

Borders  
Care  
Voice



Involving you to improve  
health and social care

The background of the page is a faded, light-colored photograph. It shows an elderly woman with white hair and glasses, wearing a light blue jacket, seated in a blue wheelchair. She is looking towards the right. Next to her, a man with short dark hair and sunglasses is sitting, wearing a dark blue t-shirt with the text 'FAIRTALE NEWYOR' and '7-6 7-5 11 3-8' visible. He is holding the woman's hand. They are outdoors in a grassy area with trees in the background.

# Annual Report 2022-2023

# Chair's Report

It's been an interesting, if in some ways challenging, year here at Borders Care Voice. As well as business as usual, we became involved in several initiatives and some new areas of work. We didn't quite achieve everything we hoped in our plans for the year but made progress in a range of areas.

We continued and extended the use of technology for a blended approach across all our work, supporting digital access and retaining in-person offers where appropriate and following best practice. We facilitated hybrid meetings off premises. All our working groups returned to in-person meetings, with the hybrid option for those unable to travel or preferring to join from home. We still offer support to people to enable this to happen. While staff mostly work in the office, a significant proportion of delivery is still via remote meetings and events. Staff can work from home as required, in accordance with flexible working and disability / illness adjustment policies.

By working in partnership, we improved co-production with people with lived experience across health and social care. We were also commissioned to facilitate Local Citizens Panels for people with a learning disability.

We developed the third sector's relationship and influence, both as part of the Integration Joint Board and as members of the Health and Social Care Partnership (HSCP). We extended our involvement in representing the sector at HSCP by engaging with several initiatives, including Integrated Workforce Planning.

Thanks to the work of our staff, we gained Disability Confident accreditation, partly due to a change in our recruitment processes and our work on co-production. The Trustees thank all the staff for their continued commitment to the organisation and all their hard work over the year, under the dedicated and inspiring leadership of our Chief Officer, Jenny Smith.

We thank our funders Scottish Borders Council and NHS Borders for their continuing support. We would also like to thank the Life Changes Trust/National Lottery for the Dementia Voices project, and the Joint Health Improvement Team for their specific commissions in relation to public engagement and training delivery.

We are very appreciative of the volunteers, including lived experience representatives, who ensure we meet our objectives.

*Dr Jane Douglas*  
Chair



# Membership and Third Sector Engagement

## Third Sector Health and Social Care Forum

We convened another session of the Forum in April to update and inform third sector organisations. The meeting was well attended, and it offered an introduction to the new Chief Officer for Integration, Chris Myers and supported by The ALLIANCE.

Topics discussed included:

- strategic commissioning process and progress – lots of developments, including a new strategic plan from the partnership to update third sector organisations on
- the newly forming Third Sector Interface (TSI) position in relation to strategic representation
- ideas for third sector networking events to strengthen relationships and awareness between statutory and third sector stakeholders.

## Communities Mental Health & Wellbeing Fund



The Chief Officer and Deputy Chief Officer were members of the steering group for this fund, established in late 2021 by Scottish Government and facilitated by Dumfries & Galloway Third Sector Interface (TSI).

We helped Dumfries & Galloway TSI to form the Scottish Borders Steering Group and Scoring Panel for the fund and sourced key officers from the Health and Social Care Partnership and Joint Health Improvement Team, working alongside third sector bodies such as the Southern Uplands Partnership and ourselves.

The Scottish Government contacted all TSIs to ask if they had eligible applications that they were unable to fund. As we had no upper limit on applications, the Borders gained an additional £815k equalling more than £1.13m for third sector delivery around mental health and wellbeing.

The second round of the fund was targeted at smaller grass roots organisations and the small grants programme (under £3k) finished in mid-November. It was oversubscribed, with £58,000 being requested from organisations in the Borders and £33,387 awarded. People with lived experience were recruited to assess the main awards (up to £50,000) which would close in January, with projects due to start in February 2023.

# Membership and Third Sector Engagement

## Mental Health Providers Forum

Our Chief Officer chairs this group, which is open to all third sector mental health providers, whether or not they are commissioned by the Health and Social Care Partnership (HSCP). The Forum had 18 members with 16 organisations represented.

We discussed, among other things, the sector's response to support Ukrainian refugees coming to Scotland. Volunteer Centre Borders shared details of volunteer translators they had sourced, and providers shared their trauma-based resources and staff expertise as potential sources of support.

Providers were encouraged to respond to the National Development Team for Inclusion engagement work for the Integrated Joint Board Strategic Plan for 2023-2026.

There was a briefing from the Public Protection team on its new Joint Public Protection Learning & Development Framework to help providers understand what training their teams should be accessing.

Issues raised at the Mental Health Board from the forum included:

- The Forum requested a written update from Mental Health Services / HSCP be submitted if commissioners were unable to attend in person.
- The third sector could form part of a holistic response (while not specific to ASD/ADHD) to support people with their mental health who will not get an assessment for Neurodevelopmental Disorders (NDD) if appropriate referrals / signposting / information sharing are made.
- Clarity on the Mental Health Local Area Co-ordinator remit to avoid confusion with third sector services.
- The need to improve clarity of information for statutory sector staff to improve their confidence to refer to third sector.
- The cost-of-living crisis and its impact on chargeable services and people's ability to pay for the support they need.
- The effectiveness of the appeals process for the SBC charging policy.

Commissioners from mental health services attended most of the meetings to update on internal and commissioned services. The Commissioning & Service Manager and Commissioning Lead from the Health and Social Care Partnership met the providers and shared updates on their work to review and map commissioned services. He also expressed a desire to work more collaboratively with third sector providers.

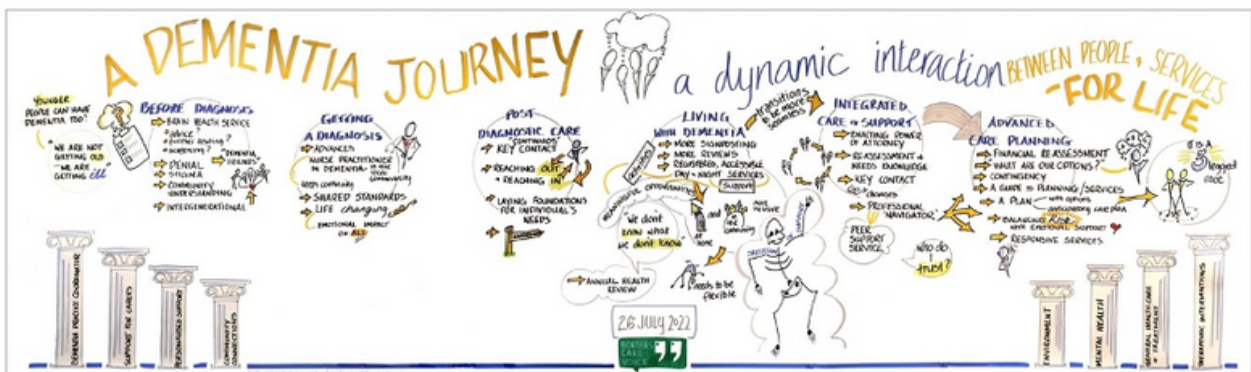
# Hearing Lived Experience Voices in our Working Groups

## Borders Dementia Working Group



We chair and facilitate this group for people with a diagnosis of dementia and unpaid carers who care for someone with dementia. The group is also supported by the Dementia Nurse Consultant and Alzheimer Scotland staff.

In April, the group met to review its previous graphic 'Living with Dementia', which was created in early 2020 before the pandemic. The members acknowledged that the gap after receiving post diagnostic support was now more apparent and there was a greater need for continuity of support. The group agreed to create a fresh graphic that spelled out its vision in more detail, to help underpin the new Borders Dementia Strategy. The group, supported by a facilitator, created a vision that covers the dementia journey - see below.



# Borders Dementia Working Group

## Themes and some actions in the vision:

- 1. Before a diagnosis** - clear pathways, i.e., brain health services / memory clinics for people who are concerned about cognitive function; a rolling programme of Dementia Friends Training and dementia friendly campaigns.
- 2. Getting a diagnosis** - Advanced Nurse Practitioner(s) in the community - greater access to that expertise outside of acute environments; recognition and support of the emotional impact/loss; understanding loss and grief as part of dementia diagnosis.
- 3. Post diagnostic care** – one 'Key Contact' that maintains a link with the individual and helps them navigate the system; more pro-active approach from mental health services, reaching out at least annually to check in with individuals and to maintain contact; help to plan ahead and preparing people and their families for next steps they need to discuss and think about as they progress.
- 4. Living with dementia** - registered and safe services to support people with their needs in day time and at night with the added benefits of respite to carers; support services need to be flexible and accessible at home, and in the community; acknowledging that buildings based services are still the safest and most positive option for some and enable people to live at home for longer.
- 5. Integrated care and support** - a smooth transition between all services under the Health & Social Care Partnership, created by integrated working and improved systems; clearer guidance on statutory tools such as Power of Attorney and Guardianship; key information, records and updates are shared by staff on an integrated basis, so we do not have to repeat our stories endlessly.
- 6. Advanced care planning** - clear information before people progress to advanced stages on care options, which consider their financial situation; good contingency planning before end-of-life stages; creation of a guide to planning/services for people at advanced dementia stages.

The vision underpins and can be seen referenced throughout the draft Dementia Strategy for the Borders which should be published, along with an action plan, in 2023-2024. Members of the BDWG also joined the Dementia Strategy Group, which is responsible for its creation and implementation.

The group developed links with the Scottish Dementia Working Group, which shared its priorities, asked about local issues, and updates on its work and developments at a national level.



## Borders Dementia Working Group



An event was held in September to launch the **Dementia Voices** films. We invited people living with dementia and their carers including BDWG members, professionals and supporters, and the film makers. We showcased the first four films and asked for feedback on each, getting ideas about how/where we could share the films for best effect.

## Mental Health and Wellbeing Forum

This group is for anyone with lived experience of mental ill health, including unpaid carers. It is facilitated by the Mental Health Development Worker and chaired by a member representative, with a vice chair and third representative elected. The reps also take a lead role in representing the views of people with lived experience and the forum in a range of joint planning groups, workshops and events to help co-produce mental health services.

The group meets in Galashiels but ran on a continued hybrid basis in 2022-2023. This supports busy staff from services to join and enables people to join from a wider geographic area or who cannot join for health reasons.



It continued to receive updates from Mental Health Commissioners in the HSCP and the Joint Health Improvement Team, including the draft Mental Health Improvement and Suicide Prevention strategy.

In addition, the group heard from the lead for Health Improvement and the Strategic Lead for the Alcohol and Drugs Partnership (ADP). They shared the work the ADP had been supporting to promote community recovery, such as a new recovery café, including consultation work on service specifications and recovery approaches.

The group had an in-person introduction and update from the new Health Improvement Specialist for Mental Health and Suicide Prevention.

## Mental Health and Wellbeing Forum

The National Development Team for Inclusion (NDTi) attended to collect feedback to assist with designing the new Health and Social Care Strategic Framework. They asked members to highlight what was most important to them in health and social care and the group responses included:

- peer support groups / buddying
- prevention work
- peer support for carers
- lived experience influencing at strategic level not only service level.

Members raised an issue at the Mental Health Board about the skills and efficacy of reception staff at GP practices screening requests for an appointment for someone's mental health. The Chair raised this with a Primary Care lead, who gave a response that was shared with the Forum. Members were not satisfied and asked several questions to be raised in response at the next Board meeting about training, comparison of data across practices, and rolling out the electronic booking system beyond Peebles.

One of the Forum members attended the end of year report session for the Mental Welfare Commission for the Borders, which was the first time someone with lived experience had been included. The report highlighted several areas for improvement in care and treatment.

### Issues and impacts raised by the Forum during the year included:

**Language** – the group expressed a preference for the use of 'poor mental health' or 'mental ill health' instead of 'problems' or 'issues' which they felt could make individuals feel guilty for being unwell. We have encouraged staff working in the field to use these terms.

**A lack of support services** for addictions that are not drug and alcohol related, for example gambling. Mental health services have acknowledged this is a current gap. Increased waiting times for assessment and treatment and the need for improved communication for people on the list.

**Signposting** to community supports while people are on waiting lists.

**Access to an assessment** for suspected Neurodevelopmental Disorder - ADHD, removal from waiting list, being left with no support and the consequent decline in mental health.



# Training

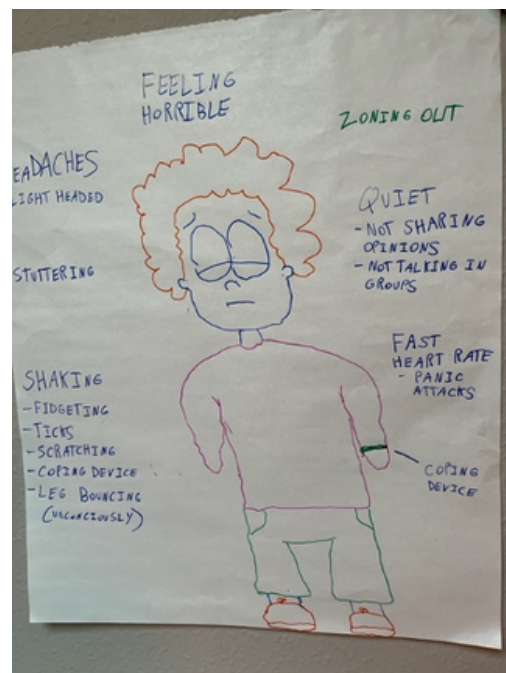
We continued to deliver some our courses online on Microsoft Teams or Zoom but offered most sessions face to face. We reduced the number of people in our face-to-face training sessions to allow for more space, and COVID-19 measures remained in place at the start of the year.

There was no **Scotland's Mental Health First Aid** (SMHFA) training during the pandemic, as it can only be delivered face-to-face in line with Public Health Scotland instruction. We resumed the course at the end of March 2022 and ran sessions in June, when we gained an additional external trainer, and September. In response to demand, we offered in house training to Cheviot Youth, Eat, Sleep, Ride and Scottish Borders Council education staff (two courses)

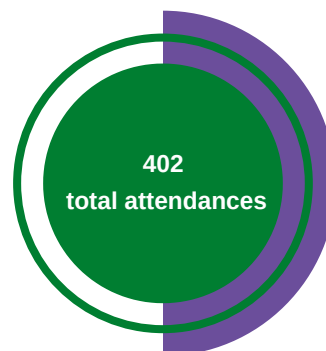
We continued to run **Mental Health Improvement and Prevention of Suicide** training online. This Informed Level training is the foundation level of the NHS Education for Scotland (Mental health improvement and suicide prevention framework). As well as our own programme, we also ran this training for NHS Borders mental health administration staff.

Following discussions with the Public Protection Unit and a review of their courses, we ran our first **Adult Support and Protection for the Social Care Workforce** course in July, and this became a regular feature in our programme.

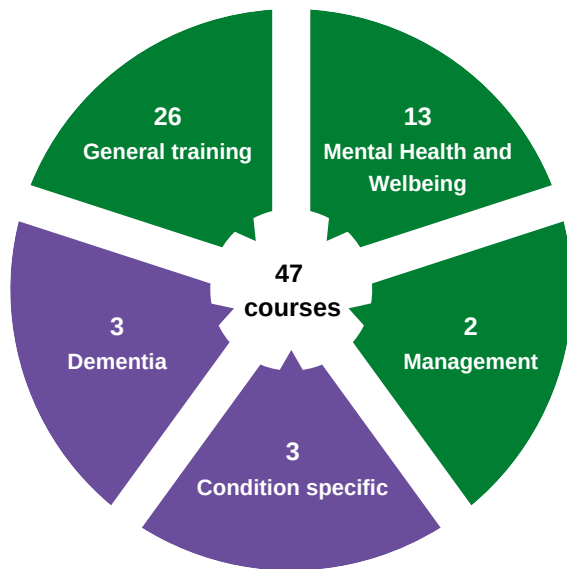
We were commissioned by the Joint Health Improvement Team (JHIT) to deliver a new training programme and evaluate it. **The Wave after Wave** course was developed in Glasgow and the JHIT wanted to roll it out across the Borders. The aim of the training is to ensure that all staff, peer supporters and volunteers meeting individuals bereaved by suicide understand the complex nature and impact of a suicide bereavement and can provide a compassionate and empathetic response whilst being aware of the impact of their work on their own well-being. Our three mental health external trainers agreed to deliver it.



*A Scotland's Mental Health First Aid session in progress*



# Training



➤ **Average uptake of training 73%**

- Overall, how would you rate this training? **4.85 out of 5**
- Do you feel the training objectives were achieved? **4.85 out of 5**
- Do you feel your knowledge of the subject has improved? **4.77 out of 5**

## “ Some course feedback

*Increased knowledge of manual handling and increased awareness of own back care and safety. Course was brilliant.*

*This training gave me a much deeper understanding of dementia: the different types, how people are affected and how we can support people with dementia using person centred approaches so that they can live contented lives.*

*Better knowledge about supervision and building trust with my staff team. Better ways of approaching supervision. Training was great, lots of great material and lots of sites to find info.*

*Tools, ideas and understanding of trauma. How to deal with people who suffered trauma.*

*This training was a great opportunity to refresh necessary knowledge required in support of vulnerable adults.*

*I had not done first aid for over 10 years, so I have learned it all again and have gained confidence again. Trainer was excellent and engaging.*

*The course was well presented and explained, and we had some good discussions. Trainers made things very clear and had a good energy.*

# Supporting Health and Social Care Integration



We represented the views of adults with lived experience of health and social care and third sector services in relation to adult health and social care provision on the **Strategic Planning Group** (SPG), the **Integration Joint Board** (IJB) and the **Public Protection Committee (PPC)**.

A joint development session was held with SPG and IJB members covering the equality and human rights (E&HR) and Fairer Scotland duties of the HSCP. We were an active participant in the founding of the E&HR subgroup for the HSCP as well as the creation of the framework and processes required for compliance (see below).

## **PPC Communications Delivery Group and Training and Development Delivery Group**

We were involved in the above sub groups and activity to help the PPC with its promotion and awareness raising on public protection and its training delivery. The Learning Network is an active partner in delivering this to the health and social care workforce we serve.

## **Equality & Human Rights Foundations Group / Equalities Outcomes & Mainstreaming**

The Equality & Human Rights Commission (EHRC) contacted the HSCP to highlight a breach of legislation because they did not have any published equalities outcomes, mainstreaming reports or sufficient evidence of Equalities Impact Assessments accompanying decisions made. We were part of a small foundations group, led by Partners for Integration (also the HSCP Equalities Lead) which was formed to take forward the work. It began September 2022, with outcomes and processes to be in place by Spring 2023. The group refined outline versions of the Equalities Outcomes & Mainstreaming Framework and the Equalities Impact Assessment Framework. It is expected this group will also act as a touchpoint for checking Impact Assessment documents to be submitted to IJB for approval in the future as well as reporting compliance and recommendations to improve it to the SPG/IJB going forward.

## **Physical Disability**

We support the monitoring of the Physical Disability Strategy and action plan via the Physical Disability Strategy Group. Members include disabled people and statutory and third sector partners. During the year, the group organised a hybrid consultation event for the national Health and Social Care Strategy for Older People. The feedback was sent to the Scottish Government and shared locally with the Health and Social Care Partnership and the Third Sector Interface. It also held three hybrid workshops to reflect on the Physical Disability Strategy and ambitions, to look at what worked well in the action plan and to develop a new plan.

# Hearing lived experience voices



## Self-directed Support (SDS) Forum

We attend this group to ensure we are capturing the views of individuals and carers who are using SDS. Concerns raised included:

- sick pay and mileage rates for Personal Assistants
- the recruitment of care staff
- the Direct Payment rate
- training for Personal Assistants including medication and manual handling.

The SDS Forum links to the **Self-directed Support (SDS) Working Group**, which is comprised of third sector and statutory staff. It aims to be a co-productive, dynamic group to generate ideas and drive forward action to promote the values and principles of SDS legislation and the SDS Standards. The purpose is to embed good practice in SDS within the Scottish Borders. We began attending these meetings in October, following a discussion at an SDS Forum meeting when it was felt it would be useful for us to represent the third sector. There was considerable discussion on training for Personal Assistants including medication and manual handling.

## The lived experience of older people

We attend and network with the Borders Older People's Forum (BOPF), which aims to give older people a voice and to share information on older people's services and activities. It also gives members the opportunity to consult on issues of concern and holds regular meetings. BOPF, together with NHS Borders and Ability Borders, was asked by the Borders Older People's Planning Partnership to help with a consultation on the Scottish Government's Health and Social Care Strategy for Older People. An open hybrid meeting to go through the strategy was held in May.

## Improving dementia services

We are active members of a cross partnership Dementia Strategy Group, meeting monthly to draft a fresh strategy aimed at improving the pathways and services for local people living with dementia and their carers. The Borders Dementia Working Group is central to informing this work and was also invited to send members to attend. In 2022-2023, the strategy group drafted the Borders Dementia Plan, underpinned by the vision of the BDWG, which will be published in 2023-2024. An education subgroup was also established to improve the coordination and consistency of training for people working with people with dementia. We participate in this via our Learning Network as a dementia training provider.

# Hearing lived experience voices



## **Designing Tweedbank Care Village**

We were invited to join the project group for Tweedbank Care Facility, reviewing design specification and building plans. A Model of Care subgroup was set up in August and we were invited to participate, representing the interests of people with lived experience and linking to the Borders Dementia Working Group, as well as third sector providers.

## **Re-opening Teviot & Liddesdale Day Service**

In September, a Court of Session ruling deemed that Scottish Borders Council had closed Teviot Day Service "unlawfully". A short life working group was set up to re-establish the Teviot Day Service as per the court ruling. We attended on behalf of people with lived experience, including the Borders Dementia Working Group. It is chaired by the Chief Officer for Integration. The group began meeting regularly in November and we helped to identify local people with lived experience to attend. We also represented the views of the Dementia Working Group. NDTi was commissioned to carry out local engagement with the community, which we advised on and promoted via our network. Good progress was made with equalities requirements, premises, Care Inspectorate and market sounding to identify potential providers. It is hoped the day service will reopen in 2023-2024.

## **Scottish Borders Council Charging Policy**

There was a discussion during the year about the Charging Forum's terms of reference and membership and we suggested that people with lived experience and carers should be included. We voiced concerns about the lack of co-production on the 2023-2024 Charging Policy. However, there were no substantive changes to the policy, which went to Council in February, so it was felt there was no need for engagement as changes were minor and technical. There was a commitment for next year that the process will start earlier and will involve people who pay charges.

## **BIAS Review**

We acted as an independent contact point for user feedback during a review of the Borders Independent Advocacy Service (BIAS) contract. Depending on the outcome, the contract may go to a re-tender process.

# Mental Health, Mental Wellbeing, Suicide Prevention



## Helping to plan Mental Health Improvement & Suicide Prevention

We attend the quarterly steering group, led by Joint Health Improvement Team, for Borders Care Voice. Information was shared from a Mental Welfare Commission visit that resulted in nine recommendations, some of which were about ensuring people with protected characteristics, particularly ethnic minorities, have equal access to mental health services.

We gave a short presentation on the HSCP's Equalities and Mainstreaming work, including the mainstreaming framework and their soon to be published outcomes for feedback. There is a need to cross reference the MHISP Action Plan with the outcomes and the associated actions.

## Joint Health Improvement Team Mental Health Engagement

Developing support for people who have taken part in suicide prevention training was one of the actions in the local Mental Health Improvement and Suicide Prevention Action Plan. To help inform this work, the Scottish Borders Joint Health Improvement Team (JHIT) commissioned us to develop, issue, analyse and report on a new survey. The team asked us to help listen to communities and hold engagement sessions, which ran in May and June. The final "Suicide Prevention Training – Impact and Support Survey" was completed in June and the results were used by Scottish Borders Council and NHS Borders to evaluate the provision of suicide prevention training in the Scottish Borders. They will identify any unmet needs, including follow up support for training participants.





## Helping services to become more trauma informed

We supported people with lived experience to meet the NHS Borders psychology team to co-design a poster highlighting '5 key things' for social care and health staff, to ensure that they are working in a trauma informed way. The poster will be drawn by a graphic facilitator in NHS Borders and trialled in maternity units, after final approval from the group and the Mental Health and Wellbeing Forum.

**Do you struggle to manage your emotions?**

**Have you received or are you seeking a diagnosis of a personality disorder?**

**We are holding a conversation café on: Thursday 30th March 2023**

**10.30am - 2pm**  
(Lunch will be provided)

**Blue Room**

**Langlee Community Centre**

The café will provide an opportunity to share your views about local services for people who may have a personality disorder.

**Please complete this short survey before attending:**

If you would like to be involved but are not able to attend, please complete the survey to make sure your voice is heard (contact us if you would like to receive the survey via email or post).

Representatives from NHS Borders Adult Mental Health Psychology Services will be attending.

**To book your place:**

01896 757290

[admin@borderscarevoice.org.uk](mailto:admin@borderscarevoice.org.uk)

Scottish Borders

Borders Care Voice

NHS Borders

## Improving the pathway for people with a personality disorder

At the end of March, the Mental Health Development Worker and reps, in partnership with NHS Borders, planned and facilitated a Consultation Café about improving the treatment pathway for people with personality disorders. There was a good turnout (around 10 people with lived experience and/or diagnosis of a personality disorder) and good quality and range of feedback received, which will be used to help improve and redesign services.

## Mapping commissioned services

In early 2023, the mental health commissioners were asked, as part of review of commissioned services, to 'map' existing provision to identify duplication/gaps. We attended two sessions to agree an initial format and identify priority areas. The perceived overlap between Penumbra Housing Support for Mental Health and the Mental Health Local Area Coordination Service was highlighted. The group also checked the Mental Health Pathways 'triangle' document to update the service descriptors.

## Co-reviewing services and raising issues at the Mental Health Board

We attend to support the voice of the Mental Health and Wellbeing Forum / people with lived experience and to give a providers' perspective.

We shared issues and impacts, as well as positive feedback from people with lived experience of mental ill health (see Page 3).

In addition to sharing service updates at the Board, our feedback on behalf of providers during the year included:

- A housing support provider had seen a decline in referrals and raised concern that its service was viewed as similar (and had a charge attached) to support provided by Local Area Coordinator mental health team. The Scottish Borders Council Charging Policy and the cost-of-living crisis was increasing the volume of people refusing housing support due to the cost. We also raised this at the Charging Forum.
- SBC Charging Policy and the cost-of-living crisis is increasing the volume of people refusing Housing Support for Mental Health due to the cost. We raised this at the Board and will also raise at Charging Forum which has oversight of the Charging Policy.



# Local Citizens Panels

We were commissioned by the Learning Disability Service to take on the work of facilitating the Local Citizens Panels (LCPs), part of the LDS Governance Structure, which had been in abeyance for some time.

We agreed to aim to recruit a Development Worker and relaunch the panels in Learning Disability Week in May 2023.

We had two meetings with Susan Henderson, Planning and Development Officer with the Learning Disability Service, and some LCP members in November to let them know that we would taking on this work.

The feedback from members was encouraging and they were keen for the LCPs to begin meeting again in person (during the pandemic some members joined online meetings).

After extending the deadline for applications for the Development Worker, we interviewed three candidates in March with a member of one of the LCPs joining the process. We appointed Eileen Prior, who joined us in April 2023.



# Internal developments



At the end of April 2022, we said goodbye to our valued colleague, Shirley Barrett, who retired.

Shirley had been with us for seven years as Mental Health Development Worker. Her role included facilitating and supporting the Mental Health and Wellbeing Forum and ensuring that those with lived experience have a voice.

She approached this - and the rest of her remit - with passion and commitment. We missed her knowledge, experience, empathy and understanding.

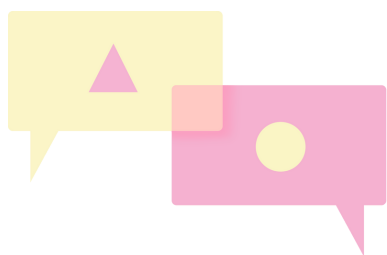
We were delighted that Shirley would continue to be involved with Borders Care Voice as a trainer.

Our new Mental Health Development Worker, Lynsay Laird, joined the team in November, following a period when we experienced recruitment challenges.

We increased the role to 21 hours from 14 to make the post more attractive and the workload more feasible.

Lynsay was previously the Community Engagement Coordinator at With You Borders and chaired a monthly lived experience forum, informing the work of the Alcohol and Drug Partnership.





## Remembering Together

We became a local partner with Greenspace Scotland for this project, which was aimed at public engagement and co-creation on ideas to create a local memorial project for the COVID-19 pandemic. We commissioned a local company, Dynamite Initiatives, to lead on co-ordination, as there was no large-scale public sector body involved in the Scottish Borders. We formed a steering group with the Joint Health Improvement Team and Transform Arts, representing the Creative Arts Business Network.

In August we held interviews with the shortlisted artists/collaborators for Phase 1 and the panel chose 2Destination Language from Duns began the work from September- December. Phase 2, potentially being run by other artists if required, ran in 2023, representing the main part of the project. This phase will engage with as many Borderers as possible to find out what connects them, their experiences of the pandemic, and how best to creatively memorialise their experiences and the people affected. The findings - and a proposal to create a new tartan design – were shared at an event in February. The tartan can be used in a variety of ways by individuals, groups and organisations across the Borders.

## Annual General Meeting

We held our AGM in October in our Offices at Triest House when some representatives and members to give an update on their experiences. There was a Q&A session with the chair of the Mental Health and Wellbeing Forum and two members of the Borders Dementia Working Group used a powerful story to share their experiences.

The following Trustees were elected:

- Jane Douglas, Individual Member
- Marc Bremner, Individual Member
- Sandy Devers, Streets Ahead Borders, Corporate Member
- Kathryn Peden, Central Borders Citizens Advice Bureau, Corporate Member
- Kelly Brown, QME Care, Kelso, Corporate Member.

## Disability Confident

We were delighted that, in progressing through the scheme, we achieved Disability Confident Employer (Level 2) status.

The Disability Confident scheme helps employers to recruit and retain great people and to:

- challenge attitudes and increase understanding of disability
- draw from the widest possible pool of talent
- secure high-quality staff who are skilled, loyal and hard working
- improve employee morale and commitment by demonstrating fair treatment.



## Our organisational members

A Positive Start CIC  
Alzheimer Scotland  
Bavs  
Berwick and District Friends of Dementia  
Borders Carers Centre  
Borders Citizens Advice Consortium  
Borders Independent Advocacy Service  
Borders Samaritans  
Borders Talking Newspaper  
British Red Cross  
Brothers of Charity Services (Scotland)  
Carr Gomm  
Central Borders Citizens Advice Bureau  
Chest, Heart & Stroke Scotland  
Cheviot Youth  
ConnectWell  
Cyrenians  
Eildon Housing Association  
Encompass  
Garvald West Linton  
Headway Borders  
Health in Mind  
Interest Link Borders  
Nature Unlimited  
Nomad Beat  
Outside The Box  
Peer 2 Peer Mindfulness Ltd CiC  
Penumbra Borders  
PND Borders  
QME Care  
Royal Voluntary Service  
Scottish Borders LGBT Equality  
Scottish Borders SDS Forum  
Serendipity  
Stow Cycle Hub CiC  
Streets Ahead Borders  
Survivors Unite  
The Bridge  
The Physiotherapy Trust  
This Kind Space CIC  
Trust Housing  
Victim Support Scotland  
We Are With You  
Youth Wellbeing Coaching CIC

## Our Trustees

Dr Jane Douglas, individual member (Chair)  
Kathryn Peden - Central Borders Citizens  
Advice Bureau (Co-Vice Chair)  
Marc Bremner, individual member (Co-Vice  
Chair)  
Kelly Brown, QME Care  
Sandy Devers, Streets Ahead Borders  
Gordon Forsyth – Individual Member  
(resigned October 2022)  
Corrina Beighton – Individual Member  
(resigned October 2022)

## Our Staff

Shirley Barrett, Mental Health Development  
Worker (until end April 2022)  
Lynsay Laird, Mental Health Development  
Worker (from November 2022)  
Ellen De Groot, Learning Network  
Administrator  
Nicola Glendinning, Office & Finance  
Administrator  
Jenny Smith, Chief Officer  
Kathleen Travers, Depute Chief Officer

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**We have 45 individual members. This does not include members of our working groups.**