



# Golden Jubilee Foundation

Patients at the heart of progress

# Board Strategy 2019-2022



## Contents

1	Executive Summary .....	2
1.1	Introduction .....	2
1.2	Strategic Context .....	2
1.3	National and Regional Planning.....	2
1.4	Development of our Board Strategy .....	3
1.5	Key Principles .....	4
1.6	Recommendations .....	4
1.7	Strategy Overview .....	5
2	Strategic Development Plan .....	6
2.1	Hospital Services.....	6
2.2	Golden Jubilee Expansion .....	9
2.3	National Elective Centres.....	12
2.4	Teaching Hospital and Centre of Excellence .....	15
2.5	Innovation and Investment.....	18
2.6	Research and Development .....	20
2.7	Golden Jubilee Hotel and Conference Centre .....	23
3	Workforce Plan .....	25
	Workforce projections .....	25
	Workforce planning .....	26
	Workforce profile .....	27
4	Financial Plan .....	29
5	Supporting Strategic Plans .....	32
5.1	Quality, Planning and Performance.....	32
5.2	Property and Asset Management .....	34
5.3	eHealth and digital transformation .....	35
5.4	National and Regional Collaboration.....	37
6	Appendices.....	39
6.1	Strategic Development Plan – 2019-2022.....	40
6.2	High Level Delivery Plan .....	41

## **1 Executive Summary**

### **1.1 Introduction**

Our Board ambition of “*putting people first to achieve and sustain excellence- in care, performance, quality, innovation and values*” shapes this strategy and our plans to support NHS Scotland.

Golden Jubilee Foundation has always aimed to ensure that we support the delivery of NHS Scotland’s national health priorities. Our focus since our establishment has been to meet NHS Board demands and deliver equity of access to high quality healthcare for as many patients as possible so that they benefit from our clinical expertise and excellent facilities.

With a well established track record of delivering increased capacity for the people of Scotland, we have expanded our range of services and grown our expertise, with the support of a workforce keen to embrace transformation and change. Our short decision making chain and direct leadership has made us uniquely placed to offer a flexible approach, helping to respond directly to address NHSScotland’s priorities.

Throughout our ongoing expansion, we have maintained high standards in clinical governance, good clinical outcomes and importantly our patients consistently tell us they are very satisfied with the quality of service provided. Whilst maintaining high standards of patient care, we have also focussed on the effectiveness and efficiency of our services, striving to implement change which reduces unnecessary patient journeys or unwanted variation in practice.

As a national resource, the NHS Scotland Quality Ambitions are at the heart of everything we do. Our primary focus is to deliver the best quality healthcare to the people of Scotland – care that is person centred, safe and effective. These continue to be our key drivers as we set out this strategy and describe our priorities for the next three years.

### **1.2 Strategic Context**

Our strategy is underpinned by our work to support the Realistic Medicine vision and specifically our work on *Shared Decision Making* will look to embed the use of “asking the right questions” within our Patient Portal and website developments. We will also develop a range of video-based shared decision making tools for patients to help them decide whether or not to progress to an invasive procedure.

We are embedding the *Reducing Waste* workstream within our existing Demand Optimisation Programme which works to ensure that the correct patient tests are performed at the most appropriate time to add value to patient’s care and to reduce unnecessary testing and through our long-standing person-centred care ethos, we will work to further deploy a *Personalised Approach to Care* through patient level costing work to reduce unwarranted clinical variation and promote more “prehabilitation” where patients are enabled (according to their own baseline health) to exercise , lose weight , and improve their health to reduce their risk before undergoing surgery.

### **1.3 National and Regional Planning**

Golden Jubilee continues to contribute to work which supports the three main aims emerging from the National Boards Collaboration:

- Supporting evaluation, improvement and transformation;
- Digitally-enabled service redesign; and
- Developing a sustainable workforce.

A number of our key programmes are strategically aligned to the collaboration aims:

- Digitally enabled service transformation and utilisation of telehealth solutions in elective care patient consultations;
- Sustainable workforce planning and contribution to the wider NHS Scotland Leadership Development Programme, Project LIFT; and
- Leading the national roll-out of the Golden Jubilee model of values based recruitment for Executive and Senior Appointments.

As a West of Scotland regional planning partner, we firmly believe that working across traditional boundaries will be critical to building a person-centred and sustainable service that is fit for the 21st Century and this approach will be embedded within this strategy.

Lastly, as a member of the National Planning Board, we will participate in planning for specialist services or where there is the requirement for services to be provided at a small number of designated sites with suitable skills, infrastructure and available workforce. This will ensure that services are sustainable, safe and meet the needs of the Scottish people.

#### **1.4 Development of our Board Strategy**

Over the past few months, a range of internal workshops with Senior Clinical and Service Leads have been held to explore current or existing strategic plans for the main parts of our organisation and discuss speciality developments over the next 3-5 years. The outcomes from these sessions have been presented for discussion with our Board and seven Strategic workstreams have emerged which will shape the direction of our Board Strategy 2019-2022.

**The 7 strategic workstreams are:**

**1. Hospital Services**

**2. Golden Jubilee Expansion/new developments**

**3. National Elective Centres Collaboration – Commissioning, Managing, Developing**

**4. Teaching Hospital Status & Centre of Excellence**

**5. Innovation & Investment**

**6. Research & Development**

**7. Hotel & Conference Centre Development**

The content of this draft strategy document will now be shared with a wide range of internal stakeholders through workshops and other communication methods. A detailed stakeholder engagement plan has been established which sets out further and ongoing consultation and engagement with a wide range of external stakeholders ranging from Scottish Government colleagues to strategic partners and the public.

## 1.5 Key Principles

A set of key principles have been proposed which will shape the direction of our Board Strategy developments:

- Our strategic developments will evolve over the years with the specific aim of meeting the needs of the population;
- We will plan our services to improve patient access to elective care, supporting patient rights in line with the Treatment Time Guarantee and reduce of waiting times;
- We have a specific role in collaborating across Scotland to deliver high quality standardised elective care;
- Through our specialised regional and national services we will improve outcomes for patients;
- Our focus on improvement and innovation will enable us to test, demonstrate and lead best practice in technology, services and new models of care;
- We will support the NHS in Scotland to encourage external investment and innovation in patient related services;
- Our impactful research benefits patients and will impact on future generations.
- We will continue to foster a 'Once for NHSScotland' approach, where appropriate; and
- Our Conference Hotel will continue to support Golden Jubilee services as well as being a high quality national NHS and public sector conference facility.

## 1.6 Recommendations

To be added following further stages of workstream development and stakeholder engagement

### Summary

**Our Board Strategy has been shaped and informed by the projected future demand for elective and specialist surgical care and diagnostic services in Scotland. It describes the vision for the ongoing evolution of services and skills at the Golden Jubilee which will be delivered in collaboration with our partners for the benefit of the people of Scotland.**

**Our strategy describes our development plans for the period 2019-22 and is aligned to the key Scottish Government policies on Realistic Medicine, Waiting Times Improvement and the Health and Social Care Delivery Plan. It will inform the continued delivery of safe, sustainable and high quality services to the people of Scotland who use our services at Golden Jubilee.**

## 1.7 Strategy Overview

Strategy Workstream	Overview
1. Hospital Services	We will continue to deliver high quality care through our existing regional and national services and our elective care provision. In addition we will develop our hospitals services to meet increasing demand and continually improve how they are delivered.
2. Golden Jubilee Expansion and new developments	Expansion of our elective care provision through new hospital facilities is fundamental to our future and the NHS Scotland's Health and Social Care Delivery Plan. In addition we will explore opportunities for expanding the range of clinical treatments and services we are able to provide through both our elective care and regional and national services
3. National Elective Centres Collaboration	<p>The success of the Golden Jubilee model of care and our track record of delivering high volume elective care that is safe, effective and person-centred, means we are well placed to collaborate with other national elective care centres. We will work with NHS Boards to ensure effective management of the national elective centres and delivery of consistent high quality models of care across NHS Scotland</p> <p>We will work with NHS Boards to effectively manage the use of private sector healthcare provision across Scotland. This will ensure that national elective capacity is fully utilised and private sector healthcare utilisation is minimised and where needed is managed carefully</p>
4. Teaching Hospital Status and Centre of Excellence	<p>We will build on existing training and education for the range of staff involved in delivering high quality healthcare including healthcare professionals. This will include becoming a teaching hospital with an undergraduate and postgraduate prospectus.</p> <p>We will also continue to develop ourselves as a centre of excellence where people come to develop their skills and expertise and learn from our world leading service providers</p>
Innovation and Investment	We will continue grow and develop our strategic partnerships to enhance our ability to fund and support Innovation. We will also ensure global development of the Golden Jubilee Foundation brand and expand our opportunities to market our

	ideas, products and models of care across the world. This will drive further investment in the Golden Jubilee Foundation, NHS Scotland and the wider scottish economy. It will also strengthen our ability to drive innovation internally and across NHS Scotland
Research and Development	We will build on our success in establishing a highly effective and well managed Research institute by exploring new fields of Research and growing the number of partnerships we have across academia, industry and healthcare. We will also seek further investment and funding opportunities to enhance our portfolio and support development of our capacity and capability for Research, including our staff
Hotel and Conference Centre	We will develop a sustainable business model and investment strategy for the Hotel and Conference centre that balances our unique ability to provide patients and carers with accommodation with our opportunities to increase income through commercial and leisure activity. We will also ensure that the conference centre is at the heart of providing services for NHS Scotland and the wider public sector

## 2 Strategic Development Plan

### 2.1 Hospital Services

Our hospital services are diverse and the strategy plans for each service will be driven by the key priorities for each. These priorities can be grouped into four distinct themes:

- Service growth
- Investment
- Developing models of care
- Maintaining sustainability

#### **Service Growth**

The key services whose strategic plans are mainly categorised by growth are our Elective specialities:

- Orthopaedics
- Ophthalmology
- General Surgery
- Endoscopy
- Diagnostic Imaging

In addition to service growth in Orthopaedics in primary arthroplasty and minor/intermediate surgery, the Golden Jubilee will further develop its model of care in the sub-specialties of foot and ankle surgery and revision arthroplasty.

To facilitate our expansion in General Surgery and Endoscopy activity to support West of Scotland demand, we will explore joint appointments to achieve a sustainable workforce. We will also explore extended roles such as Nurse Endoscopists, which will be supported by our NHS Training Academy.

Our plans associated with our significant expansion in Ophthalmology to be delivered in our new Integrated Ophthalmology Unit are laid out in section 2.2 of this document.

### ***Investment***

As one of the highest volume coronary intervention centres in the UK, Golden Jubilee currently delivers a high quality cardiology service and our percutaneous primary coronary intervention (PCI) rates have increased in number and complexity.

In delivering our future strategy for Interventional Cardiology we will plan and deliver additional capacity to meet predicted demand and improve access to timely treatment and early intervention.

We will build on our investment in Robot Assisted Surgery in Thoracic Surgery by extending its use into Orthopaedics, with a primary focus on robot assisted total and uni-compartmental knee replacement surgery.

### ***Developing Models of Care***

Recognising the changes in patient urgency and acuity, we are developing a Cardiac Strategy to inform our future care models for Regional Cardiac Services. This will also influence our plans for developments in anaesthetics and critical care, recognising that there are also key dependencies on anaesthetics from our elective specialties.

In addition to addressing the changing service demands and patient urgency and acuity, the Cardiac Surgical Strategy will describe to aim to move towards a 'Minimally Invasive First' strategy for isolated aortic valve disease and isolated mitral valve disease in need of intervention. Minimally invasive surgery, in general, will be key growth area for the department.

For multiple or complex procedures such as aortic, mitral and tricuspid valve surgery with coronary artery bypass grafting, the focus will be on continuous achievement of improved surgical outcomes. A range of other specialist developments ranging from sutureless valves and increasing the numbers of bypass surgery procedures carried out without the use of heart/lung machines will be explored. Subject to National Planning decisions, we will also plan to develop our Surgical Aortic Valve Implantation programme.

As our Thoracic Surgery service expands its minimally invasive care programme through robot assisted surgery, we will continue to develop as a UK leader in this field. We are already delivering increased numbers of endobronchial valve procedures to reduce lung volume in patients with emphysema and it is our goal to further develop this service for patients in the West of Scotland.



We will further increase the scope of our Enhanced Recovery programme in Orthopaedics, Cardiac and Thoracic Surgery, aiming to achieve effective optimisation of patients before surgery and safely reduce post operative length of stay.

In line with these speciality developments, our clinical services will take forward their delivery plans:

Allied Health Professions Strategy key themes-

- Developing our AHP workforce
- Health and wellbeing of staff and patients
- Access and awareness of AHP services
- Delivering excellence through Research, Innovation and Quality Improvement

Healthcare Science Delivery Plan priorities:

- Demand Optimisation
- Streamlining health technology management
- Point of care testing
- Developing sustainable services and integrated models of clinical physiology delivery

Pharmacy Strategy themes:

- Development of the future Pharmacy Strategy aligned to digital transformation
- Embedding realistic medicine and practice-based research in the future service model.

### ***Maintaining Sustainability***

The Golden Jubilee is home to three National Services delivered on behalf of NHS Scotland. In addition to the opportunity to introduce new developments in our Scottish Pulmonary Vascular Unit (SPVU), a key focus will be the implementation of the standards for specialist adult congenital heart disease (ACHD) care in NHS Scotland.

Our key priorities for our Scottish Adult Congenital Cardiac Service (SACCS) will be:

- Recruitment and retention of our specialist workforce to extend and improve service provision;
- Reviews of our surgical and interventional care pathways to meet population demand and sustainable care;
- Undertake and respond to analysis of diagnostic provision and outreach requirement to ensure that the shared care model meets future requirements.

Within the Scottish Advanced Heart Failure Service (SNAHFS), our main focus will be:

- Continuing to deliver the SNAHFS Strategy and planned heart transplant activity; and
- Expand the use of the Organ Care System to deliver improved transplantation rates for donation after circulatory death (DCD).

## 2.2 Golden Jubilee Expansion

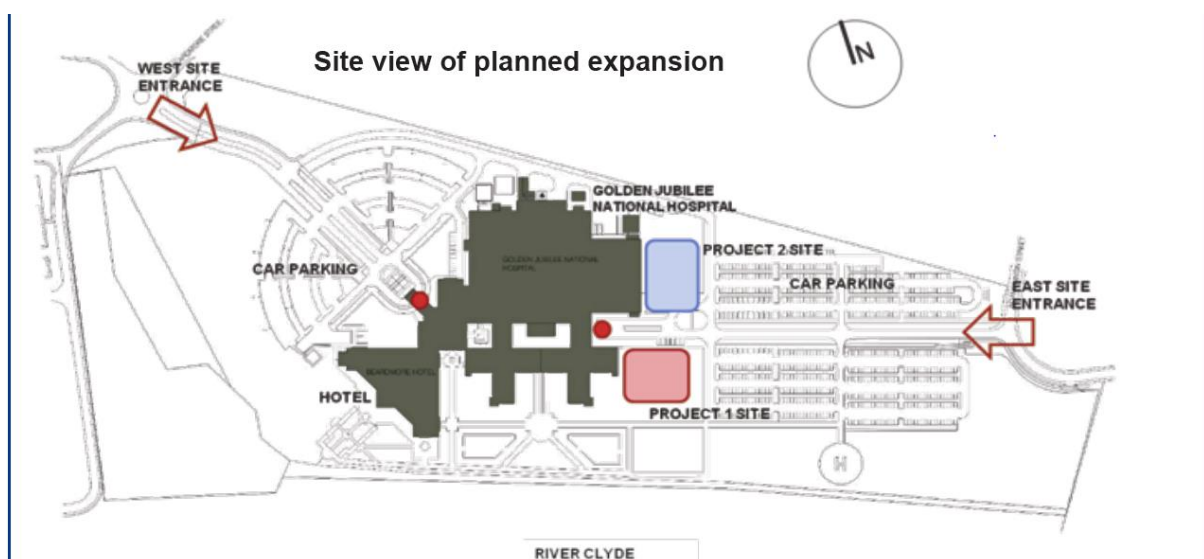
As part of the Scottish Government's investment of £200 million to meet demand for elective procedures over the next 10 years, the Golden Jubilee Foundation is now focusing on creating an expansion programme to treat more patients than ever before. Our hospital expansion will be delivered in a phased approach subject to necessary Scottish Government approval:

- Phase 1 will deliver a new integrated eye unit which will be open in July 2020 providing 10500 cataract procedures per annum and 12915 outpatient appointments rising to 11000 Cataract procedures and 13530 Outpatient Appointments by April 2021
- Phase 2 will deliver new surgical capacity across orthopaedics and general surgery and increased capacity for endoscopy procedures. This will open in 2021 significantly increasing elective care capacity for NHS Scotland.

The key objectives for our expansion are to:

- create sufficient additional elective care capacity for the West of Scotland region to meet the predicted need for elective care by 2035;
- provide innovative patient centred models of care that are both efficient and sustainable;
- provide sustainable workforce models that ensure the Golden Jubilee Foundation remains an exemplar employer and an attractive place for staff to work;
- reduce or eliminate routine use of the private sector;
- reduce the chances of cancellation of elective surgery and reduce cancellation rates;
- enable delivery of current and future Government guarantees on inpatient / day case waiting times on a sustainable basis; and
- deliver increased efficiency and productivity, adopting the principles of Better Care, Better Health and Better Value as set out in the Scottish Government "Health and Social Care Delivery Plan" published in December 201

The image below demonstrates the locations for both phases of the new GJ Elective Care Centre



Construction has begun on Phase 1 of the Elective Centre expansion which will be opened on a phased basis and will introduce the following new infrastructure:

4 Theatres commissioned by 2020/21

5 Theatres commissioned by 2024/25

6 Theatres commissioned by 2030/31



### ***Phase 2 Expansion***

Assuming there is a 10% productivity improvement within the other West of Scotland hospitals and an additional 415 Total Knee Replacement procedures are delivered using existing resources, there will be a need for the GJF to expand and deliver a further 1,796 procedures by 2035. Assuming the same level of productivity improvement for primary hip procedures, there will be a need for the GJF to expand and deliver a further 1,171 Total Hip Replacement procedures by 2035. Orthopaedic revision surgery requirements for the future will require additional capacity. Taking into account the total demand for other orthopaedic procedures such as foot and ankle and hand and wrist surgery, the GJ orthopaedic expansion will require a total of six additional theatres.

The demand for diagnostic endoscopy will require the Phase 2 expansion to deliver up to three additional procedure rooms and the current Initial Agreement modelling predicts the requirement for two additional in-patient/day case general surgery theatres.

### ***New Clinical Treatments and services***

The Golden Jubilee has always been at the forefront of exploring new opportunities for clinical treatments and expanding the range of services we provide. In addition to the service changes outlined in section 2.1, we will be exploring the following areas and where viable developing services to deliver new treatments:

- **Lung Transplantation**

NHS National Services Division (NSD) is currently supporting an options appraisal exercise led by GJNH to consider the options for delivering lung transplantation services for Scotland. Comparing the rate of lung transplantation for Scottish patients to those in the rest of Europe, far fewer Scottish patients

receive lung transplants than those elsewhere suggesting a significant unmet need. Scoping work has progressed through a range of visits and workshops sessions to explore service planning and demand. The GJ team are currently planning visits to Scottish NHS Boards to hear about their experience of the current service to inform a potential future service delivered from Golden Jubilee and are preparing documentation to be submitted via the National Specialist Services Committee and associated national approval routes.

- **Single Site Scottish Pulmonary Vascular Unit (SPVU)**

We will consider the opportunity of the development of a single site SPVU service, co-located with our other National Services and the potential to expand SPVU service provision to the delivery of a Balloon Pulmonary Angioplasty Service for Scotland and a Radiofrequency Ablation (RFA) service for primary or secondary lung cancers, which would enable Scottish patients to be treated closer to home

- **Organ Care System**

Use of the Organ Care System (OCS) went live at the GJNH during the summer of 2017. OCS is designed to keep recently donated hearts warm and beating during transportation, with the aim to increase the number of donor hearts available for transplant by increasing the length of time the donor heart remains viable. Following a number of successful retrievals with donation after brain death (DBD), the GJ team will expand its use in donations after circulatory death (DCD).

The use of OCS will increase the numbers of available hearts for transplantation for Scottish patients, improve clinical outcomes by maintaining the donor heart in a warm, perfused state during transit and reduce numbers of patients requiring expensive heart failure management treatments.

As the use of OCS is not funded by NHS Blood and Transplant, its use is normally supported through hospital charities. In order to maintain a viable and sustainable OCS service, the GJF will launch a campaign for Scotland-wide Heart Transplantation with a specific appeal for our Organ Care System.

- **Regional Cardiac Imaging**

The GJNH currently provides a modern, efficient and multi-disciplinary/modality Cardiology imaging service. Based on analysis of current activity in Radiology and Cardiology a sustained increase in referrals is anticipated. This is driven by factors such as increased complexity of referrals, advanced imaging to support structural heart interventions including TAVI and interventional cardiology and orthopaedic expansion. This is closely aligned with emerging evidence to support multi-disciplinary and multi-modality and the emergence of novel technology, especially non-invasive assessment of coronary anatomy (CTCA and CTCA-FFR); the demand for which is expected to rise further with emerging evidence and clinical practice guidelines. Working with the West of Scotland region we will review the future demand and develop a sustainable regional cardiac imaging service.

## 2.3 National Elective Centres

In response to Scottish Government's formal request the GJF have given consideration as to how they can support the delivery of the six new Elective Treatment Centres (ETCs) to optimise the return on the new investment.

Consideration has been given to establish how the GJF can support the delivery of high quality elective care, using upper quartile performance models of care, ensuring performance is optimised and continually monitored, thereby ensuring the maximum benefit is delivered for patients and NHS staff.

The proposed approach described below is aligned with the work of the National Elective Centres Programme Board and with the Scottish Access Collaborative and will deliver a 'Once for Scotland' approach.

The following two options are proposed for the management of the ETCs:

<b>Option 1 – 'An Innovative Commissioning/ Collaboration Approach'</b>	An Innovative Collaboration / Commissioning Approach: the GJF strategically direct the assessment of elective treatment needs, undertake the planning and prioritisation of the ETCs activity whilst also setting an agreed governance and performance framework with regular monitoring and ongoing peer support.
<b>Option 2 – 'GJF Directly Manage the stand alone ETCs'</b>	The GJF directly manage stand alone ETCs: for example the Stracathro Regional Treatment Centre could be managed as satellite facility of the GJF

The strategy proposes that as a first step in demonstrating the effectiveness of the approach, the Forth Valley ETC activity is delivered via the Commissioning Model. This would mean that the planning and prioritisation of the FV ETC activity would be strategically directed by GJF, working within an agreed governance and performance framework.

This approach would deliver the following benefits:

- Elective activity will be 'protected' and ETC 'resources' will always be used to deliver elective care **(Effective)**
- Clinical performance will be driven towards upper quartile performance **(Effective)**
- Patient experience will improve through achievement of a very low surgical cancellation rate and increased patient access as a result of improved performance **(Person Centred)**
- Waiting times will reduce, improving patient access to elective care, supporting the implementation of Scottish Government's Waiting Time Improvement Plan **(Effective, Person Centred)**

- Opportunity of generating added value benefits of GJF learning and experience of running high volume high quality elective care centre likely to be realised  
**(Safe/Effective & Person Centred)**
- Opportunity to embed elective culture (e.g. GJF values based approach to care)  
**(Safe, Effective / Person Centred)**

Furthermore, it is proposed that the Stracathro RTC would be directly managed by GJF with clear service level agreements put in place to support staffing, and clear operating and costing models.

This approach would also deliver the benefits listed above, however it is recognised that direct management of the stand alone ETCs will require investment in significant additional resources at GJF to support the operational day to day management of the services provided; and there will be a requirement to agree service level agreements with NHS Tayside to support the delivery of local clinical and non clinical support services.

Regardless of the service management option chosen, each of the options would be measured through an agreed monitoring framework with appropriate levels of escalation. For example should there be issues with quality of care, performance or governance, this would be picked up through the monitoring process and an appropriate level of support and/or intervention would be provided. This could include support to undertake quality improvement work, one to one mentoring, management support and or direct management of the unit by the GJF.

The operating models for each delivery arrangement would all comprise the following key elements:

- Demand Management / Patient Booking
- Delivery of standardised upper quartile models of care
- Developing a governance , quality and performance management framework – (including standardised pathways & processes)
- Performance Monitoring, Management & Support
- Staff Competencies & Training
- Staff Governance, Workforce Planning, Recruitment & Human Resources
- Financial Flows & Governance
- Clinical Governance & Risk Management

### ***Demand management/Patient Booking***

GJF would take responsibility for the entire elective treatment centres capacity. It would then allocate capacity based on each Health Boards need. This would ensure that continual assessment of need by specialty and by geographical area would be made to ensure monthly capacity is allocated by speciality to where it is most needed.

### ***Delivery of standardised upper quartile models of care***

The 'Golden Jubilee Elective Treatment Model' would be implemented within each ETC and it should be noted that this model will continue to evolve with upper quartile performance. A culture of continuous improvement would be encouraged through the

innovative collaboration framework which will encourage multidisciplinary teams to continue to identify and implement 'international best practice' across every ETC. This approach will also include 'standardisation' of clinical practice and pathways by procedure by specialty, removing variations in practice and pathways of care.

Developing a governance, quality and performance management framework – (including standardised pathways & processes)

GJF and the partnering Health Board would agree within the contract specification a governance, quality & performance management framework which would set out:

- The clinical governance and risk management framework - including a clear responsibility and accountability framework
- Clear clinical outcome measurement and clinical audit methodology for each procedure and specialty
- Implementation of the 'Golden Jubilee Elective Treatment model'
- A standardised clinical productivity framework, setting out expected clinical productivity by specialty including a range of key performance measures

### ***Performance Monitoring, Management & Support***

The agreed governance and performance framework would provide the vehicle by which quality and performance would be measured every month. For example each ETC would produce a monthly report to facilitate national scrutiny of the utilisation of all elective treatment capacity. GJF would review all reports and provide peer support as required to identify trends, and tackle issues as they arise whilst also supporting the continual improvement of services.

### ***Staff Competencies & Training***

GJF would support the establishment and development of formal training academies to support the training of staff ahead of the opening of each ETC; this would be a continual programme of training to support each ETC as it expands year on year in line with forecast population change and patient demand.

### ***Staff Governance, Workforce Planning, Recruitment & Human Resources***

Responsibility and accountability for recruitment, training and staff governance & management of staff would remain with each ETC. GJF would support the workforce planning process by sharing experience of required minimal staffing levels to deliver standard clinical productivity levels. The 'values based' recruitment process would also be implemented to support the recruitment process for new staff. For more difficult to recruit to medical posts there would be the opportunity for joint appointments, these could be between the GJF and other ETCs, or between other Health Boards and the ETCs.

### ***Financial Flows & Governance***

Financial flows would be maintained separately to the GJF & other Health Boards existing budgets. There are a number of different funding options for both the

revenue and the capital that could be put in place. These will be fully developed as part of the planning and implementation process.

### ***Clinical Governance & Risk Management***

Clinical governance and risk management would be owned and managed locally by each Health Board, and a risk assessment tool would be utilised within the monthly performance report to highlight any issues as they arise and agree control measures, with peer support provided by GJF.

### ***Procurement & Consumables***

As part of the establishment of the governance, quality and performance framework, discussions would be progressed with each partner to establish the feasibility and practicalities of standardising equipment, implants and consumables. Further benefits could be delivered through a common approach to procurement of equipment and key consumables.

## **2.4 Teaching Hospital Status and Centre of Excellence**

A number of strategic objectives have been established under this workstream which can be grouped into the following themes:

- Development of the NHS Training Academy
- Medical teaching and education and clinical skills
- Academic partnerships
- Transforming roles and sustainable staffing
- Medical contracts and effective job planning

### ***NHS Training Academy***

The strategic context for workforce planning in NHS Scotland is shaped by the increasing demand for health and social care services, as we live longer lives, often with more complex and intensive needs. One of the key drivers for change to our traditional approach to workforce planning, training and development is the launch of the National Elective Centre Programme. This ambitious programme aims to introduce capacity to increase the number of procedures in areas of high demand will help to meet the needs of an elderly population estimated to be 25%-30% higher in 2035 than at present. Treatment offered in these centres across Scotland will focus on a range of high demand surgical specialities.

The scope of the Training Academy development will be shaped and defined by the needs within NHS Scotland. It is assumed that a fully developed Training Academy would be capable of delivering:

- The projected workforce for the Elective Treatment Centres;
- The future workforce requirements to support the wider needs within NHS Scotland; and
- The skills and capacity to address specific key pressure areas or scarce roles, such as Advanced Practice.



It is recognised that across Scotland, there are a range of workforce availability challenges within health and social care. This proposed model could be delivered at scale to address the widest possible range of medical, clinical and non clinical roles, however this proposal will focus on the opportunities to expand workforce availability and capacity on a phased and incremental growth basis.

The model will prioritise clinical workforce training for Nursing, Allied Health Professions, Healthcare Scientists and Pharmacists in the first instance. Later phase development will involve administrative and support services training pathways.

The Training Academy will deliver a sustainable workforce in line with the programme delivery for all of ETCs, including the Golden Jubilee Foundation (GJF) expansion and the first ETC at NHS FV. The Academy approach will be predicated on the Golden Jubilee model of care, with a workforce model aligned to delivering the capacity and quality planned for the GJF expansion. Workforce modelling will also be based on the training needs analysis for each ETC and will encompass the lead times for incremental increases in recruitment and training numbers as well as the provision of the clinical education resource to deliver the Academy approach.

The Academy models of training will facilitate and prioritise accelerated learning pathways through a dynamic and cutting edge blend of classroom, blended learning, self-directed study on intensive residential courses and direct clinical experience. The Academies will prepare staff to be e-literate and at ease with a range of digital and eHealth developments.

The Training Academy will utilise the wide range of facilities already in place at the Golden Jubilee Foundation to accelerate learning and provide cutting edge skills acquisition such as:

- Access to the clinical skills services within the Golden Jubilee Research Institute, adjacent to the Golden Jubilee Conference Hotel (GJCH);
- Wide range of flexible training and conference facilities, for residential and non-residential training events
- Live-link facilities from the GJCH to the GJ Theatre Suite and Cardiac Cath Labs to enable learning and observation at scale and interact with clinical teams in a real-time environment;
- Clinical simulation facilities; and
- Strong and well established approach to clinical education, senior clinical mentoring and training.

In addition, the Academy could be established to concentrate learning on an intensive residential basis at weekend and summer schools. This would enable a risk-sharing approach to be adopted where clinician and educator resource could be released for short periods from other NHS Boards to provide maximum mutual benefit.

The NHS Training Academy would offer excellent opportunities to not only attract, but further strengthen existing commercial Strategic Partnerships within NHS Scotland. Coupled with multifaceted targeting of donations and investments from philanthropists, Trusts and Foundations, Entrepreneurs, Captains of Industry as well as a Scotland-wide professional fundraising drive, could deliver the necessary

funding structure to underpin the delivery of a world-class Training Academy by NHS Scotland.

Early analysis indicates an excellent potential for attracting sponsorships from international commercial organisations. Careful analysis of the sponsorship investment will be carried out to ensure that funding streams are sustainable and sufficiently flexible to enable the dynamic development of the Academies at scale.

Other funding streams to be considered could include:

- Training Allocations from NHS Boards
- Central Transformational Funding
- Self Funding Options

This is a highly ambitious opportunity to match workforce with demand and provide optimal return on investment in ETCs, which will only be viable if delivered at scale. The logistics of delivery at the required scale are currently being explored and will be fully articulated as a priority in year one of this Strategy.

### ***Medical teaching and education and clinical skills***

Building on existing medical postgraduate teaching arrangements, we will work to ensure that GJF is fully integrated within national training programmes to ensure that our capacity to support postgraduate medical teaching and education is effectively utilised. We currently offer undergraduate teaching and education through the cardiology element of the neurology placement and will look to further expand our involvement with undergraduate medical education, ensuring that it continues to be coordinated and delivered to a high standard.

### ***Academic partnerships***

In addition to the academic partnerships that will be developed as part of the NHS training academy described above, GJF will progress the work with the University of Glasgow to be recognised as a University Hospital. This will support our strategic plans to develop further strategic partnerships and will support our vision of leading on research and innovation. Through designation and accreditation, we will also be well-placed to attract sponsorship and investment to our training academies and clinical education programmes.

### ***Transforming roles and sustainable staffing***

In looking to embed sustainable staffing, we will continue to explore opportunities to extend the use of Advanced Practice roles across the GJF clinical specialties. This will be carefully planned to ensure a safe and appropriate balance of doctors, advanced and extended scope practitioners, seeking to make full use of the skillset of each clinician.

Our delivery approach will continue to be aligned to our Advanced Practice strategy, with its four key pillars of:

- Clinical practice
- Leadership
- Facilitation of Learning
- Evidence, research and development

Our clinical workforce will continue to be planned and delivered using best practice workforce planning and will support the requirements of safe and sustainable staffing and excellence in care practices.

### ***Medical contracts and effective job planning***

In order to ensure that our consultant and specialty doctor job plans meet best practice and support future service planning and delivery, we will carry out an in-depth analysis of our current job plans, review our range of non-consultant roles and work to develop a job planning framework capable of delivering five over seven and extended day working.

## **2.5 Innovation and Investment**

Following the launch of the new and ambitious national health and social care innovation fund to develop original and pioneering treatments for Scotland's patients, the fund was established within the GJF. The vision was to apply a 'broad based' approach to securing additional income and investment from research bodies, commercial partnerships, industrial sponsorships and philanthropists; income generating activity. GJF has also been assigned the objectives of identifying world-wide commercial and strategic partnerships to support the marketing and selling of successful GJF and NHSS innovations globally.

Our strategic vision for innovation and investment over the period 2019-22 will focus on the following areas:

### ***Strategic Partnerships***

We will continue to secure and further expand our range and depth of strategic partnerships to help drive, at pace, NHSS' innovations which can either be shared, or used to generate income and investment nationally and internationally. This includes ongoing development of our electronic patient record in partnership with Orion and full automation in National Early Warning Score observations and calculations with Syncrophi. Through our expansion and robotics programmes, we will extend the scope of existing joint working, by attracting and securing donations, grants and investment to underpin a sustainable Organ Care System service.

We are dramatically enhancing our existing partnerships with Stryker, to further widen our approach to collecting, analysing and using data, not only across the whole organisation, but also globally including; clinical outcome measures and patient reported outcome measures, specifically ensuring the effective and continuous access to OBERD. This is further described in the Research section of this strategy. Finally through our well-established partnership with Zimmer Biomet, we will open and operate the only UK based Laboratory Service focussing on effective and early diagnosis of prosthetic joint infection.

### ***Income Generation***

The GJF Innovation campaign is driven by an ambitious income generation programme to include: philanthropic giving, trusts and foundations together with, sponsorship and investment opportunities by way of angel and commercial investment plus the strengthening of strategic partnerships. The charity's vision, goals and tight governance are clearly identified and upheld by GJF and NHS Scotland and weave closely to underpin all income generating initiatives.

One particular initiative driving income directly to the Innovation Fund is the hospital's cafe facility. In August 2017, it was re-launched and re-branded a 'not for profit' Café Latte; via its strapline...*"all profits are poured back into the Golden Jubilee Foundation"*. Café Latte also provides a central communication nucleus from which to inform and promote to our patients, families and friends of income generating initiatives being delivered to support innovation at the Golden Jubilee Foundation. As part of the expansion programme at GJF, we will look further to develop income generation opportunities to support Golden Jubilee Foundation's key priorities.

Our goals for the period 2019-22 will include sustainable income generation activity plus focus on supporting:

- The development of Hotel and Conference Centre Hotel business; and
- Sponsorship opportunities with strategic partners, including the Golden Jubilee Academy.

### ***Innovation Fund Management***

Building on our existing successful partnership with NHS Tayside, we have agreed to the transfer of grant funds relating to the Malawi Emergency Medicine Project to GJF. The grant funding will be payable until 2023 and will be tightly controlled through the GJ Innovation Fund governance process. The purpose of the project is to "develop fit for purpose and sustainable Emergency and Trauma Units at all Central Hospitals in Malawi – replicating the significant improvement to delivery of essential emergency care as experienced at Queen Elizabeth Central Hospital Blantyre (the pilot for this project), with the aim of delivering in Malawi, for the first time, a National Emergency and Trauma network."

Continuing close collaboration to support innovation in digital health and care by negotiating and securing corporate investment with leading pharmaceutical companies; especially a project which identifies early identification of Arterial Fibrillation (AF) in primary care throughout Scotland. The project will be launch initially with NHS Lanarkshire. Any commercial investment secured will be directed towards The Innovation Fund for Scotland and governed by GJF – another shared services example.

### ***Open Innovation***

In order to support our strategic aims to support open innovation and partnerships with industry and academia, we will look to engage a range of leading university partners in joint innovation activity, underpinned by both a memoranda of understanding and/or a Strategic Partnership. We will specifically focus our innovation efforts on expanding approaches to robotics in healthcare and commercial partnership opportunities. This also encompasses the current partnership with Scottish Enterprise to drive a feasibility study on establishing the Golden Jubilee Foundation as "NHSS' Accelerator Unit for Innovation."

### ***Global Development***

The GJ has been asked by the CMO to explore an option to provide medical training associated with the Jordanian Military Medical Service. The aim would be to provide specialist medical education to post-graduate level doctors. This requires further exploration but has synergies with the Golden Jubilee Academy approach.

### ***Managing Innovation***

Building on the success of our existing Medical Devices Alpha Test (MDaT), we will aim to promote its approach to a Scotland-wide audience. To extend our “Once for Scotland” ethos, NHS Boards from around Scotland have already been encouraged to access MDaT®. A positive response was received from Scottish Health Innovations Ltd (SHIL) and Scottish Technologies Group.

The overall aim is to increase our MDaT® programme enhance the MDaT® process by providing/offering additional route to market and investment advice.

**We will launch an Innovation Academy in partnership with carefully selected investment partnerships – need more here Angela and Jann**

### ***Charity Development***

Through our early work with VST Enterprises, a FinTech and solutions based company in Manchester, we have established the potential to create and support the build of an interactive but highly secure fundraising application – a realistic platform on which to support The Innovation Fund. This would also be an ideal vehicle on which to drive income generation through national campaigns for example; the Organ Care System for transplantation. This technology, known as VCode®, is at the forefront of innovation for generating income via public donations. We will engage VST Enterprises in a Strategic Partnership Agreement to progress this exciting opportunity.

A further range of activities being explored and shared as a Once for Scotland opportunity is GJF’s Free Wills programme. The development of a dynamic marketing and communications campaign surrounding this programme will provide further acceleration, growth and development of the charity over the period 2019-22. Finally, we will review the opportunities of converting unused endowments to non-restricted funds to improve their deployment within the Foundation.

## **2.6 Research and Development**

The strategic intent for the Golden Jubilee Research Institute is articulated clearly as part of the Board vision. This vision explicitly places the performance and promotion of research as a primary purpose of the organisation, and makes research one of the key domains in which the success of the institution will be judged. Our aim will be to develop our research capability in a complementary manner to the existing NHS Research Scotland (NRS) infrastructure, seeking to add value in our focus areas. Our Research Strategy published in 2016 sets out a five year vision for the organisation where we:

- Maintain the momentum of our current trajectory whilst retaining our hunger for the most ambitious scenarios, including ‘big data’ trials and Advanced Medical Therapy such as stem cell and gene therapy trials;
- Have a wider portfolio of research spread over our main specialties;
- Grow the commercially sponsored and funded part of the research portfolio with commercial partners attracted to our ability to approve projects quickly and to recruit to target and on time;

- Expand our academic research portfolio, with more studies, and some integrated work programmes, supported by the Research Funding Councils and research charities such as the Wellcome Trust and the British Heart Foundation;
- Continue to lead multicentre international trials and trials of international clinical significance;
- Explore new –to the Golden Jubilee - areas of research activity such as data science, usual care trials and health service research; and
- Develop our academic staff group and continue to promote multidisciplinary engagement in research.

Further work is needed to build on this success and continue to grow our reputation as a leading centre for medical research. Our strategic objectives will be delivered within these broad themes:

### **Research Capacity and Capability**

We will continue the expansion of our capacity and capability to lead and support research through the following:

**Academic Staff Development** – In order to grow our research portfolio substantially we will increase the amount time available to tenured senior researchers. This may be through the creation of new posts or through funding research sessions for existing NHS staff. We will also continue to develop our links with academic partners, explore joint lectureships and develop a critical mass of research focussed staff in key specialties.

**Research and clinical staff** – We will increase research skills and engagement in research across all staff groups to promote a research culture across the organisation enabling research within a wide range of clinical disciplines and expanding of the research portfolio across all specialities.

**Research Support** – This relates to staff who are employed solely for the purpose of supporting research activity. Our aim is to grow this staff group thereby facilitating the growth of the research portfolio as described in the sections above.

**Expansion of Golden Jubilee Research Institute** – We will develop a business case with a range of partners including commercial, academic and public sector bodies to attract and secure funding to expand:

- the physical infrastructure of the Research Institute, including the clinical skills centre;
- the staff available to support research and innovation;
- the portfolio of commercial, non-commercial and academic research; and

### **Programme expansion and new developments**

#### **Biologic Capability Expansion**

Biologics is a term generally used to include techniques such as gene therapy and stem cell therapy which represent important future therapies. Compared with trials of non-biological drugs, these trials introduce an additional level of complexity, including technique-specific regulatory and infrastructure requirements. The Golden

Jubilee has already successfully recruited to stem cell and genetherapy trials and our aim is to continue to develop this activity.

### ***Data Science Programme***

Large systematic audit projects such as implant registries, and national clinical audits have been around for many years and are used to understand clinical outcomes and guide further research. Combined with appropriate statistical techniques this kind of data gathering is already a powerful tool. More recently, the widespread availability of electronic patient records, combined with increasing computing power has increased the potential for this kind of “big data” mining to a new level in terms of the ability to gain insights into disease causation and treatment effects.

For the Golden Jubilee Foundation, this a potential area for significant expansion based on our patient throughputs and the vast amount of data, including image data that we record. In addition we perform a substantial and potentially increasing proportion of the Scottish activity for some procedures e.g. cataract surgery, hip and knee joint replacement, cardiac and thoracic surgery and interventional cardiology. There is considerable scope to expand and build on our current activity for instance developing both retrospective analyses and prospective clinical trials during ‘usual care’ studies that can be enabled through existing registries in orthopaedics, cardiology, cardiac and thoracic surgery.

Through our work with a strategic partner, Golden Jubilee has secured access to OBERD - an international Quality Clinical Data Registry providing our orthopaedic surgeons with access to data from seven of the world’s leading healthcare organisations. This will accelerate our ability to develop key international research relationships and advance our research-based care. We will also work towards developing a key strategic partnership around machine learning and healthcare related algorithms.

### ***Clinical Trials of Investigational Medicinal Products(CTIMPs)***

Otherwise known as drug trials, the Golden Jubilee hosts a number of drug studies but has not yet sponsored this kind of research project. Developing this capacity would require significant investment, specifically within the pharmacy department and within the monitoring/auditing elements of the Research Institute. This investment would significantly increase if the study was to recruit from multiple sites. The lack of sponsorship for our own CTIMPs is not a barrier to developing drug studies and we will keep the option of sponsorship development under review over the next couple of years.

### ***Medical Device Developments***

Building on our experience with the development of our Medical Devices Alpha Test (MDαT), we will carry out a scoping exercise to explore the feasibility of sponsoring trials of non CE marked medical devices. This will be positioned alongside our plans to develop our work to facilitate translational research and early intervention testing. We will also pursue the development of an innovation infrastructure that will function as an interface between industry and academia, and enable joint work with industry partners and post-doctoral engineers.

## **2.7 Golden Jubilee Hotel and Conference Centre**

The Golden Jubilee Conference Hotel is a unique Hotel and Conference Centre for NHS Scotland patients, staff and partners. Its strategy aims to deliver a pivotal meeting and hospitality element of the Golden Jubilee Foundation, an internationally renowned Healthcare campus, and a global centre of education, innovation and collaboration in health, hospitality and learning.

The priorities for the next three-five years have been grouped into six distinct themes:

- Driving Business Development;
- Asset Management and Development;
- Sustainable Investment Strategy;
- Patient Services;
- NHS Conference Services; and
- Centre for Health and Wellbeing.

### ***Driving Business Development***

Building on the success of the 2020 strategy infrastructure developments and excellent teaching and learning facilities, the Hotel is an optimal position to capitalise on the unique links with the Hospital and Research Institute providing a crucible for innovation, collaboration and education, nationally and internationally. The Business Development plan will focus on the following key markets:

- Consolidation and growth in national NHS and Public Sector markets.
- Growth in International medical and healthcare markets with a Foundation wide business development plan.
- Establishment and development of the NHS Training Academy.
- Consolidation and growth of third sector, trade union and association conference and training market.
- Delivering a community based Hotel for local corporate and leisure markets.

### ***Asset Management and Development***

As an integral part of the Foundation, and a key NHS Scotland asset, the Hotel requires significant asset management and development. Building on recent strategic infrastructure the Hotel will aim to complete and develop further:

- Remaining bedroom upgrades;
- Development and implementation of the Riverside Project to increase conference and dining capacity, improve access to the Centre for Health and Wellbeing, whilst creating a more versatile and ambient multi functional space;
- Enhance and develop services and facilities to enable medical and healthcare learning and collaboration; and
- Establish an effective and sustainable maintenance system.



## ***Sustainable Investment Strategy***

A sustainable investment strategy will be developed which will recognise and seek to overcome challenges associated with the unique operating environment of the hotel as part of the Foundation family.

## ***Patient Services***

Playing a key role in the Golden Jubilee model of care and contributing positively to the patient journey, detailed planning of future patient/relative room capacity will be carried out to ensure hospital expansion and regional priorities can be accommodated. This future model will be built with long term capacity and flexibility as primary drivers.

## ***NHS Conferences***

The Hotel remains the recognised NHS and public centre conference venue and continues to evolve its service to provide excellent meeting and conference facilities and support. There will be the requirement to reinforce and confirm the approach to the implementation of the national events strategy to enable the hotel to provide maximum value to NHS Scotland.

Utilising the 'Venue of Excellence' model of quality service, the Hotel will provide a unique base to nurture and support the NHS Training Academy approach, supporting training and education at a range of levels.

The Hotel provides a world class conference and meeting venue for the Foundation, an essential platform to showcase and cultivate innovation, partnerships, investments and collaborations. It will continue to host prestigious and cutting edge conferences and meetings which enhance the profile of the Foundation and act as a catalyst for attracting and retaining talent and collaborative meetings which can lead to healthcare solutions, clinical progress and medical innovations.

## ***Centre for Health and Wellbeing***

Building on the transformation of the Hotel Health Club to a Centre of Health and Wellbeing which is delivering its phase two milestones, the centre will move to phase three of the transition to become a Foundation-led resource providing:

- Integration of the physical space with the wider health and wellbeing scope and aspirations to ensure that staff of the Golden Jubilee Foundation can access health and wellbeing services;
- Increase use of Occupational Health of the Centre to support staff health and wellbeing;
- Development and promotion of the Centre of Health and Wellbeing as a beacon of good working practice;
- Explore the potential of research programmes that explore the potential of health and wellbeing in the workplace; and
- Embed Centre of Health and Wellbeing as an employee, delegate and guest resource underpinning the world class conference, meeting and academy resources, providing facilities to unwind and keep fit.

### 3 Workforce Plan

The Golden Jubilee Foundation recognises that our workforce is our biggest asset and is key to successful delivery of the board strategy. We will need to grow our workforce over the coming years in the context of challenging labour market. This will require a strong focus on effective and forward looking workforce planning that enables us to plan and provide a workforce over the course of this strategy that:

- Ensures we are matching capacity with demand which will be changing year on year due to both expansion and changing models of care and service delivery
- Enables us to evolve and develop the skill mix of our workforce to suit new models of care and ways of working
- Supports the increasing range and scope of practice within different healthcare professions

Planning for the future workforce needs to be combined with clear plans as set out in our people strategy for how we will attract, develop and retain the right number of people with the right skills and values to deliver high quality healthcare.

#### Workforce projections

The Golden Jubilee Foundation workforce has grown by approximately 2% each year since 2015 and we now currently employ approximately 1800 staff. This growth has enabled us to expand our services and increase our capacity to deliver increasing amounts of elective care for NHS Scotland as well as expanding our regional and national services.

Our hospital expansion programme will grow even further our elective care capacity and further development our regional and national services will also see continued growth. Workforce modelling for continued expansion of elective care, regional and national services will see our workforce grow to approximately 2400 by 2025. This increase will be across all staff groups in the hospital as illustrated in figure 1.1 below.

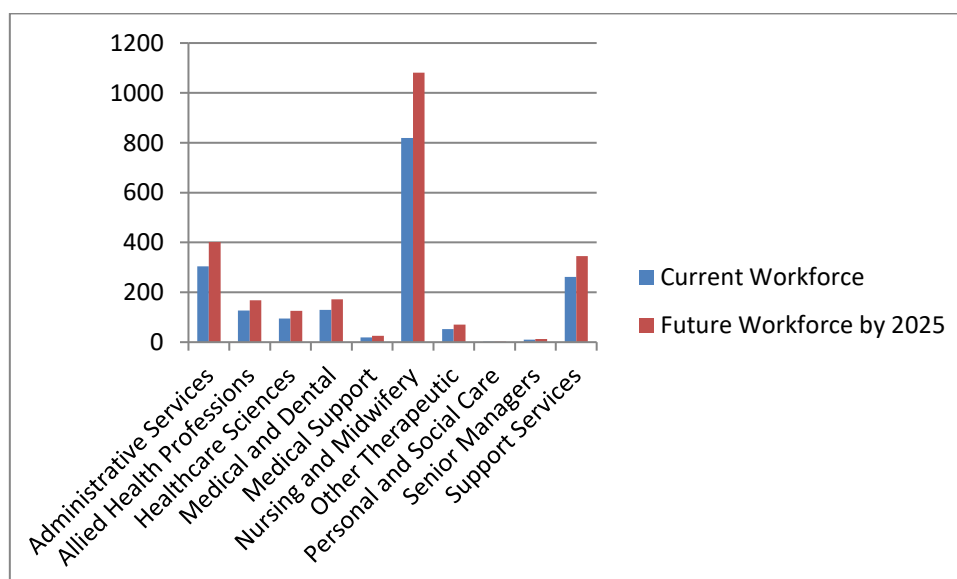


Figure 1.2 shows the relative scale of the growth challenge across the staff groups of our workforce.

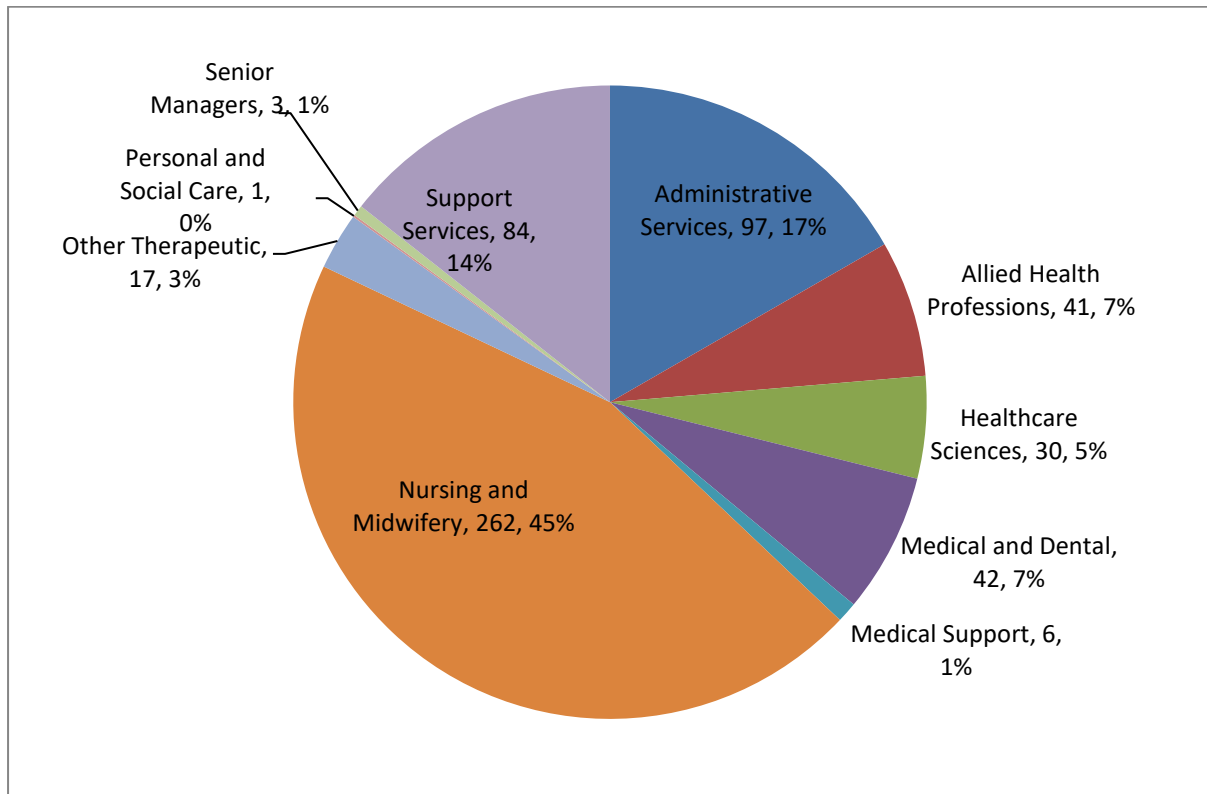


Figure 1.2 – Percentage Increases by Staff Group

### Workforce planning

As we grow our workforce, further analysis through detailed workforce planning will be needed to determine the specific skill mix within the staff groups. This will enable us to determine which job roles will be required to deliver new and evolving models of care and how many staff will need to be recruited to this range of job roles.

For example we have completed detailed workforce planning for our ophthalmology expansion which uses a new model of care which makes greater use of optometrists in cataract surgery and enables best use of the ophthalmologist's time. This has enabled us to plan how many optometrists we need in the future to increase elective cataract surgery capacity whilst limiting the demand on the relative scarce resource of our ophthalmologist's time.

Further workforce planning will be required on an ongoing basis to ensure we deliver the planned expansion of services but are also able to adapt the changing models and care and influences such as the Scottish and international labour markets.

This will need further investment in and development of our workforce planning approach through the following:

- We will introduce a new digital platform for workforce planning and analysis that is accessible across the organisation.

- Invest in the training and development of our people in relation to workforce planning.
- Develop and deliver comprehensive forward looking workforce plans across all specialities and departments with the GJF

We will deliver a digital platform where our Board can use a common data warehouse to upload workforce data to allow them to report on workforce related metrics. Currently considerable time is invested in extracting, transforming and reporting workforce data. Typical workforce data is captured and maintained on a number of local and nation systems e.g. eESS, payroll, finance/planning systems, recruitment systems, appraisal systems, training systems, iMatter. This solution will provide the ability to report on Workforce data regardless of which system the data resides.

We will create a training and development programme for our staff that will ensure they have the skills in workforce planning that are appropriate to the position and responsibility within the organisation. This will ensure we have an appropriate range of skills including highly skilled workforce planners responsible for overall organisational planning working with managers and staff who are able to plan for their areas of responsibility.

We will support managers across the organisation to plan for the workforce required for the services they manage now and in the future. A key focus will be assessing and forecasting changes to service delivery models due to factors such as increasing demand, technological advances and service redesign. This will deliver an overall workforce plan that is based on detailed departmental and divisional workforce plans.

### **Workforce profile**

We recognise that the nature of our workforce will develop over time in response to changes in how healthcare is delivered and to changes in the labour market. This will require developing of new job roles as outlined above as well as innovative approaches to attracting, recruiting and developing staff into current and new job roles. We know there will be challenges in meeting demand and that this will be more difficult in some areas than others. We will focus on the following areas to address these challenges.

### **Medical Workforce**

The growth in demand for consultants across NHS Scotland combined with the enhanced specialisation that elective care centres brings will require collaboration between NHS Boards. We will work with other boards to develop joint appointments where consultants can work between two boards to enable them to practice across the breadth of their specialty. This will ensure the elective care centres model can be delivered whilst maintaining clinical skills and providing attractive and motivating consultant roles

We will also continue to seek opportunities to develop existing job roles, or create new ones, that will support our medical workforce. This will enable our medical workforce to provide the care only they can provide whilst moving work they don't need to do to other healthcare professionals

## **Training Academies**

As described earlier in this strategy, we will significantly expand our academy approach to support training and development of staff into advanced practice roles and to support recruitment into specialised roles and workforce groups where there are staff availability gaps. This will ensure that we are able to attract and support people into critical job roles that need advanced skills in a timely and effective way.

## **Further and Higher education**

We will continue to develop our approach to providing access to further and higher education. This will contribute to our role as an employer who invests in people and that supports people into skilled work. Through gaining skills and qualifications, people from the local area and further afield can access a career in healthcare, which supports youth employment, those seeking re-employment into a new job sector and increases access to work.

## 4 Financial Plan

The Board financial plan incorporates the key points from the Scottish Government Health priorities that relate specifically to the Golden Jubilee and the financial assumptions and impact of these over the next three to five years.

The key focus areas within the financial plan are as follows:

- Acknowledgement that capacity within Golden Jubilee has been reached and population growth trends and demographics indicate that demand will continue to increase. Additional capacity is being created through our Expansion programme (both new build and internally) with continued efficiency and improvement being maintained throughout this period.
- Plans and financial assumptions to deliver the earmarked investment to deliver the National Elective Treatment Centres expand the Golden Jubilee National Hospital. At this stage within the financial plan Phase 1 Ophthalmology financial assumptions are in line with the final full business case (FBC) approved by Capital Investment Group and Phase 2 Expansion reflects the approved Initial Agreement, whilst recognising that this will be updated throughout the period of the plan
- Financial planning assumptions to ensure we continue to lead and deliver the Golden Jubilee elective care model of service with resources in place to deliver this.
- Requirement to build on the Golden Jubilee vision of leading quality, research and innovation
- Adopting a 'Once for Scotland' approach and collaboration with other National Boards and the Target Operating Model (TOM) work streams (and Territorial Boards and Regions) to identify ways to standardise and share service delivery
- Implement shared decision making and value added approach to Health care provision under the Realistic Medicine vision
- Recognition that we are a significant employer for the local area in West Dunbartonshire and working with West College Scotland, West Dunbartonshire Council and other third sector providers on how we can maximise employment and economic growth in the local area and how by working together we can generate efficiencies across a range of service sectors
- Consider our workforce assumptions and challenges and how we can maximise these to deliver a safe, effective and efficient delivery model both within the Board and supporting others through the development of our NHS training academy
- Build upon our digital expertise and use this enhance our current service delivery

The financial plan has been developed to account for the delivery of the following priorities within this strategy document:

- Sustained investment in both our Radiology and Theatre Academies that delivers in-house training and accreditation for 'hard to fill' clinical posts. This model has received significant interest from other Boards who have visited GJ and commenced some programmes locally. Crucially this model has improved Golden Jubilee recruitment to peri-operative posts and reduced recruitment time and advertising costs for Theatres and the model is being developed to roll this out across NHS Scotland. The approach to meeting the additional resource requirement for the establishment of the NHS Training Academy has been considered in section 2.4 of this strategy.
- The continuation of the efficient model of care for ophthalmology with increased productivity through the use of extended nursing roles, the introduction of surgical trainees and sharing this practice across NHS Scotland.
- The ongoing provision of the Non ST elevation myocardial infarction (NSTEMI) project rolled-out in 2017/18 which saves a total of 5,000 bed days for the West of Scotland creating additional capacity to deal with their increasing emergency admissions and the plans to increase this further in 2019/20.
- The extension of the Thoracic Robotic Surgery programme resulting in a shorter length of stay, reduced pain and improved outcomes for patients.
- The financial plan incorporates the capital and revenue costs associated with the hospital elective centre expansion. It recognises the additional refurbishment costs for the existing estate, which will be subject to further exploration in the Outline Business Case (OBC) for Phase 2; and the likely requirement to phase the equipping of the new building as areas become operational.
- The financial plan also acknowledges the financial pressures within the Golden Jubilee Conference Hotel such the additional challenges of the current economic environment. This has impacted on bedroom and conference business sales due to increased market choice. Further pressure is being experienced with the loss of previous NHS Scotland conference business which is planned to improve with the National collaboration approach and the requirement to upgrade the facilities and bedroom space, retain four star rating and generate income to support this investment recurrently.
- The financial implication of our research work has had a favourable impact on the Board research programme to date with significant reinvestment in our research staffing and infrastructure to deliver our increased research activities. Recurring funding approved by the Chief Scientist Office has also been assumed within this plan.
- Continued investment in the eHealth and digital transformation programmes, with a specific priority placed on the implementation of an Electronic Patient Record (EPR) across the hospital. This supports exploring and facilitating the sharing of information across NHS Board boundaries to support patient pathways. This will be complemented by further exploitation of our clinical portal and development of our patient pathways to reduce variation and improve quality.

- Finally, the Board has committed to develop and implement innovation across its services and has in place a number of innovation programmes delivering this. In addition the Golden Jubilee leads on the National Innovation Fund for NHS Scotland. This work has continued to progress at pace particularly linking into the Global Citizenship work in 2018/19. The financial implications of delivering a local innovation programme have been assumed within this financial plan including the continued investment in innovation bids.



## 5 Supporting Strategic Plans

### 5.1 Quality, Planning and Performance

#### **Quality Strategy**

The Golden Jubilee has been able to consistently deliver high quality care for our patients and carers and to continually improve and develop its services because we promote a culture of improvement. There is also a strong base and understanding of quality improvement methods and the ability to apply and use these to improve care.

The aim of the quality strategy is to build on this and ensure a widespread culture for improvement and a systematic approach to quality through the following:

- Developing our Quality Management System
- Quality Improvement Approach, capacity and capability
- Effective use of data and evaluation

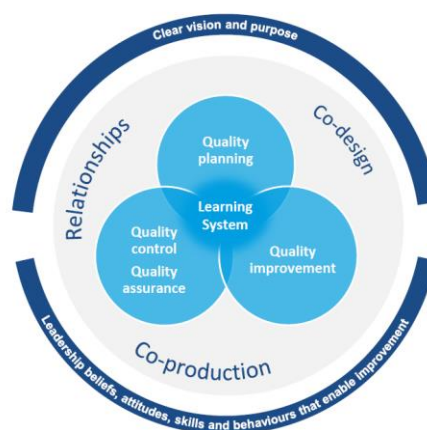
#### **Quality Management System**

We will develop our quality management system to link quality control and quality assurance to quality planning and quality improvement, as illustrated in figure 1.1., so that we can:

- Understand the needs of our service users and the wider population of Scotland
- The difference between these needs and what we provide including issues identified through quality control and quality assurance activities
- Plan and deliver improvement priorities to close the gap



High-level quality management system framework (draft)



1.1 – Quality Management System Concept<sup>1</sup>

<sup>1</sup> Quality Management System Concept promoted by Healthcare Improvement Scotland

## ***Quality Improvement Approach, Capacity and Capability***

The Golden Jubilee has successfully used quality improvement methods and tools over the years to redesign and improve services and the quality of care delivered. We will develop this into the Golden Jubilee Quality Improvement Approach which will clearly articulate the methods and tools we will use for improvement.

To progress the Golden Jubilee Quality Improvement Approach we will need to further develop capacity and capability for quality improvement across the organisation. This will require a combination of developing new training programmes and matching the growing resource of quality improvement skills, including coaching for improvement, to the needs of teams across the organisation.

### ***Effective use of data and evaluation***

The Golden Jubilee has developed its Quality Framework and has a rich source of data available to support our approach to Quality. We will continue to develop our use of data so that they are analysed and presented in a consistent way that makes it easy to understand and interpret for staff, service users, carers and the public. We will also support staff to develop their understanding and skills in using data so that we make use of it to:

- enable evaluation of service redesign and improvement
- effectively monitor and manage performance
- identify opportunities for improvement

### ***Planning and programme management***

The Golden Jubilee has a good track record of planning and delivery of a wide range of projects and programmes that flow from strategic planning. As we continue to grow and develop we will need to further enhance our ability to develop and manage strategies, programmes and projects across the organisation. This will need the right skills, methods and capacity to ensure that long term strategy is translated into programmes of work and effective project management to deliver them. This will be achieved by building on existing skills and resources to strengthen our programme management office.

### ***Performance Framework***

An effective quality management system should be underpinned by a performance framework that enables the board and staff across the organisation to:

- Monitor performance and implement appropriate immediate or short term remedial actions (quality control)
- Receive assurance that standards of care are maintained through routine audit and self-evaluation (quality assurance)
- Identify persistent gaps between anticipated standards of care and actual performance and plan medium and longer term interventions to close the gap (quality planning)
- Monitor the impact of medium and longer term interventions to track improvement (quality improvement)

The Golden Jubilee has these elements in place and will bring them together in an integrated performance framework that is fully deployed across the organisation.

## **5.2 Property and Asset Management**

The Board Property and Asset Management Strategy (PAMS) continues to support the strategic and operational delivery of the Foundation services. Our PAMS has been developed with a focus on collaboration, specifically with the West Region, other National Health Boards, and other partners.

Specific developments such as adding additional imaging capacity (CT and MRI) have been recently delivered to support regional demand. We will continue to participate in work to develop the “Once for Scotland” approach through our ongoing links with local partners such as West College and West Dunbartonshire Council.

We continue to develop our Property Strategy which has the following main aims:

- To describe the condition and performance of the current estate owned by the Board;
- To describe the strategic vision for the estate supporting the 2020 strategy of the Board; and
- To identify the prioritisation and investment plan to deliver this strategic vision.

### ***Estate developments***

#### **Smarter Offices**

Work continues aligned with the Scottish Government Smarter Offices initiative in both our existing and expanded Estate. We are also working closely with Health Facilities Scotland and other National Boards as part of this programme.

#### **Master plan update**

In October 2016, the Board commissioned work to prepare a master plan for the development of the Golden Jubilee Foundation site. The master plan has mapped the next ten years’ development at the GJF encompassing the already identified service developments as well as the less defined anticipated developments.

The significant elements of this master plan are:

- A new combined Ophthalmology Outpatient and Day Surgery Unit;
- Six new operating theatre suites functioning as a parallel unit as part of the enlarged theatre department along with a same day admissions unit;
- A new combined Day Surgery and Endoscopy Unit with two operating theatres and two endoscopy procedure rooms;
- Expanded outpatient, imaging, and inpatient facilities;
- Expanded office and other clinical and non clinical support facilities;
- A reconfigured and enlarged hospital entrance court; and
- Associated additional car parking spaces.

### ***eHealth infrastructure and Medical Equipment***

In line with the Board’s e-Health strategy the primary focus for e-Health will be the introduction of electronic patient records. A number of strategic projects are being undertaken which will impact on the delivery of eHealth within the board such as:

- Introduction of Electronic Patient Records;
- General Data Protection Regulations (GDPR);

- Document scanning; and
- Self check in as part of the expansion programme.

The Board has an established medical equipment group that informs capital group with regard to the procurement of all medical equipment, with the key areas of focus being:

- Installation of additional cath lab capacity;
- Phased replacement of existing cath labs; and
- Ongoing medical equipment investment and replacement programme.

### 5.3 eHealth and digital transformation

The Scottish Government's digital health and care strategy 2018 sets the context for our approach to integrating digital technology and data into delivering high quality healthcare. The strategy includes a focus on the following:

- **Service Redesign and Improvement** enabled by digital technology
- Developing a national digital platform that will:
  - support **excellent care at point of contact**
  - support **innovation and new products**
  - make **better use of information, knowledge, research and innovation**
- Workforce **digital skills and capability**
- **Information Governance** fit for a digitally enabled future

The Golden Jubilee has made strong progress in these areas and will continue as a leader in the adoption, development and use of technology and data in healthcare delivery.

#### **Service Redesign and Improvement**

A key principle of the Golden Jubilee's approach to Quality is to combine service redesign and improvement with digital technology. Implementing technology does not on its own achieve the changes in healthcare systems and processes or changes in clinical practice that lead to change and improvement. The following areas are priorities for ensuring that service redesign and improvement is integral to the technology deployment:

**Electronic Patient Record** – Care pathways across the organisation will be improved by designing and implementing the electronic patient record alongside continuous improvement of the pathways. This will be enabled by clinical engagement in redesign through assigned clinical leads and improvement facilitators.

**Telehealth** – We will develop care pathways that minimise the need for travel and face to face consultations, both new and follow up, for our services which are provided across NHS Scotland using technology including video conferencing and home health monitoring solutions

**Medicines Management** – We will build on existing technology enabled improvements to medicines management by implementing a Hospital Electronic Prescribing Management and Administration (HEPMA) system. The key benefits to be derived from implementing a HEPMA system are related to improving patient

safety, supporting efficient work practices and improving medicine governance and medicines management. HEPMA will also deliver a range of significant improvements which include:

- Production of legible, unambiguous and complete prescriptions;
- A single and comprehensive view of a patient's current and historical drug record;
- Real-time decision support to guide and improve the appropriateness and accuracy of prescribing, including notification of allergies, drug interactions and duplicate treatments;
- Real-time view of medicines administration; and
- Visibility and more effective control and management of drug expenditure.

**Patient Portal** – We will further develop our approach to supporting self management and person-centred care enabled by technology such as patient portals. Integrating data and information provided by patients, such as patient reported outcomes, with the healthcare record patient will improve our understanding of the whole patient pathway and experience. It will also support self-management, particularly for the services providing support for long term conditions such as the Scottish Pulmonary Vascular Unit and Scottish Adult Congenital Cardiac Service.

#### ***Excellent care at point of contact***

There are a number of technology systems that will contribute to delivering high quality care at the point of contact including those outlined above. The key to success is to ensure that we focus on well designed care pathways from the community into the hospital and back out again making best use of technology to change and improve transitions in care. This technology includes:

**Clinical portal** – continuing development of our own clinical portal that also integrates with other clinical portals at local, regional and national level to share information across the whole patient pathway

**Medicines Management** – continuing development of our ability to share information on medicines including on admission and discharge between community and hospital settings

**Referral, admission and discharge information** – continuing development of referral, admission and discharge processes and associated technology including:

- Enabling safe, effective and person-centred clinical triage at point of referral
- Comprehensive information available on admission
- Timely and accurate discharge information provided to the patient as well as community and primary care providers.

#### ***Digital skills and capability***

As technology progresses and becomes an increasing part of everyday life including healthcare we will need to ensure our staff are supported to develop the digital skills appropriate to their role. This will involve working with National Education for Scotland to deliver on the national digital workforce development plan.

## ***Information Governance***

We will build on our a strong foundation of robust information governance balancing our current regulatory requirements and obligations with adapting to changes at national level aimed at improving appropriate and effective sharing of information.

## **5.4 National and Regional Collaboration**

### ***National Board collaboration***

Integral to the work compiled as part of the National Boards delivery plan submission, the Golden Jubilee has reviewed work programmes in progress relating to each of the four agreed National Board priorities shown below:

- National Evaluation, improvement and Transformation Service
- Digital Innovation
- Sustainable Workforce
- Underpinned by Financial Sustainability

With this in mind bids have been presented for inclusion to the Scottish Government Transformation Fund in relation to the roll out of the NSTEMI programme across Scotland and a further expansion of this service at the Golden Jubilee.

During 2017/18 adopting the 'Once for Scotland' approach, National Health Boards have worked collaboratively aiming to standardised and share services reducing the operating costs of Special Boards by a target £15m. The Golden Jubilee has supported £1.9m over the past two years and in line with the other Boards has assumed this recurring reduction going forward.

The key delivery priorities for Golden Jubilee which link to the National Board Collaborative Workstreams are:

- Digitally enabled service transformation and utilisation of telehealth solutions in elective care patient consultations;
- National roll-out of the Golden Jubilee model of values based recruitment and taking a lead role in HR shared services work;
- Delivering as a pilot site for the new Executive Digital Appraisal system; and
- Continue to support and to implement national approaches delivered on a regional basis in areas such as Procurement and Estates and Facilities.

### ***Regional Delivery and Planning***

The Health and Social Care (H&SC) Delivery Plan described a commitment to put in place new arrangements for regional planning of services on a population basis, and to plan and deliver services that were sustainable, evidence based and outcomes focussed.

For the West of Scotland, this involves joint working across five territorial NHS Boards, 15 Health and Social Care Partnerships, 16 Local Authorities, a number of Third Sector organisations and five National Boards including the Golden Jubilee Foundation. In working together the aim is to develop a plan which will improve health and wellbeing, improve workplaces and deliver best value for the region's population of 2.7 million people.

The Golden Jubilee will continue to be an active participant in this planning work. Our Executive and Clinical Teams are represented across the oversight and workstream groups associated with the Regional Planning agenda.

## 6 Appendices



## **6.1 Strategic Development Plan – 2019-2022**

## 6.2 High Level Delivery Plan