# NHS Golden Jubilee

### **Meeting: NHS Golden Jubilee Board Meeting**

### **Meeting date: 24 January 2023**

### **Title: Annual Delivery Plan 2022/23**

### **Responsible Executive/Non-Executive: Gareth Adkins, Director of Strategy, Planning and Performance**

### **Report Author: Carole Anderson, Deputy Director, Quality, Performance, Planning and Programmes**

## 1 Purpose

### This is presented to the Board for:

### Awareness

### This report relates to:

* Annual Operation Plan

### This aligns to the following NHSScotland quality ambition(s):

* Safe
* Effective
* Person Centred

**This aligns to the following NHSGJ Corporate Objectives:**

|  |  |
| --- | --- |
| Leadership, Strategy & Risk | Effective Executive Leadership and Corporate Governance for a High Performing Organisation. |
| High Performing Organisation | High Performing Organisation – Establishing the conditions for success to enable excellent outcomes and experience for patients and staff. |
| Optimal Workforce | Evolve robust workforce plans and training solution with robust and person centred retention and recruitment to be effective & agile. |
| Facilities Expansion & Use | Expansion, development and optimal utilisation of facilities including Phase 2 Expansion and effective utilisation of all NHS Golden Jubilee facilities. |
| Centre For Sustainable Delivery | Evolve CfSD to have a core function in the NHS Scotland recovery plan with high impact programmes, nationally connected clinical leadership architecture at the heart of driving reform. |
| NHS Scotland Academy And Strategic Partnerships | Further develop NHS Scotland Academy, NHS Golden Jubilee Strategic Partnerships and Research |

## 2 Report summary

## 2.1 Situation

While NHS Board planning is now beginning to transition to a more stable ‘normal’ position, Territorial Boards were asked to produce an annual delivery plan (the ADP) for 2022/2023 covering a limited set of priorities. National Boards were not formally required to develop ADPs however, NHS Golden Jubilee prepared a plan as good practice, providing structure and focus for the Board for the remainder of the financial year. Following recent discussions with our Sponsor Team at Scottish Government, we have been advised they are content for the ADP to be taken to the NHS GJ Board for final approval.

## 2.2 Background

During the Sponsor Team meeting, there was detailed consideration of GJ performance against the initial 2022/23 activity plan, as well as the revised plan containing a range of “stretch” targets. In particular, it was noted that as at the end of October 2022, GJ was delivering 6% ahead of the original activity plan agreed with the Planned Care Team and 1% behind revised stretch plan submitted with the ADP. Key achievements highlighted were:

• Consistent delivery of key performance indicators including ‘stretch targets’ in Endoscopy, Cardiac Surgery, General Surgery and Diagnostic Ultrasound.

• Increased use of Robotics in Orthopaedics and Thoracic Surgery.

• Increased delivery of Heart Transplantation with optimal patient outcomes.

• Successful recruitment to critical care workforce.

• Consistent achievement of 31- day cancer target in Thoracic Surgery

• Ongoing development of Scottish National Radiology Reporting Service (SNRRS) programme – 80+ Radiologists now reporting across Scotland.

Further areas of discussion focussed on:

* Finance – projection of break-even at year end, noting the uncertainty (at the time) of the outcome of pay negotiations
* Workforce- recruitment challenges in particular with reference to Phase 2 expansion, and actions being taken to manage these challenges, and maximise recruitment opportunities
* Winter Preparedness- the focus being on maintaining planned care within our core clinical specialties, whilst being flexible and responsive to wider NHSS system pressures
* Centre for Sustainable Delivery (CfSD)- noting the accelerated roll out of redesign in planned care, and developments within Specialty Delivery Groups and the National Elective Coordination Unit (NECU).

## 2.3 Assessment

The Board has been asked to develop further proposals for consideration by Scottish Government, including the National Planning team focussing on two highly specialist national services delivered by GJ where activity and demand exceeds current national commissioning levels:

**Transcatheter Aortic Valve Implantation (TAVI)**

Referrals and procedure numbers have increased over the past few years as a result of population need, including clinically vulnerable patients, which has led to a level of unplanned activity through non-recurring funding and accommodating additional TAVI activity through clinical prioritisation. The Executive and Senior Team are currently developing a position paper which will present options on managing West of Scotland TAVI demand and introduce more rigorous commissioning of this service from GJ.

**Heart Transplantation**

This nationally-designated service has seen increasing activity beyond the current service level agreement set with National Services Division (NSD). Accommodating increased activity of this highly specialist surgery needs to take into account overall resources required to meet future demand for heart transplant in addition to complementary services such as cardiac surgery and critical care capacity. The Executive and Senior Team are currently developing a position paper for the National Planning Team, which will describe the impact of this increasing activity, and propose a review of service commissioning.

### 2.3.1 Quality/ Patient Care

Delivery of the ADP supports optimum use of GJ capacity for quality patient care outcomes

### 2.3.2 Workforce

The ADP describes current workforce pressures and actions being taken to manage and mitigate these challenges, where possible.

### 2.3.3 Financial

The ADP is underpinned by the Board Financial Plan.

### 2.3.4 Risk Assessment/Management

Delivery risks and mitigations are fully explored within the ADP and its associated delivery planning templates

### 2.3.5 Equality and Diversity, including health inequalities

An impact assessment has not been completed because the ADP is developed as a response to Scottish Government Planning guidance. Developments or changes to service delivery will be subject to EQIA at service level.

### 2.3.6 Other impacts

N/A

### Communication, involvement, engagement and consultation

The Board has carried out its duties to involve and engage external stakeholders where appropriate:

* Discussions with Divisional teams and specialty leads throughout June/July 2022
* Workforce discussions with staff side representatives and Staff Governance Group July 2022.

### Route to the Meeting

This has been previously considered by the following groups as part of its development. The groups have either supported the content, or their feedback has informed the development of the content presented in this report.

* Executive Director Group, 6 June 2022
* Finance and Performance Committee, 5 July 2022
* NHS GJ Board, 28 July 2022
* Finance and Performance Committee, 6 September 2022
* NHS GJ Board, 29 September 2022
* Finance and Performance Committee, 10 January 2023

## 2.4 Recommendation

* **Awareness** – For Members’ information only.

## List of appendices

The following appendices are included with this report:

* Appendix No 1, Annual Delivery Plan 2022/23 Feedback Letter
* Appendix No 2, Final NHS GJ ADP
* Appendix No 3, Revised 2022/23 Activity Plan

The remaining appendices are unchanged from their circulation to the Board in September 2022, however are available on request from the Corporate Governance team.