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# **Annual Delivery Plan Template**

Template: ADP1

NHS Board: NHS Golden Jubilee

# 2023/24 Annual Delivery Plan

# This Annual Delivery Plan (ADP) sets out NHS Golden Jubilee’s priorities and delivery objectives for 2023/2024. It has been developed in line with the Planning Guidance issued to Boards by Scottish Government in March 2023. All Action references and numbering correspond to the specific requirements made by Government in the Planning Guidance.

# The plan describes how NHS Golden Jubilee will contribute to national recovery, with specific reference to the ten national ‘Drivers of Recovery’:

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| **1** | Improved access to primary and community care to enable earlier intervention and more care to be delivered in the community |
| **2** | Urgent and Unscheduled Care – Provide the right care, in the right place, at the right time through early consultation, advice and access to alternative pathways, protecting inpatient capacity for those in greatest need |
| **3** | Improve the delivery of mental health support and services |
| **4** | Recovering and improving the delivery of planned care |
| **5** | Delivering the National Cancer Action Plan (Spring 2023-2026) |
| **6** | Enhance planning and delivery of the approach to health inequalities |
| **7** | Fast track the national adoption of proven innovations which could have a transformative impact on efficiency and patient outcomes |
| **8** | Implementation of the Workforce Strategy |
| **9** | Optimise use of digital and data technologies in the design and delivery of health and care services for improved patient access |
| **10** | Climate Emergency and Environment |

*Table 1: Recovery and Renewal: the 10 Drivers of Recovery*

# The ADP outlines how NHS Golden Jubilee will sustain, develop and evolve to effectively support the ongoing recovery of Scotland’s health service through the work of:

* The Golden Jubilee University National Hospital (including ongoing expansion)
* Centre for Sustainable Delivery
* NHS Scotland Academy
* Golden Jubilee Hotel & Conference Centre
* Golden Jubilee Research Institute

The ADP describes how NHS Golden Jubilee will continue to work with other boards to make best use of available capacity. It is recognised that as a National Board, our role is to support the needs of NHS Scotland, working collaboratively through this difficult time, to provide as much essential care as possible to those who need it. This continues to be a quickly evolving situation. We will continue to monitor this position to make best use of the resources available, working with wider NHS Scotland to support urgent clinical needs.

NHS Golden Jubilee fully supports the Scottish Government’s NHS Scotland Recovery Plan. This includes our expedited expansion plans, the ongoing Phase 2 National Treatment Centre expansion; work to develop and expand diagnostic services including endoscopy locally and nationally; continued development of the NHS Scotland Academy and national Centre for Sustainable Delivery in support of accelerated workforce development, innovation and redesign; and a collaborative approach to supporting boards and NHS Scotland more generally to manage ongoing pressures at this challenging time.

NHS Golden Jubilee is committed to the recovery and sustainability of inpatient and day case elective care, outpatient care and diagnostic services. Our Board has a key role in delivering the National Delivery Plan for Planned Care. This includes working with other boards and NHS Scotland to protect, stabilise and recover planned care in the short term through action to reduce the number of patients waiting long periods for treatment, and through achieving the future strategic ambitions for Scotland’s planned care services. Our planned contribution to the recovery and protection of planned care is described in our Board Planned Care Return in March 2023.

NHS Golden Jubilee’s delivery priorities, with particular focus on the national recovery drivers and strategic priorities, are described in this ADP (ADP1) document and accompanying Delivery Planning Template (ADP2).

The ADP is aligned to the Board’s three year Financial and Workforce Plans. NHS Golden Jubilee’s three year Medium-Term Plan will also align with these plans.

Alongside the ADP are clinical activity plans for 2023/2024. These plans reflect:

* Analysis of previous activity actuals, subject to know existent constraints
* Current workforce capacity, including planned recruitment to key roles
* Actions to support the national priority to reduce patient waiting times
* Local NHS Golden Jubilee productivity and improvement opportunities to provide additional capacity within our core specialties.

It is proposed that the ADP is formally agreed by Scottish Government and allocated to NHS Boards by Scottish Government Performance colleagues to reduce unnecessary change which can lead to loss of delivery capacity, staff concerns and governance risks.

**Collaboration across National Boards**

Through the National Directors of Planning Group, we are supporting and participating in an integrated approach to recovery and delivery planning across NHS Scotland. We will be sharing the content and focus of our annual and medium term plans as a collective group of national boards with the intention of identifying any key activities or projects that would benefit from wider collaboration.

For further information on the NHS Golden Jubilee Annual Delivery Plan, please contact:

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**Appendices**

Appendices accompany this plan as separate documents.

1. Delivery Planning Template ADP2

**Supporting Documents (available upon request)**

1. NHS Golden Jubilee Activity Plan 2023/2024
2. NHS Golden Jubilee Workforce Plan
3. NHS Golden Jubilee Financial Plan
4. NHS Golden Jubilee Planned Care Plan
5. NHS Golden Jubilee Diversity and Inclusion Strategy
6. NHS Golden Jubilee Health and Wellbeing Strategy

Section A: Recovery Drivers

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| 1 | **Primary & Community Care**  Improve access to primary and community care to enable earlier intervention and more care to be delivered in the community |

NHS Golden Jubilee recognises the importance of collective ‘whole system’ collaboration in order for NHS Scotland to recover core services, continue to improve levels of productivity and achieve sustainable improved outcomes for patients throughout Scotland.

While NHS Golden Jubilee does not have any direct primary and community care responsibilities, we will continue to work with referring Boards and other partners as they progress actions to enable earlier intervention and care in the community.

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| **No.** | **Board Action** |
| **1.1** | There are no specific NHS Golden Jubilee actions in this area. |

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| 2 | **Urgent & Unscheduled Care**  Provide the Right Care, in the Right Place, at the right time through early consultation, advice and access to alternative pathways, protecting inpatient capacity for those in greatest need. |

At NHS Golden Jubilee, the majority of urgent and unscheduled care is carried out within our Heart, Lung and Diagnostic Division, within the specialty / subspecialty areas of:

* Cardiac Surgery
* Thoracic Surgery
* Interventional Cardiology and Structural Heart
* Scottish National Advanced Heart Failure Service

NHS Scotland’sUrgent and Unscheduled Care Collaborative aims to deliver a whole system approach to urgent and unscheduled care, building resilience and transforming NHS services. Key priorities include reduction of attendances by transforming the way people access urgent and unscheduled care, and reducing admissions by optimising virtual capacity pathways to deliver care closer to home. It is anticipated some elements of the Urgent and Unscheduled Care Collaborative will transition to the Centre for Sustainable Delivery (CfSD) during the current year, however details on their exact strategic priorities are yet to be finalised. The CfSD will work with and support the Urgent and Unscheduled Care Collaborative during the transitional phase to define detailed plans.

An update is provided on the actions below applicable to NHS Golden Jubilee during 2023/24:

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| **No** | **Board Action** |
| **2.6** | **Boards are asked to set out plan to increase assessment capacity (and/or footprint) to support early decision making and streaming to short stay pathways.**  **Optimal Reperfusion Service**  There is ongoing review of the standard key performance indicators used within the West of Scotland Optimal Reperfusion Service and based on the most recent National Cardiac Benchmarking Collaborative (NCBC) data, NHS Golden Jubilee has the shortest median door to balloon times in any UK cardiology unit. Our aim is to maintain this excellent performance during 2023/24, which is vital for delivering urgent patient care for patients experiencing an ST-segment elevation myocardial infarction (STEMI).  **Benchmarking and Improvement**  As part of the NCBC participation, NHS Golden Jubilee is able to benchmark cardiac surgery and cardiology services with units across the UK. We will be reviewing the comparative data for 2021/22 once it is available to establish any further areas for redesign. In addition, we are continuing to develop our capacity and demand modelling approach with a plan to repeat analysis of the cardiac and cardiology bed requirement during Q2 2023/24.  **Catheter Lab efficiency programme**  Work is underway to review a range of activities with the aims of reducing variation, and maximising lab utilisation:  Improving throughput:   * Start Times – Reviewed the role and timing of morning briefs and introduced target start time. Trial of a ‘golden patient’ model has proved successful. * Turnover Time – Improved process for preparing and calling for next patient. Team roles assigned for the cleaning of the lab. Exploring options to support patient transit and holding area. * Lunch cover and restart planning * Finish Times – Cut off times for last patient on the table agreed for all procedure types. * Scheduling – Vetting of all referrals and scheduled lists. Identifying case complexity and likelihood of overnight bed requirements. Minimise on the day cancellations. * Hot Lab Utilisation – Scheduling of additional elective activity on the hot lab where possible. Urgent activity to be prioritised by the Consultant of the Week. STEMI activity to be directed to next available coronary lab with the aim of protecting capacity for inpatient procedures.   **Transcatheter Aortic Valve Implantation (TAVI)**  Following the approval for NHS Golden Jubilee to increase TAVI activity to 229 procedures for 2023/24, focused operational monitoring will be established with referring Boards to ensure that activity is financially supported to meet demand. A detailed reporting schedule will be established which will ensure that all funding for activity has been received prior to accepting any referrals which exceed service level agreement levels. It is expected that demand will continue to increase across the WoS; recognising that TAVI procedure rates are lower in the WoS than the North or East. Careful planning and monitoring will be put in place to assess the impact of these ongoing increases in demand.  **Scottish National Advanced Heart Failure Service**  NHS Golden Jubilee has a strategic aim to sustain and further develop a modern, dynamic and patient centred cardiac transplant, retrieval and mechanical circulatory support (MCS) service delivering world-class outcomes for the people of Scotland. In 2022/23, the service carried out 40 transplants against a profile for 17-20. There is a requirement to provide additional capacity assuming that the transplant activity will remain high. A business case has been requested for capacity/resource to deliver 30/35 transplants per year. This will ensure that capacity and infrastructure is available to meet the demand requirements for heart transplant in Scotland.  During 2023/24, we will develop a formal business case as part of the NSD funding cycle to secure a recurring resource to be able to deliver the surgical, bed, outpatient clinic, diagnostic services and workforce capacity to sustain transplant activity at a level of 30-35 per year.  **Urgent/unscheduled cardiac surgery**  In order to manage the impact of urgent or unscheduled cardiac surgery, the immediate focus for 2023/24 will be on medical job planning with an aim to introduce flexibility across the Theatre schedule, seeking to minimise cancellations of elective surgery. An extended operating day in theatres is in place to a limited extent, and during 2023/24, further planning and modelling work will be undertaken to explore opportunities to increase the number of extended day theatre sessions; this will be subject to recruitment of sufficient theatre workforce to increase extended day in theatre. Work to explore redesign opportunities in critical care is ongoing, which has enabled some additional weekend bed capacity for high dependency (HDU) patients. During 2023/24, further work will focus on HDU care models and critical care nursing, advanced practice and medical workforce developments to manage current and future demand. |
| **2.7** | **Set out plans to deliver effective discharge planning seven days a week/ optimise flow**  **Winter Plan and NSTEMI pathway redesign**  During last winter (mid Dec 2022-March 2023), NHS Golden Jubilee opened up to 12 additional beds to support West of Scotland (WoS) bed pressures during the winter months. This required redesign of inpatient pathways for STEMI, NSTEMI and patients awaiting cardiac surgery at NHS Golden Jubilee. It saved an average of 6.8 beds per day for the WoS over the winter period as well as reducing ambulance transfer requirements.  We also achieved an improvement in referral to transfer and referral to procedure times for patients on the 72-hour NSTEMI pathway. We have begun discussions with WoS Boards with a view to reinstating this winter plan, subject to funding being committed from regional boards accessing the increased bed capacity at NHS Golden Jubilee.  As part of the review and evaluation of the Winter Plan, NHS Golden Jubilee will begin work with the WoS Regional Planning group to formalise the routine delivery of additional winter capacity at NHS Golden Jubilee, which will require committed funding to ensure a sustainable approach to securing the workforce to staff the beds. The 72 hour NSTEMI pathway will be reviewed to develop extended criteria for direct access NSTEMI with a plan to develop a business case by 2024 to secure delivery funding from the West of Scotland. |

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| 3 | **Mental Health**  Improve the delivery of mental health support and services. |

NHS Golden Jubilee does not deliver patient facing community mental health services.

The Golden Jubilee University National Hospital’s Clinical Psychology team provides dedicated services to the following departments:

* Orthopaedics
* Scottish National Advanced Heart Failure Service (SNAHFS)
* Scottish Adult Congenital Cardiac Service (SACCS)
* Scottish Pulmonary Vascular Unit (SPVU)

The Clinical Psychology Team work with doctors, nurses and other health professionals to support patients living with life-long conditions and those accessing Golden Jubilee for treatment.

NHS Golden Jubilee’s Health and Wellbeing Strategy 2020-2023 describes the Board’s ambition:

*To be a leader in promoting and maintaining a healthy workplace and provide support for our people which maximises their health and wellbeing*

The Strategy is shaped around four strands:

* Mental health
* Physical health
* Financial and social
* Creating the conditions

The Strategy is delivered through an action plan overseen by the Board’s Health and Wellbeing Group and formally through the Staff Governance Group. Further information can be found within the NHS Golden Jubilee Health and Wellbeing Strategy, and Workforce Plan (both available on request).

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| **No.** | **Board Action** |
| **3.1** | There are no specific NHS Golden Jubilee actions in this area. |

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| 4 | **Planned Care**  Recovering and improving the delivery of planned care |

During 2023/24, NHS Golden Jubilee will continue to deliver its core services:

* Cardiac surgery
* Diagnostic radiology
* Diagnostic endoscopy
* General surgery
* Interventional cardiology
* Ophthalmology (cataract surgery)
* Orthopaedic surgery
* Thoracic surgery

NHS Golden Jubilee will also deliver the three national services based at the Golden Jubilee University National Hospital:

* Scottish Adult Congenital Cardiac Service (SACCS)
* Scottish National Advanced Heart Failure Service (SNAHFS)
* Scottish Pulmonary Vascular Unit (SPVU)

NHS Golden Jubilee submitted its Planned Care Plan for 2023/24 to Scottish Government in March 2023. This Plan sets out the Board’s plans and activity trajectories to maximise local, regional and national planned care capacity, and protection of diagnostic capacity. The NHS Golden Jubilee Planned Care Plan is available on request.

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| **No.** | **Board Action** |
| **4.1a to 4.11a** | NHS Golden Jubilee submitted its Planned Care planning return to Scottish Government in March 2023. This Plan is available on request. The key components of the plan are:  **Maximising Planned Care capacity locally, regionally and nationally**  Maximising capacity to deliver planned care  NHS Golden Jubilee has agreed an activity plan for 2023/24 for planned care (and heart and lung specialities) which will be delivered within all available local staffed capacity. This takes into account core capacity and additional capacity available during late 2023/24 resulting from the opening of the Phase 2 expansion. Residual unstaffed capacity is being offered for National Elective Coordination Unit (NECU) coordination and allocation. As workforce availability remains a key constraint, NHS Golden Jubilee is working alongside NHS Scotland Academy to develop solutions to support an optimal theatres workforce, reviewing skill mix and training at pace.  Maximising opportunities for regional working to deliver planned care  The NHS Golden Jubilee activity plan describes the use of all staffed capacity to deliver planned care as part of existing Service Level Agreements, the national ‘National Treatment Centres’ programme, and planed care activity delivered in heart and lung specialties within the West of Scotland Heart and Lung Centre. Residual unstaffed capacity is offered for NECU coordination and allocation.  NHS Golden Jubilee working nationally, with support from the Centre of Sustainable Delivery, to maximise all opportunities to deliver planned care  NHS Golden Jubilee National Elective Services Division is working with NECU / CfSD / Scottish Government Access Support Team colleagues to optimise use of all available unstaffed capacity at the Golden Jubilee University National Hospital for the delivery of planned care in core Golden Jubilee specialties. NHS Golden Jubilee is also committed to delivering the National Treatment Centre standards of productivity for elective services.  Specific action to prioritise delivery of the Waiting Times Targets for Outpatients and TTG in the most challenged specialities  Outpatient - there are no outpatients waiting over 12 weeks at NHS Golden Jubilee and we expect to maintain this position  Treatment Time Guarantee (TTG) - There are no patients waiting longer than 12 weeks at NHS Golden Jubilee in the planned care specialties where Golden Jubilee holds full wait list responsibility. There are patients waiting over 12 weeks in the heart and lung specialities with the greatest number being coronary referrals. The details of TTG waits can be found in the TTG tab and in the tables below which shows the projected wait list profile and projected activity position for 2023/24:    *Table 2: Projected wait list profile*    *Table 3: Projected TTG activity profile for 2023/24*  **Protecting Diagnostic capacity locally, regionally and nationally**  Maximising all local capacity to deliver diagnostics in 2023/24  Service Level Agreements with Boards have been revised to include slight increases in capacity for 2023/24. A patient focussed booking system has recently been adopted, aiming to reduce DNA rates. Cardiologist supervision of complex MRI across concurrent lists is being maximised to release 50% more capacity for SACCS lists. NHS Golden Jubilee is increasing substantive Radiologist / Cardiologist posts in 2023/24 through joint appointments and Service Level Agreements with other Health Boards. The opening of a second endoscopy room is being accelerated to support management of rising waiting times prior to Phase 2 of the Board’s expansion programme opening.  Maximise all opportunities for regional working to deliver diagnostics  This will be delivered through continued support for Regional cardiac imaging capacity; Increased training support for other Health Boards for specialist Cardiac imaging procedures (both acquisition and supervision/reporting); and scoping of potential options for Regional Sonographer Bank to maximise use of Ultrasound equipment.  Work nationally, with support from the Centre of Sustainable Delivery, to maximise all opportunities to deliver diagnostics  NHS Golden Jubilee continues to encourage waiting list validation through vetting of long wait examinations, to reduce unnecessary tests. During 2023/24 NHS Golden Jubilee is introducing a pilot scheme to implement vetting questions at time of booking to eliminate scans no longer required. The National Endoscopy Training Centre within the NHS Scotland Academy opened 2021 to increase access to endoscopy training at an accelerated pace.  Timeline for adopting high impact changes for Endoscopy  NHS Golden Jubilee has processes in place to optimise efficiency and productivity. NHS Golden Jubilee can, when requested flex, in respond to requests for additional capacity.  NHS Golden Jubilee is the first NHS Board to be JAG accredited. Not all of these measures are available on current reporting systems but will be when the national reporting system is implemented.  The National Endoscopy Academy hosted at NHS Golden Jubilee provides immersion training and as we have JAG accreditation, we can start delivering training. This drives up standards of endoscopy and supports training across Scotland.  NHS Golden Jubilee now has 3 fully trained nurse endoscopists; one of whom we trained ourselves, and a further trainee in post.  **Productive opportunities**  Adopt ‘Hospital within a hospital’ model  NHS Golden Jubilee has a well-developed model to optimise available capacity through collaboration with NECU, visiting surgeons or, where appropriate, use of independent sector teams within our orthopaedic theatres or within stand-alone mobile operating units. There are also beds assigned to elective specialties, which are described in the ‘productive opportunities’ tab in the accompanying excel file.  Extend scope of day surgery  In General Surgery, performance against the BADS targets for day surgery continues to be strong, with the highest volume and most relevant procedure being laparoscopic hernias and cholecystectomy. Orthopaedic BADS procedures including ACL repair and “23 hour” joint replacements are measured as part of the day surgery improvement programme. Whilst numbers of minor and ACL procedures are relatively low, good progress is being made, within patient cohorts suitable for day case surgery.  National Elective Co-ordination Unit (NECU) to undertake waiting list validation and support matching demand with available capacity for longest waiting patients in the first instance  NHS Golden Jubilee has worked with NECU to undertake wait list validation for long waiting Electrophysiology (EP) and Coronary patients. Around 500 patients have been contacted and all long waiting patient referrals have been validated, with only 19 removals from the waiting list to date. This validation project concluded at the end of February 2023.  Prioritisation, scaling and adoption of High Impact Programmes  Active Clinical Referral Triage (ACRT) -Fully embedded in General Surgery where referrals are vetted by clinical fellows ensuring that patients referred are appropriately booked for pre-operative assessment clinics. Those referrals that do not meet the criteria are returned to referring boards, ensuring effective use of clinic slots. Tested but not active in Orthopaedics as NHS Golden Jubilee has been receiving Treat only (as opposed to See and Treat) referrals since 2020. In this instance, ACRT is best carried out in referring boards as to deliver at NHS Golden Jubilee would be a duplication of effort. The process has been tested in in NHS Golden Jubilee but there are no plans to deploy this year unless see and treat referrals are re-introduced.  Patient Initiated Reviews (PIR) - Fully embedded in Orthopaedics. Since 2018, the Arthroplasty Service has changed the patient pathway to ensure PIR is fully embedded and that only patients requiring review for clinical reasons are booked into review clinics. The service is also working through the large numbers of past patients treated prior to 2018 to ensure PIR is applied to this large cohort of patients. PIR is not active in General Surgery- NHS Golden Jubilee does not provide follow up for General Surgery patients, so PIR is not indicated.  Enhanced Recovery After Surgery (ERAS) - fully embedded in Orthopaedics, Cardiac and Thoracic Surgery, with teams focusing on returning to achieving pre-pandemic length of stay performance. Patients are now presenting in a poorer pre-operative condition due to extended waiting times and require more prolonged rehabilitation. NHS Golden Jubilee has also begun testing prehabilitation for cardiac and thoracic patients, with the aim that these service developments are considered for wider adoption, subject to resource allocation.  Ophthalmology  Improvement groups have been established to deliver:   * minimum of 8 patients per theatre list * Implementation of ring fenced high flow cataract lists * Develop training lists to support senior trainees led list * Increase number of patients on training list min 6 per list * Collaborate with NECU to utilise uncovered theatre sessions * Reduce variation in equipment supplies * Implementation of ‘Open Eyes’ National electronic patient record   Engage with Speciality Delivery Groups (SDGs) and implement service improvements  Work is ongoing to ensure full participation of clinical and managerial leads within the following relevant SDGs:   * Ophthalmology: Cataract * General Surgery * Cardiology * Orthopaedics (SG led group)   Reduce unwarranted variation and adopt Minimum Standards per procedure across theatre productivity, day case activity and start and finish times  Performance is being measured against the National Treatment Centre Programme theatre standards, with the primary focus of improvement activity being uptake of lists and reducing same day cancellations.  Utilise and adopt the recommendations from the Atlas of Variation maps  As data is only currently available by territorial health boards it is impossible to pull out data relevant to patients treated at NHS Golden Jubilee. We can however see the value in examining variation and would welcome an opportunity to work with national information services to explore how to do so and this would also be relevant to other elective treatment centres. We have a well embedded PROMS database which provides outcome data which is used by clinicians. Whilst this is not currently a topic of Atlas maps at the moment, PROMS are included as a key commitment in the Scottish Government Value based health and Care vision paper  Ongoing engagement with National Treatment Centres Programme to ensure alignment / support of high-volume pathway redesign  Widespread pathway design work is ongoing as part of NHS Golden Jubilee Phase 2 National Treatment Centre expansion, particularly in the following areas; theatres, CSPD and outpatients.  Our Surgical Admission delivery group is working in collaboration with our internal Quality Improvement, Centre for Sustainable Delivery, and Modernising Patient Pathway colleagues, focussing on value stream mapping to:   * Understand the patient pathway from referral to discharge * Identify flow issues / bottlenecks * Reduce variation / duplication * Develop effective and efficient pathways * Engage and take ownership of change   Work across Scotland to ensure maximising capacity through NECU  NHS Golden Jubilee is working with NECU to optimise use of Golden Jubilee capacity  Implement findings from the review on the future direction of procedures of low clinical value as they are identified  These reviews would need to be extended to consider the impact on National Treatment Centres |
| **4.8a** | **Outline plans for CfSD to undertake waiting list validation of >52 weeks through NECU. This validation should identify potential alternatives for treatment and expect at a minimum 5-10% reduction in waits**  See 4.4 |
| **4.10a** | **CfSD**  **Outline plans to work with Boards that have developed plans to target increasing throughput in first instance, “Super Saturday”, or similar sessions to be delivered**  The CfSD is supporting a series of local campaigns to help address long waits by matching physical and workforce capacity to excess demand across NHS Boards. To date, 16 campaigns have been completed, 10 are underway, and 19 are currently being scoped. Over 5,000 patients have been validated and just over 2,100 have been treated. 18% of patients were removed from the waiting list after validation. |
| **4.11a** | **To deliver core clinical services and the specialist NSD services from NHS Golden Jubilee. Including:**   * **Planned care services - Supporting NECU; Implementing CfSD high impact programmes** * **National specialist services** * **Heart, Lung & Diagnostics**   Supporting NECU  NECU is a core Programme within CfSD, and this will continue to be supported over the next year. See 4.4 for the initial priorities that NECU will be delivering against.  Implementing CfSD high impact programmes  The CfSD continues to support the implementation of several key national programmes, including Active Clinical Referral Triage (ACRT), Discharge Patient Initiated Reviews (PIR), Enhanced Recovery After Surgery (ERAS), Remote Health Pathways, Cytosponge and Colon Capsule Endoscopy (CCE). Oversight of this work is carried out by the relevant SDGs, who will be responsible for ongoing operational delivery and implementation.  In addition, the CfSD has led on the development of the national NHS Scotland cataract blueprint which sets out a range of practical actions for NHS Boards. The CfSD is currently developing a supporting cataract toolkit to help Boards with local implementation.  These programmes have been supported by the development of national Heat Maps. These are designed to support the adoption of high-impact and productive approaches by identifying key priorities and areas of opportunity at Board level.  Revised heat maps for 2023/24 have now been developed and tested. These include further day surgery metrics and an extended focus on improving cataract productivity. Heat maps are being issued to all Boards so that they can help identify improvement opportunities for the forthcoming year. |
| **4.1** | **CfSD**  **Identifying dedicated planned care bed footprint and resource by board/hospital enabling “hospital within a hospital”**  The CfSD is working with Boards that already have developed plans to target increasing throughput. The learning from this work is being used to develop a new toolkit for Boards.  The toolkit is designed to provide advice and support to enable Boards to protect planned care capacity. The toolkit includes learning from the NHS Forth Valley “hospital within a hospital” model. |
| **4.2** | **CfSD**  **Extending the scope of day surgery and 23-hour surgery to increase activity and maximise single procedure lists**  Where clinically appropriate, the work plans being developed by the Specialty Delivery Groups (see 4.3) will include actions around extending the scope of day surgery, 23-hour surgery and maximisation of single procedure lists. |
| **4.3** | **CfSD**  **2023/24 to reduce unwarranted variation, utilising Atlas Maps of variation and working with CfSD and respective Speciality Delivery Groups and Clinical Networks.**  The CfSD is continuing to develop the Speciality Delivery Groups (SDGs). SDGs are co-chaired by a relevant CfSD National Associate Clinical Director (NACD) and the speciality Clinical Lead (funded by the CfSD). This ensures that the groups have robust, high-level leadership. The Clinical Lead provides speciality-specific expertise and understanding, and the NACD ensures that the SDG work is fully aligned with the broader requirements of the NHS Scotland Recovery plan and the “once for Scotland” pathways.  Draft work plans for all the established SDGs have now been completed. These are now in the process of being formally approved and signed-off. These work plans include actions around reducing unwarranted variation and utilising the Atlas of Variation, where appropriate, to help implement high-impact and productive approaches.  A total of 13 SDGs have now been established, covering specialities including General Surgery, Orthopaedics, Dermatology, ENT, Gynaecology, Breast Surgery, Cardiology, Gastroenterology, Neurology, Respiratory, Rheumatology, Vascular Surgery and Cataracts. More SDGs are currently being formed, including Urology which builds on existing national networks. |
| **4.4** | **Approach to waiting list validation for patients waiting over 52 weeks, including potential alternatives for treatment. Outline level of engagement with NECU**  A key objective of the NHS Scotland Recovery Plan is tackling the waiting times backlogs within planned elective procedures and diagnostic care. NECU is a key CfSD programme which provides a co-ordinated and standardised approach to optimising national capacity and reducing levels of variation through waiting list validation, supporting the recovery of elective waiting times.  The NECU team has been tasked with carrying out a national waiting list validation exercise on patients waiting more than 52 weeks across 5 specialities: ENT, gynaecology, general surgery, orthopaedics and urology. This includes both administrative and clinical validation. Initial local campaigns (see 4.10a) have achieved an 18% reduction in patients.  To date, NECU has developed a national protocol for carrying out the waiting list validation. An initial governance paper setting out NECU and Board responsibilities has been developed and further work to finalise the information governance arrangements with Boards is underway. Once Boards approve the governance arrangements the validation work can commence.  In addition, the CfSD is currently working with Specialty Delivery Groups to identify clinicians who are capable of supporting the clinical validation element of the process. The CfSD has procured a digital patient interaction tool to enable automated waiting list validation.  As a National Treatment Centre (NTC), the Golden Jubilee University National Hospital (GJUNH) continues to work collaboratively with NECU. Alongside waiting list validation on NHS Golden Jubilee’s core services, residual unstaffed GJUNH theatre capacity will be offered to NECU for co-ordination and allocation, assisting in reducing the planned care waiting list backlog. |

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| 5 | **Cancer Care**  Delivering the National Cancer Action Plan (Spring 2023-2026) |

Working with other Health Boards, NHS Golden Jubilee is committed to delivering critical to life cancer diagnosis and treatment for the people of Scotland. This includes the continuation of the Thoracic programme delivering timely treatment for lung cancer by adhering to the 31-day target.

Throughout the pandemic, NHS Golden Jubilee provided a range of critical to life core services, and collaborated with a number of Boards to provide urgent cancer surgery and P2 priority surgeries. To support delivery of these new services, new Standard Operating Procedures (SOPs) were developed. With our evolved and established SOP template, NHS Golden Jubilee continues to be in a position to rapidly react to and support other Board’s needs when required.

The prioritisation of cancer treatment remains ongoing as NHS Scotland continues to remobilise and recover from the pandemic. The latest published data from Public Health Scotland (PHS) (for Q4 2022)[[1]](#footnote-2) reports the 62-day referral-to-treatment standard is below 72%, a fairly consistent decline since NHS Scotland was placed on emergency footing. This decline is reflective of diagnostic pressures that have been exacerbated by the pandemic.

Scotland’s new earlier cancer diagnosis vision will form part of the new cancer strategy to be published later this year. NHS Golden Jubilee continues efforts to increase diagnostic capacity, supporting timely access and optimising treatment options. The opening of NHS Golden Jubilee’s Phase 2 Surgical Centre supports further expansion of the Diagnostic Endoscopy service, and additional space is being prepared to support increased demand in the short-term. Additionally, the Radiology Strategic Development Programme (RSDP) will continue to support increased diagnostics as key features of the programme include enhanced capacity utilisation and workforce constraints. NHS Golden Jubilee continues to support territorial Boards by providing diagnostic allocations for cancer procedures, which contributes to national cancer and diagnostic targets.

The NHS Scotland Academy remains dedicated to supporting enhanced diagnostic capacity through establishment of the National Endoscopy Training Programme and the National Bronchoscopy Training Programme in 2022/23, which is focused on improving lung cancer outcomes. During 2023/24, the Academy team seek to scope the provision of additional training opportunities in diagnostic service supporting roles with an aim to reduce bottlenecks. This work will also be a core feature of the Medium-term Plan.

The Centre for Sustainable Delivery (CfSD) work plan includes a strategic priority focussed on ‘Supporting earlier cancer diagnosis’. This work aims to support improved access for patients to cancer diagnostic services and treatment through development of optimised cancer diagnostic pathways, sharing of best practice, innovation, and working across the primary and secondary care interface to review referral pathways. Specific work includes:

* Designing and implementing optimal cancer pathways including Rapid Cancer Diagnostic Services (RCDSs). These were formerly known as Early Cancer Diagnostic Centres (ECDCs)
* Developing new public awareness campaigns, and supporting full adoption of the Framework for Effective Cancer Management, to improve access for patients

The actions below provide detail of those actions applicable to NHS Golden Jubilee and the Centre for Sustainable Delivery, as outlined within the guidance.

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| **No** | **Board** **Action** |
| **5.1a** | **Increased provision of diagnostics and associated workforce**  NHS Golden Jubilee has focused efforts on increasing diagnostic capacity. Space has been identified for an additional CT scanner to increase CT capacity. This proposal is included in the Board’s bid to the National Infrastructure Board for 23/24. It is important to note that no funding has not yet been secured, however upon allocation of funding this would be progressed during 2023/24.  The Radiology team has scoped plans to expand hours of activity offered via increased Radiographer and Health Care Support Worker resource across evenings and weekends. Prior to the pandemic, the bulk of activity was delivered within core hours, Monday to Friday, 9am – 5pm. The service has delivered additional activity via ad-hoc and informal arrangements. A business case is being taken forward during 2023/24 to establish a sustainable enhanced workforce model to increase activity hours and diagnostic capacity.  NHS Golden Jubilee will continue with efforts to increase Radiology reporting capacity via increased substantive joint appointments with other Boards, as well as the additional Teleradiology system provider which enhances reporting capacity. The Scottish National Radiology Reporting Service Bank will see a 10% year-on-year increase, through roll-out of additional workstations across 3 years. Of note, during 2022/23, the number of Golden Jubilee reporters increased by 25%, producing several weeks of more than 400 hours reporting activity.  Diagnostic Endoscopy – See details in section 4.1a and 4.11a. |
| **5.2a** | **Roll out of Rapid Cancer Diagnostic Centres**  Rapid Cancer Diagnostic Centres developed and deployed by the CfSD. See section 5.13a. |
| **5.3a** | **Embed diagnostic optimal pathways and national referral guidelines**  NHS Golden Jubilee has committed to scoping the development of lung biopsy service supporting the optimum lung cancer pathway. This requires engagement with West of Scotland Boards to identify how NHS Golden Jubilee can best support the lung biopsy service model to increase the proportion of patients who have lung biopsy prior to surgery in line with best practice. It is recognised delays in access to biopsy are now impacting the 31 day to surgery target.  NHS Golden Jubilee’s diagnostics service is scoping potential for non-recurring support to displace some current activity to a mobile facility. This would enable space to support complex CT procedures and ease current backlogs.  NHS Golden Jubilee is supportive of the continued application of iRefer and BMUS guidelines during the vetting phase of imaging requests. Doing so will continue to ensure utilisation of existing diagnostic capacity.  NHS Golden Jubilee will continue to work in collaboration with West of Scotland Boards (WoS) and Regional Cancer Advisory Group (RCAG) to identify NHS Golden Jubilee’s capacity to support the PET scan service and improve access / reduce waiting times.  NHS Golden Jubilee successfully launched the Colorectal Imaging service in March 2023. A business case for an enhanced software package is being taken forward in 2023/24, although this is not rate limiting for the service.  The Bowel Screening pathway is now developed. Efforts will be focused on developing a business case during 2023/24. |
| **5.7a** | **Ongoing prioritisation of cancer surgery**  Surgical capacity within the Thoracic unit is being increased with the appointment of a sixth Thoracic surgeon. The additional capacity will provide increased operating capacity, cover for all multidisciplinary team meetings and clinics This will contribute towards a robust and sustainable service.  NHS Golden Jubilee is also committed to exploration of Regional Lung Ablation service at GJUNH. This will prevent reliance on NHS England capacity and enhance patient-focused experience by delivering locally.    **Cancer Waiting Times (CWT)**  NHS Golden Jubilee has consistently delivered against the 31-day cancer target and it is expected that this performance will be maintained.  We continue to monitor developments about lung cancer screening and stand prepared to support any national implementation of a screening programme, subject to evaluation of service impact and resource requirement. |
| **5.8a** | **Structure of NHS Golden Jubilee cancer services**  NHS Golden Jubilee’s Director of Heart, Lung and Diagnostics oversees cancer services at NHS Golden Jubilee. Within the thoracic surgical service, a dedicated Nurse Specialist provides support to patients within the cancer pathway, and a Tracker oversees and monitors the pathway for this patient group.  NHS Golden Jubilee offers an internal prehabilitation service, providing a range of face-to-face and electronic contact when required.  NHS Golden Jubilee will continue to adhere to the national Scottish Cancer Network (SCN) clinical management pathways.  The 6 principles of good rehabilitations provides a person-centred approach to recovery. NHS Golden Jubilee delivers against the principles in Critical Care (GPICS) and ward settings post-operative.  NHS Golden Jubilee does not provide referral to third sector cancer services. NHS Golden Jubilee is a tertiary board, therefore post-operative follow and onward referral to third sector services cancer services is the responsibility of local boards. |
| **5.11a** | **Plans to collaborate with Scottish Government adopting “tried and tested” clinically agreed pathways, tools and techniques to ensure available resources are maximised e.g. facilitating Boards’ adoption of the breast pain pathway, embedding Active Clinical Referral Triage (ACRT)**  This is not a cancer action. This work is being taken forward via the Speciality Delivery Groups and applies to all relevant planned care specialities. See 4.11a. |
| **5.12a** | **Consensus note for cancer pathways**    The CfSD’s Clinical Leadership Team has developed a consensus note for cancer pathways, to raise the awareness of available tools and techniques. This has been shared with Health Board Cancer Management Teams to highlight improvement pathways relevant to cancer. The CfSD Clinical Leadership Team will continue to promote this guidance and engage with Cancer Management Teams throughout 2023/24 as necessary. |
| **5.13a** | **Plans to lead the development of Scotland’s first Rapid Cancer Diagnostic Services**  The CfSD is supporting the development and deployment of Scotland’s first Rapid Cancer Diagnostic Services (RCDSs). Five RCDSs have successfully gone live, with the latest (NHS Borders) going live in March 2023. The next RCDS (NHS Lanarkshire) is due to go live this summer.  An interim evaluation report on the establishment of the RCDSs has been prepared by the University of Strathclyde. The University’s final evaluation report is due to be published later this year, and will inform the future development of RCDSs as well as provide lessons applicable to the first tranche of services. |
| **5.14a** | **AI adoption to help identify those at higher risk of cancer earlier and expedite the start of their pathway**  The CfSD continues to support an ANIA innovation for chest x-ray Artificial Intelligence (AI) to support cancer pathways. This work involved both ANIA and Early Diagnosis Teams working with a range of partners, including NHS Grampian, NHS Greater Glasgow and Clyde, and the Scottish Health Technologies Group.  The project has successfully completed the initial Strategic Assessment stage, and is currently undergoing further evaluation and refinement. A ‘soft launch’ trial is underway in NHS Grampian, which will inform the future development of an initial Standard Operating Procedure (SOP) for the use of AI technology in cancer pathways.  It is important to note that whilst the innovation is being supported and evaluated within the ANIA partnership, there is no guarantee that the innovation will be successful or capable of national deployment.  **CfSD support in delivering test beds sites in 2023, working with key partners such as the Scottish Health & Industry Partnership**  This work is being progressed via the ANIA partnership. It is not cancer specific, and is designed to support all innovations.  The CfSD works with a range of partners in national innovation adoption, including the Scottish Health and Industry Partnership (SHIP). Over the next year, ANIA will continue to develop strategic partnerships with the wide range of stakeholders necessary to support this work, including: Health Boards, regional test beds, the Scottish Health Technologies Group and industry partners.  It is important to note that the CfSD has no direct control over the operation or funding of the test bed sites. Heath Boards and other partners have the ability to withdraw their engagement and support at any point. |
| **5.15a** | **Scotland’s first Optimal Cancer Diagnostic Pathway**  The CfSD has developed an optimal diagnostic pathway for lung cancer. A supporting toolkit was developed in partnership with regional clinical leads and deployed to all Health Boards. Over the next year, the CfSD will work with Health Boards to embed the pathway throughout NHS Scotland.  The CfSD will continue to develop additional diagnostic pathways for other cancers, with the next to be developed for Head and Neck cancers. |
| **5.16a** | **The CfSD will continue to lead on Scotland’s new earlier cancer diagnosis vision, which will form part of Scottish Government’s new 10-year Cancer Strategy to be published in 2023**  This is reflected in the work plan priorities and programmes delivered by the CfSD. |
| **5.17a** | **Cancer procedure and diagnostic allocations**  Service Level Agreements are in place between NHS Golden Jubilee and referring Boards. NHS Golden Jubilee’s 2023/24 activity plan has been revised to reflect the slight increase in capacity.  NHS Golden Jubilee continues to support territorial Boards with allocations for cancer procedures and diagnostic testing to deliver care in line with national cancer and diagnostic targets. |
| **5.18a** | **NHS Scotland Academy (NHSSA) to continue to support delivery of enhanced diagnostic capacity through delivery of a range of training opportunities, including Ultrasound Training**  In 2023/24 the National Ultrasound Training Programme will continue with current delivery (averaging 120-200 ultrasound procedures per week through the training lists), and will expand to offer immersive experience to medical trainees. The delivery of this expansion is currently being scoped.  The NHSSA is enhancing diagnostic capability and capacity through the National Endoscopy Training Programme, particularly for colonoscopy and upper GI scopes. See 8.7 for further information.  The NHSSA will deliver a two-year project (2023/24 and 2024/25) to train 45 respiratory trainees in basic bronchoscopy and 36-48 senior trainees / SAS grades / Consultants in Endobronchial Ultrasound and Transbronchial Needle Aspiration (with Scottish Government funding through the CfSD).  NHSSA is scoping training opportunities to address other bottlenecks in diagnostic service support roles (including biomedical sciences and decontamination roles) during 2023/24. |

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| 6 | **Health Inequalities**  Enhance planning and delivery of the approach to tackling health inequalities, with a specific focus in 2023/24 on those in prison, those in custody and those who use drugs. |

NHS Golden Jubilee serves patients from across Scotland, but predominantly the West region. Our patients are referred from their home board, with NHS Golden Jubilee having no community presence in the same way a territorial health board does (for example, public health, General Practice, Community Pharmacy etc.). NHS Golden Jubilee does not therefore have a direct role in reducing inequalities associated with accessing services given our patients are referred by other boards. NHS Golden Jubilee’s Health Inequalities agenda focuses on minimising the impact of health and socio-economic barriers to accessing our services, our commitment to diversity and inclusion, supporting our workforce, and developing our role as an ‘Anchor’ organisation within our local community in Clydebank.

Whilst NHS Golden Jubilee works with boards to ensure patients are able to access the treatment they require as part of their patient pathway, responsibility for reducing overarching inequalities associated with accessing the healthcare system predominantly lies with territorial boards and national boards such as Scottish Ambulance Service and NHS 24. The West of Scotland, and NHS Golden Jubilee’s more immediate location in West Dunbartonshire, includes many of Scotland’s most deprived communities. As such our patient intake already includes a sizeable portion for whom comorbidities and other issues are existent.

Given the broad geographical location of our patient population, particularly within regional and national services, NHS Golden Jubilee continues to work collaboratively with patients, referring Boards and transport providers to ensure fair access to services. The Patient Co-ordination Centre ensures patients are informed of public or private transport options and NHS Golden Jubilee’s transport service offerings. Where patients travel afar to access services, the Conference Hotel offers support via allocation of a patient / relative bedroom (see section 11). NHS Golden Jubilee’s onsite transport service provides pick-up and drop-off services based on individual patient needs.

The Board’s Diversity and Inclusion Strategy forms an integral part of NHS Golden Jubilee’s aim to promote the health and wellbeing of staff, patients and volunteers. This includes minimising any inequalities experienced within our workforce.

We have embedded the Equality Impact Assessment (EQIA) process within our service re (design) activity to ensure inclusive engagement practices are followed throughout the engagement lifecycle. This takes into account people represented by the Protected Characteristics of Age, Disability, Gender Reassignment (Trans Status), Marriage / Civil partnership, Maternity / Pregnancy, Race, Religion / Belief, Sex, Sexual Orientation and Socio economic circumstance.

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| **No.** | **Board** **Action** |
| **6.1a** | **Local priorities for reducing health inequalities**  NHS Golden Jubilee’s priorities for 2023/24 in relation to reducing and minimising health inequalities largely focus on the following areas:   * Ensuring leading practice around patient accessibility and inclusive design are incorporated within the Phase 2 expansion of the Golden Jubilee University National Hospital. The new National Treatment Centre at NHS Golden Jubilee is due to open to patients at the end of 2023. * Redesign of existing areas of the Golden Jubilee University National Hospital, such as the current refurbishment of Orthopaedic Outpatients, incorporates the same inclusive best practice as new build developments such as the Phase 1 Eye Centre and Phase 2 Surgical Centre expansion builds. * Implementing actions within Year 3 of the Board’s Diversity and Inclusion Strategy. Outcomes and associated outputs relating to workforce diversity and inclusion include: * Education and training – developing a suite of new training materials to further embed equality, diversity and inclusion throughout NHS Golden Jubilee * On-board diverse talent – introducing a number of initiatives to attract and retain diverse talent to the organisation * Leadership and organisation structure - we are committed to creating a more equitable workplace, with diversity across management structures by understanding and addressing barriers to career progression and promotion by the protected characteristics and Fairer Scotland Duty * Inclusivity and data - a commitment to building a better understanding of diversity within the organisation by examining the data collection and analysis methods used to characterise workforce profiling * Patient centred inclusive service design – Our service design work considers patient accessibility, experience and issues of inequality as a core element of the process. For example, our redesign of the Scottish Adult Congenital Cardiac Service (SACCS) seeks to design the service to meet patient needs ‘from the ground up’. Patient experience is being built in at all stages, to both understand patient experiences of accessing the service in the past but also to co-design future solutions. This includes analysing patient demographic data to better understand our patient populace, including geographic and accessibility issues. |
| **6.2a / 6.5** | **Anchors Strategic Plan**  Working with local community partners and key stakeholders, NHS Golden Jubilee will develop an Anchors strategic plan by October 2023. NHS Golden Jubilee recognises the opportunity it can play as an anchor organisation locally and regionally. The Fraser of Allander Institute has identified West Dunbartonshire as one of three councils facing ‘Grand Challenges’. These challenges include population decline, economic recovery in areas requiring regeneration and dealing with poverty and inequalities.  The scale and influence of NHS Golden Jubilee’s activities span not only core clinical services but carry over into research, training and education, and hospitality. This has been evidenced following a recent review to specifically determine what is taking place in the organisation, which will contribute towards an anchor mission. NHS Golden Jubilee has already undertaken engagement with a range of stakeholders and communities, all benefiting from employment and volunteering opportunities, accessing health and wellbeing facilities, and business opportunities. Furthermore, NHS Golden Jubilee is supporting existing infrastructure projects in the area such as work to review the opportunity to be part of a district heating project which is being led by the local authority, with the potential to provide free heating to social housing tenants.  The work to date has confirmed that hospitals like NHS Golden Jubilee have the potential to create value beyond the direct clinical care that they provide through tackling the social determinants of health.  Our review of current contributions on how NHS Golden Jubilee employs staff, offers student opportunities, or procures goods and services, has identified the need for a more intentionally designed programme or framework, as the societal value of this work is not automatically or accidentally created.  We have developed the following schedule of activity as part of the Anchors Strategic plan which outlines the key milestones for the approach to develop an anchors plan in association with key stakeholders.   |  |  | | --- | --- | | Timeline | Milestone(s) | | Q1  (Apr – Jun) | 1. Review existing activity within NHS Golden Jubilee 2. Benchmark activity against Joseph Roundtree Foundation framework 3. Participate in NHS Scotland Boards Anchor Peer Network and Health Anchors Learning Network 4. Establish internal steering Group and agree organisational objectives | | Q2  (Jul – Sep) | 1. Identify key external partners and & establish stakeholder group, agree common objectives and priority actions 2. Develop base line data for measurement and data collection framework 3. Create governance and communication structures | | Q3 (Oct – Dec) | 1. Launch anchor charter and action plan | | Q4 (Jan – Mar) | 1. Delivery Phase |   *Table 4: Anchor Milestones* |
| **6.3a** | **Accessibility to services: transport needs**  NHS Golden Jubilee recognises the need to minimise inequalities in physically accessing NHS Golden Jubilee services including transport to the Golden Jubilee site. Our Out Patient Co-ordination Centre continue to work with patients and referring Boards to ensure they are informed of site location and travel options / directions. NHS Golden Jubilee Transport team provides co-ordination of patient transport provisions where appropriate.  Additionally, referring Boards provide patients with information and travel guidance when attending NHS Golden Jubilee. This includes re-imbursement options via the referring Board’s expenses process. |
| **6.4** | **Women’s Health Lead**  NHS Golden Jubilee has established a number of internal networks covering several protected characteristics as defined under the Equality Act 2010. This includes the appointment of a dedicated Women’s lead at Executive Director level, and the establishment of an internal Women’s Network. |

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| 7 | **Innovation Adoption**  Fast track the national adoption of proven innovations which could have a transformative impact on efficiency and patient outcomes. |

NHS Golden Jubilee has relationships across a range of sectors. Working with key partners allows NHS Golden Jubilee to develop innovative and transformational approaches to health care recovery, renewal and redesign. Our partnerships support emerging innovation in healthcare, drawing on a range of academic, industry and healthcare expertise. These collaborations aim to support core NHS Golden Jubilee services, including our Phase 2 National Treatment Centre expansion, support NHS Scotland priorities, and have a direct impact in transforming healthcare within planned care, unscheduled care, cancer, patient experience and workforce development and supply.

The national Centre for Sustainable Delivery (CfSD) works collaboratively with a wide range of partners to bring innovative technologies and solutions to the frontline of healthcare on a national basis. The Accelerated National Innovation Adoption (ANIA) pathway is a new initiative focussed on the use of technology to fast-track proven innovations into the wider NHS Scotland healthcare system on a ‘Once for Scotland’ basis. ANIA is delivered in collaboration with a range of national partners to combine the right skills and capabilities across Scotland to reduce barriers to national innovation adoption. ANIA aims to support the quick and safe rollout of technological innovations that will improve patient outcomes and patients and staff experience, in ways that are also environmentally and financially sustainable.

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| **No.** | **Board action** |
| **7.1** | **Boards to set out the approach and plans to work with ANIA partners (coordinated by CfSD) to adopt and scale all approved innovations coming through the ANIA pipeline**  The CfSD will work with the Innovation Design Authority and Board Chief Executives to ensure that Boards are informed of current developments and innovations that are ready for national adoption. |
| **7.1a** | **Lead co-ordination of the Accelerated National Innovation Adoption ANIA Collaborative, to enable the adoption and scaling of high impact technological based innovations across NHS Scotland**  Innovation is a core programme within the CfSD work plan. During 2023/24 the CfSD will continue to:   * Develop and improve the ANIA pathway * Provide support and ensure robust assessment of innovations being progressed through ANIA * Implement throughout Scotland those innovations which have been approved by the Innovation Design Authority (IDA) * Develop and implement communication and stakeholder engagement plans * Undertake horizon scanning with partners to identify potential new innovations |
| **7.2** | **Work with a range of national organisations to combine the right skills and capabilities across Scotland to reduce the barriers to national innovation adoption - delivering care through collaborations**  In addition to our partnerships with NHS Boards and Scottish Government, a key focus for NHS Golden Jubilee is our relationships with academia, industry and third sector organisations. The aims and objectives around many of these partnerships will be to explore and deliver genuine innovative solutions and beneficial reform to healthcare and staff delivery models and roles.  In 2023 NHS Golden Jubilee will be producing a strategic framework for how we establish future relationships in an intentional way, ensuring robust governance around our existing and future partnerships. This will allow NHS Golden Jubilee to treat our strategic partners in a fair and equitable way.  NHS Golden Jubilee has a proven track record in working with academia and third sector organisations within research, particularly the University of Glasgow and the British Heart Foundation on clinical heart trials.  We have a long standing Memorandum of Understanding (MOU) with the University of Glasgow and are looking to cement this relationship in 2023/24 by increasing and widening the health initiatives we jointly undertake.  In 2022, NHS Golden Jubilee’s national Centre for Sustainable Delivery also signed an MOU with NHS Greater Glasgow & Clyde, University of Glasgow, AstraZeneca UK and Lenus Health to:   * Deliver NHS transformation by testing new patient pathways / digital technologies to enable earlier diagnosis and treatment * Enable large scale clinical trials and studies in Scotland * Collect evidence to assess the effectiveness of these new clinical management pathways * Scale up successful pathways to spread across NHS Scotland.   The first project being considered for rollout across NHS Scotland is the Optimised Pathway for Early Identification of Heart Failure in the Community (OPERA) – a collaboration between AstraZeneca UK, NHS Greater Glasgow and Clyde, University of Glasgow, Lenus Health and West of Scotland Innovation teams. This is currently going through the national innovation pathway stages with a decision during 2023.  In the last year, NHS Golden Jubilee has received University Status from the University of Strathclyde, and have embarked on a number of joint projects to support NHS Scotland. This includes working with us on:   * The new National Elective co-ordination Unit (NECU) concept * The interim independent evaluation of the Rapid Cancer Diagnostic Centres (<https://www.gov.scot/news/interim-report-shows-value-of-rapid-cancer-diagnostic-services/>) * Research and education within Industrial informatics, robotics, pharmacy, endoscopy and ‘living lab’ demonstration environments   Joint projects with the University of Strathclyde:  Applying Industrial Informatics to Health Challenges  The University is taking an active interest in supporting innovation to address the national backlog in elective care. A joint meeting with the CfSD and Strathclyde Industrial Informatics researchers was held in October 2022. Participants identified a range of areas where approaches in industrial informatics could be applied to address the backlog using innovations from other sectors such as energy and space. The University is in the process of identifying research funding calls to support the conduct of one to two early proof of concept studies.  Orthopaedics & Robotics  This is a focus area of joint work from which the strategic partnership originated. Led by the Department of Biomedical Engineering and the NHS Golden Jubilee’s orthopaedics team, work is ongoing in several areas. New options are emerging for joint projects in AI and orthopaedics – one being x-ray image analysis for arthroplasty (above). There is ongoing work across a range of robotics research and development. University researchers and NHS practitioners held a joint workshop to better align future research with clinical need.  Pharmacy  At the onset of our partnership a number of pharmacy related teaching options were explored through the NHS Scotland Academy. These are now pursued through NHS Golden Jubilee’s newly appointed Director of Pharmacy. We are envisaging co-designing teaching and training for pharmacists and looking into placement opportunities to enrich learning. Close collaboration between the pharmacy team at the University and at the NHS Golden Jubilee might also open opportunities for joint research and development in the future.  Research  In terms of facilitating research relationships between our two organisations, we are actively developing:   * An Information Sharing Agreement. NHS Golden Jubilee already has this kind of agreement in place with others and it helps facilitates setting up specific projects. * An agreement relating to the use of residual human tissue by University of Strathclyde. Given that the University is already pursuing this kind of agreement with NHS Lanarkshire, it would be sensible that NHS Golden Jubilee consider a similar agreement which would enable researchers to access residual tissue (assuming all other regulatory requirements have been met). * A high level Intellectual Property sharing agreement. This would facilitate the 'ideas factory' approach between our two organisations. * A document that would facilitate access for staff in both organisations.   The NHS Scotland Academy is developing joint research with the University in the areas of pedagogy, upskilling and the development of ‘once for Scotland’ solutions. The Academy identified key challenges arising in the National Endoscopy Training Program and in Endoscopy Non-Technical Skills as well as challenges identified by NHS Scotland Assure, National Treatment Centres and the Nursing & Midwifery Council. A meeting to outline joint research opportunities was held in January 2023. The Academy is currently identifying areas suitable for student projects and for joint research funding bids.  Meetings are taking place between the University’s ‘Living Lab’ team and the Academy to develop joint work on demonstration environments. |
| **7.2a** | **Work with a range of national organisations to combine the right skills and capabilities across Scotland to reduce the barriers to national innovation adoption**  The CfSD has supported the development of the new Innovation Design Authority (IDA), which provides overall oversight of the ANIA pathway. Membership of the IDA is designed to provide expert understanding of opportunities associated with acceleration of key innovations, along with a broad understanding of how the overarching innovation ecosystem works together.  The CfSD also co-ordinates the work of ANIA delivery partners, including NHS National Services Scotland (NSS), Healthcare Improvement Scotland, NHS Education Scotland, Public Health Scotland and Digital Health and Care to enable them to align their skills and capabilities to jointly assess and implement high impact, evidence based innovations across Scotland. |
| **7.3a** | **Renew the focus on accelerating implementation of the Heat Map programmes to maximise capacity, reduce variation and increase theatre efficiencies, including ACRT and PIR**  To support the development of the Integrated Planned Care Programme, NHS Boards have been requested to develop their Heatmap, which gives an overview and a measure of impact of focussed deployment of existing priority CfSD initiative(s) and national improvement programmes.  NHS Golden Jubilee continues to provide data on Active Clinical Referral Triage (ACRT), Discharge Patient Initiated Reviews (PIR), Enhanced Recovery After Surgery (ERAS), and Day Surgery for elements of General Surgery and Orthopaedics.  The following table shows NHS Golden Jubilee achieved in excess of 100% of the heat map measures due to be met during 2022/23:   |  |  |  |  | | --- | --- | --- | --- | | **Heatmap measure** | **Actual number March 2023** | **Projection for 22/23 year end** | **Percentage achievement** | | General Surgery - ACRT | 213 | 200 | 100% | | Orthopaedics - PIR | 3105 | 2700 | 100% | | General surgery – Day surgery | 189 | 60 | 100% | | Orthopaedics - Day surgery | 1338 | 840 | 100% |   *Table 5: NHS Golden Jubilee Heatmap measures*  Heatmap returns will be reviewed in the first instance at the NHS Golden Jubilee National Elective Services Confirm and Challenge meeting prior to submission to CfSD. These are scheduled on a monthly basis, and provide a timely opportunity for discussion and scrutiny.  CfSD has introduced an updated Heatmap dataset for 2023/24 and have requested each board measure progress against a projected aspiration. For 2023/24 NHS Golden Jubilee will submit data on the following:   * ACRT – Orthopaedics only * PIR - Orthopaedics only * Cataract cases per list (All list are cataract list) * ERAS and Day Surgery – Orthopaedics procedures only   Analysis is underway to set the anticipated performance against each measure and subsequent improvement plans for 2023/24.  For CfSD, please note that implementation and delivery of the Heat Maps is not an innovation adoption, and is not carried out through ANIA.See 4.11a. |
| **7.4a** | **Identify productive opportunities to prepare bespoke packages of support to create capacity in the system that will help with delivery of the planned care targets and provide sustainability for the future**  Innovation is a core CfSD programme. It includes horizon scanning to identify potential new innovations, and ongoing assessment and support of existing innovations being progressed through the ANIA pathway to ensure they are capable of delivering high-impact innovations that can be scaled to a national level. This includes innovations capable of increasing capacity, supporting planned care targets, and providing sustainability. |
| **7.5** | **National Elective Coordination Unit (NECU)**  NECU will continue to play a central role in coordinating a national approach to cross boundary working, tackling the backlog of long waiting patients including through administrative and clinical waiting list validation. |
| **7.6** | **Support prioritisation, scaling and adoption of high impact programmes including ACRT, PIR, ERAS, Day Surgery, Cytosponge, Colon Capsule Endoscopy**  Please note that implementation and delivery of these high impact programmes is not an innovation adoption. See 4.11a. |

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| 8 | **Workforce**  Implementation of the Workforce Strategy. |

Workforce continues to be a significant priority for NHS Golden Jubilee. In common with Boards across Scotland, NHS Golden Jubilee continues to experience significant workforce challenges. NHS Golden Jubilee developed its latest three-year Workforce Plan in 2022. This plan is in line with the strategic framework as set out in the National Workforce Strategy for Health and Social Care, setting out NHS Golden Jubilee approaches to supply, training, development, and service delivery challenges across the five workforce pillars:

* *Plan*
* *Attract*
* *Employ*
* *Train*
* *Nurture*

An update on the implementation of the Board’s Workforce Plan is included in Section C of this ADP.

In line with Scottish Government expectations, it is NHS Golden Jubilee’s intention to fully align workforce and delivery planning. Future ADPs will include more detailed updates on delivery of the Board Workforce Plan, and delivery priorities and actions for the forthcoming year.

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| **No.** | **Board Action** |
| **8.1**  **8.2**  **8.3** | **Deliver eRostering by November 2023**  eRostering has to be in place and operational within NHS Golden Jubilee by November 2023. This will be delivered through a formal Board Strategic Programme, with appropriate governance and oversight of the programme established through Board structures.  A Senior Responsible Officer (SRO) will be identified within the Board Executive Leadership Team, with overall responsibility for delivering eRostering within NHS Golden Jubilee. Dedicated programme resources will be allocated to deliver eRostering and to support its transition to business as usual from November.  NHS National Services Scotland (NSS) and the eRostering system provider will support NHS Golden Jubilee to undertake a gap analysis of existing approaches and internal systems to inform the scope and shape of the eRostering implementation programme. This will in turn inform the delivery milestones for the programme. The gap analysis will be undertaken during summer 2023, with specific deliverables and timescales for delivery incorporated in to future quarterly updates of the Board Delivery Planning Template. |
| **8.4** | **Engaged and Informed Staff**  **NHS Golden Jubilee to support staff to stay engaged and informed with seamless information sharing and a curated experience that includes relevant news, conversations, and other resources — all in one place**  NHS Golden Jubilee has a well-established partnership model, working closely with staff-side representatives and Trade Union in accordance with legislative requirements and Staff Governance Standards. This ensures staff are:   * Well informed * Involved in decisions * Provided with a continuously improving and safe working environment * Supported to maintain health and wellbeing   Staff are represented by the Employee Director at the Board’s Staff Governance and Person Centred Committee, and at other committees such as Partnership Forum by trade union representatives.  NHS Golden Jubilee has always valued two-way communication with its staff. Several methods are used to ensure that colleagues are communicated with, informed and engaged in an easily accessible way:   * NHS Golden Jubilee engages with staff through a ranges of mediums, including regular staff e-bulletins, Jubilee Life newsletter, and targeted information campaigns across a range of work and wellbeing themes and topics. * Leadership within the Board ensure key strategic and organisational messages are disseminated through staff meetings and events, management cascade and targeted communications issued by the Communications Team. * During the pandemic, we expedited our digital communications strategy. This moved our staff magazine, bulletins and corporate information to a digital format, available via email, our intranet and website. It also allowed staff to easily view appropriate video and animation in one place. In addition, QR code posters are now used to help staff quickly access key information through mobile devices. * All staff and topic specific discussions were held online and open for all staff to take part. * Communications is never a ‘one size fits all’ for staff. For those without easy access to digital devices, there is still the ability to provide hard copies and traditional methods such as posters and leaflets. * Going forward, we are now making best use of the introduction of Microsoft 365 applications to support our staff. * Our intranet will be moving to SharePoint, allowing teams more empowerment around the information they wish to share and allowing access to key information from anywhere with your network login. * The Microsoft Communicator application will allow us to quickly disseminate corporate information across the organisation. * The Viva Engage platform will allow better engagement across the organisation, allowing department, professional or topic specific communities to be set up to increase engagement and discussion. * ‘Stream’, allowing staff to view videos directly through the Microsoft365 platform without the need to exit to another site such as YouTube.   Staff perceptions and feedback are sought by managers during 1:1s and annual appraisals, and more formally through the annual iMatter process. The iMatter survey and follow up focus groups and team sessions provide insight into staff satisfaction levels, with team iMatter action plans developed to address local issues and to inform broader organisational plans. It is NHS Golden Jubilee’s intention to undertake iMatter again during 2023/24, including development of team action plans later in 2023. |
| **8.5** | **Maximise digital capacity, including Connect Me**  Connect Me is not a workforce related development. Remote health monitoring, including systems such as Connect Me, could be particularly useful in services where routine monitoring of patients’ health conditions. This will be considered as part of the Board’s wider consideration of Technology Enabled Care. |
| **8.6** | **The NHS Scotland Academy as a trusted partner of stakeholders throughout NHS Scotland**  The NHS Scotland Academy (NHSSA) has established programmes that the first cohorts of learners have now completed. Evaluation of the training is indicating that it is adding value and is evident in practice within clinical settings. As the number of participants and alumni of NHSSA programmes increases this will grow trust in the NHSSA brand amongst teams and Boards within which learners are based.  Feedback indicates improved practical application and skills amongst immersive learners after as a little as one week of immersion. The NHSSA has systems in place to gather evidence and personal testimonies from learners and alumni, with these published to increase the visibility and positive messaging around the work of the NHSSA. Trust in the work of the NHSSA is further evident in the enthusiasm of learners and their colleagues in promoting the programme to peers.  Moving forward, a priority for the NHSSA is to continue to grow trust by ensuring focus remains on consistently realising the NHSSAs published Values and Mission Statement. The NHSSA is designed to collaborate and to provoke collaborative responses to workforce challenges facing healthcare nationally. The NHSSA has worked with many stakeholders within health and social care on its initial projects and programmes, developing a reputation for persistence in addressing challenging issues. This includes the NHSSA exploring potential workstreams that have then been passed to other stakeholders to progress or to develop collaboratively. This approach demonstrates commitment to the greater cause, with the Academy contributing to broader issues rather than seeking to resolve all issues in isolation. This model will remain a hallmark of the NHSSA approach during 2023/24 as it continues to consider responses to workforce challenges and develop programmes that meet the needs of NHS Scotland. |
| **8.7** | **Outline plans to deliver accelerated training through collaboration including: Accelerating learner programmes to support National Treatment Centre staff development; Accelerated training additional Sonographers; National Endoscopy Training Programme**  The NHSSA plans to deliver the following during 2023/24:   * Foundations in Perioperative Practice Programme: two cohorts of 8-12 learners each * Surgical First Assistant Programme: two cohorts of 8-12 learners each * Anaesthetic Practitioner Programme: two cohorts of 8-12 learners each * Endoscopy Assistant Practitioner Programme: two cohorts of 5-10 learners each * National Ultrasound Training Programme: two cohorts with 11 learners in cohort one, and provisionally nine in cohort two (subject to partner University recruitment) * National Endoscopy Training Programme: the following courses are scheduled to run at locations throughout Scotland during 2023/24 – Endoscopy Non-Technical Skills; Upskilling for Upper GI; Upskilling for Colonoscopy; Train the Colonoscopy Trainer; Basic Skills in Endoscopy (colonoscopy and upper GI). More course will be added as faculty becomes available. * National Bronchoscopy Training Programme: 22 individuals (of the 45 due to complete the two-year project) will be trained in basic bronchoscopy during 2023/24. The first two of four cohorts (9-12 learners each) will start the Endobronchial Ultrasound / Transbronchial Needle Aspiration training programme during 2023/24. * Independent Prescribing for Community Pharmacists: four days of clinical skills training will be offered for 11 months. Based on 12-15 learners per day, this has potential to create between 528-660 learner days. * Introduction to Roles in Health and Social Care: this digital learning programme remains in use, with positive feedback and an average of 200 new learners each month anticipated during 2023/24. To date 3600 learners have accessed the resource. |
| **8.8** | **Plans to support learners and educators using NHSSA programmes including NMC OSCE, Youth Academy and senior phase apprenticeships**  The NHSSA will continue to support learners and educators via the NMC OSCE process, with particular focus during 2023/24 on Midwives. This will support Midwives in gaining the registration required to practice.  A Cultural Humility resource for use by learners is (subject to approval of the business case in May 2023) set to be launched in October 2023.  The NHS Scotland Youth Academy, through Skills Development Scotland, will deliver a Healthcare Pathway pilot for senior phase school students. The qualification will focus on three challenge projects: spaces and places’ community and wellbeing; creativity. The pilot will run in five regions, with 100 pupils participating. |
| **8.9** | **Plans to develop pathways into health and social care roles for military service leavers and veterans**  Following initial scoping and engagement work, it has been agreed that NHS Education for Scotland (NES) is better equipped to deliver this workstream. NES assumed responsibility at the end of 2022/23. As NES is a parent Board of the NHSSA there remains close links between the work of the Academy and this workstream, with the NHSSA available to support any identified accelerated training requirements as required. |

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| 9 | **Digital**  Optimise use of digital & data technologies in the design and delivery of health and care services for improved patient access |

NHS Golden Jubilee is committed to optimising the use of digital and data technologies, providing corporate and clinical staff with modern, fit for purpose systems and services. The focus of the Board digital strategy during 2023/24 is to establish a baseline of resilient services and infrastructure upgrades that will enable further upgrade and replacement of clinical and business services and in time the leveraging of new systems to innovate and improve services.

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| **No.** | **Board Action** |
| **9.1** | **Optimising M365**  Throughout 2023/24, NHS Golden Jubilee will work to optimise the use of the M365 suite of products as part of the Board’s ongoing digital transformation. Initiatives are led by the Board’s Digital Team, governed by Executive Director led Digital Steering Group.  Initiatives include:   * Retiring local legacy file storage services in favour of M365 cloud-based solutions such as OneDrive and SharePoint. This will improve the security of document storage through better retention policies and records classification, and the accessibility to organisational information through more device options. This will allow disinvestment in redundant on premises storage and backup services. M365 will also support the increased use of business and clinical classification schemes within the Board – it is the intention that data will be (re)classified prior to migration to the cloud. It is likely that this work will take the duration of 2023/24 to complete. * Utilise the MS Teams / SharePoint / Viva Engage product sets to deliver improved, simpler information storage solutions. This includes the management and distribution of Board and Committee papers, again enabling disinvestment in the existing third party software. This work is being undertaken in collaboration with Microsoft’s Modern Workplace specialists. We expect the output of this work to be of use to other Boards looking to make similar changes. * Work with Microsoft is underway to develop a digital pathway for pre-operative assessment utilising M365, with particular focus on clinical pathways within the new National Treatment Centre opening in late 2023. This work is part of wider activity to bring process automation to the Board using M365 and associated product sets. * Launch a revised Board Intranet using SharePoint Online, integrating with existing M365 tools used within the Board (Teams, Exchange Online). This will provide a modern platform for sharing organisational information to all staff, provide vital links to national M365 resources, and integrate with national systems such as TURAS and the M365 Skills Hub. This will allow disinvestment in the current on premises SharePoint environment.   A broad range of external learning resources have been made available to local digital teams to improve skill sets across Microsoft Cloud technologies (M365, Azure, Power BI). This increases knowledge and skills in areas where NHS Golden Jubilee users will need support, as well as building organisational capacity in support of future digital innovation. While initially focussing on digital services staff, in time it will support the creation of a new network of Digital Champions empowered and supported to promote the use of digital technology in their own service areas, fostering a new digital culture within NHS Golden Jubilee. Additional external subject matter expertise is being utilised where local skills are not yet developed to provide the necessary input in support of an accelerated programme (M365 “Fast Track” Team, external contractors).  As M365 becomes the dominant product in the overall security and compliance posture within the Board, local Data Protection Impact Assessments and Data Processing Agreements will be developed. These will utilise foundations provided by national Information governance and security work, with NHS Golden Jubilee committed to adopting recommendations from the M365 Security and Compliance Review (locally) as well as implementing National Cyber Security Council recommended security policies during 2023/24.  Microsoft Defender for Endpoint products available under the M365 national licence are in the process of deployment and will be fully adopted by July 2023. Work is ongoing with the NSS Cyber Centre of Excellence Team to scope the adoption of Microsoft Defender for Servers to fully protect the NHS Golden Jubilee estate. These initiatives have been highlighted as areas of improvement within the Boards Network and Information Services Directive assessment and will contribute towards the overall compliance score following the updated assessment which is scheduled for the end of 2023.  As a representative West of Scotland Board, NHS Golden Jubilee actively participates in the West of Scotland Development Group and the M365 Power Platform Short Life Working Group. Whilst the Board has not yet deployed any products under development from these groups, discussions continue with the intention of deploying some small scale automation products (room booking, annual leave requests) and clinical workflow elements (SACCS MDT and Patient Management Database). The adoption of these automation and clinical workflows will be dependent on the adopted licence model within the Board and ensuring appropriate licenses are available. The local team work closely with the national M365 support team to ensure licenses are closely managed in line with agreed volumes and splits to ensure current requirements are met. Future usage and license implications will be discussed and agreed in the same way as they move towards adoption. |
| **9.2** | **National digital programmes**  NHS Golden Jubilee is working to implement several key national digital programmes during 2023/24:  **Hospital Electronic Prescribing and Medicines Administration (HEPMA)** The business case for HEPMA adoption across NHS Golden Jubilee is complete, and is being considered by the Board at its May 2023 meeting for approval to commence the project. Funding is allocated within the Board Financial plan and, if approved, there are plans to work with Pharmacy and Digital staff from NHS Greater Glasgow and Clyde to deliver an accelerated adoption with completion towards the end of the financial year. Recruitment is underway for senior pharmacy and project management resource to support the early stages of the project.  **CHI** Golden Jubilee continue to prepare for the change to the new national CHI system. All necessary prerequisite work and integration testing has been completed with a current estimate of October 2023 for go-live.  **Laboratory Information Management System (LIMS)** As NHS Golden Jubilee has not yet ‘called off’ on the new National LIMS product, work continues to upgrade the existing local LIMS system to the new version of Clinisys WinPath, with an estimated completion date of November 2023. The Board continues to participate in regional and national planning exercises for the national LIMS system to ensure our requirements are captured, and that local plans consider any implications for Laboratory services.  **Endoscopy Reporting System (ERS)** The Board is working with the national programme team to be an early adopter of the new Endoscopy Reporting System. This will allow the Board to go live with the new system in advance of the opening of the Phase 2 National Treatment Centre later in 2023, and remove an existing risk around the age and (in)stability of the current reporting software. Digital services are supporting Medical Physics in ensuring the Board’s digital and imaging equipment is ready to meet new ERS infrastructure requirements.  **Picture Archiving and Communication System (PACS)** NHS Golden Jubilee has recently completed installation of the latest version of the new Philips PACS system. There are no active plans to consider system replacement at this time, however the Board will continue to contribute to clinical and digital forums in this area to maintain a readiness and ensure planning activities are properly assessed and scheduled where appropriate.  **NearMe** The Board has an aspiration to extend the use of NearMe this financial year, including in support of some activities of the new National Treatment Centre. Expansion of NearMe is predicated on commissioning a broadened application support resource to manage system administration. This is under consideration by the Board at present as part of a wider digital resource and responsibilities review.  **Other initiatives**  Other digital initiatives being progressed during 2023/24 include:  **Data Warehouse** Developing an enterprise Data Warehouse environment built on the Microsoft Azure platform. This will, for the first time in NHS Golden Jubilee, allow data held on disparate clinical systems to be extracted, manipulated and presented in support of organisational planning and performance activities. The system will utilise, amongst others, the Power BI toolset as part of the Boards available M365 license set and in time will link with national data repositories such as SEER and NDP. This will be live by the end of the 2023 calendar year.  **Electronic Patient Records (EPR)**  The Board’s EPR programme will move forward with the launch of Anaesthetic Pre-operative assessment, electronic nursing notes and Orthopaedic pathway developments this year. Existing pathway mapping exercises will also be revisited to ensure services are correctly prioritised based on clinical imperative and resource availability.  The Board will adopt the Open Eyes national Ophthalmology system to provide a full EPR pathway for patients initially around cataract surgery. The Board will partner with colleagues in NHS Greater Glasgow and Clyde to provide learning and accelerate adoption within the Ophthalmology service at NHS Golden Jubilee.  **NetCall** The use of NetCall will be expanded this year to incorporate better patient communication and interaction, and assist in the management of waiting times via the Hospital Booking Office Digital Transformation process. Text message and email will replace current postal methods, leading to savings on stationery and postage costs.  **Printing / Digital Signing** The Board will finalise and implement a new Print Strategy and electronic document signing service. This will provide audit assurance around electronic signatures, condense the printer fleet within the Board and reduce print and consumable costs across the organisation.  **TrakCare Upgrade** The planning phase for the upgrade to the TrakCare Patient Management System within the Board will take place during 2023/24. This upgrade will improve overall stability and security of the platform, unlocking additional clinical features and new user interface allowing much more flexible, user friendly interaction with the product. The upgrade also allows NHS Golden Jubilee to consider the benefits of adopting InterSystems HealthShare technology versus the current Orion Clinical Portal environment. |
| **9.3** | **Organisational Digital Maturity Exercise**  The Board has identified the Executive Lead and Lead Responder as part of the maturity exercise, and participated in awareness workshops. Discussions are underway to establish a short life working group to support the completion of the maturity exercise and provide a full and complete response before the advertised deadline. The assessment will be completed by end of July 2023, with output in the Autumn. This group will comprise of organisational and clinical leaders from across the Board. |
| **9.4** | **Leadership in digital**  The Board has a Digital Steering Group chaired by an Executive Director, with wider executive and senior management membership. The group’s remit is to set the digital strategy, prioritise the work plan and support digital transformation efforts within the Board. The Steering Group reports to the Clinical Governance Committee on progress against the strategy and work plan, and to the Audit and Risk Committee regarding Network and Information Services Directive compliance.  The Director of Digital regularly attends Executive Leadership Team and Board meetings to update on matters relating to digital, or to seek approval of business cases where digital plays a key part in the delivery of a new service e.g. HEPMA. |
| **9.5** | **Scottish Health Competent Authority / Network and Information Systems (NI)s Regulation Audits**  The Board has a fully governance backed programme working towards NIS Directive compliance including committee and Board reporting mechanisms. The competent authority has met with the Board regularly to discuss implications of the change to the 2023 framework, with an internal exercise to re-map requirements nearing completion. The internal governance arrangement include Digital Steering Group, Digital Governance Group and the Risk and Audit Committee.  Key activities include:   * Adopt national cyber products * Replace corporate network and firewall equipment * Recruit dedicated cyber operations and compliance staff (2 operations and 4 compliance in 2023/24) * Review existing processes based on previous audit feedback.   An on-site audit is planned for May 2023, with final assessment in December 2023. A work plan for each recommendation and control has been established with regular reporting and clear escalation routes through internal Board governance in place. The Board expects to meet or exceed the current 60% compliance target by the end of 2023.  As part of the NIS compliance work the Board has engaged resources from the NHS Cloud Centre of Excellence to assist with the deployment of improved security tooling and review configuration of existing products and processes. This is reviewed informally on a regular basis and any findings / recommendations worked into the overall NIS work plan. |
| **9.6** | **eRostering – plans to contribute to national roll-out by Nov 2023**  See section Workforce 8.1 to 8.3 |

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| 10 | **Climate**  Climate Emergency & Environment |

NHS Golden Jubilee is uniquely placed as a national asset for NHS Scotland to be an exemplar organisation in leading innovation, change and transformation that will ensure we provide health and care that is sustainable through a culture of environmental stewardship. At NHS Golden Jubilee we will continue to evolve and develop how we provide care to ensure it is sustainable and that we manage our assets and resources in an environmentally responsible way.

Our hotel and conference centre provides class leading guest and delegate services and we will ensure the centre is also a class leader in sustainable hospitality and conferencing. We will foster a culture of environmental responsibility to encourage guests to contribute to sustainable practices whilst using our facilities. We will also manage our use of resources including working with suppliers to minimise our environmental impact.

The CfSD will deliver the Green Theatres programme across Scotland and will work with partners to identify further opportunities for national sustainability programmes. Finally, the NHS Scotland Academy will explore opportunities with partners to embed sustainable principles and practice in the programmes it delivers.

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| **No.** | **Board Action** |
| **10.1** | **Building energy transition programme**  NHS Golden Jubilee aims to use renewable heat sources for all of its buildings by 2038; we are progressing this by proposing to join Phase 4 of the Queens Quay District heating system being developed by West Dunbartonshire Council. The district heating system is powered by a heat pump using the river Clyde as a low grade heat source. A business case is being developed to be presented to the Board in summer 2023.  NHS Golden Jubilee has a single building within a single site. We realise if successful, this unique District Heating opportunity could be a motivational case study for other major hospital sites in other boards. |
| **10.2** | **Fleet decarbonisation**  NHS Golden Jubilee is in the process of upgrading two vehicles. At present, challenges persist with the geographical location of patient populations, and the range provided by electronic vehicles in meeting our patient and organisation’s needs. There is, however, potential to explore this element in the future as the local vehicle is due to be replaced in approximately two years. |
| **10.3** | **National Green Theatre Programme**  The National Green Theatres Programme is a new CfSD led programme, which has been developed over the course of the year. The national Green Theatres launch event was successfully held at the end of March 2023 with 350 attendees.  During 2023-24, we will establish an NHS Golden Jubilee Green Theatres Programme to implement nationally recommended ‘sustainable care bundles’ such as:   * Switching from disposable to re-useable items * Reducing how many disposable items we use * Selecting disposable items which are more easily recycled |
| **10.4** | **Reducing medical gas emissions**  NHS Golden Jubilee is a leader in the use of total intravenous anaesthesia and pain management which avoids or minimises the use of volatile anaesthetic gases. We have also switched from the use of Desflurane which is a very potent greenhouse gas to alternative gases with lower impact. Further work is required with clinical staff to agree how to go further with reducing harmful anaesthetic gas use and managing it safely.  Our Priorities for 2023-24:   * Review volatile gas use across our care pathways and agree action plan including targets for either eliminating or reducing their use * Implement technology solutions for containing, processing and disposing of volatile anaesthetic gases |
| **10.5** | **Adaptation to climate change**  The key climate change risks relevant to NHS Golden Jubilee are:   * Risks to our site due to flooding * Risks to health care delivery from extreme weather   A flood risk assessment has been completed, with our site protected from the risk of flooding by the presence of a flood plain opposite the hospital and the riverbank defences on the hospital side of the river. We will continue to update flood risk assessment to ensure that any changes to these risk levels is identified and mitigated.  Risks to healthcare delivery on our site need to be mitigated in two ways:   * Business continuity planning for adverse weather – we have already updated our plans to take into account lessons learned from extreme cold weather events we have experienced and maintaining vital services. We will review our plans in relation to other extreme weather events including high winds, high temperatures and flooding that may impact the wider travel system. * Building design to adapt to climate change – our key vulnerability is to periods of extended high temperature and its effect on internal building temperatures. We have undertaken remedial work to improve cooling capability, particularly as we have had to operate for several years with sealing windows during our building works as an infection control precaution. The building was designed to include natural ventilation through windows so we have already had to adapt. However, further work may be required to address future climate change and extended periods of heat. |
| **10.6** | **Plans to achieve waste targets in DL (2021) 38**  We have already undertaken a programme of staff training on segregation of waste. To reduce our waste we will continue with staff training on the segregation of waste. We will also review the design of the waste segregation systems and processes to make it as easy as possible for staff, visitors and patients to segregate waste at source. This will include reviewing the layout and labelling of bins and waste stations for clinical, domestic and food waste streams.  We are also working with University of Strathclyde to establish a green transition ecosystem hub which will use design based approaches to tackling the climate change emergency. One aspect of this work will include using design to explore opportunities for reducing single use disposable items and design out waste through appropriately user-centred designs for re-useable items. Two items we are already considering are re-useable theatre caps and re-useable theatre gowns. The key to success will be finding both technically acceptable solutions that meet requirements for clinical and healthcare environments as well as user acceptance of the alternative solutions. |
| **10.7** | **Plans and timescales to implement an approved Environmental Management System (EMS)**  NHS Golden Jubilee is working with national colleagues on the new National System for EMS. |
| **10.8** | **Net Carbon Zero legislation and Sustainable Design and Construction (SDaC) Guidelines will be incorporated into the design and construction of the expansion of NHS Golden Jubilee as part of the National Treatment Centres Programme**.  To make our major construction projects more environmentally sustainable we have ensured the following:   * Contractors have signed up to take back schemes (floor protection, PPE, plasterboard) to recycle more construction materials. * Contractors have changed from use of diesel to HVO (Hydrogenated vegetable oil) in all of site plant. * Contractors have introduced the use of Biodigester Remediact to deal with any potential construction spills (eco-friendly aerobic bio-digester). * Contractors on site catering providers have moved to biodegradable packaging.   In addition we are exploring the following:   * In discussions with cabin suppliers with a view to changing to waterless urinals to reduce water usage. * Installing a “last person out” switch that will automatically shut off all power to non-essential items such as photocopiers, printers etc. * Trailing “palletloop” recycling of pallets. * Changed site access from card to facial recognition to save use of plastic cards. |

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| 11 | **Additional NHS Golden Jubilee section**  **Golden Jubilee Conference Hotel**  The Hotel continues to develop its infrastructure to support the NHS Scotland Academy both short and longer-term and it plays a key role in supporting other NHS Boards, the University of Glasgow Medical Faculty and other healthcare bodies in the West of Scotland through the Healthcare Skills and Simulation Collaborative |

NHS Golden Jubilee is home to the Golden Jubilee Conference Hotel (GJCH). The on-site four star facility consists of 168 guest bedrooms, and innovative conference and leisure facilities. The Conference Hotel plays a key role in supporting NHS Golden Jubilee’s essential services by providing:

* 19 bedrooms for patients and relatives
* 18 bedrooms, plus one suite for International Recruitment cohorts
* 11 on-call rooms for staff

The Hotel provides conference and exhibition space suitable for a range of corporate events. The Hotel’s 2020 Strategy sought to position the Hotel as a pivotal conference, meeting, and hospitality venue of an internationally renowned medical innovation campus, with the bedroom infrastructure to provide residential educational experiences. Conference rooms and facilities were therefore refurbished to a high specification, as well as bedroom upgrades of two of the three floors. During 2022/23, the Conference Hotel executed an interim strategy due to continued market instability following the pandemic.

With a strong return in international travel, leisure and corporate markets in 2022, the Conference Hotel seeks to build upon the success of the 2020 Strategy, by agreeing and launching the 2023 Strategy. The new proposed Hotel Strategy outlines the longer term ambition and vision for the Hotel that is centred on positioning the Hotel as an accredited hospitality centre of learning. Working with local schools, national hospitality institutions and academic stakeholders, the hotel will look to develop pathways for the next leaders of the future, by developing accessibility and development pathways within hospitality.

The strategy will look to focus on achieving total profit optimisation, while continuing to prioritise NHS Scotland conference and meetings, understanding the current climate, the Hotel will look to develop other markets such as association and corporate markets to ensure maximum use of its facilities.

To further support the NHS Golden Jubilee and NHS Scotland, the Hotel will look to expand its meeting room and training room portfolio to ensure maximum use of an NHS Facility. The facility will also continue to support the NHS Scotland Academy to deliver training courses on a hospital site including exploring residential options.

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| **No.** | **Board Action** |
| **11.1** | **Development of Golden Jubilee Conference Hotel Strategy**  The new proposed Hotel Strategy outlines the longer term ambition and vision for the Hotel that is centred on positioning the Hotel as an accredited hospitality centre of learning. Working with local schools, national hospitality institutions and academic stakeholders, the hotel will look to develop pathways for the next leaders of the future, by developing accessibility and development pathways within hospitality.  The strategy will look to focus on achieving total profit optimisation, while continuing to prioritise NHS Scotland conference and meetings, understanding the current climate, the Hotel will look to develop other markets such as association and corporate markets to ensure maximum use of its facilities. |
| **11.2** | **Golden Jubilee Conference Hotel Financial Plan**  NHS Golden Jubilee’s GJCH has implemented the 2023/24 financial plan which outlines the objectives and financial projections for the year. The Hotel will regularly monitor performance to ensure it remains in line with the plan throughout the year. Quarterly progress updates will be reflected through the Delivery Planning Template ADP2. |
| **11.3** | **Golden Jubilee Conference Hotel as an asset in support of NHS Scotland**  The GJCH will continue to play a key role in supporting the needs and priorities of NHS Golden Jubilee and NHS Scotland. The Hotel will continue to provide support via bedroom allocation for visiting clinicians, on-call clinicians, and patient and relative rooms. The Hotel remains a key resource in supporting International Recruitment cohorts by providing bedroom and communal living space for newly appointed recruits. Wider support to NHS and other public bodies will remain a priority in the provision of conference and event space. Additionally, the Hotel will continue in being a key service provider to NHSSA, offering physical skills and simulation training space. |

Section B: Finance and Sustainability

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| Identify any risks and issues to delivery of the ADP, with reference to the need for financial balance and associated improvements through, for example, Sustainability and Value Programme. |

This section should be read in conjunction with NHS Golden Jubilee’s three-year Financial Plan. The detail within this section is aligned to core elements of the Financial Plan. The Plan is available on request.

The Board continues to develop its approach to sustainability and value. This includes the ongoing establishment of a cross-organisational value and sustainability programme, and focussed divisional value review activities. This will be a significant area of focus for the Board throughout 2023/24 and beyond.

**Areas of Risk**

The following risk areas have been identified in relation to NHS Golden Jubilee:

* Failure to agree scope of Board Sustainability and Value programme and delivery of efficiency initiatives – particularly recurrent schemes
* Workforce risk- recruitment and retention of core NHS Golden Jubilee existing workforce and Phase 2 Expansion – management and control of the use of temporary staff (Agency / Wait List Initiatives / Overtime)
* Delivery of finance break-even duty and achievement of Capital Resource Limit / Non-Core Resource Limit
* Impact of winter and ongoing system pressures for core NHS Golden Jubilee services
* Digital infrastructure, readiness, resilience and maturity

**Financial Plan Risk areas**

Specific risks relating to the Board’s Financial Plan and financial outlook include:

* On-going non-pay inflation as well as energy increases and supply chain restrictions on key consumables (Cardiology and Orthopaedics)
* Requirement to achieve financial balance over the three year plan period and deliver almost £7.7M recurrent savings (3.29%) in 2023-24, rising to £28.3m in 2025-26
* Development of a revised ‘Best Value’ Work Programme approach in 2023-24 to focus on achieving significant recurring savings for the next financial year (2024-25)
* On-going high levels of vacancies, offset with high cost temporary staffing (WLIs/Agency/OT)
* Identification of underlying vacancy factor savings and turnover
* Focus on organisational wide work programmes
* Reducing clinical variation (Realistic Medicine / Value Based Health Care)
* Benchmarking of costs against ‘best-in-class”
* Work stream related to cost improvement, leading to improved costing methodology to review and re-evaluate Service Level Agreements
* Over-performance on fixed Service Level Agreements – WoS Cardiology / cardiac / thoracic
* Funding of Business cases put forward to NSD for appropriate resources to deliver expected levels of activity (SNAFHS / SACCs)

**Productivity Improvement**

Identification of potential productivity improvements, including:

* Plans are articulated as part of the planned care return, with a primary focus on reducing length of stay, reducing DNAs and cancellations. In addition there will be a strong focus on optimising the take up of activity allocations by referring Boards
* Full roll out of Microsoft365 – enhanced productivity of full utilisation of software available
* Introduction of PECOS on-line electronic purchasing across the organisation, accompanied by a review of authorisation hierarchy and delegated purchasing authority levels

**Waste Reduction Priorities**

Our aim is to reduce the amount of waste we produce and increase how much of it is recycled. For 2023/24 we will continue to strive for high levels of recycling within our waste segregation systems and processes. In 2023/24, to reduce our waste NHS Golden Jubilee will continue to deliver staff training on the segregation of waste. We will also review the design of the waste segregation systems and processes to make it as easy as possible for staff, visitors and patients to segregate waste at source. This will include reviewing the layout and labelling of bins and waste stations for clinical, domestic and food waste streams. As an example of our commitment and achievements to date, our hotel has reviewed its product range and eliminated single use plastics from its bedrooms and gone paperless by introducing an online guest services app. In addition the hotel has a comprehensive waste segregation system in place across the whole facility.

We are also working with University of Strathclyde to establish a green transition ecosystem hub which will use design based approaches to tackling the climate change emergency. One aspect of this work will include using design to explore opportunities for reducing single use disposable items and design out waste through appropriately user-centred designs for re-useable items. Two items we are already considering are re-useable theatre caps and re-useable theatre gowns. The key to success will be finding both technically acceptable solutions that meet requirements for clinical and healthcare environments as well as user acceptance of the alternative solutions.

Section C: Workforce

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| Please include an update on the implementation of Board workforce plans. |

NHS Golden Jubilee developed its latest three-year Workforce Plan in 2022. This plan is in line with the strategic framework as set out in the National Workforce Strategy for Health and Social Care, setting out NHS Golden Jubilee approaches to supply, training, development, and service delivery challenges across the five workforce pillars:

* Plan
* Attract
* Employ
* Train
* Nurture

This section of the ADP provides an update on the implementation of NHS Golden Jubilee’s Workforce Plan since it was published in 2022, including actions and interventions being put in place to ensure:

* Planning and resourcing strategies are in place to deliver the required workforce to both support recovery and redesign of services, and maximised capacity within clinical services
* Full use of new roles, and training and development opportunities, to support workforce diversification particularly in hard to recruit to roles
* Enhancing our local workforce supply pipelines, alongside cementing the Board’s role as an ‘anchor’ institution in the local community, through initiatives such as apprenticeships and community outreach
* Maximising the use of technology and automation to increase efficiency, mitigate workforce growth requirements and some supply pressures
* Effective use of local and national workforce policies to maximise recruitment, retention and wellbeing of staff
* Address and reduce barriers to delivering exemplar best practice workforce practices

This update on the delivery of the Workforce Plan is structured around the five workforce pillars. Actions marked as ongoing will continue to be delivered during 2023/24.

It should be noted that an extensive programme of engagement is currently underway focussed on detailed workforce planning with clinical and corporate teams. This process will consider a wide range of workforce planning issues, including workforce projections, risks and opportunities, with the intelligence arising from this engagement informing further updates to the overall Board Workforce Plan. These updates will be reflected in quarterly progress updates on this ADP, specifically through the Delivery Planning Template ADP2.

**Plan**

NHS Golden Jubilee recognises the importance of effective workforce planning if it is to achieve its strategic and operational priorities. This includes understanding current and projected workforce needs. A significant focus of the Board’s workforce planning and recruitment activity has centred on meeting the workforce needs of the Board’s Phase 2 National Treatment Centre expansion programme. The workforce requirements of Phase 2 were originally articulated in the expansion business case, with progress in delivering this key programme subject to regular assurance reporting to Scottish Government.

Actions to support the delivery of the ‘Plan’ aspects of the Workforce Plan include:

* Recruitment events at local schools, colleges, universities and internally within NHS Golden Jubilee. This serves a dual purpose of seeking to attract workforce to NHS Golden Jubilee, but also, where appropriate, seeking to promote broader health and social care careers through collaborative work between NHS Golden Jubilee’s core recruitment team and the NHS Scotland Academy. This work will continue in to 2023/24. **Ongoing**
* Organisational and operational workforce plans, and activities linked to the overall Board Workforce Plan, are subject to review and scrutiny through Board governance structures. This will remain an ongoing activity to ensure NHS Golden Jubilee has the workforce required to deliver current and future services. **Ongoing**
* A comprehensive Board strategic and service planning process was undertaken during spring 2023, to inform development of the Board’s Medium Term Plan and refresh of the overall NHS Golden Jubilee Board Strategy. This process included consideration of key workforce opportunities and challenges, and initial consideration of ‘local’ workforce plans which will support overall Board workforce planning activity during 2023/24. **Complete**
* A Diversity and Inclusion Group was established with particular focus on delivery of the Board’s Diversity and Inclusion Strategy and Equality Outcomes. This group reports formally through the Staff Governance and Person Centred Committee within Board governance arrangements. **Complete (establish group) and ongoing (group in action)**
* An initial five internal networks were established to promote a diverse workforce and consider a range of diversity and inclusion issues. These networks include: Ability, Ethnicity, LGBT+, Spiritual Care, and Women. A further two networks covering Armed Forces and Young Persons will be launched during 2023/24. **Ongoing**
* Implemented trainee posts to support diversification of roles that are challenging to recruit to, including: Anaesthetic Assistants; Trainee Occupational Nurses; Trainee Perfusionists, Cardiac Physicians, and non-clinical roles within estates and facilities management. Work will continue throughout 2023/24 as part of the Board’s overall workforce strategy. **Ongoing**
* Similar to core recruitment engagement activities highlighted under the first bullet, our recruitment team and the NHS Scotland Academy continue to collaborate with partners including Skills Development Scotland to create youth employment opportunities linked to the Youth Academy. A joint event is planned for September 2023. **Ongoing**
* Work is underway to develop an Employability Strategy as part of broader development work associated with NHS Golden Jubilee’s emerging Anchor Institution Strategy. Working with partners in the West Dunbartonshire area, the Employability Strategy will focus on creating opportunities for young people and hard to reach groups to access health and care career pathways. **Ongoing**
* NHS Golden Jubilee will continue to explore funded training opportunities, working with West College Scotland as the local College within the greater Clydebank area. **Ongoing**
* NHS Golden Jubilee continues to participate in the MCR (Motivation, Commitment and Resilience) Pathways mentoring programme. **Ongoing**
* Continue to explore opportunities for apprenticeships through the Skills Development Scotland administered Apprenticeship Levy. **Ongoing**

**Attract**

There are elements of the ‘plan’ pillar that also fall under ‘attract’, therefore it is helpful to read these two pillars in conjunction. Attracting the workforce NHS Golden Jubilee requires is fundamental to our success, both of current services but also future expansion and service development. A Communications and Marketing Strategy has been developed jointly by the Board’s Communications and Workforce Teams to support NHS Golden Jubilee’s workforce attraction plans.

Job roles and vacancies are promoted through specific recruitment campaigns, planned and management by the Board’s Recruitment Advisers within the Workforce Team. Attracting high-quality candidates from a wide and diverse population is not just desirable, but necessary if NHS Golden Jubilee is to achieve its priorities and vision. Collaborative work with the NHS Scotland Academy, including that described earlier in this section, supports current and future workforce attraction and planning. Dedicated NHS Golden Jubilee, and joint Academy, careers events are widely promoted to raise awareness of career opportunities locally within NHS Golden Jubilee and within NHS Scotland.

Key elements of the ‘Attract’ pillar include:

* NHS Golden Jubilee’s Volunteer Strategy has supported young people applying for careers in health care. Six young people joined the programme in 2022/23, with the Board’s Volunteer Service linked in with West College Scotland’s Clydebank campus to collaborate on opportunities to attract young people into health care. **Initial actions complete – will continue to be ongoing action**
* Visits and work experience are planned for 12 young people interested in working in a variety of health care roles. A further 12 placement places will be offered to young people interested in medicine, beginning June 2023. **Ongoing**
* An internal Young Persons’ Staff Network has been established. It is expected that this network will play a key role in NHS Golden Jubilee’s Investors in Young People status in 2023. **Complete**
* NHS Golden Jubilee will again support West College Scotland’s annual STEM event, scheduled for November in 2023. **Complete for 2022/23, and ongoing**
* NHS Golden Jubilee and the NHS Scotland Academy have jointly developed a new Foundation Apprenticeship, resulting in an increased number of available placements (now up to 20). Simulated learning will commence in August 2023 for 20 Modern Apprentices, with the programme currently under development. NHS Golden Jubilee is also exploring opportunities to bring in posts on an apprenticeship basis via the Skills Development Scotland Apprenticeship Levy. **Ongoing**
* NHS Golden Jubilee’s International Recruitment project continues, with 19 whole time equivalent nursing staff recruited to date, with a further five starting with NHS Golden Jubilee in June 2023. **Ongoing**
* Recruitment events are ongoing to support workforce required for Phase 2 expansion, with an internal event taking place monthly. Ten events have taken place since January 2023, including Universities, Royal College of Nursing, Job Centre Plus and internal events. Events to support non-clinical roles, such as housekeeping, are planned for May and June 2023. **Ongoing**
* NHS Golden Jubilee’s emerging Employability Strategy will specifically target underrepresented groups, seeking to reduce and remove existing and / or perceived barriers to health care careers. This includes reviewing the Board’s recruitment process during 2023/24, and capitalising on opportunities arising from NHS Golden Jubilee’s status as a local Anchor organisation within the West Dunbartonshire area. **Ongoing**

**Employ**

The following progress has been made under the ‘Employ’ pillar:

* ‘Retire and Return’ has been supported across the organisation to maximise opportunities to retain, in some capacity, experienced colleagues. A communication plan was implemented to support this initiative. **Complete**
* Develop an updated staff handbook, with a dedicated Teams channel launched for new staff working in the new National Treatment Centre. **Ongoing**
* Online Exit Interviews have been launched to improve the Board’s intelligence relating to staff reasons for leaving the organisation to inform improvement to Board workforce and employment practices. **Complete**
* A more robust process for workforce analysis and planning associated with Phase 2 expansion has been developed, and monitored monthly. **Complete with implementation ongoing**
* A total of 1107.5 whole time equivalent positions were advertised by the recruitment team during financial year 2022/23. **Complete**
* Year one actions associated with the Board’s Health and Wellbeing Strategy were delivered as planned. **Complete**
* The internal Employee Assistance Programme was retendered, and subsequently relaunched with a new provider and improved staff offering. **Complete**
* A new Spiritual Care Strategy was launched to support patients and staff across NHS Golden Jubilee. **Complete**
* Initially accelerated during the pandemic, NHS Golden Jubilee has embraced flexible hybrid working practices to support staff. **Ongoing**
* Analysis of stress and staff absence data is being undertaken to inform future health and wellbeing interventions and strategy. **Ongoing**

**Train**

The following progress has been made under the ‘Train’ pillar:

* An on-boarding and induction programme has been developed to support new staff joining the organisation as part of Phase 2 expansion. **Complete**
* Statutory and other mandatory training throughout NHS Golden Jubilee has been reviewed and refreshed. **Complete**
* Leaders and managers, both existing and aspiring, are supported through in-house, regional and national development opportunities. NHS Golden Jubilee participates in the national NHS Scotland Graduate Management Training Scheme. **Ongoing**
* NHS Golden Jubilee continues to seek opportunities to establish relationships (formal and informal) with colleges and universities locally and nationally. **Ongoing**
* Collaborating with the NHS Scotland Academy Youth Academy to develop pathways in to health care roles that will benefit NHS Golden Jubilee services. **Ongoing**
* Developing and delivering an organisational development culture programme to support Phase 2 expansion. **Ongoing**

**Nurture**

The following progress has been made under the ‘Nurture’ pillar:

* A short-life working group has been established to specifically focus on intelligence from Attraction and Exit Interviews to allow better understanding of the reasons why staff join / leave NHS Golden Jubilee. **Ongoing**
* The Board’s new three year Spiritual Care Strategy launched in January 2023. The strategy ensures that spiritual care is an integral part of the whole person centred approach delivered by NHS Golden Jubilee’s teams for patients, staff and volunteers. **Complete**
* The Board’s new Volunteer Strategy was launched in February 2023. This three year strategy focusses on supporting volunteers, staff and patients. **Complete**
* Year one actions associated with the Board’s Health and Wellbeing Strategy were delivered as planned. **Complete**
* To date over 100 staff members are now trained in mental health first aid, with further training planned during 2023/24. **Ongoing**
* Staff mindfulness and mental wellbeing sessions are now delivered on an ongoing basis. **Ongoing**
* Personal resilience training is now routinely offered as part of the Board’s learning and development offering. **Ongoing**
* Proposals are being developed to enhance in-house short and longer-term psychological support services for staff. **Ongoing**
* A Staff Pantry has been launched by Trade Union colleagues to support staff members experiencing challenging personal circumstances including food poverty or financial difficulties. **Complete (launch). Ongoing, supported by wider organisation**
* Core management training is in place covering core managerial competencies. **Ongoing**
* Healthy eating options are provided on-site to staff. Staff are also provided with information on physical health, and ways in which they can improve this through physical activities and fitness challenges. This work is supported by NHS Golden Jubilee’s in-house Occupational Health Physiotherapy Team. Staff can access discounted membership rates for the Golden Jubilee Conference Hotel Wellbeing Centre, and corporate membership of West Dunbartonshire Leisure Trust health facilities. **Ongoing**
* An Active Travel Group has been established, leading on efforts to develop and promote sustainable active travel options for staff, patients and visitors to NHS Golden Jubilee. This includes the launch of a staff travel promotion in partnership with First Bus in July 2023. **Ongoing**
* A further review of staff benefits and their promotion amongst the workforce will be undertaken during summer 2023. **Ongoing**
* iMatter continues to be promoted as the main means of gathering staff perception and engagement data. There were improvements in employee engagement scores during 2022, and in staff governance and line management support scores. The 2023 iMatter process will be delivered later in 2023. **Ongoing**

Workforce planning is an iterative process, with actions continually reviewed in line with organisational need**.**

Section D: Value Based Health and Care

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| Please outline work underway with your local Realistic Medicine Clinical Lead to deliver local RM Plans. |

Value based health and care will be delivered by embedding Realistic Medicine practice across core NHS Golden Jubilee specialities. Scottish Government has confirmed funding for 2023/24 to develop and deliver NHS Golden Jubilee’s local Realistic Plan. Dedicated resource is being identified and where necessary recruited to deliver the Realistic Medicine programme. This will include revisiting and updating the Board’s Realistic Medicine work plan for 2023/24.

Workstreams and improvement programmes being delivered within the Board have Realistic Medicine embedded at the heart of discussions. Specific priorities for 2023/24 include:

* Further development and delivery of Board Realistic Medicine plans during 2023/2024
* An organisational focus on embedding Realistic Medicine and Value Based Health and Care principles in practice within relevant core clinical specialties
* Continuing to build awareness, knowledge and competence of Realistic Medicine amongst the workforce. Ongoing awareness and training sessions are being carried out within a broad range of clinical groups and professions, with the NHS Education for Scotland Shared Decision Making module promoted to staff
* Working with Finance colleagues to understand the true cost of procedures from start to finish, and with clinicians to understand high / low value and cost procedures with a focus on eliminating wasteful steps in our clinical processes
* Standardise our pathways and processes, including ‘one stop’ clinics and Day of Admission surgery
* Anticipatory care planning / Treatment Escalation planning – several services highlighted reviews of patient information as underway or planned. Consistency in approach to patient information will support patients with accessibility and to provide assurance in quality. Patient appointment letters will be equipped with QR Codes, which will have BRAN questions (benefits, risks, alternatives and do nothing) integrated within them and they will be tailored to each individual condition. See also Section F: Improvement Programmes
* BRAN questions in clinics
* Provision of high quality patient education i.e. Joint school, videos, leaflets, consent process
* Minimising variation and delivering effective prescribing models
* Reduce un-necessary interventions and time in hospital, including maximising the use of virtual consultations where appropriate

Shared Decision Making will be evaluated and strengthened during 2023/24 to underpin the delivery of value based care. This includes the use of patient reported outcome measures.

Section E: Integration

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| Please demonstrate how the ADP has been developed with partner Integration Authorities. |

This section is not applicable to NHS Golden Jubilee.

Section F: Improvement Programmes

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| Please summarise improvement programmes that are underway, along with the expected impact and benefits of this activity. |

NHS Golden Jubilee Improvement activity is aligned to the Quality, Performance and Financial Improvement workstream of the Sustainability and Value programme. This workstream is required to ensure ongoing delivery against the priorities set by the Operational Performance Delivery Board, including planned care targets. It will also support the routine annual work within services to plan and deliver efficiency improvement plans.

Improvement priorities identified within NHS Golden Jubilee for 2023/24 include:

* Enhanced Recovery After Surgery (ERAS) – expected to increase the number of patients benefitting from ERAS as measured by a length of stay of three days or less
* Theatre productivity – increase percentage of four joint lists in orthopaedic surgery
* Outpatient productivity – redesign of the Scottish Adult Congenital Cardiac service (SACCs) outpatient clinic flow
* Realistic Medicine – introduction of Treatment Escalation Plans in Coronary Care Unit. The implementation of a Treatment Escalation Plan (TEP) within interventional cardiology is to aid clinical decision - making for this patient cohort and support the safe, effective and person centred management of the deteriorating patient. The improvement aim is that by end July 2023, 90% of all relevant patients within Interventional Cardiology requiring a TEP will have a valid and reviewed TEP in place. This improvement project aligns to Realistic Medicine aims and objectives – particularly shared decision making, reducing harm and waste and managing risks better. The aims of this project are also aligned with the national deteriorating patient work stream led by Healthcare Improvement Scotland.

A Quality Improvement work plan for 2023 to 2026 has been developed. This will support the testing and implementation of enhanced Quality Improvement (QI) infrastructure and capacity within NHS Golden Jubilee, both within clinical and non-clinical settings. This includes close alignment with patient safety and clinical quality management responsibilities undertaken by NHS Golden Jubilee’s Risk and Clinical Governance function. QI work plan objectives for 2023/24 include:

* Implementing an internal NHS Golden Jubilee QI education curriculum, open to staff throughout the organisation ranging from those with limited or no prior experience through to more advanced QI practitioners
* Establishing a central register of QI projects and interventions, with particular focus on aligning these to the QI education curriculum
* Establishing an internal QI network, sharing knowledge and experience while building supportive, collaborative peer connections amongst QI practitioners
* Developing an NHS Golden Jubilee Quality Management System (QMS) and toolkit, including tools for measuring the case for change and efficacy of QI interventions
* Organisationally, raising the profile of QI including visibility of the wide range of QI activity taking place within NHS Golden Jubilee
* Increasing levels of awareness of QI amongst staff, with a baseline aim for 10% of NHS Golden Jubilee staff reporting feeling ‘informed about’ and / or ‘involved in QI’ by the end of 2023/23

1. [Cancer waiting times - 1 October to 31 December 2022 - Cancer waiting times - Publications - Public Health Scotland](https://publichealthscotland.scot/publications/cancer-waiting-times/cancer-waiting-times-1-october-to-31-december-2022/) [↑](#footnote-ref-2)