



NHS GRAMPIAN ANNUAL REVIEW 2023

23 November 2023 by Teams

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PEOPLE
Joining with people to flourish.

PLACES
Using our places to proactively seek the best health and wellbeing and fairness for all.

PATHWAYS
Enabling a partnership approach to our pathways of care.

Objectives for 3-Year Delivery Plan (2023/26)



PEOPLE

1. Strengthen colleague and citizen engagement to improve health



PLACES

2. Create the conditions for sustainable change



PATHWAYS

3. Improve preventative and timely access to care

Successes – partnership is critical



PEOPLE

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PATHWAYS

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NHS Grampian Anti-Racism Plan 2023-2028

Working with our Staff Equalities Network, launched what is believed to be the first Anti-Racism Plan in Scottish health boards

Embedding Population Health and whole system working

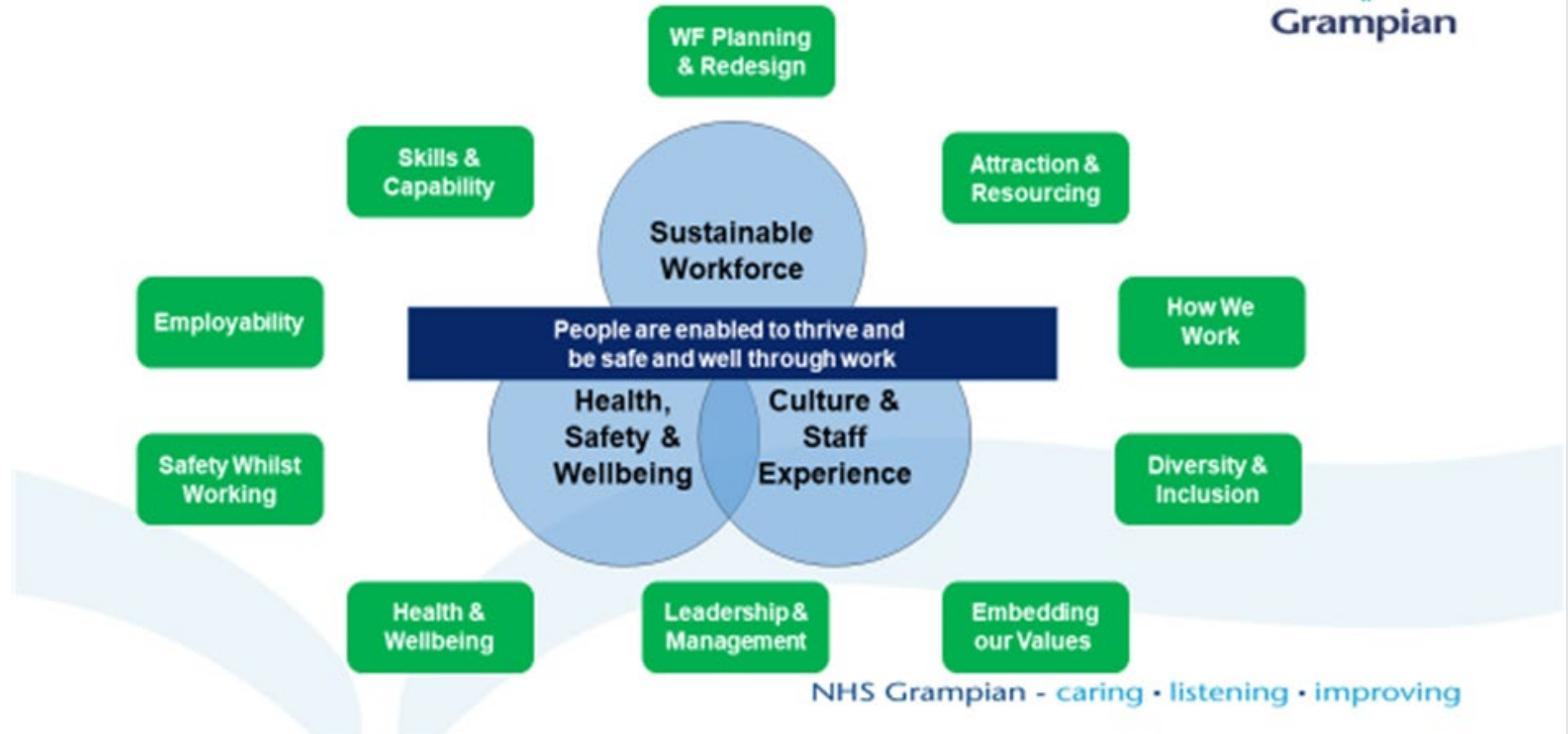
Working across the whole system to have flourishing communities living fulfilled lives

Harnessing the potential of AI

Launched Rapid Lung Cancer Diagnostic Pathway using Annalise CXR technology to speed up the prioritisation and assessment of chest x-rays

Our greatest asset - colleagues

Colleagues & Culture - Areas of focus





Four Pillars approach developed by The King's Fund

- Cost of Living
- Whole systems approach to obesity
- Health through the lens of Place
- Tackling stigma in the North East
- Data reporting & analytics – inequalities
- Public Health workforce development
- Using learning to improve outcomes

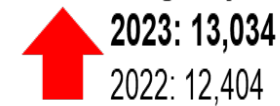
Access to care – Key Performance Metrics

Emergency Department:

4 hour performance

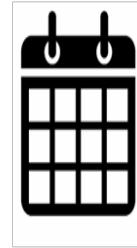
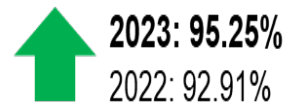


Total Emergency Admissions



Cancer 32 day standard:

Decision to treat to first treatment



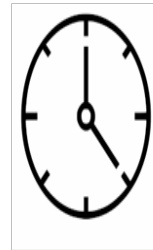
Cancer 62 day standard:

Referral to first treatment



Delayed Discharges*:

Standard and code 9 delays

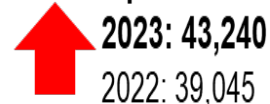


Child & Adolescent Mental Health Services

18 week standard



New outpatient waiting list size*



TTG inpatient waiting list*



Progress achieving targets hampered by

- **Continued high demand** on the system – partly backlog caused by the pandemic but also changing health profile of the population
- the **gap in capacity** to meet current demand
- An **aging population** living longer with multiple conditions
- **Cost of living crisis** increasing poverty, widening health inequalities

A NATIONAL CHALLENGE

General Practice faces a sustainability challenge across Scotland; it is felt particularly in Grampian with long standing recruitment and retention issues

The local issues:

- 90% of patients are seen in General Practice, which has 7% of the NHS funding
- An aging population means more of us are living with chronic disease conditions which need to be managed in General Practice, increasing their workload.
- Practice numbers in Grampian have declined from 84 in 2007 to 69 in 2023 (~18% reduction)
- Number of GPs in Scotland has increased by 6.9% since 2012, but declined by 5.3% in Grampian
- Average number of patients per GP in Grampian increased by ~10% since 2012
- Challenges recruiting to multi-disciplinary teams (MDT) in Grampian General Practice

What we are doing about it:

The three Health & Social Care Partnerships are working with patients, GPs and practice staff, members, Local Medical Committee/GP Sub Committee and third sector to produce **a new vision for General Practice in Grampian**

- Holding a series of workshops to develop the vision, 250 attendances so far
- Vision will be available in draft early 2024 with further engagement to follow on the objectives to deliver it

Access to care – Unscheduled care

- NHS Grampian has lowest attendance at Emergency Departments of all Scottish mainland health boards -323 attendances per 100,000 population (Scottish rate 462)
- Challenges improving the 4 hour performance trend – recent Board performance is 61% as at end September 2023
- Working in partnership with Scottish Ambulance Service and specialties throughout ARI to introduce Safe Transfer of Care – no ambulance will wait more than 30 minutes for the patient to be admitted for assessment

What are we doing about it?

Comprehensive improvement plans in place to achieve 70% ED 4 hour performance target by end of 2024 and remove ambulance stacking:

- introduced **Rapid Assessment and Care**, now seeing 500+ patients a month
- Introduced **Call before You Convey**, providing advice to paramedics and diverting cases away from ED
- the **ARI Flow Navigation Centre (FNC)** receives over 30 calls per day, + 350% since Sept 22, 70% resulting in an alternate outcome to ED
- Expansion of **Hospital@Home** service: Aberdeen City increasing from 37 beds to **55 beds** by end March 2024 and plans for expansion in Aberdeenshire and Moray to provide acute care closer to home, supporting both early discharge from hospital and alternatives to admission
- Increased number of cardiac catheter lab interventions and use of discharge lounge has freed up capacity within ARI

Access to care – Planned care

Critical challenges:

- Highest clinical priority urgent patients and cancer patients use nearly all the ARI theatre capacity
- Long waiting lists in urology, dermatology, GP Minor Surgery, Gynaecology and ENT
- More patients referred as 'urgent' removes capacity to deal with other patients – examining the reasons for this increase in urgent referrals
- No evidence that patients enduring long waits have higher attendances at ED but they are increasing the demand in Primary Care
- No additional capacity available nationally to assist in reducing these waiting lists for treatment
- Insufficient diagnostic capacity
- Infrastructure challenges at ARI and DGH
- Funding not available to source additional external capacity

What are we doing about it?

- **Maximising efficiency of current capacity** - theatre utilisation is 90%, above Scottish average
- Increase in pre-operative assessment
- Introduced a **Waiting Well service** –supported 10,377 patients in wellbeing conversations to September 2023, 85% of patients thought the information they received was useful or might be useful in the future and 75% of patients gained reassurance from the call
- Project to introduce an **MRI scanner at Dr Gray's Hospital** – waiting confirmation of funding from SG
- Project to **recommission short stay theatres at ARI** – additional capacity from early 2024 for routine cases
- Using **regional and national capacity** for routine cases– Stracathro, Golden Jubilee National Hospital
- To improve cancer 62 day performance:
 - Use Golden Jubilee Hospital for colorectal surgery
 - Use Forth Valley for breast patients
 - AI for lung cancer diagnosis has reduced diagnostic time

Additional capacity required

What we have learned:

- Bed occupancy, delayed discharge and corridor care data shows that it is essential to provide sustainable additional capacity in ARI starting winter 23/24
- Permanent, staffed beds will improve flow, reduce corridor care and ambulance stacking, and provide certainty of capacity for elective care

Immediate intervention:

ARI Bed Base review – 32 additional beds to be introduced early December 2023

Consider in medium and long term?

Examine options for separation of planned complex specialist services, including cancer therapies, from high volume low complexity planned care and unscheduled care capacity – not possible in the short term for workforce and infrastructure reasons but evidence from other systems shows that this provides certainty of capacity for planned care

Dr Gray's Strategic Intent

People	Place	Pathways
<ul style="list-style-type: none"> Staff being enabled to fulfil their potential Centre for Excellence for Remote and Rural health Test bed for interdisciplinary/ multi-disciplinary models of care Centre for Excellence for teaching undergraduate students and development post-graduate trainees 	<ul style="list-style-type: none"> An anchor organisation for Elgin and Moray Expert provision for local population Delivery of service for Grampian and North regions Moray Portfolio as an integrated system Utilisation of technology and innovation 	<ul style="list-style-type: none"> Networked with Aberdeen and Inverness Delivery of general unscheduled services, expert in assessment, diagnosis and stabilising and either (1) onward transfer, or (2) local treatment Residual capacity to deliver planned care services in Dr Gray's and in network Separate planned and unplanned care

Integrated Maternity Services for the North of Scotland

2023		2024		2025		2026	
Jan-Jun	Jul-Dec	Jan-Jun	Jul-Dec	Jan-Jun	Jul-Dec	Jan-Jun	Jul-Dec
Intrapartum transfers of time critical Moray women to Raigmore in place	Enhanced complex antenatal care; consultant led triage and day assessment	Raigmore Hospital refurbishment complete		Planned Caesarean Sections at DGH			Consultant-led obstetric births in DGH
				Moray women can choose Raigmore for consultant led birth			

Financial performance

In 2022/23 NHS Grampian:

- **achieved our three financial targets** (breaking even against revenue budget, fully using our capital funding, operating within the cash limit)
- **spent £1.34 billion** on providing health services to the population of Grampian and the North of Scotland
 - this included £41 million dealing with the impact of the Covid pandemic.
- invested **£105 million** in new buildings, medical equipment, IT systems and backlog maintenance.
- the Board's Accounts received an **unqualified audit opinion**

Infrastructure – Baird and ANCHOR project

The **ANCHOR Centre** will bring together

- Oncology day-patients and out-patients
- Haematology day-patients and out-patients
- Pharmacy
- Research and Teaching Facilities
- Non-Clinical Support Services
- Radiotherapy

The **Baird Family Hospital** includes

- Maternity Services including a Community Maternity Unit
- Gynaecology Services
- Breast Services
- Neonatology Services
- Aberdeen Centre for Reproductive Medicine
- Radiology Services
- Operating Theatres
- Research and Teaching Facilities
- Non-Clinical Support Services



Infrastructure challenges

39% of properties over 50 years old
57% over 30 years old

High risk infrastructure with frequent failures = rate limiting factor to achieving performance targets and eliminating backlog

25% of properties don't meet modern standards for healthcare buildings

'Must do' equipment replacement
2023/23 costs are £9m
5 year costs estimated £76m

AREA PARTNERSHIP FORUM

- The APF is the main forum for the conduct of employee relations
- Works with the Occupational Health, Safety and Wellbeing Committee
- Feeds into the Staff Governance Committee and the Board
- Co-Chaired by the Deputy Chief Executive and Employee Director



Looking back through 2022 - 2023 the key issues the partnership dealt with were:

- Moving out of COVID arrangements
- Impact of derogations on staff and patients
- Industrial Action planning and preparation
- Joint Working Group with ACF of Staff Breaks, Rest and Recovery
- Sub-groups:
 - Terms and Conditions
 - Policies
 - Development
 - Endowment



Looking forward:

- Continuing to work together
- Seek and implement solutions to various challenges
- Support the work to improve the staff experience as part of Plan For The Future

What is the Area Clinical Forum?

- ACF is an advisory committee representing all clinical groups with patient representatives.
- The Chair of ACF is also appointed to the NHS Grampian Board as a non-executive member
- Reciprocal dialogue with the Chief Executive Team to provide support and advice on service delivery and the implementation of change
- It identifies opportunities for improving services and the wellbeing of the workforce.

2022/23 key issues:

- 'Plan for the Future' - ACF members were fully briefed and updated throughout the year.
- ARI Bed Base review
- Mandatory and statutory learning
- Whistle Blowing
- Sustainable Healthcare

Current and recurring challenges

- Staff recruitment and retention
- Service delivery in a challenging financial envelope
- Staff wellbeing in the face of considerable operational pressures
- Aging infrastructure leading to challenging workplaces
- Encouraging staff to contribute to committee structures in an already busy workload

Looking forward:

- Continue building on engagement with Chief Executive Team and NHS Grampian Board
- Engaging with projects including Plan for the Future delivery and Primary Care Vision work
- Strategic vision of what healthcare will look like in the future
- Active involvement of ACF in the Digital Strategy for healthcare delivery
- Updating the terms of reference for its constituent committees and encouraging a diverse membership that is representative of all service providers and users
- Promoting a culture of positivity while working in Grampian, recognising the challenges but embracing the positive impacts our colleagues provide for our citizens.

Question time