Delivering care through collaboration

NHS Golden Jubilee

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Chair: Susan Douglas-Scott CBE Chief Executive: Gordon James

Gillian Martin MSP Convenor Health, Social care and Sport Committee Scottish Parliament Email: HSCS.committee@Parliament.Scot

Dear Gillian.

Thank you for the opportunity to meet the Committee recently and provide evidence about NHS Golden Jubilee.

In response to your 29 March 2023 letter requesting further information, I have detailed our responses below in the order of the questions asked.

Financial sustainability

Is further financial support required to address increased and increasing costs or is there a need to transform the way in which services are delivered? Where are the greatest challenges?

The overall NHS funding landscape is obviously challenging within the current environment. While we recognise further investment within Health and Social Care budgets for 2023/24 there are significant cost challenges/pressures resulting from demand, cost of supplies, energy, general inflation and pay costs.

NHS Golden Jubilee is working towards achieving the 3% efficiency target for 2023/24 based on a local Sustainability and Value Programme linked to the national work.

Working with Scottish Government and NHS colleagues, we need to review the funding associated with Service Level Agreements and commissioned services (e.g. heart transplantation) to ensure future demand is appropriately resourced.

What difference has 3-year financial planning made to securing financial sustainability? What further support could the Scottish Government provide to support medium-term financial planning?

The 3-year financial planning cycle has allowed us to better plan our finances linked to our activity projections. It also enables us to look at efficiency savings projects over a longer period. However, we recognise that this 3-year planning period is extremely challenging and a number of the assumptions used are subject to change and, as such, we will continue to update and refine our forward financial plans.





Performance

In your own experience, to what extent do the performance standards used to monitor NHS boards drive service delivery at a management level and on the frontline?

Performance standards, whether they are Local Delivery Plan/Annual Delivery Plan standards or relating to newer waiting times or elective care standards, are built into Board Performance frameworks and, as such, are a primary focus for management teams. On the frontline, there will be understanding of the target areas, but a keener focus on direct care delivery.

A review of performance targets and measures across NHS Scotland is planned by Scottish Government for later in 2023/24, and this would be welcomed by Boards to simplify reporting frameworks. It is also helpful that, in addition to our Annual Delivery Plan, we have been asked to produce a medium term plan linked to our 3-year financial plan.

Do you have concerns that these standards can distort board priorities in an unhelpful way?

Prior to the pandemic, management of waiting times was also balanced against clinical need and priority, and this consideration needs to continue.

It is important that focus is applied to reduce long waiting patients, not just to reduce the actual time waiting but also to combat the associated implications and potential harms of waiting, such as inability to work, conditions linked with inactivity and any impacts on patient mental health.

However, it is also important to ensure that patients with a greater clinical need or level of impairment are not disadvantaged by a focus only on length of wait.

Are there any standards in particular that Golden Jubilee Hospital would prioritise for improvement and any you would deprioritise in the current climate?

As part of our National Treatment Centre development, NHS Golden Jubilee will place a high priority on elective care recovery, whilst retaining clinical quality outcomes.

It is recognised that the existing sickness absence standard of 4% is meaningful in working towards sustainable services, however a broader focus on employee health and wellbeing and retention is more likely to support service delivery.

Maximising the use of the NHS Scotland Academy will also support sustainable services. This will be through new workforce models and offering different and exciting career access and pathways for those who want to have a career within NHS Scotland.

COVID Recovery

To what extent do you feel your board has been adequately consulted about delivery of the NHS Recovery plan?

NHS Golden Jubilee discussed the content of the recovery plan with NHS Boards and Scottish Government colleagues to ensure we could provide as much support as possible to patients across Scotland. This was mainly around high demand planned care services such as orthopaedics, cataract surgery, diagnostic imaging and scopes.

The national Centre for Sustainable Delivery (CfSD) has also been set up specifically to support the rapid rollout of new techniques, innovations and clinically safe, fast and efficient pathways for Scotland's patients.

In your view, are the increases in activity levels proposed in the recovery plan achievable?

Recovery activity levels are mutually agreed by our NHS Board and Scottish Government, which while challenging, we will feel are achievable.

In 2022/23, NHS Golden Jubilee carried out 30% of all Scotland's cataracts and hip and knee replacements and have expanded our support for Endoscopy services by 24%, bringing forward activity before the opening of our Phase 2 Expansion. We delivered 7,000 scopes in 2022/23 and are scheduled to carry out 9,000 in 2023/24.

Workforce availability and employee retention remains a key challenge in achieving activity levels. Projected activity levels can only be achieved if NHS Boards are able to attract, train and retain sufficient staff numbers.

Is there anything about the recovery plan that you would now wish to change in light of current circumstances?

The financial challenges facing NHS Boards could limit investment in and delivery of, recovery. Transformative change to deliver recovery at pace can sometimes require investment to progress, and this may not be achievable as anticipated.

The NHS Scotland Academy is already delivering accelerated workforce development in a number of priority roles, and is developing further programmes and work streams to address additional areas of need. However, workforce (as previously mentioned) remains a key challenge in the delivery of the aspirations of the Recovery Plan.

Progress of the recovery plan

Are there any particular areas of the recovery plan you would highlight where good progress has been made and why do they think this is?

Since launching in June 2020, the innovative Scottish National Radiology Reporting Service (SNRRS) has supported health boards across the country: reporting over 200,000 exams, providing faster diagnosis for patients and saving NHS Scotland more than £1.5 million over the last 18 months. Providing faster diagnosis for patients means health boards can determine the right course of treatment as early as possible which could lead to significantly improved outcomes.

The national Centre for Sustainable Delivery (CfSD) has established key programmes to support boards to:

- deliver improvements in planned care;
- develop sustainable improvements in service delivery;
- reduce variation and support improved access to care;
- diagnose cancer earlier; and
- develop and deploy ambitious Once-for-Scotland, clinically led, environmentally sustainable initiatives that contribute towards NHS Scotland's net zero target.

The Accelerated National Innovation Adoption (ANIA) pathway has been designed to identify and support national adoption of high impact innovations at pace.

Which areas of the recovery plan do you think have made the least progress and what are the reasons behind this?

Multiple strands of the Recovery Plan rely on digitally enabled services. Financial and technological constraints, including ageing core digital infrastructure, risk both the pace and scale of digitally enabled innovation and change.

We would support an accelerated 'Once for Scotland' approach for digital reform. This will help us in our delivery of local digital and infrastructure solutions for patients and our staff, ensuring a sustainable system-wide service.

Staffing

What are the key factors influencing higher rates of turnover, sickness absence and high vacancy rates in certain professions in your board?

Our turnover of staff is 12.9% (on par with other NHS Boards) with most moving on to promoted or similar-level posts with other NHS boards. We are working on our attraction and retention strategy as well as promoting Retire and Return across NHS Golden Jubilee.

Our sickness absence rate is on average 5.5% with the main causes linked to mental health conditions. NHS Golden Jubilee has a 3-year Health and Wellbeing Strategy with a delivery plan that is monitored by our Partnership Forum and Staff Governance and Person Centred Committee. In addition to our on-site Occupational Health Service, we have information and services focusing on:

- physical, mental, financial, spiritual and social health;
- where to get help in a crisis;
- access to an Employee Assistance Programme (counselling) available 24 hours a day, 7 days a week, 365 days a year; and
- Mental Health First Aiders.

We are looking to open a Health and Wellbeing Hub to provide additional support to staff and have implemented Schwartz Rounds and Mindfulness sessions.

Similar to employers across the NHS, we have challenges to recruit certain specialist roles, such as health care scientists, nursing and specialist clinical roles. Workforce remains a key priority to support our services, as we need to recruit 363 whole time equivalent (WTE) in a range of disciplines over the next year for our expansion. So far we have recruited 120 WTE towards this in a range of clinical and non-clinical roles.

What can be done to address the immediate workforce challenges your board faces?

Nursing is the most challenging area to recruit to and we have a number of initiatives underway such as:

- International recruitment;
- Flexible working:
- Retire to Return:
- Redesign of roles;
- Training porgrammes offered by the NHS Scotland Academy;

NHS Golden Jubilee is the brand name for the NHS National Waiting Times Centre

- Targeting university and college entrants; and
- A range of other employability programmes.

To what extent are you confident that your workforce strategy will address the challenges your board currently faces and what do you consider to be a realistic timeframe for this?

NHS Golden Jubilee has a Board-approved 3 year Workforce Plan that is being reviewed in 2023/24 to ensure we have the key skills and staff to deliver now and in the future.

Our Workforce Strategy has a set of short, medium, and long-term plans. Our recruitment and retention strategy is more immediate but for certain roles we require a recruitment pipeline well in advance of vacancies.

NHS Golden Jubilee, through the NHS Scotland Academy, is also committed to the redesign of roles (e.g. nurse endoscopists) and new ways of working as well as having more access points and career pathways for healthcare roles.

Culture and governance

In the absence of the national Dignity at Work surveys, how does your board monitor bullying and harassment in its workforce? Can you share overall trends in your board's area?

NHS Golden Jubilee is committed to a set of shared values and monitors all workforce issues through our Staff Governance Group and our Staff Governance and Person Centred Committee. In the last 12 months, we have had 6 reports of bullying and harassment across different areas within NHS Golden Jubilee with no trends identified.

One of our Non-Executive Board members is our Whistleblowing Champion and we have launched a campaign to promote how whistleblowing works, while also promoting how staff can raise and feedback concerns though management, Staff Side representatives and our Confidential Contacts scheme.

The iMatter yearly staff survey is showing that NHS Golden Jubilee has a higher than national average response rate and employee engagement with 130 out of 175 teams identified as 'Green: Strive and Celebrate'.

I sincerely hope that our response provides enough information for the Committee. I completely appreciate the many demands on your time but I want to extend an invitation to Committee members to visit us and see first-hand the many ways we are supporting NHS Scotland.

Please let me know if you need further details or wish to visit us at NHS Golden Jubilee.

Thank you all for your interest in our organisation.

Kind regards,

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Gordon James Chief Executive NHS Golden Jubilee

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