

## **Efficiency Statement**

NHS Grampian achieved its three key financial targets for the year 2013/14

- ✓ Operated successfully within Revenue Resource Limit
- ✓ Operated successfully within Capital Resource Limit
- ✓ Met Cash Requirement

Successful achievement of these targets was made possible through the delivery of efficiency savings totaling £22.4 million during the course of 2013/14.

These savings were delivered through a range of efficiency initiatives aimed at eliminating waste, increasing productivity and delivering best value from service redesign while maintaining and enhancing the quality of front line clinical service delivery.

NHS Grampian as a responsible steward of public resources consistently strives to deliver increased value through improvements in the economy, efficiency and effectiveness of its functions. Continuous Service Improvement (CSI) and best value is firmly embedded within the culture throughout NHS Grampian.

Preparing for health and social care integration was a major area of work during 2013/14. The Board worked closely with the three local authorities in the Grampian area to create Transitional Leadership Groups which started to develop the arrangements for integration in Moray, Aberdeenshire and Aberdeen City. It is clear from the work of these groups that the integration agenda will have a significant impact on the role of NHS Grampian and result in the improvement of health and social care across the area.

During 2013/14 the Board provided a focus on the development of unscheduled care which resulted in the formulation and implementation of an unscheduled care programme of work. The programme included the creation of a clinical decision support service which provides on demand advice to clinicians at the first point of contact with patients who require emergency or urgent treatment. The initial outcomes from the service are positive and this has given the Board encouragement to develop the service further and extend the concept of clinical decision support across unscheduled and planned care.

2013/14 also saw the start of a process aimed at transforming the approach to primary care. Primary care continues to respond to pressures arising from demographic change, changes in clinical practice and increased patient expectations prompting the consideration of an approach which will strengthen the multidisciplinary team approach and seek greater involvement of patients and the population as a whole in taking responsibility for the improvement of health and the delivery of local healthcare.