grampian clinical strategy
2016 to 2021

summary version
“We’ve been wrong about what our job is in medicine. We think our job is to ensure health and survival. But really it is larger than that. It is to enable well-being. And well-being is about the reasons one wishes to be alive. Those reasons matter not just at the end of life, or when debility comes, but all along the way. Whenever serious sickness or injury strikes and your body or mind breaks down, the vital questions are the same: What is your understanding of the situation and its potential outcomes? What are your fears and what are your hopes? What are the trade-offs you are willing to make and not willing to make? And what is the course of action that best serves this understanding?”

Atul Gawande, Being Mortal: Medicine and What Matters in the End
This strategy is not about individual services or population groups. It is about how we enable staff to work together with partners, individuals and communities to deliver the changes required to deliver safe and sustainable services which ensure the best possible patient experience and health outcomes. This strategy is consistent with the principles and direction developed as part of the Healthfit approach.
Purpose and aims

Our population is growing and ageing. Even the most conservative projections of future healthcare needs in the next 20 years highlight the importance of strategic and systematic change to meet these needs. It is important we have a clear strategy to support the changes required to continue to deliver improved health and clinical outcomes for the population of the North East and North of Scotland.

This document is a summary of the Grampian Clinical Strategy for 2016 to 2021. For the full version of the Clinical Strategy, go to www.nhsgrampian.org/clinicalstrategy

This Clinical Strategy is a shared strategic plan, focusing on clinically related activities for the next five years and takes a population focus across the North East and North of Scotland. It clarifies our general approach and objectives to guide detailed implementation plans. It is focused on the added value to all clinical services and concentrates on collective endeavours and mutual interests, not ones which are the principal responsibility of one partner. A key feature of the strategy is to focus change in those areas, as advised by staff which will support them to make the changes individually, within their teams or with partners.

The aims of this strategy are to:

• Confirm the direction for clinical services over the next five years and beyond.
• Identify the objectives across the health system to improve patient outcomes.
• Confirm the change that is required to support the health system to work more effectively.
• Outline areas of shared benefit across the system.
We all face changes in managing our expectations and our changing role in the provision of good health – this applies to staff across the system, individuals using services and wider society.
Partnership working and the changing role of NHS Grampian

Since 2000, NHS Grampian has been responsible for planning, commissioning and delivering all NHS services, and has overall responsibility for the health of our population. The formal delegation of a significant proportion of services to Integration Joint Boards of the new Health and Social Care Partnerships (HSCPs), from April 2016, means that over 40% of the NHS budget transfers to these new bodies. This changes the nature of organisational roles, responsibilities and governance in managing health and health services.

The new HSCPs in Moray, Aberdeenshire and Aberdeen City bring together the NHS and local authority social care services for adults with the aim of integrating services around the needs of individuals and communities. The emphasis is on enabling people and patients to live independent lives as much as possible and to coordinate care between hospital, community and home. In addition to community and primary care services, the Integration Joint Boards will be responsible for the planning of six acute hospital services which focus mainly on unscheduled care, i.e. emergency treatment and care provided in emergency departments, general medicine, geriatric medicine, respiratory medicine, rehabilitation medicine and palliative care.

The delegation of the planning and delivery of services to the HSCPs is a major change. However, NHS Grampian continues to be accountable for the clinical governance of all health services. It is also a major provider of acute and tertiary services and continues to employ over 14,000 staff.

NHS Grampian is a large organisation in the North East of Scotland and has a responsibility to maximise community benefit in what it does. There will be a need to increase effort in community planning and empowering communities to develop local solutions for good health and wellbeing, and in the contribution towards overall regional economic wealth and development.

Collaborative working with the third sector in the planning and delivery of improvements at service and strategic level will be essential in maximising delivery of person-centred care. Unpaid carers are now the largest provider of care but often the valuable role they provide can be detrimental to their health and wellbeing. It is essential that we involve unpaid carers in the development of care plans and work with partners to identify and respond to the specific needs of carers.
There will be a focus on collaborative working with other public sector organisations and business in relation to infrastructure developments, digital and health innovations and research and development. In addition to this, NHS Grampian will continue to have a role in delivering acute services across the area. A specific plan for the delivery of acute services will be prepared which will be consistent with the Grampian Clinical Strategy and partnership plans.

Acute services are delivered predominantly within the hospital setting, however, there are increasingly more elements of care being delivered locally in collaboration with primary and community care. These services are provided across the North East and to the populations of Orkney and Shetland.

Tertiary, highly specialist care is predominantly delivered in Aberdeen, situated on one of the biggest health campuses in Europe and delivered to the North of Scotland population. A number of these specialist areas, working with university and other partners have led the way on advances in diagnostics and treatment through research, technology and robotics which has revolutionised clinical care locally and elsewhere. Aberdeen also provides highly specialist services to populations across Scotland and beyond, including the Oil and Gas Sector.

The improvement of acute and tertiary services requires successful partnerships with the NHS Boards in Tayside, Highland, Orkney, Shetland and the Western Isles. The need to extend service delivery networks to manage planned care capacity pressures across the North of Scotland is well understood and NHS Grampian is already an active partner in enabling this to happen.

It is essential that NHS Grampian works in collaboration with academic partners to provide the right educational programmes to meet the future needs across the North East and North of Scotland. An important role for NHS Grampian is to anticipate future needs across the North East and North of Scotland which tackle current workforce supply issues, and which allow for flexibility as new service delivery models emerge.
Our approach

We have structured our Clinical Strategy into four overarching themes which are summarised below. These themes are consistent with the strategies of the three Health and Social Care Partnerships. They also span primary and acute hospital care and relate to physical and mental health for children and adults. Although these themes are described separately, they are highly connected, where progress in one has an influence on the others.

Prevention
Primary prevention activities can stop people becoming ill and reduce the need to use clinical services. Secondary prevention interventions help to identify disease at the earliest stage to begin prompt treatment and minimise future health problems.

Self-management
Individuals, families and communities play a significant role in managing their own health conditions. A partnership of care contributes to better outcomes and more effective use of health services.

Planned care
Good organisation, communication and collaboration in the delivery of primary care and specialist services help to improve patient outcomes and avoid emergency situations.

Unscheduled care
Multiple emergency care providers connected through technology and information sharing will help to provide seamless care for patients. Effective working should span the spectrum of emergency care from minor injuries to major trauma.

How you can contribute
In order to extend and increase the pace of change towards our Healthfit vision, we need all staff to be thinking about the opportunities within their areas to:

• **Change the way we think about health need:**
  This relates to understanding what outcomes are important to patients when they need care. It also relates to activities which prevent, delay or alter the extent to which health services are required, such as supporting self-management and improving health literacy. Efforts here support the concept of ‘realistic medicine’, with the emphasis on personal wellbeing, appropriate use of health services and delivering true person-centred care.

• **Improve productivity, value and quality:**
  This includes activities which improve the process of caring to add value, maintain high quality and help more patients to be cared for and treated. Sustaining local and specialist services in Grampian and the North of Scotland will depend on us being efficient, productive and effective.

• **Incorporate flexibility in providing care:**
  This relates to efforts which extend our capacity for care and treatment. It includes working within specialist networks across the North of Scotland and the rest of the country to provide better access to treatment services. It also includes developing staff according to new models of care and extending the role of communities and the third sector, particularly in prevention and self-care. With the growing and ageing population, more flexibility will be needed in the way that planned care is delivered even with an increase in productivity.
Enabling transformation

Creating the right environment to make change is essential. During the consultation phase, staff, the public and partners told us what they felt would be the key areas of change to support staff to make the necessary improvements.

In supporting staff to deliver the strategy, we make the following commitments to:

- Support a confident, competent, motivated and healthy workforce, who are able to initiate improvements in services, and have a good work-life balance with support and opportunities available to look after their health and wellbeing.
- Support staff to improve and extend their skills, knowledge and opportunities, encouraging a workforce that can adapt to changes in practice as new models of care and practice emerge.
- Provide the means to enable networking, information sharing and collaboration across and beyond the usual boundaries. Provide the tools for people to do their job well, particularly access to Information Technology (IT) and clinical information.
- Ensure a productive workforce and teams, helping staff to work effectively and addressing performance issues responsively.
- Influence the creation of a modern digital environment with Local Authority and business partners for the North East Scotland health economy.
- Provide modern clinical facilities with cutting-edge technologies to advance clinical care delivery and make Grampian the place to work and live.

As a people organisation, our workforce plans aim to ensure that services have staff in the right numbers, with the right skills, values and behaviours to deliver high quality care. NHS Grampian depends on workforce planning and collaboration with academic partners to provide educational programmes. An important role for NHS Grampian is to anticipate future needs across the North East and North of Scotland which tackle current workforce supply issues, and which allow for flexibility as new service delivery models emerge.

A developing role of NHS Grampian is in creating an environment which stimulates innovation in the workplace. This is fundamentally about getting the best from our key resources - people, processes, and relationships. In an environment which is often under pressure, our aim is to encourage new ideas to be generated by staff and to support them in the best way possible to implement change. The full version of the Grampian Clinical Strategy provides further information on the factors key to enabling transformation.
Our ambition

Prevention
The NHS has a major contribution to make to the promotion of health and the prevention of disease across populations. Preventing poor health and premature death is better for people and, if delivered systematically, can reduce demand on healthcare services. It is cost effective, yet it is estimated that we spend only 4% of the NHS budget on prevention programmes.

People from deprived communities are more likely to suffer ill health and require greater use of clinical services. Tackling inequalities in health is fairer for society and will reduce avoidable demand for health services.

Our ambition for prevention within this Clinical Strategy is to:

• Implement primary prevention activities that have a direct benefit for clinical services, protect staff from ill health and create a positive environment for wellbeing (e.g. smoke-free health facilities, staff immunisation).

• Deliver systematically and at scale, secondary prevention activities that address inequalities in health and help to reduce further avoidable demand on health services (e.g. screening programmes, alcohol reduction interventions, tobacco cessation support, weight management programmes).

• Transform the healthcare environment to influence how people behave, seizing opportunities during capital investments to make all healthcare facilities designed and organised to create the right environment for change. Catering, open spaces, the availability of exercise opportunities and information points all help to enable patients, staff and visitors make healthy choices, even in our busy lives. Good places equal better health.

• Enable healthcare information about care and treatment to be obtained, understood and used to make appropriate and informed health decisions. This is important for patients and staff when understanding options, location of treatment, outcomes and risks.

Self-management
People with long-term conditions account for 50% of all GP appointments, 64% of all outpatient appointments and over 70% of inpatient days in hospital. This situation is likely to increase. Rather than just dealing with immediate health problems, we want to understand what individuals need to live the life of their choosing and help support them to achieve this.

Our ambition for self-management is that:

• Staff, partners and carers believe in the value of person-centred care and shared decision-making, and support individuals in their active involvement in being part of the solution.
• The organisation of services is adapted to a person’s multiple needs, rather than a person having to adapt to multiple systems.

• The wider resources in a person’s community are known and used as part of the health system (e.g. community groups, leisure facilities).

• Communities have access to modern digital infrastructure through investment opportunities created by the Scottish Government and the ‘City Deal’. The use of innovative approaches and technologies to support communication and self-care are pioneered in Grampian.

**Planned care**
Anticipating and responding to the requirements for clinical care helps to avoid emergency situations and leads to better outcomes for patients. Good communication with patients helps to establish realistic expectations, person-centred care and treatment.

The projected increases in the requirement for primary care and specialist care will place further pressure on these services for advice, diagnosis and treatment. Services will need to be provided differently if they are to be sustainable and meet the needs of the population.

The need to extend service networks to manage elective care capacity pressures across the North of Scotland is well understood and NHS Grampian will be an active partner in enabling this to happen.

Stakeholders believe that providing care locally is important, so we want to work efficiently and in collaboration with other providers to manage peaks and troughs in service need. The development of new elective care facilities will extend planned care capacity and provides an opportunity to transform our approach, in conjunction with partner Health Boards in the North of Scotland.

Our ambition for planned care is to:

• Provide care close to people’s homes, including diagnostics, treatments and wellbeing support.

• Tailor specialist treatment based on the realistic needs and goals of each person.

• Improve the efficiency and productivity of services whilst safeguarding quality of care and working conditions for staff.

• Sustain planned care services as part of a North East and North of Scotland network, being sensitive to our dispersed population, and securing sufficient capacity to improve faster access to care.

**Unscheduled care**
The demographic challenges we face suggest that unscheduled admissions will rise, even with the effective organisation of planned care, prevention and self-management. The health system in the North East of Scotland has coped well in keeping avoidable unscheduled admissions low compared to the rest of Scotland, but the challenge in maintaining this is considerable.
Aberdeen is to be one of four major trauma centres in Scotland, operating as a hub within the North of Scotland as part of a national network. The organisation and management of services is a key area for collaboration to ensure equitable and high standards across the northern region.

Our ambition for unscheduled care is to:

• Extend the provision of unscheduled care by developing new practitioner roles to support self-management and wellbeing, including developing the role of the third sector and local communities.

• Provide health and social care advice and practical decision support for patients, carers and staff in emergency situations, helping to prevent unnecessary hospital admissions.

• Provide the appropriate capacity in acute and community hospitals, care homes and in patients’ homes so that patients are cared for in the most appropriate place, without delays.

• Deliver major trauma services for the North East and North of Scotland population ensuring high quality of care and effective outcomes for patients and their families. As part of this development, ensure improvements created also translate into the enhancement of care and outcomes for critically-ill patients and their families across the North of Scotland.

Concluding remarks
This strategy is about enabling the good health and wellbeing of our staff, patients and people of the North East and North of Scotland. The underpinning belief is that this comes from being heard, being valued and being supported. We have spent 10 months finding out what is important to people and the changes that are necessary. Our ambition in developing and implementing this strategy is to equip our health system – staff, patients and communities to transform the way clinical care is understood and delivered.
Delivering the ambitions

In order to support the implementation of the strategy and deliver the ambitions set out within this, we will on an annual basis set out the commitments and priorities for implementation. This will be informed by staff, partners and the public. As part of confirming the commitments and priorities annually, we will also communicate the achievements made from the previous year’s commitments.

To read about the commitments and priorities for this year, please go to www.nhsgrampian.org/clinicalstrategy