



# healthfit

caring • listening • improving

## NHS Grampian's Health Plan 2010-2013

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# Proudly working together to deliver the best possible services for a healthier Grampian



NHS Grampian's Chief Executive, Richard Carey, talks about the current work of the organisation and its plans for the future

The three years that this Health Plan covers are likely to be the most challenging that NHS Grampian has ever experienced – but possibly the most exciting in terms of what will be achieved.

We are in many ways entering unknown territory. We know that our funding increases will be lower and we know that in 2010/2011 we will have to save £34 million. It is difficult to be specific about the financial position in future years, but we can be sure that the demands for funding will increase because of population changes, new drugs, new treatment and more advanced technology. This will require difficult decisions, hard choices and strong leadership, along with the support of the public. Safety and quality will remain core to what we do, but so will efficiency. We will be challenged to look carefully at our Healthfit plans and how we deliver services, the number of staff we employ, and our building programme.

At the same time, we have a great deal to look forward to. NHS Grampian will lead efforts locally to tackle the causes of ill-health and narrowing the gap between the healthiest and unhealthiest parts of the region. We will open our new Emergency Care Centre in the heart of the Foresterhill site in Aberdeen, providing the best emergency and unscheduled care, and replacing approximately 40% of the beds in Aberdeen Royal Infirmary. This will be the largest ever building project in Grampian and is one of NHS Scotland's flagship developments.

Whilst modernising our existing hospitals, we will drive forward our plans to shift care away from hospitals to community settings and patients' homes, with the right people delivering the right care in the right place. All our plans support NHS Scotland's health policies, as set out in Better Health, Better Care and our shared national ambition for achieving world leading quality in our healthcare services.

The very best of the NHS and the best of NHS Grampian is not about money. It's about how we work together and respect one another – patients, staff and the public – to care and improve health. It's about acknowledging how much has been achieved and how much potential there is for the future. Yes, budgets will be tight, yes, savings will be made, but we will not lose sight of our vision – proudly working together to deliver the best possible services for a healthier Grampian.

## Main Areas of Focus

The preparation of this Health Plan has involved the most comprehensive consultation we have undertaken so far. We asked members of the public, staff and organisations we work with what they thought our priorities should be for the next three years.

Based on what they told us, we will concentrate our efforts on five key areas of work. These are:

1. Improving health and reducing health inequalities
2. Involving patients, public, staff and partners
3. Delivering safe, effective and timely care in the right place
4. Developing the workforce and empowering staff
5. Improving efficiency, productivity and sustainability – getting the best from our resources

For more information, please see [www.nhsgrampian.org/healthfit](http://www.nhsgrampian.org/healthfit)

Our plans for delivering the best possible services for a healthier Grampian will focus on 'shifting the balance of care'. In other words, moving care to where it is more appropriate, and putting more emphasis on what happens outside hospitals.

Our aim is to ensure the care you receive is high quality which means, safe, with good clinical outcomes and improved patient experiences. This is what we mean by putting people at the centre of everything we do. At the same time, the services we provide, and the way in which we work, must be efficient and affordable. This does not mean one-off savings, but long term financial stability. The ambition throughout Scotland is for world leading quality, for everybody, all of the time.

Shifting the balance of care will mean ongoing changes to how we deliver health and healthcare services in the future. Key features of our strategy involve:

### Helping you to maintain good health, and to protect against and prevent ill-health

- Information and advice on health and wellbeing, and opportunities to prevent ill-health such as immunisation and screening, will be accessible and personalised to you, whatever your circumstances.
- GP practices and community staff will have a crucial role in supporting and maintaining your good health and wellbeing, through monitoring and sharing this responsibility with you.
- Support groups and skills development programmes will be provided to help people with long term conditions manage and maintain good health. Community groups will be supported to lead these activities.
- 'Anticipatory Care Plans' will be developed for people with

## Our strategy – what will this mean for you?

complex health needs, who are at higher risk of being admitted to hospital. This will provide tailored information to prevent an emergency situation occurring and enable good communication between healthcare professionals.

### Providing care in people's homes and in community settings, away from large specialist hospitals

- Services will be delivered in such a way that it is made easy for you to use them, whatever your needs or abilities.
- More care will be provided using 'telemedicine' (care through videolink or over the telephone), which will mean less travelling for appointments.
- Unless you require highly specialised tests or treatment, you will be less likely to be admitted to hospital.
- Through better co-ordination between hospitals and community teams, you will have a shorter stay in hospital.
- A new Emergency Care Centre at Foresterhill in Aberdeen will open in 2012. This will improve the facilities and arrangements of all emergency services across Grampian, and will improve the management of patients in an emergency.
- Services will be completely reorganised at Aberdeen Royal Infirmary. This will enhance the experience for patients by grouping wards together to improve efficiency across specialist teams, and avoiding transfers from ward to ward.

### Delivering more care using trained and experienced staff from across a range of professions

- Services will be delivered by different staff, not just doctors, who will take on new skills and responsibilities.
- Specialist staff will focus on delivering specialist services.
- We recognise the important role of unpaid carers and will ensure that we do everything possible to support the needs of carers and listen to their views.
- Staff will work with patients, carers, members of the public and partners in looking at our services and, as appropriate, make the right changes.

The combination of shifting the balance of care and improved co-ordination of services will mean that fewer inpatient beds are needed in Grampian hospitals. By providing more tests and appointments in community settings, it is likely that we will change the type of services provided in community hospitals.

This transformation has already started, but we will increase the speed of these changes over the next three years. Everyone will be affected by this strategy – patients, the public, staff and other organisations. Staff, facilities and finance will need to be reorganised to make the changes a reality. Most importantly, we need the people of Grampian to be open to new ideas and different ways of working.

The remainder of this plan describes our commitment and actions to enable a complete change in the way that we think about health and the delivery of care.

Thank you for reading this plan.



# Simply the best

NHS Grampian aims to be the best performing provider of health care services in Scotland. Dr Roelf Dijkhuizen explains

The NHS is renowned all over the world because it delivers a wide range of services to patients, free of charge at the point of delivery. In modern times with improved communication and technology, it is possible for us to provide services close to people's homes, where in the past they would have had to travel to larger centres. In 2002, NHS Grampian developed the 'Healthfit' approach, which aims to provide services locally as much as possible and reserve acute hospitals for complex interventions, that need specialist care in a hospital setting.

Since 2002, local clinics in cardiology, orthopaedics and dermatology have been established across Grampian. Telemedicine has allowed emergency cases to be seen without travelling to Aberdeen. Diagnostic tests such as ultrasound are carried out in the community, and community hospitals are acting as focal

points for services provided by GPs and other health professionals. Partnerships with local authorities and voluntary organisations have been formed to support rehabilitation and respite close to home.

In Aberdeen, Woodend Hospital is run by the City Community Health Partnership to provide rehabilitation and intermediate care, allowing Aberdeen Royal Infirmary (ARI), to focus on complex, specialist hospital care.

## Shifting the balance of care

Shifting the balance of care is what Healthfit is all about:

- Shift from big expensive hospitals to community based services.
- Shift from doctor-dependent care to involve other healthcare workers and self-care.
- Shift from emergency admissions to prevention of ill-health, with



Dr. Roelf Dijkhuizen  
Medical Director

patient-centred support of long term conditions such as diabetes, heart disease and lung disease.

## Adapting to survive

In times of economic pressures and an ageing population, shifting the balance of care becomes even more important. If we did not shift the balance, we would have to build an extra hospital with 600 beds every three years in Scotland.

Rather than building more of the same, we aim to improve the facilities already available to our patients. The

first stage of a comprehensive site development programme at Foresterhill in Aberdeen will be completed in 2012, this will make inpatient facilities fit for 21st century care. Facilities in Dr Gray's Hospital in Elgin, as well as community facilities for general and dental practice, are also being developed and modernised.

Much has been achieved but much more needs to be done to become the best provider of healthcare in Scotland. Difficult choices will need to be made. For example, the development of local community based care in North Aberdeenshire involved the upgrade of facilities at community hospitals in Banff and Fraserburgh, but the closure of Portsoy and Maud hospitals.

## A safe service

Patient safety has to be at the core of everything we do. Healthcare associated infections have been a particular problem across the NHS in Scotland. After a poor year in 2009, NHS Grampian has seen a large improvement with levels of infections such as Clostridium difficile and MRSA coming down. This has been achieved by changes in antibiotic prescribing and upgrade of facilities available to patients, combined with strict infection

control measures by staff and visitors to our premises. Staff in NHS Grampian are determined to provide services with the lowest infection rates in Scotland, nothing less will be good enough.

## Access to services

Clinicians from primary and secondary care are working together to design the most effective and efficient patient pathways as part of our 'Better Care Without Delay' Programme. By March 2010, no patients available for treatment waited longer than 12 weeks for an outpatient appointment and nine weeks for an inpatient appointment. We achieved this with greatly reduced reliance on one-off waiting list initiatives and the private sector.

A number of our specialities are already achieving the 18 week referral to treatment standard and we are well placed to meet this target across the board during 2011.

The development of patient pathways will enable us to identify those elements of the pathway that can be delivered in primary and intermediate care settings, shifting the balance of care towards locally accessible services, wherever appropriate.

During the consultation on our priorities, some people told us of continuing problems in getting GP appointments within 48 hours. In Moray and Aberdeenshire, GP practices are working together to ensure consistent standards and to influence the pattern of care, both in the community and in hospitals. In Aberdeen, a major project to revolutionise the way in which primary care services are provided in the City will be taken forward during the three year life of this Health Plan. The Aberdeen Health Village, planned to be developed in the centre of the city, plays an important role in this changed way of working, by providing diagnostic and treatment services for patients in Aberdeen.

We will ensure that these and other initiatives result in patient-centred, consistent and easy access to GP services and also to services in the community provided by pharmacists, optometrists and other health professionals. This will also mean improved access for those people with mobility, language and communication difficulties.



### Facilities fit for 21st century care

Timely access to diagnostic services is essential to quicker treatment. We will pay particular attention to radiology, endoscopy and laboratory services over the life of this plan. We are already in the process of providing two new MRI scanners and one new CT scanner at ARI during 2010. Our strategy for the future development of these diagnostic scanners will be completed by April 2010. During 2009/10 we upgraded our endoscopy facilities in the Department of Gastro-Intestinal Medicine at ARI and our plans for endoscopy services in both hospital and community settings have been developed with support from Aberdeen University and informed by patient views.

Fast access to diagnosis and treatment is vital for patients with suspected cancer. Nurse-led colorectal and prostate cancer models of care are working well, and this innovative work will continue to develop. Delivering these kind of services close to home is a first in Scotland. Upgrading of cancer inpatient and outpatient services in Aberdeen and Dr Gray's is well underway and new inpatient facilities will be completed in 2012. Two new linear accelerators for the treatment of cancer will be completed at Foresterhill by 2013.

Many of the major projects to improve facilities are being taken forward by the Health Campus Programme outlined on page 20. Shifting the balance of care, supported by the development of community services and modernisation of hospital services, will continue to reduce reliance on high cost hospital services and make our service sustainable and fit for the future.

### Patient Management System

The new Patient Management System (PMS) will play a major role in improving and supporting patient services, leading to faster diagnosis, treatment and care. It will provide health professionals with easy access to appropriate information electronically in one system. The PMS will enable better case management, more effective co-ordinated care, improved communication between healthcare professionals on patient care and results, reduction of delays and improved patient safety.

**Mr Terence O'Kelly**  
Consultant in General Surgery

### What will this mean for you?

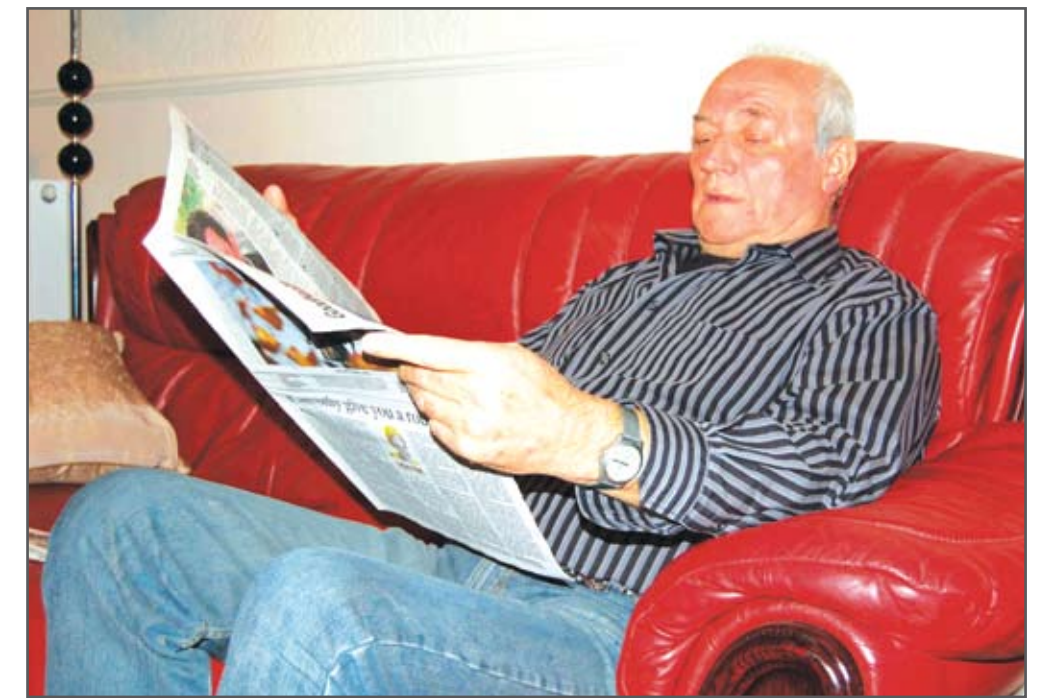
- Faster access to healthcare services:
  - Guaranteed access to an appropriate member of a GP practice team within 48 hours, or advance booking by 31 March 2011
  - Referral to treatment within 18 weeks by December 2011
  - Referral to treatment of cancer within 62 days by the end of 2011
  - Decision to treatment of cancer within 31 days by the end of 2011
  - Arrival at A&E to admission or discharge within four hours
- More care at home and in local communities and fewer admissions to hospitals:
  - More support to manage long term conditions at home
  - Local diagnosis and treatment where appropriate
  - Greater flexibility from a wider range of health professionals
- Better facilities and equipment:
  - More single rooms
  - Better training and development facilities for staff
  - New inpatient facilities for cancer patients in the Emergency Care Centre development
  - New equipment for cancer treatment – two new linear accelerators for radiotherapy by 2013
  - Modernisation of major radiology facilities – two new MRI scanners by 2011

## Eye emergency service success

John McRae's vision had been fine since having cataract surgery 10 years ago. But when Mr McRae, 73 (pictured right), found his sight had deteriorated overnight to the extent he could not see anything on his left side in either eye, he immediately called his local optometrist in Aberdeen.

They arranged an emergency appointment that day, Mr McRae's vision was checked and he was referred immediately to Aberdeen Royal Infirmary (ARI) for further tests.

At ARI, he learned he had suffered a stroke which had affected his vision, and a scan showed a blood clot on the right side of his brain. Treatment was given immediately and within two days his sight returned and he was discharged.



"I've been telling everyone to see their optometrist if anything happens to their eyes", said Mr McRae. Mr McRae, who hadn't known about the service for eye emergencies provided by optometrists in Grampian, was relieved to have received prompt

attention. He is under review by his own GP to maintain his general health. The service is available through 51 optometry practices across Grampian. If you have any signs or symptoms of visual problems, please contact your nearest optometrist for help.

Lerwick, Shetland's main population centre and town, is about 210 miles north of Aberdeen. Health care in Shetland is delivered through 10 health centres, a hospital with acute care facilities, and a range of community services. There are on-island consultants in surgery, medicine and anaesthesia, a GP/midwife run maternity unit, a consultant led community mental health team, and a number of specialist nurses.

The Gilbert Bain Hospital in Lerwick is where visiting clinicians from Aberdeen run clinics, carry out surgery, and contribute to the learning and development of Shetland based staff. Staff from Shetland also travel to Aberdeen to work alongside clinicians in order to gain skills. One recent example is the development of our GP Specialist in

## The NHS Shetland perspective on partnership working with Grampian

gynaecology, where training has been provided in Aberdeen and Shetland. For Shetland residents, NHS Grampian is the main provider of off-island services, and a major contributor to on-island services.

Partnership working is all about sharing a common vision, and the support from NHS Grampian is crucial to the total service on offer for Shetland residents. The challenges are ever increasing for health service providers, particularly in these times of economic pressure. This makes the adherence to a shared vision between NHS Shetland

and NHS Grampian about preserving the provision of health care to Shetland residents ever more important. We continue to work closely with managers and clinicians in NHS Grampian to ensure that Shetland residents are able to access high quality services in a timely way, and location does not disadvantage people's ability to receive the same services that are provided elsewhere on mainland Scotland.

**Simon Bokor-Ingram**  
Director of Clinical Services  
NHS Shetland



# Improving health in Grampian

Dr Lesley Wilkie tells us how we can all work together to produce a happier and healthier Grampian



Dr Lesley Wilkie  
Director of Public Health  
and Planning

## In your opinion how healthy is the population of Grampian?

We're lucky in Grampian, it's a great place to live and when you look at health in the rest of Scotland, we compare quite well. But, as a nation, we don't compare well to the rest of Europe. We know people who live in less fortunate circumstances are definitely not as healthy. However, the majority, who are living in better circumstances, still may have health issues caused by lifestyle factors, like alcohol and obesity.

What we want to achieve is not just people living longer, but living longer in good health.

## Will our future health needs be different to what they are now?

Yes, they will be. As a population, we are living longer, which means more people may develop long term conditions. These are conditions which are more common as we get older, like heart disease, respiratory disease, dementia or arthritis.

Data shows us that lifestyle factors, for example alcohol, obesity and smoking, are causing early deaths, particularly in our younger, more disadvantaged population. If we don't deal with these issues, this will become a greater problem in the future, requiring more health resources, and resulting in a greater burden to families and communities.

## What are the main health issues affecting people in Grampian?

Cancers, heart disease and alcoholic liver disease are the main reasons people in Grampian die earlier than they should.

The way people eat unhealthily, drink alcohol, smoke and use drugs contributes to the reasons why people become unwell and die early.

More people are living with health conditions which will remain with them for the rest of their lives – conditions like diabetes and chronic obstructive pulmonary disease (COPD).

More people are overweight and

obese, or living with mental health problems like depression.

Having the opportunity to make healthy lifestyle choices, to get the services that you need, in the way that you need them, can be affected by a wide range of issues such as age, where you live, or whether you have a disability (learning or physical).

## What will NHS Grampian do to make things better?

We can help you to help yourself by providing easy access to the information, support and skills that will help you do just that. By being the expert on your own health, and being in charge of managing your health condition, you can feel healthier, reduce the time you spend in hospital and reduce the chance of any complications occurring. This will help you to be as healthy as you can be.

We will ensure that people who are overweight and obese have access to the most appropriate advice and support to achieve a healthy weight. We will work with you and others, to help you to understand what a healthy weight is and how this can be achieved and maintained.

We will promote health through identifying things that protect against ill-health, both physical and mental. Where illness does exist, we will make sure that this can be identified and the right treatment provided.

We will continue to work with our partners to protect the public against infectious diseases and hazards in the environment, by preventing the spread of infections such as E coli and HIV.

We will encourage the uptake of immunisation and screening programmes and take action with other agencies to make the environment as safe and healthy as possible.

We will make every effort to understand what the greatest needs are and make sure that information, support and services are directed to respond to your needs.

We will also make sure that every contact with an NHS facility and member of staff provides you with the opportunity to improve your health, so that when you need it, you can easily receive the right care, at the right time in the right place.

We will continue to provide health promoting services such as smoking cessation, breastfeeding support and toothbrushing for children to help you and your families develop healthy behaviours and make healthy choices.

We will provide free, confidential information on health conditions, ways to improve your health and local support groups through the NHS Grampian walk-in *healthpoints* across Grampian or through the freephone healthline 0500 202030.

## What else can be done?

We will continue to work with our partners – our communities, the councils, police, fire and rescue service, and voluntary organisations – because we know that by working together we can make a bigger difference to the health of people in Grampian.

## What can help you stay healthy?

- Stop smoking and limit your and your children's exposure to other people's smoke.
- Find opportunities to be active in your daily life.
- Eat five portions of fruit and vegetables every day, reduce the amount of sugar, salt and fat in your diet and think about the size of your meals.
- If you drink alcohol, drink sensibly. Know what is a safe level of drinking and do not drink alcohol if you are pregnant or thinking about getting pregnant.
- Brush your teeth twice a day with fluoride toothpaste.
- If you choose to take drugs, never share equipment, and consider getting tested for hepatitis.

- Use a condom to prevent the risk of infections and unintended pregnancies.
- Take part in your community – volunteering, sport or learning a new skill can all help you make a contribution to your community and will improve your physical and mental health. This is even more important if you are not able to work.
- Wash your hands with soap and, if you cough or sneeze use a tissue and place it in the bin. This will help you reduce your chances of catching and spreading infections like those that cause colds and flu or diarrhoea and vomiting. Simple, but it works.
- Make the most of opportunities to be screened or immunised, for example, the annual flu vaccination.

## What will this mean for you?

- We will give you the information, support and skills you need to keep you healthy
- A healthy weight programme will be offered to every child who needs it
- We will increase our screening of those who may be drinking too much alcohol and, if necessary, offer a brief intervention to help them reduce their consumption
- We will support 8,120 people who want to stop smoking, to quit by March 2011
- We will continue our breastfeeding support for new mums, increasing our breastfeeding rate to 41% by March 2011
- We will target heart health checks to those most in need



Laura Gray  
Director of Corporate  
Communications



# Get involved

Laura Gray explains the importance of patients, carers and the public working with NHS staff and partners to improve care and services in Grampian

## What difference can this make?

From changing how we care for patients to improving hospital signs – your views can help make a better NHS. You can influence what we do in a variety of ways, from giving us feedback about your care, to being involved in a change to services or buildings.

Over the next three years, there will be more opportunities to get involved with NHS Grampian in improving services and the health of the people of Grampian. By working together, we will also support you to use services responsibly, such as keeping appointments and looking after your own health.

If you have been in hospital, attended a clinic, or had any other contact with NHS services, we welcome your views. Please fill in a feedback card to tell us about your experiences, good and bad, and to make suggestions. In the past, feedback has made a difference in many ways including:

- Making appointment times in some clinics more suitable for patients.
- Employing more staff to answer telephone calls.
- Improving written information for patients.
- Improving cleaning standards.

## Examples of getting involved

- Members of the public are involved in cleaning and hand washing inspections with staff in our hospitals to help us improve the environment for patients and reduce healthcare associated infections.
- Local people have been involved in helping us plan the new Emergency Care Centre at Foresterhill.
- Members of the local Public Partnership Forum in Moray have helped us plan and open a chapel in Dr Gray's Hospital, Elgin.
- When we write an information leaflet for patients we ask members of the public to read it and help us make sure that it is clear and does not use jargon.
- Local people in the Banff area were involved in planning the upgrading of Chalmers Hospital and the new Health Centre.

- Patients with experience of cancer and their carers and family members are helping us plan a new Cancer Centre.

These are all positive examples of public involvement in the local health service. There will also be difficult decisions to make over the three years of this plan and it is vital that we continue to work together in an open and honest way.

"I have enjoyed being part of the Health Village Project Team, which has involved discussions and design workshops, surveying patients and even counting the number of buses going past potential sites for the Village.

I feel my involvement, as well as the wider patient and public involvement, has influenced the location and layout of the building."

**Sue Kinsey**  
Public Representative

## How will we work together?

We are committed to providing the best possible care and experience for our patients. To help make sure this happens we need to involve patients, carers, and the general public. Over the next three years we will:

- Make it easier for people to tell us what works and does not work, by providing easier access to our Feedback Service and encouraging informal feedback.
- Make sure that when we are planning to make changes we ask users of our services what they think, and involve them in discussing options and planning the change.
- Make sure that we learn from positive and negative comments about our services.
- Make sure that we involve people who might find it harder to give their views, such as those who are non-English speaking or have communication difficulties.
- Improve how we involve children and young people.

- Involve more members of the public in decision making through the NHS Grampian Community Forum (which looks at Grampian-wide issues) and Public Partnership Forums (which look at local services in Aberdeen, Aberdeenshire and Moray).

## Other ways of telling us about your healthcare experience

- You can speak confidentially to one of our Feedback Service advisors by telephoning 0845 337 6338 (local rate).
- You can email your feedback to [nhsgrampian.feedback@nhs.net](mailto:nhsgrampian.feedback@nhs.net)
- You can take part in projects that are planning changes by becoming a public representative or attending a focus group or event.
- You can participate in the national surveys about hospital care, GP care and services for people with long term conditions.
- You can call the Independent Advice and Support Service (IASS)

on 0845 330 5012 (local rate). The service can help people, who do not wish to go directly to the NHS Feedback Service, who would have difficulty filling in a form, or who do not have English as their first language.

## What will this mean for you?

- More chance to have your say
- Easier ways to give feedback
- Evidence that we listen and learn from what you tell us
- People who are non-English speaking or have communication difficulties have opportunities to be involved
- More information provided in a way that is relevant and easy to understand
- Carers having a stronger voice and receiving greater support
- More people influencing health services in Grampian





Elinor Smith  
Director of Nursing

# How important is patient safety?



Patient safety covers a wide range of topics in all parts of the NHS – from protecting children, looking after adults in need of care and protection whether through age, infirmity or learning disability, through to what happens in community and hospital settings.

We record all patient-related incidents and we know that the four most common types involving patients are:

- slips, trips and falls
- medication incidents
- treatment and patient care
- access to healthcare services, onward referral and discharge.

From research evidence we know that patient safety in NHS Grampian is good by international standards, but we want to continue our work to make it even better. In 2009, we received reports which told us that some of the things we do and some of our hospital environments did not always support patient safety. We have taken these reports very seriously and have made major changes to improve patient safety. Patient safety will always remain a top priority for NHS Grampian. We want to make sure we deliver reliable healthcare so we get it right for every patient, every time.

As part of the Grampian Health Plan Consultation, we asked members of the public and staff what were their top priorities. Most people said that 'safety

and cleanliness' were in their top three priorities.

"The Scottish Patient Safety Programme (SPSP) has resulted in a real culture change in the whole healthcare team within Intensive Care, encouraging us to put patient safety at the forefront of everything we do. SPSP is now evident in so many of our daily practices, including twice daily safety briefings, daily goals for every patient and continuous audit of our simple care instructions. It is improving our communication, and reducing healthcare associated infection and ultimately aims to improve patient experience and outcome."

Senior Nurse

## How have we improved patient safety so far?

We have a Patient Safety Strategy and we are participating enthusiastically in national programmes to improve patient safety and experience. In particular, we are paying a great deal of attention to:

- The prevention of infections – for example we have improved

our performance against standards for hand washing, antibiotic prescribing and practice in cannula care to reduce the risks of infection.

- Regular 'Patient Safety Walkrounds', which involve senior members of staff and the public, who identify areas affecting patient and staff safety.
- Supporting our charge nurses to lead on patient safety in their ward and department areas.
- Improved safety in medicines management, where we have redesigned safer prescription sheets.
- Using tools to improve communication between staff at change of shifts and when patients are transferred to a different ward.
- Raising patient safety awareness through education of staff and students.
- Carrying out work to improve healthcare premises.

Patient safety is everybody's business and everyone can contribute in some way. Visitors are invaluable in the

healing process and can help our staff in the fight against infection by heeding the messages about hand hygiene and by acting as responsible visitors.

## How will we continue to improve patient safety?

Over the next few years, we will continue to focus on the following areas, which we believe will make the biggest improvements to patient safety:

- We are giving authority to the Senior Charge Nurse (ward sister) to take control of the ward environment.
- We are "releasing time to care", to allow our nursing staff to meet individual care needs, such as protecting mealtimes to assist patients with eating and drinking.
- We will use the Feedback Service to address issues that are raised.
- We will launch our Child Protection Strategy so that all staff are clear about their role in protecting children.
- We will work with our partners in the police and local authorities to support and protect adults affected by disability, mental disorder, physical illness or mental infirmity.
- Reducing harmful events by 30% and reducing avoidable inpatient mortality (death) by 15% by 2011, in line with the aims of the Scottish Patient Safety Programme.
- Reducing the number of people who are infected by Clostridium difficile (C diff) by at least 30% by 2011.
- Reducing the number of people who develop Staphylococcus aureus bacteraemia/bloodstream infections by a further 15% by April 2011.
- Ensuring the implementation of patient safety becomes part of the daily routine in NHS Grampian, by

continuing to spread good practice, such as:

- Identifying what staff need to do to prevent infections and to make sure this is carried out every time
- The use of structured communication tools to improve the handover of patients between areas
- A consistent approach in the use of the pre-operative surgical checklist to reduce complications in the operating theatre
- The introduction of Patient Safety Walkrounds to new areas.
- Reporting publicly on patient safety at NHS Grampian Board meetings.
- Working in partnership with university and further education colleagues to highlight patient safety in education programmes.
- Supporting our Falls Strategy to focus on reducing harmful falls.
- Improving the quality and standard of facilities in NHS Grampian, making our hospitals and health centres safer, more efficient and modern (see page 20).

## Challenges?

Health care is complex and with this inevitably comes risk. Our challenge is to ensure that risk is managed as part of our day-to-day activity by all our clinicians – doctors, nurses and allied health professionals such as physiotherapists and dietitians – as well as our support staff who are committed to working in partnership with patients and the public to make safer health care a reality.

## What will this mean for you?

- You may be screened for infections before, or on admission to hospital
- Continued reduction in infection rates
- You will see all staff washing their hands or using hand gel before and after touching you or your surroundings. If not, ask them why not. We will continue to comply with the national hand hygiene targets
- There will be strict adherence to the new cleaning regimes with senior charge nurses given permission to challenge any aspect of the ward environment where standards are not met
- You will see changes in practice in our hospitals to further improve patient safety, for example, measures to stop nurses being interrupted when carrying out administration of medicines, and assessing and putting measures in place to reduce falls
- You will be asked your views and suggestions on how we can develop our services to ensure the experience of patients helps us to drive forward improvements
- Information will be displayed on wards to show patients and the public the work that is being done to improve the safety and quality of care provided in that area
- You will be able to access regularly updated reports on the safety of services and care in NHS Grampian as of spring 2011



Mark Sinclair  
Director of Human Resources  
and Strategic Change

# Keep improving

With public debt at record levels the need for more productivity and efficiency in order to continue to improve patient care and sustain services has never been greater, explains Mark Sinclair



## Will the credit crunch mean less improvement to healthcare services?

With public spending expected to decrease and demands for health care continuing to increase, we shall inevitably have to “do more with less”. I actually think it will drive us to make more service improvements because every penny counts. We will need to do more with the money we have, so harder financial times can actually drive improvement rather than hamper it.

## How does service improvement support the quality of services delivered?

Improving the quality of our services will be at the heart of NHS Grampian’s improvement agenda. We are striving to deliver the very best care more reliably and with greater efficiency. There will be a strong focus on what is important to patients and to everyone working in NHS Grampian. We will also be aiming to encourage greater involvement of people in the design and delivery of their care.

## What does improvement mean to the public?

Improvement from the public’s perspective is about ensuring that care and supporting services are delivered



**Looking at my processes, with support, I was able to identify areas of activity that were adding no value and could be eliminated.**

**Gary Mortimer**  
Acting Director of Facilities



in the most efficient and effective way and which meet their needs. The ageing population in the north-east will mean that health services will be under increased demand, and advances in healthcare technology will continue to improve our ability to care for patients. The public is essential in advising us what should be improved, based on their experience. This is all about improving the whole patient experience from initial appointment to the end of treatment.

## What do the changes mean for staff?

The great thing about service improvement is that it reduces waste, inefficiencies and duplication. Consequently staff should feel less stressed because they feel they’re in control of the flow of work and patients through their service. Equally,

the improvements are of benefit to patients. When you’re taking out wastage of time and resources, for example, reducing the duplication of forms and questions, you cut down the work that staff have to do on administration. This allows more time to care for patients, and consequently reduces the stress it places staff under.

Staff involvement is vital to these changes – in fact, the most important aspect is that staff believe they can really make a difference to patients. Our staff are in the driving seat because they know where the waste or inefficiency lies, and as such are the best placed people to make the changes with patients to take the inefficiency out, whilst improving the quality of care and services.

## What are the main areas that NHS Grampian is going to improve?

A vast range of areas cover the whole of NHS Grampian, for example, improving patient safety, improving operating theatre performance, improving access to services and our purchasing and leasing systems. Our staff and patients have identified areas which hamper how we deliver

efficient services. This document sets out how we will improve care and services over the next three years.

## Can you give us an example of what they may be?

Our previous health plans outlined just some of the improvement work done over recent years. The major improvements you should expect to see over the next three years are:

- Patients being referred for appointments/treatment more efficiently and effectively, so improving access and reducing waiting times.
- Shorter hospital stays – wherever possible, people would far rather be seen by clinically appropriate staff in the comfort of their own homes.
- Improved use of operating theatres.
- Improved savings in purchasing and leasing of resources.
- Improvements in care in the community, reducing the need to attend hospital.
- Reducing delay at A&E.
- Improvement in patient outcomes.

Improvements, however, need not be huge tasks, just simple adjustments can



**The buzz around the place has been fantastic! Staff are coming up to me with suggestions for improving patient care – they’ve really bought into the fact that they can have a say in the way things will work in future.**

**Steven Close**  
Consultant Physician



make a big difference – such as an electronic discharge letter which is e-mailed directly to your GP from the hospital. No waiting around for hours for that brown envelope with your discharge details!  
By addressing these areas, however small, it will help us improve the patient’s experience, and make better use of resources and staff time. It’s very much about getting everyone involved in making our services work more efficiently for the benefit of not only patients, but also staff themselves. It’s very rewarding to know that you’ve been part of a chain of events which has spurred on change in the

workplace. Some changes are small and localised, but other changes are Grampian-wide.

## Can patients influence these improvements?

Absolutely! We need to learn from their experiences so we understand what works well and what could be improved. We need to work together to make the right changes that improve the patient experience.

Improvement is not a one-off – we need to do this continuously in order to provide quality care in an efficient manner. Patients and staff are an essential part of this process.

## What will this mean for you?

- More and better care for less resource
- More efficient use of taxpayers’ money
- Staff who feel they really can make a difference
- Improved experience for patients
- Improved outcomes for patients
- Cost savings for the NHS



# Getting the most from our resources

## Where does NHS Grampian's money come from?

Almost all of our funding comes directly from the Scottish Government – your money in other words, and as such we have an obligation to use that money exclusively and in the most effective way possible in providing health services to those who pay for them.

## We receive two different types of funding:

**Revenue** – we spend more than £900m every year in delivering day-to-day services. That covers ongoing costs including wages of more than 17,000 members of staff, prescription drugs, medical supplies, light and power and many other commitments incurred by a large, complex organisation such as ours.

**Capital** – NHS Grampian also receives capital funding which is used to buy assets such as hospital buildings and equipment. In 2010/11, for example, we will spend around £70 million on improving buildings and installing new equipment.

We also receive charitable funding from a variety of sources, which is managed by the NHS Grampian Endowment Fund, an independent charity, and is used for the benefit of

## Alan Gall explains the financial challenges which lie ahead and tells how NHS Grampian will continue to use public funding wisely to improve health and provide health services

staff and patients in accordance with donors' wishes.

## How will the economic downturn affect the services provided by NHS Grampian?

The demand for health services continues to grow without stopping for breath. New techniques, materials, equipment and drugs, along with our expectations as members of the public will always push demands higher and higher. We have enjoyed exceptional annual funding increases of around 7% during the last few years but since 2008/09, those increases have been gradually reducing to previous levels. The 2010/11 increase, for example, is 2.42%.

With very little scope for cutting back on the services we provide, we must always identify the most cost effective ways of working to allow us to function within available resources. Every member of staff is responsible for avoiding inefficiency or "waste" whether that is, for example, when ordering and using materials or making sure that

annual leave patterns do not disrupt the efficient working of operating theatres.

Funding levels over the next few years will undoubtedly slow down our service development opportunities. However, this belt tightening should encourage everyone working for NHS Grampian to focus on priorities which, in itself, should free up resources to allow us to take advantage of modern ways of doing things.



Alan Gall  
Director of Finance

Much of our day-to-day expenditure is incurred on paying staff. Every department must ensure that its staffing structures are delivering the best quality of service at lowest cost. We must reduce our staffing costs in years to come through a combination of reducing post numbers from current levels, reviewing the skill mix of staff, reducing hours where possible and carefully managing the use of overtime.

## How much is NHS Grampian having to save next year?

All health boards have to make savings of at least 2% of their running costs every year to comply with the national Efficient Government Scheme. That is around £14 million for us. In addition to that, we need to reduce the cost of our ongoing commitments by a further £20 million to allow us to deliver all the services the public want and stay within budget. £34 million is exceptionally challenging but should not be impossible for an organisation spending over £900 million per year.

In addition, whilst NHS Grampian has successfully negotiated extra capital funding from the Scottish Government to support our ambitious modernisation programme, the recent economic crisis means this will now be less than planned. As a result NHS Grampian will have to reduce its capital programme by around 20% per annum over the next five years.

## What is NHS Grampian going to do to ensure they continue to use public money wisely?

There are a number of things NHS Grampian will do over the next three years:

- Ensuring that allocation of funding will support our strategy as explained on page 3, but also deliver results such as:
  - Improved health for the population
  - Improved clinical outcomes for patients

- Improved patient safety
- Improved patient experience
- Workforce appropriate and sustainable for the future
- Best value for the money invested.

- Making sure everything we do is effective and efficient and provides value for money, for example stopping doing things which have no benefits to safe, quality patient care or patient experience. Please see page 16 where Mark Sinclair explains more about this.
- New developments will require to be prioritised against existing services to ensure the decisions we make provide maximum benefit for the Grampian population.

## What can the public do to help NHS Grampian use its resources wisely?

### Clinical/GP appointments

Simple things, for example, turning up for appointments or notifying in good time that you can't attend. Over 38,000 outpatients did not attend their appointments in Grampian last year. That resulted in wasted NHS resources of more than £3.5 million. A knock-on effect to this can also mean patients having to wait longer as a consequence of these empty appointment slots not being filled by other patients.

### Stay healthy

Scotland continues to be the "sick man of Europe". We all have a responsibility to look after ourselves to avoid illness in the first place. Sensible diet, exercise and moderate alcohol consumption would free up millions of pounds for the NHS and other public services in Scotland.

## Going to the right service or place for treatment

Are you aware of 'Know Who To Turn To' information which advises on

circumstances when you are best to see a pharmacist, or your GP, or attend A&E? If not, please see [www.know-who-to-turn-to.com](http://www.know-who-to-turn-to.com) or call 0500 20 20 30.

## And finally...

NHS Grampian is fortunate in receiving such high levels of public funding. We have a huge responsibility to make best possible use of that money on a day-to-day basis. Members of the public, individually or through groups, can have a positive influence on how resources are used. Where choices have to be made, difficult decisions have to be faced up to. Decisions are currently made by clinicians, managers and sometimes politicians. If we are to continue to develop services for our population, your views must be heard and taken into account.

## What will this mean for you?

- Providing more services in community and home settings rather than in hospital beds
- Reshaping the workforce to ensure that the right skill levels are being used to ensure value for money in everything we do
- Prioritising service provision, recognising that difficult decisions sometimes have to be made
- Saving on administration costs by sharing services with other organisations in the NHS and elsewhere
- Continuously streamlining everything we do, and so avoiding waste and duplication, so that every pound we spend adds value

The transformation of health services in Grampian is being supported by the Health Campus Programme – a range of interlinked projects aimed at redeveloping the main healthcare facilities across Grampian. Graeme Smith explains



Aberdeen Dental School

# Fit for purpose: healthy places

## The Health Campus Programme

The implementation of the programme will result in the improvement of hospital and community facilities across Grampian. This will ensure that they are organised to support modern healthcare and meet the challenge of treating more people closer to home.

The changes have been discussed in detail with staff and the public – there have been more than 40 public meetings over the last two years. Scottish Government approval has resulted in additional capital funding being allocated to NHS Grampian. The changes are exciting, but much more needs to be done and some difficult choices will have to be made about how we get the most out of the funding available.

The programme is not just about providing facilities which are safe, modern and fit for purpose. The main aim is to use the projects to support staff to provide better services within the resources that are available. Many

thousands of staff will be involved and, whilst there will be many challenges, it will be a chance in a lifetime for many to develop new roles.

“Aberdeen Dental School, which opened in November 2009, was developed in partnership between NHS Grampian and the University of Aberdeen. This will be an essential part of the improvement of dental services across the North East of Scotland. The School will train 20 new dentists every year with the aim that most will remain in practice in the area.”

**Professor Michael Greaves**  
University of Aberdeen

## Healthier places for staff, patients and visitors

It is a top priority for NHS Grampian to make sure that its facilities are safe and healthy for those who use them. On page 14, Elinor Smith explains why

this is important and it is the role of the Health Campus Programme to make sure that improvements are made in a strategic and efficient way.

The new facilities being developed will meet the highest standards of patient safety and infection control, for example, in the Emergency Care Centre, most of the inpatient beds will be in single rooms with en suite shower and toilet facilities. Where we are investing in existing buildings, we will make sure the money that is available to us deals with the highest priorities in terms of improving safety for patients and staff.

## Specific developments over the next three years include:

- Emergency Care Centre – a major project costing £110m, to be completed in 2012. This will result in the integration of emergency care services at Foresterhill and provide support for the whole of Grampian. The project will also



Chalmers Hospital



Foresterhill Energy Centre



Emergency Care Centre

replace 40% of the inpatient beds at Aberdeen Royal Infirmary and include the re-organisation of the whole Infirmary. This will be linked to developments that will provide more treatment and care in communities and reduce the need for admission to hospital.

- Chalmers Hospital and Health Centre – a complete redevelopment of Chalmers Hospital and a new Health Centre. The development, to be fully completed in 2012, will provide services for more people to be treated locally and is part of a re-organisation of services in the Banff area, which will include the closure of Campbell Hospital in Portsoy.
- Aberdeen Health Village – part of our plans to create capacity in the community, the Village project will provide a wide range of services and facilities. The Village will also provide new facilities to replace outdated accommodation in Woolmanhill and Denburn Health Centre.
- Foresterhill Energy Centre – the Foresterhill site will be powered by

a new energy centre at the cutting edge of technology by the summer of 2011. The Centre, costing £12.5m, will meet the heating and electricity needs of Foresterhill for the next 20 years, reduce NHS Grampian’s carbon output by 800 tonnes per year, and reduce energy costs by approximately £2m per year.

- New premises for Whinhill Medical Practice in Aberdeen in 2011, which will be shared with Grampian Police.
- The continued improvement and reshaping of community facilities across Grampian to support the delivery of quality care as close to people’s homes as possible.
- Woodend Hospital – the role of Woodend as the ‘community hospital’ for Aberdeen will be strengthened by investment in improved rehabilitation facilities.
- Patient safety improvements – a range of improvements will be made across Grampian to ensure that standards of safety are maintained.



**Graeme Smith**  
Project Director for the Health Campus Programme and Head of Service Development, NHS Grampian

## What will this mean for you?

- Hospital premises will have a reduced risk of healthcare associated infections
- As of 2012, the Emergency Care Centre will be operational and will support improved co-ordination and delivery of emergency care across Grampian
- Chalmers Hospital in Banff will fully open in 2012
- A new Energy Centre will help the environment and power the Foresterhill site by summer 2011
- Continued improvement of community facilities which supports shifting the balance of care, meets the needs of the Grampian population, and manages risk

# People caring for people

Gordon Stephen, Employee Director explains how NHS staff in Grampian are striving to make a difference to people's lives



Gordon Stephen  
Employee Director

Did you know that NHS Grampian is the biggest employer in the North of Scotland, employing over 17,000 people, the length and breadth of Grampian? If we include the families of staff then between a quarter and a fifth of the Grampian population is connected directly or indirectly with our organisation. Did you know that there are over 200 different jobs in the NHS – some of them undertaken by many thousands of people and some by just one person? Every day in Grampian approximately 6,000 people visit their GP, district nurses make 1,250 visits and 2,700 people are seen as outpatients.

It all adds up to a huge “machine” or a big “business”. We don’t see it as a business or a machine. Of course, there are some similarities and we must ensure that we learn from the things business does well and apply that learning to the NHS. But fundamentally, for us, the staff of NHS Grampian is the organisation – people who do things for people – day in, day out. People we value, who know the services they deliver, the challenges and opportunities they face and who very often know the solutions. We are committed to involving and working with staff in the way in which we plan and deliver services, now and in the future. Listening to the views of staff is very important to us – through the staff surveys that are held every two years, by face to face discussions, and through our staff side representatives,



partnership working and the partnership forum.

In Grampian we have a culture and history of working together – staff, management, patients, carers and the public. That doesn’t mean we always agree – when money is tight, choices have to be made and priorities re-set. We share a strong commitment to delivering the best possible patient care, but we know we can always improve, do better and do more. Every single member of staff in NHS Grampian has a role to play in delivering our vision and our Health Plan. For some staff that is a very direct, hands on, clinical role. For others it is a supporting role. For many it is a behind the scenes role. We see each of these roles as equally important and we see the involvement of all staff, working in partnership, as an essential part of the way we work.

## What will this mean for you?

- We will continue to develop models of care, which are more responsive to meet the needs of local communities. This will mean care will be delivered by different staff, who are appropriately trained and skilled to deliver the best possible service to you
- Staff will work together to promote the benefits of preventative action and support you in self-care, by providing you with the knowledge and understanding of when and where to seek expert guidance and treatment
- NHS Grampian will continue to work with universities, further education and the wider education sector to ensure staff have the appropriate training and skills, which meet the needs of the local population
- NHS Grampian will continue to strive to be an employer of choice

## Developing our workforce

NHS Grampian’s aim is to ensure that we meet the needs of individuals and communities by providing high quality, safe and affordable care through a flexible workforce.

Throughout this plan we have talked about our staff and how important they are in helping us meet the various challenges ahead, as well as ensuring that the exciting plans for improving health and services are delivered.

NHS Grampian faces a potential funding gap for 2010/11. With workforce accounting for approximately 70% of our controlled spend, it is essential we review our workforce to ensure it is safe, affordable and able to meet the tough challenges ahead. We will require to reduce our staff costs in years to come, through a combination of reducing the number of posts from current levels, for example, not always replacing vacant posts, reviewing the skill mix of staff, reducing hours where possible and carefully managing the

use of overtime. To help us deliver the various challenges mentioned in this plan, we will work more closely with regional colleagues in the North of Scotland in the NHS and across the wider public sector.

As explained by Mark Sinclair on page 16, we will empower our staff to carry out Continuous Service Improvement. This will remove waste and inefficiency, which in turn, will free up staff to focus on patient care.

There is no doubt the forthcoming years will present a challenge to all at NHS Grampian. We are confident that by involving and developing our staff, by working in partnership, by communicating clearly and honestly, and by building a sustainable and flexible workforce, we will be in the ideal position to overcome these challenges.

### Clare Ruxton

Head of Human Resources  
NHS Grampian

## NHS Orkney on working with NHS Grampian

Orkney is located six miles north of the mainland of Scotland, and is made up of 54 islands, of which 18 are inhabited. The total population of Orkney is approximately 20,000. Healthcare is provided through 13 GP practices, a hospital with acute facilities and a range of community services. There are consultants in surgery and anaesthesia, a GP run acute medical service, and a GP/ midwife run maternity unit.

Clinicians from NHS Grampian visit Balfour Hospital in Kirkwall, on a regular basis to support the delivery of clinical services in Orkney. They also work in partnership with local clinicians to deliver clinical education and training.

NHS Grampian is the main provider of off-island services to Orkney residents and is a major contributor to on-island services. A long term partnership arrangement has been established between NHS Orkney and NHS Grampian and this will provide a joint vision for the future delivery of high quality clinical services to the people of Orkney. Sharing skills, knowledge, training and expertise between NHS Grampian and NHS Orkney is fundamental and will provide future sustainability to local clinical services in Orkney.

### Dr Marthinus Roos

Medical Director  
NHS Orkney

## Glossary

**A&E** – Accident and Emergency Department

**Clinical outcomes** – Results following care and treatment

**CT scan** – Computerised Tomography Scan is a specialist x-ray machine which produces detailed images of body structures

**Efficiency** – Delivering more (outputs) for the same resources (inputs) or delivering the same (outputs) with fewer resources (inputs)

**GP** – General Practitioner, also known as your family doctor

**Healthfit** – NHS Grampian’s approach to delivering improved health in Grampian

**Intervention** – Care or a procedure

**Linear accelerators** – Equipment which provides radiotherapy treatment

**Partners** – Are people and organisations who work together

**MRI scan** – Magnetic Resonance Imaging Scan which uses magnetism and radio waves to produce images of body structures

**Staff side representatives** – Accredited trade union/ professional body representative

**Telemedicine** – Care provided remotely by technology such as over the telephone or via a video link

**Wellbeing** – A person’s level of health and happiness

**Workforce** – All staff employed

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