



Beyond boundaries -

Developing a new regional plan for the West of Scotland

Information for staff

January 2018

The launch of the Health and Social Care Delivery Plan in December 2016 set out an ambition to look across boundaries and to plan and deliver services that would meet the triple aim:

- improving the patient experience of care;
- improving the health of populations; and
- reducing the cost of health care.

In the West of Scotland we have added to this by stating that the fourth aim should be about staff value. One year on from the publication of the plan, we have seen the regional planning arrangements across Scotland evolve. This newsletter provides the first update to staff across the West of Scotland about the work being taken forward.

In the West of Scotland we have been working across our Health Boards and Integrated Joint Boards to establish a common purpose to our planning that respects the importance of local and locality planning:

- improving health and wellbeing;
- increasing care and quality;
- better workplace with a focus on staff; and
- delivering best value.

West of Scotland region

The West of Scotland has a population of around 2.7 million people, and covers approximately 8,777 square miles. There is a combination of urban, rural and island communities.

The West of Scotland region comprises a number of partner organisations who support the provision of health and care services. This includes five territorial Boards, 15 health and social care partnerships, 16 local authorities, five national Boards and a number of third sector organisations.

Health and social care partnerships (HSCP)

- Argyll and Bute
- Dumfries and Galloway
- East Ayrshire
- East Dunbartonshire
- East Renfrewshire
- Falkirk
- Glasgow City
- Inverclyde

- North Ayrshire
- North Lanarkshire
- Renfrewshire
- South Ayrshire
- South Lanarkshire
- Stirling and Clackmannanshire 1
- West Dunbartonshire

NHS territorial Boards

- NHS Ayrshire & Arran
- NHS Dumfries and Galloway
- NHS Forth Valley

- NHS Greater Glasgow and Clyde
- NHS Lanarkshire

NHS national Boards

- Golden Jubilee Foundation
- National Education Scotland
- National Shared Services

- NHS24
- Scottish Ambulance Service
- Other National Boards are linked through the National Planning work



John Burns, Chief Executive of NHS Ayrshire & Arran, and Regional Implementation Lead for the West of Scotland, comments:

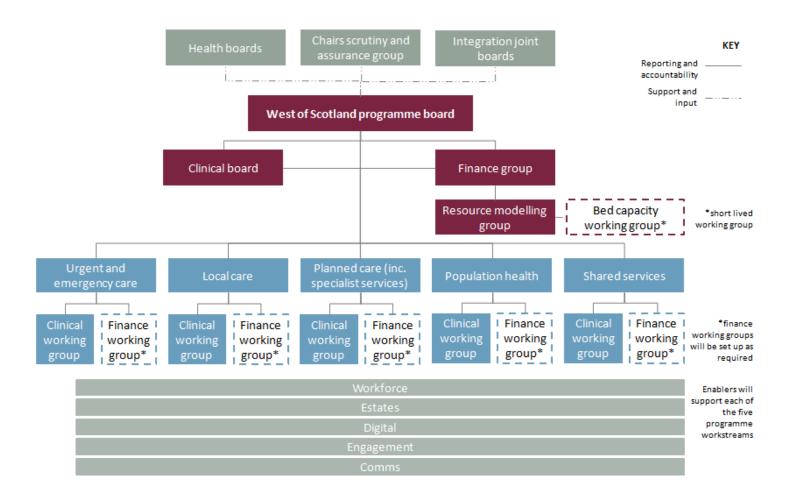
"We have always had strong working relationships across the West of Scotland. This has allowed us to quickly adapt and develop our approach to thinking about how we will take this opportunity to think and plan for the future models of care that will meet the changing needs of the population. We need to be able to adapt and innovate. We recognise that resources are finite and so must seek to deliver within a best value framework. Working together to achieve our common purpose will be core to our approach.

"There are already good examples of this across the West of Scotland. For example:

- interventional cardiology, based in two facilities at Hairmyres in Lanarkshire and the Heart and Lung Centre at the Golden Jubilee Foundation;
- the Beatson West of Scotland Cancer Centre in Glasgow which we have recently extended by developing a satellite cancer unit at Monklands in Lanarkshire; and
- the regional robotic prostatectomy service at the Queen Elizabeth Hospital in Glasgow.

"There is a great deal of work underway and you can see the key workstreams and how we are organised in the chart below."

¹ Local authorities are typically one-one with HSCPs, with the exception of Stirling and Clackmannanshire, which has two local authorities and one HSCP.



Leads for each group and workstream are in place or being appointed

| Group | Lead(s) | |
|-------------------------------------|--|--|
| West of Scotland Programme Board | John Burns (Chair)Sharon Adamson (Director) | Regional Team: Heather McVey (Service |
| Clinical Board | Angus Cameron | Planning) John Gomez (Analyst) |
| Finance Group | Mark White | Maggie MacKinnon (Programme Management) |
| Urgent & emergency care | Calum CampbellJulie White | Michelle Connolly (Programme Management) Michelle Nolan (Admin |
| Local care | Cathie CowanLouise Long | |
| Planned care | Jane Grant | |
| Shared services | Jeff Ace | |
| Population Health | Linda De Caestecker | |
| Workforce | Patricia Leiser | |
| Estates | • Colin Sloey | |
| Digital | Dennis Betts | |
| Engagement | Calvin Brown | |
| Comms | Miriam Porte | |

SOURCE: Carnall Farrar analysis



Angus Cameron, Clinical Lead for the West of Scotland region, explains why a strong input from clinicians is vital.

"In the West of Scotland, we want to make sure that there is a strong clinical input to any proposals. This will ensure that we make changes based on evidence of what works well, while drawing on the experience of senior doctors, nurses and other clinicians. We have established a clinical board, made up of clinicians from across the region, which will closely scrutinise proposals to ensure that we provide a safe and effective service to reasonably meet the needs of patients.

"We also want to ensure that we improve the value of the care that is delivered. This includes reducing unwarranted variation in intervention

rates across the region, and ensuring a consistent standard of high quality care. We will focus on patient pathways - for example, patients will only attend outpatients when there is a real clinical need; have investigations that are really helpful; or treatment that directly addresses their health problems.

"We want to ensure that there is effective support for patients with mental health issues. We know that mental health issues can impact on the chance of getting physical illnesses in the first place, and that they often have worse outcomes as a result.

"We are aiming for higher quality care, proactively delivered in communities whenever possible, and delivered as efficiently as possible. This will ensure we don't waste resources, and allow our staff to work effectively with patients without constraints on their efforts to deliver the best possible care."

Next Steps

We are working towards the first regional plan at the end of March 2018. This plan will look to set out our strategic intent informed by understanding our care model which must start with the individual citizen and build through strong local models to hospital care. This plan will also bring forward work that was underway before these new arrangements. The final aspect of the plan will look to best value to ensure that, in the West of Scotland, we are sharing good practice and delivering services efficiently and effectively. Communication and engagement will be two important aspects of our work going forward.

As we progress our work we look forward to working with as many colleagues as possible to shape the future of services across our region.

Further information

As our plans progress, we will be issuing further staff briefings so that you are kept up-to-date with what's going on across the West of Scotland. For more information about how we are sharing updates on the regional delivery plan, contact your local communications lead.

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