

Annual Review 10 November 2016

Agenda Item 1

Progress against the 2015/16 action points

ACTION POINTS

- **The Golden Jubilee Hospital has agreed with NHS Boards to undertake 35,000 procedures in 2016/17.**

Excluding cardiothoracic surgery and cardiology activity, our 2016/17 activity target for inpatients, day case patients and diagnostic examinations totals 37,871 procedures when adjusted for complexity. The target includes a range of services such as orthopaedics, ophthalmic and plastic surgery, and diagnostic imaging and represents a 16.2% increase on 2015/16. Despite the target increase, however, as of the end of August 2016 we were 7.2% ahead of our year to date target and on track to deliver the full year allocation.

Despite continuous expansions, demand for Orthopaedic surgery continues to exceed our capacity. In response to this demand, we initiated further expansions during 2015. The full year effect of these expansions equates to an additional 450 primary joint replacements (or equivalent) and an additional 200 foot and ankle procedures per year. Taking into account the expansions outlined above, the 2016/17 target for orthopaedic joint replacements is based on 4,200 primary joints (or equivalent) and 700 intermediate orthopaedic procedures.

In response to ongoing demand for cataract procedures, we increased our capacity in November 2015 with the aim of delivering an additional 500 procedures over the winter period in 2015/16. The full year effect of this expansion will result in the service delivering a total of 6,200 cataract procedures on behalf of referring Boards in 2016/17.

In addition to the abovementioned expansions, an additional 1,450 magnetic resonance imaging (MRI) scans were also offered to NHS Boards to support them over the 2015/16 winter period. This activity was provided through a staffed mobile MRI scanner, however the reading and administration was carried out by GJNH. Our expectation is that 2,500 additional MRI scans, 250 computerised tomography (CT) scans and 170 DEXA (bone density) scans will be made available to referring Boards in 2016/17

- **To work with the Scottish Government on the elective strategy and produce a business case for the new facility during 2016/17.**

A detailed capacity and demand analysis exercise was carried out during 2015 to assess the predicted demand on elective/scheduled care services over the next ten years in Scotland. GJNH worked in partnership with the Scottish Government and a number of NHS Boards to examine projected population increases, the effect of an increasing older population and the resulting increase in demand for health and care services. In particular,

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volumes of cataract and hip and knee replacement surgery have increased by at least 90% since 2002; and this growth rate is expected to continue. Furthermore if intervention rates per head of population for these procedures increase, this projected growth will be greater still.

This growth in activity is set against the backdrop of increasing capacity challenges in NHS Scotland leading to difficulties in meeting waiting times and an increased use of private sector capacity.

As a result of this analysis and based on the success of the Golden Jubilee model of elective care, the Scottish Government has announced that there will be an investment of approximately £50 million at Golden Jubilee to meet demand for elective procedures over the next ten years. The planned objectives of the investment are as follows:

- Eliminate the use of the private sector;
- Reduce the chances of cancellation of elective surgery;
- Deliver in full and on a sustainable basis current and future Government guarantees on inpatient/day case waiting times;
- Provide greater resilience around the winter period with a more flexible use of beds and theatres; and
- Adopt leading edge best practice from across European and the World in delivering safe, effective and person centred elective healthcare.

In response to the predicted demand from the West region, the footprint of GJNH will be expanded through the construction of a new wing which will contain additional operating theatres, outpatient consultation areas and diagnostic facilities. The Project Team to deliver the new elective care centre at GJNH is currently being established and will produce the business case during 2016/17.

In response to ongoing demand for additional capacity, Golden Jubilee has brought forward work on its infrastructure projects to increase services for 'in demand' specialities, particularly radiology, ophthalmology and general surgery services. The early investment of £5million from the Scottish Government will enable the Golden Jubilee to invest in:

- Two state-of-the-art Magnetic Resonance Imaging (MRI) machines (one with cardiac capability), providing an additional 10,000 examinations a year;
- Building prototype ophthalmology theatres and outpatient clinics to pioneer new models of care, which will treat more patients every year; and
- Establishing a dedicated general surgery service, providing up to 2,100 procedures a year, increasing quality and continuity of care for patients and their families.

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- **Continue to lead innovation on behalf of NHS Scotland in order to support development of new ideas to ensure Scotland remains at the forefront of providing pioneering healthcare**

Open Innovation and Innovation Funding

Open Innovation has been defined as *“the process of innovating with others for shared risk and reward to produce mutual benefits for each organisation, creating new products, processes or ideas that could not otherwise have been achieved alone, or enabling them to be achieved more quickly, cheaply or efficiently”*.

Golden Jubilee has now participated in two Open Innovation sessions led by Scottish Enterprise. This programme is the first of its kind in Scotland, with the cohort being established to:

- Build capacity and capability;
- Develop new relationships and collaborative opportunities;
- Share learning, expertise and experiences;
- Help each other with implementation – what’s working; what’s not;
- Stimulate new thinking and ways of working; and
- Maintain pace and momentum.

Golden Jubilee has presented at these events on Innovation funding and industry collaboration and has been working closely with Scottish Government and Scottish Enterprise. During 2016/17 the Golden Jubilee will host the open innovation programme.

Work has been ongoing in developing a Case for Support for the Innovation Fund in Scotland, with a pilot developed for the Golden Jubilee. The Case for Support is an essential requirement for fundraising – it is the foundation to building an ambitious fundraising initiative. In order to deliver a successful fundraising strategy, we recently appointed a new Director of Global Development and Strategic Partnerships to take forward this ambitious programme of work.

Enterprise Risk Management Approach

Since 2015/16, we have been progressing the development of an ‘Enterprise Risk Management’ (ERM) approach led by our Board and Senior Management Team. This approach, which is being uniquely applied in a health care setting, is designed to identify potential events that may affect the Board vision, to allow the Board to determine which of these events it is willing to accept in pursuit of the vision (risk appetite) and to put in place measures to manage risks within risk appetite tolerances. Triggers and alerts will be put in place to enable more effective risk management. This potentially allows us to achieve better informed decision making with enhanced information on risks and aggregation across our Board.

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The Board has already completed significant work to launch this approach including:

- Agreed the structure of our risk appetite framework – with risk appetite statements framed around the three strands of the Board vision – Leading Quality, Research and Innovation;
- Tested the level of the Board risk appetite for these three areas and assessed how the level of risk appetite varied across the four elements of the Board campus – The Golden Jubilee National Hospital, the Golden Jubilee Conference Hotel, the Golden Jubilee Research Institute and the Innovation Centre;
- Held workshops our Board and Senior Management Team to assess the risk landscape, risk appetite and tolerance for our innovation pillar;
- Developed a risk profiling tool for innovation and plans are in place to roll this out to research and the hotel as the next phase during 2016/17; and
- Agreed the governance arrangements with a revised risk committee being established during 2016/17. This is supported by a newly created post of Chief Risk Officer.

Medical Devices Alpha Test (MDαT)

We have continued to expand our innovative MDαT process developed to connect inventors, funders and clinicians to work together to create innovation in medical devices. The process enables individuals and organisations (such as commercial device companies and academic organisations) to submit a healthcare related device for review by a panel of clinical experts. The review will evaluate the device and its potential use in NHSScotland and the wider healthcare environment. One of the first devices to be evaluated through our MDαT process, the Braidlock, is now being exported to Europe, bringing economic benefits to Scotland and a commercial partnership with GJF is being explored. Demand from device companies for MDαT review has increased significantly over the past year.

We have also established a number of Memoranda of Understanding with strategic partners; this includes Strathclyde University, West College Scotland and a leading hospital in Bangkok. We have also hosted visits from Great Ormond Street and clinical and management teams from Singapore, Australia and Brunei.

- **To undertake a scoping exercise on the possibility of lung transplantation at the hospital and to work with stakeholders in taking this forward.**

Following actions outlined within our Board Local Delivery Plan and agreed with Scottish Government at the Board Annual Review in January 2016, National Services Division (NSD) have formally supported the commencement of an options appraisal exercise to consider the impact of developing a lung transplantation service at Golden Jubilee.

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Development of a lung transplantation service at GJNH has been a longstanding aspiration of the Board and is seen as a logical progression from establishment of the heart transplantation service on the site in 2008. Under current arrangements lung transplantation is not available in Scotland and so Scottish patients requiring the procedure travel to the North of England for treatment. Furthermore, GJNH is the only heart transplant centre in the United Kingdom which does not currently offer both Heart and Lung transplantation.

Over the course of 2016/17 a multidisciplinary team from the Jubilee team with support from NSD and Scottish Government will consider the potential patient benefits to be gained via a Scottish lung transplant service as well as the clinical capacity within Scotland to provide such a service and its financial implications. This work has commenced through an analysis of the current service with support from NSD and we have secured specialist respiratory physician advice to enable us to develop a future potential patient pathway for a lung transplantation service at GJNH. The appraisal will explore all options including a description of activity required to deliver a phased implementation of lung transplantation.

The outcome of the options appraisal will be an outline business case which will be presented to Scottish Government and NSD for consideration.

Golden Jubilee Conference Hotel

The Conference Hotel performed well in what was a very busy year. Following a robust marketing and engagement campaign the rebrand to the 'Golden Jubilee Conference Hotel' was completed in January 2016 and progress was made in not only exceeding the year's business development target but in developing the pipeline for future years. The hotel continued to demonstrate its role as public sector asset with 56% of its business derived from NHS and public sector organisations, and it provided over 8,500 patient bedrooms during 2015/16. All financial targets were exceeded enabling the venue to re-invest in its strategic infrastructure plans.

Turning to 2016/17 and as of the end of August 2016, good progress is being made to update a number of the Hotel's facilities in line with the Conference Hotel's 2020 strategy to develop the venue as an international hospitality, meeting and conference element of the Foundation. The new 'Inspiration Space' conference area was completed in September and this will provide a flexible meeting space which increases overall delegate capacity and provides a platform for creative and collaborative work. The first phase of refurbishing the hotel's bedroom stock with a slick, contemporary look has also been completed. Refurbishment of the remaining rooms will take place on a rolling basis over the next three years.

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Quality Ambition: Person Centred

Delivery of Wait Times

- **12 weeks Treatment Time Guarantee (TTG)**
- **18 weeks Referral to Treatment (RTT)**
- **12 weeks for first outpatient appointment**

During 2015/16 100% of new outpatients were seen within 12 weeks and all of our patient journeys were completed within 18 weeks of referral. We fell slightly short of the 12 week Treatment Time Guarantee (TTG), treating 99.9% of inpatient and daycase patients within target.

Overall we are proud of our waiting times performance as over the course of the year we faced a number of capacity challenges; rising demand for Cardiology beds associated with increased complexity and number of interventional coronary procedures, two consecutive expansions of our Orthopaedic service, and one expansion of our Ophthalmology programme.

Cancer Treatment Target (31 days)

Maintaining the high standards set in previous years and helping to ensure the best possible outcome for our patients, we continued to provide surgical treatment to all lung cancer patients within 31 days during 2015/16 with a median wait time of 11 days and maximum wait of 30 days.

This positive performance has continued into 2016/17 with 100% of cancer patients treated within the 31 day target as of the end of June 2016.

Involving People

During 2015/16 we reviewed our Involving People Strategy which describes how we will work with our stakeholders outside and inside the organisation. Our aim is to move beyond involvement based around giving and receiving information so we can build a participative approach using tools such as shadowing, storytelling and partnership working to develop mutually beneficial relationships between GJF and its wider community. The revised strategy is scheduled for sign off during 2016/17.

National Person Centred Health and Care Programme

In line with the strong person centred ethos within the Board we continue to develop initiatives to support our patients, their families and carers, and our staff:

'Must do with me' elements:

- As part of our focus on holistic patient, family and staff care we reviewed our 'Spiritual Care Policy' during 2015/16, setting out how we will guarantee equity of access to support regardless of belief. The policy will be signed off during 2016/17;
- We piloted 'Patient Voices' films in Cardiac and Thoracic Surgery in which patients and their families spoke about their experience of care at GJNH. These films are being made available to new patients to help them prepare for

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surgery. During 2016/17 we hope to develop films for other clinical areas to support more of our patients.

Volunteers

There was a significant expansion of our Volunteering Services during 2015/16 with an increase in both the number of volunteers and the variety of roles. In addition to services such as befriending and leading quality walkrounds, we now have a number of Patient Peers. As past patients of the Cardiothoracic service themselves, these volunteers provide emotional support and practical advice to new Cardiothoracic patients while raising any patient concerns to staff.

Last year also saw the launch of our volunteer newsletter, 'Involved'. Distributed to all Jubilee volunteers and staff along with volunteer managers across Scotland, 'Involved' helps ensure our volunteers are kept informed of all Jubilee related news while maintaining our links with the wider, national volunteer community.

Equalities

Ensuring our services are accessible to all our patients regardless of language, disability or impairment is a key Board objective. To this end our 'Interpretation and Translation Policy' has been reviewed to ensure all Jubilee patients are able to engage with us in the most accessible way for them.

In January we were awarded 'Top Health and Social Care Provider in the UK' and came 29th in the UK as a whole, our highest ranking yet, in the prestigious Stonewall Workplace Equality Index (WEI) 2016.

Feedback, comments, concerns and complaints

We are pleased to report that while we saw more patients in 2015/16 than in 2014/15 and underwent a number of expansions, we received fewer complaints. In 2014/15 we received 51 complaints (0.08% of overall activity); however, this fell to 48 complaints (0.07% of overall activity) during 2015/16.

We have reviewed the framework and system that supports complaints and feedback management to ensure we involve the right people in responses and use the learning gained to improve our services. As a result of patient feedback we have:

- Set up a new Tissue Viability clinic to assist in monitoring wound complications; and
- Reviewed our hotel booking process for travelling patients to give them the best experience possible.

The DATIX risk management system was also significantly upgraded and the complaints/ feedback module continues to be developed to support tracking of learning and trends across the types of feedback.

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Quality Ambition: Safe

Providing Safe Care

The Golden Jubilee aims to provide high quality care which is safe, effective and person centred. We recognise the risks that are inherent in the delivery of healthcare and are committed to continually reviewing our systems and processes to prevent or reduce the risk of harm whilst allowing us to take opportunities to improve our services.

The Board's **Adverse Event policy** has been significantly revised in line with the national framework from Healthcare Improvement Scotland, with an updated process to support identification and management of Significant Adverse Events. Our DATIX system was upgraded during November 2015 to support the policy re-launch and we continue to develop the causal analysis and action tracking capability of the system in monitoring improvements.

The Foundation remains fully committed to the work of the **Scottish Patient Safety Programme (SPSP)** in improving care for all of our patients. Work is underway in key areas of; Acute Adult programme of Falls, Pressure Ulcer, Deteriorating Patient and Catheter-Associated Urinary Tract Infections (CAUTI). Our pilot ward, Ward 3 West, was invited to present their work on the Scottish Structured Response (SSR) at a regional learning event this year. Following an increase in Staphylococcus Aureus Bacteraemia (SAB) cases there was a review of the Peripheral Vascular Catheter (PVC) maintenance processes with standardisation across all areas of the documentation used to support this. This work was presented at a national Healthcare Associated Infection (HAI) Improvement event in year. The SPSP Leadership Group oversee the programme activity with sub-groups linked to the work streams.

Medicines are a key area of safety and during 2015/16 year we have implemented **Electronic Drug Cabinets**. These cupboards will ensure that patients receive their drugs in a more efficient and timely manner and reduce the risk of errors.

The **Antimicrobial Audit programme** within the Board also continues. A programme of regular audits of antimicrobial prescribing and administration is carried out in the hospital in line with the Scottish Government and SAPG (Scottish Antimicrobial Prescribing Group) recommendations. Results from this are being used to inform local improvements with one are selecting this as their local quality improvement priority.

Innovation at GJNH is also being used to improve our patient's safety and clinical outcomes. We are the first hospital in Europe to trial a groundbreaking device which could revolutionise post surgery care for knee replacement patients. The remote control knee device monitors patients who have had knee replacement surgery, patients to see the progress they are making, and also allowing their consultant to monitor their recovery remotely whether they stay 20 or 200 miles away. It is hoped this new device will significantly improve the recovery journey and clinical outcomes for patients having knee surgery.

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Quality Ambition: Safe

Healthcare Associated Infection (HAI)

Staphylococcus aureus bacteraemia (SAB)

Following a rise in Staphylococcus Aureus Bacteraemia (SAB) cases during the first half of 2015/16, we voluntarily invoked the HAI Policy Unit Chief Nursing Officer (CNO) Algorithm to gain additional support from Health Protection Scotland and Health Improvement Scotland. We developed a SAB prevention group and undertook a collaborative review of possible contributory factors which produced a robust action plan of quality improvement approaches. While there was a subsequent reduction in the number of cases during the second half of the year, the surge in the first two quarters resulted in an overall rate of 0.22 cases per 1000 occupied bed days (AODB). This exceeded our local target of 0.12 cases per AOCB but was within the national target of 0.24 cases per AOCB.

Turning to 2016/17, in the period April to July 16 two SABs have been identified, a positive improvement on last year which saw five cases in the same time period.

Clostridium difficile infection (CDI)

In line with performance seen in previous years, no cases of clostridium difficile infection (CDI) were reporting during 2015/16 and as of the end of July no cases have been seen in 2016/17. We continue to employ alert organism surveillance and close monitoring of the severity of cases by the Prevention and Control of Infection Team.

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Quality Ambition: Effective

Financial Performance

The Board achieved its three core financial targets in 2015/16. Against its Revenue Resource Limit (RRL), the Board achieved a break-even position for both core and non-core expenditure.

In achieving this result, the Board has delivered efficiency savings of £3.498m against a plan of £3.265m, with an increase of £233k against plan.

In addition the Board continues to recognise its national status in supporting both Territorial Boards and National Boards in delivering their efficiency and productivity agenda.

In 2015/16, this support included:

- Additional out of hours and weekend activity for Radiology services currently delivered 'free of charge' to all Health Boards;
- Additional MRI capacity through the use of the mobile MRI increased from two days to five days per week;
- Additional orthopaedic and ophthalmology expansions of which the Board funded the non recurring costs of these in 2015/16 and the supported 1/3 of the recurring costs – to a value of £600k;
- Investment in a Radiology and Theatre Academy that delivers in- house training and accreditation for 'hard to fill' clinical posts. If this model works this could be rolled out across NHS Scotland;
- A reduction in the marginal costs for orthopaedics and endoscopy; this equates to a saving of £700k across NHS Scotland; and
- The roll out of see and treat services across orthopaedics and ophthalmology resulting in savings in new outpatient attendances for Boards across Scotland of 7,212 orthopaedic patients and 8,000 ophthalmology patients

Capital Planning Process

The capital spend for 2015/16 was £6.387m against a budget of £6.387m thus demonstrating a breakeven position. This is split between medical equipment replacement, property expenditure and Information Management and Technology (IM&T) equipment.

A capital planning process for the capital allocation is established with a capital group meeting fortnightly to consider the capital requirements in relation to the Board, in particular:

- Strategic planning objectives;
- Proposed capital projects; and
- Approval and monitoring of capital expenditure.

In addition the work included in the property and asset management strategy is used to inform the capital plan. We have also established a Property and Asset Management (PAMS) Steering group that considers all strategic property and asset issues.

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Quality Ambition: Effective

Efficiency Savings Programme

The efficiency plans for 2016/17 are in the main related to service and quality improvement schemes across inpatient and outpatient services this includes productivity increases and a more efficient use of the workforce. In addition we continue to realise significant savings from procurement schemes (with particular focus on reducing variation), eHealth projects through benefits realisation and energy efficiency through the Central Sterilisation Processing Department (CSPD) steam project.

In recognition of the challenges the Board has in place an efficiency and productivity group including all key Executive Directors and senior managers within the organisation.

The three-five year work plan focuses on the following key areas:

- Telehealth;
- Job planning;
- Prescribing including roll out of electronic drug cupboards;
- Income generation;
- Benefits realisation from ehealth initiatives;
- Radiology redesign;
- Innovation initiatives;
- Workforce planning including e-rostering;
- Capacity Planning and scheduling;
- Procurement lost opportunities and reducing variation;
- Closer monitoring of quality bid investment and benefits realised; and
- Benchmarking and best practice initiatives.

During 2016/17, we aim to extend the Portal to Portal (online patient record viewing tool) connectivity to include links between GJNH and NHS Ayrshire & Arran, NHS Dumfries and Galloway and NHS Greater Glasgow & Clyde. This has been a key efficiency saving for the Board in the previous two years and will continue as the usage increases. Extending to other Boards will save significant time across all clinical staff and administration time.

In addition, we will further rollout electronic ordering of Laboratory and Radiology tests across Golden Jubilee Hospital, building upon the benefits already identified within the Outpatient Department

Staff Governance 2015/16

Everyone Matters: 2020 Workforce Vision recognises the key role the workforce plays in responding to the challenges that NHSS is facing, and in improving patient care and overall performance. During 2015/16, our key areas of achievement were:

- iMatter has been rolled out to every team within the Board. Training has been delivered across the Board and guidance developed to ensure sustainability of the system;

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Quality Ambition: Effective

- We have reviewed the level of organisational development support required to support Team Leads and Managers in relation to developing iMatter action plans and improving the quality of Knowledge and Skills Framework Personal Development Review (KSF PDR) conversations. A process is in place to align support where support on Team Effectiveness is requested;
- Excellent progress has been made in delivering the 2015/16 Staff Governance Action Plan;
- All NHS Scotland Partnership Information Network (PIN) policies have been implemented within the Board ensuring equity of access and consistency of approach; and
- Values based recruitment is now embedded throughout the Board with training provided for all line managers. This helps the Board to work towards its Vision for leading quality, research and innovation, and our Values of:
 - Valuing dignity and respect;
 - A 'can do' attitude;
 - Leading commitment to quality;
 - Understanding our responsibilities; and
 - Effectively working together

iMatter

Having fully implemented iMatter, the Board received its anniversary report in July 2016 with an overall response rate (RR) of 71% and employee engagement index (EEI) score of 77%. These demonstrated an increase from 2015 (RR 65% and EEI 77%).

Values Pulse Survey

Having developed our innovative validated pulse survey to test whether staff feel our values are being "lived", we rolled the survey out to half of the Board in June 2016. The results were very positive with a 62% response rate and a Values Index Score of 84%. The survey will be rolled out to the remaining staff in November 2016.

Sickness Absence and Knowledge and Skills Framework (KSF)

Sickness absence has been a challenging area for us in 2015/16 and Board absence rate for the year was 5.1%. Since April 2016, our levels of sickness absence have reduced and were at 4.1% in July.

Sickness absence continues to be managed effectively and fairly for all staff in a supportive manner through close working of staff, managers, Human Resources and staff side.

Our performance against the KSF PDR target of 80% has remained a strong focus and 74% of KSF reviews were completed by 31 March 2016. To ensure staff are fully supported in their development we are now working on improving the quality of the conversations between managers and staff during the review process.

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Quality Ambition: Effective

Leadership Development

During 2015/16 we continued work to implement our Leadership Framework to support our Board 2020 Vision of 'Leading Quality, Research and Innovation' to build and embed the leadership skills of all staff.

A key area of focus has been the roll out of Human Factors training across the organisation. Currently 35% of staff have completed this training. Human factors looks to improve clinical performance through an understanding of teamwork, tasks, equipment, workspace, culture and organisation on human behaviour and abilities and application of that knowledge in clinical settings.

In late 2015, our Quality and Innovation Group approved the development of a programme of quality improvement training at Levels 1 and 2 which would contribute to achievement of the Bronze and Silver levels of the Leadership Framework. These programmes are progressing well and the aim is to have a celebration event twice yearly to allow staff to present their improvement projects and be recognised for their efforts in improving quality as well as motivating others to participate.