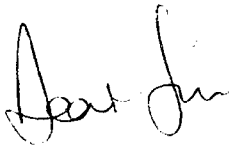


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1. This letter summarises the main points covered and the key actions agreed during our discussions at the Annual Review and associated meetings in Clydebank on 18 May.

2. I would like to thank you, Jill Young and the others in your team for all your hard work in organising an extremely practical and positive programme. It was very useful for me to take an informative tour of the ICU unit at the hospital, to have an opportunity to see at first hand a range of new technology and state of the art facilities that are improving efficiency and patient care and to converse with a variety of NHS staff and patients. The constructive nature of our discussions at the various meetings was not only stimulating but extremely worthwhile and valuable.

Meeting with the Partnership Forum

3. I should be grateful if you would pass on my thanks to all those who participated in this meeting. The discussions were very positive and constructive, and there was clear evidence that strong partnership arrangements are in place.

4. I was very pleased to acknowledge the significant achievements of the Board in ensuring that progress towards the eKSF (electronic Knowledge & Skills Framework) HEAT target was on track and that sickness absence continues to be below 4%.

5. We discussed the challenges associated with maintaining partnership in the challenging financial climate that faces us and I was particularly impressed with the commitment expressed by all parties to maintain a strong partnership framework to ensure that staff remain engaged with the organisation.

6. The challenges of making changes to services were highlighted in response to increasing financial pressures and I was very pleased to hear that staff have had the opportunity to contribute to this process and indeed have come up with some good suggestions. As was pointed out, even small changes soon add up to helping the organisation achieve its goals.

7. We also talked about the need for good communications with the workforce and a number of initiatives were highlighted including learning classes and I was particularly impressed and intrigued that the Board had run a 'Finance is Fun' session. It is clear to me that there are good levels of engagement with the workforce at all levels of the organisation.

8. The issue of implementing eKSF was raised and experience suggested that this process was quite resource intensive. I stated that in many ways KSF is more important than 'Agenda for Change' itself as it is essential that we have a system that values staff development and ensures a quality workforce. I emphasised my view that to have a system that ensures managers have structured and protected time with their staff is essential and central to the development of quality services. I agreed that there is a need to take stock nationally of the numbers of staff who do not have access to computers as this appears to be a significant barrier to the electronic completion of the KSF record.

9. We also discussed the implementation of the Regulation of Healthcare Support Workers and asked that there be national consistency on the supporting HR processes and further discussions with the service on how best to support this significant initiative. I agreed that the Scottish Government would be happy to look at support for Boards to ensure consistency of approach and would ask officials to ensure there is further discussion on this issue.

10. We ended the meeting by discussing the benefits of partnership working and I was very encouraged that whilst it was acknowledged there will be difficult times ahead it was agreed that by working together in partnership a stronger organisation would emerge as a result.

11. Finally, I was advised that Carole Anderson was stepping down as co-chair of the Partnership Forum and that Jane Christie had been elected as the new co-chair. I thanked Carole for all her hard work and dedication to developing partnership within the National Waiting Times Centre and wished Carole and Jane good luck in their new roles.

Tour of Level Two and Three: New ICU System, Hospital at Night System, CT Scanner and 3-D digital Imaging Technology in Cath Labs.

12. I visited the Intensive Care Unit to see the Critical Care Clinical Information which is an integrated system that is designed to replace paper records in the ICU and HDU Units. Staff in departments such as pharmacy and laboratories also have access to review patient medications and communications. The system also automatically records patients' vital signs from devices hooked up to the patient. This reduces the time spent on manual updating records and forms allowing staff more time with the patient. I also saw a demonstration of the 'hospital at night' system which is a clinical handover tool for all specialties. The system is generic and permits multi-professional sharing of information 24/7. Both these systems greatly enhance clinical care and patient safety.

13. I also saw the new 64 slice CT machine, the first of its kind in Scotland, and the 3-D digital imaging all of which were particularly impressive. I was extremely impressed with the leading edge technology. The CT scanner with cardiac capability is good example of non-invasive treatment. I heard at first hand from the very highly skilled Cardiology team in the new Cath Lab how this new technology is making a tremendous difference and saw a cardiac interventional procedure as it happened, I heard the potential for it to do much more in terms of new developments for patients and was assured that your senior team would be fully involved at all stages of the process for TAVI in particular.

14. I was especially pleased to be able to meet with a group of patients and staff during the visits and should be grateful if you would pass on my personal appreciation to all of them,

Meeting with Patients

15. I very much appreciated the chance to learn directly from patients about their experiences of care of at the Golden Jubilee National Hospital, and I am grateful to those who gave up their time to be present at the Annual Review and to speak.

16. All the patients were extremely upbeat recalling their own very positive experiences in the quality of care they received and praising the hospital and its entire staff. They commented that the Board was very responsive to their needs and that of their relatives and all paid warm tributes to the excellent care and treatment that was provided by the hospital. In particular Colin Stoddart provided a very touching account of his own patient journey, right through to undergoing a heart transplant which has so enhanced his quality of life. The other patients in recounting their own individual experiences were also warm in their fulsome praise towards the hospital. In general the patients were very pleased with the culture and overall ethos of the Golden Jubilee.

17. I always attach great importance to the views of patients and I thanked those whom I met at the time, but I should be grateful if you would convey to them my appreciation of their willingness to give up their time and to speak so candidly and constructively about their experience, especially Colin Stoddart for his particularly uplifting story.

Annual Review Meeting

18. After I reported back on the above meetings, you presented a useful overview of your Board's key achievements over the past year and some of the challenges and opportunities that lie ahead. The majority of these were covered later in the meeting and are recorded in the relevant parts of this letter. I noted that Board has put into practice or satisfactorily advanced each of the issues identified for action at last year's Annual Review. I would like to put on record my thanks to Lindsay Burley for her role in leading the sustained success of the hospital.

Access and Activity

(a) West of Scotland Heart and Lung Centre

19. The West of Scotland Heart and Lung Centre is now fully established and providing an extensive range of heart and lung surgery, diagnostic and interventional cardiology services on a regional and national basis for both routine and emergency patients. The centre was continuing to deliver on waiting times with most heart patients receiving their operation within 8 weeks. You were also delivering on the cancer waiting time standard.

20. You indicated that the new CT scanner and Biplane 3-D digital imaging technology were both having a major impact in speeding up diagnosis and treatment and improving the quality of care to patients.

(b) Delivering Activity for NHSScotland

21. The hospital had delivered 26,500 procedures in 2009/10. This exceeded the activity/target by 19%. This was indeed an excellent performance in view of the significant increase in highly complex hip and knee joint replacement operations. I noted that imaging which has an important role in diagnosing patients had performed exceptionally well with over 4,000 extra patients. I thanked all the staff who had contributed to an outstanding achievement, which had benefited many patients throughout Scotland.

22. The hospital has agreed to undertake 21,395 procedures for NHSScotland in 2010/11. The Board was continuing to work with Boards to finalise the available capacity to be taken up by NHS Boards. Ophthalmology remained a concern with Boards continuing to reduce their requirements. General surgery uptake was also down although you had agreed to undertake 60 gastric banding operations in the coming year, initially for NHS Dumfries and Galloway, NHS Forth Valley and for the Argyll and Bute area of NHS Highland.

23. You confirmed that you are continuing to work with Boards to try and acquire patient flows for the next 3 to 5 years. You gave an update of progress with Argyll and Bute Community Health Partnership to provide outreach clinics and secure direct referrals for orthopaedic surgery. Discussions had focussed on a redesign of services to improve the patient pathway and the patient experience. Discussions were ongoing particularly in relation to the financial details.

24. In relation to orthopaedics you indicated that as with previous years Boards had again requested increased orthopaedic activity. In view of this you were currently pulling together a business case to expand your orthopaedic capacity. I urged you push ahead with the business case as orthopaedic is a service with increasing demand.

25. I stressed the importance of the Board's strengths is its flexibility in assisting other NHS Boards hospital's. I emphasised it was important that other Boards take into account the services available at the hospital particularly in their planning process to ensure referrals to the Golden Jubilee in the longer term. The hospital is now an integral part of the NHS in Scotland.

Improving Treatment for Patients

26. On Healthcare Associate Infection (HAI), the Board and staff are justly proud of the continuing excellent performance in this area. There was a slight decrease in the number of cases of staphylococcus aureus bacteraemia and clostridium difficile associated disease. This was a very good performance and the challenge for the Board is to continue to maintain this low level of infection. I noted the excellent work you were continuing to take forward to implement zero tolerance. I was very pleased to hear about leadership from the top and that you have a detailed action plan within the hospital.

27. I noted that the Board had moved forward with the Scottish Patient Safety Programme (SPSP) particularly in establishing a recovery plan. You advised that you have improved resourcing to the SPSP and that all streams are showing improvements. I was very interested to hear that you remain on track to reach your target within this whole process.

28. My meeting with the patients clearly indicated that it is apparent that the Board has made significant progress in remaining fully engaged in involving people. The Board have piloted a quality survey to support progress which is measurable in the quality of the patient journey. I commended you for proactively ensuring that the views of Patients Focus Group and the Disability Reference Group were always fully considered in the analysis of the initial feedback.

29. As the hospital remains distinctive through the range of services that it provides it is important to continue to deliver and develop a set of improvement indicators to address any shortcomings that may be identified by service users. You recognised the challenges ahead in the coming year and in the importance of being able to benchmark all aspects of the hospital's services and that you would continue to develop this.

Efficiency

30. I commended the Board on achieving all three financial targets – remaining within Revenue Resource Limit, Capital Resource Limit and cash requirement in 2009-10, as well as exceeding your efficiency saving target. You confirmed the Board was on course to deliver the current year's efficiency target.

31. In the light of the existing economic situation it was important that the Board continue to seek efficiencies. The Board recognised the importance of continually reviewing how to provide improved services more efficiently. You have a robust Performance Framework which looked at cost against performance and continue to look at redesign and procurement of corporate services with other NHS Boards.

32. I congratulated you on the excellent performance in sickness absence which was in line with the national target of 4%. The reduction of the sickness rate reflected the top priority this continues to receive across the Board. You outlined the close liaison between managers and HR advisers which had been put in place protocols to support individuals on their return to work.

Staff Governance

33. You also stated that staff governance continues to be a strong focus for the Board and that work will continue through the year in order to review and develop effective staff policies and procedures. This will be significant in ensuring that the staff governance Action Plan will continue to be progressed. You reported that an external audit had already commended you on the effectiveness of the Board's staff governance arrangements which had already highlighted a strong culture of promoting staff governance throughout the organisation as well as identifying areas of good practice. You had previously indicated that communication is the key with information being passed on to all staff at the appropriate time via briefings, notice boards and a scheme entitled 'Speakeasy' – a two-way communication tool where staff can also offer feedback. You had also revised the Dignity at Work policy by building on existing values and behaviour.

Learning and Development

34. I understand that the Board's Learning and Development team had already undertaken a substantial programme and achieved the launch of a robust Leadership and Management Framework which is directly linked to the national leadership strategy. You have also led a Change Agent Initiative in partnership with NHS Forth Valley which will increase capacity and capability in accelerating any projects.

I appreciate the importance of the significance of this programme of work across the organisation. You should therefore continue to work remains on track and I would be grateful if you could keep the Health Directorate informed of the work you are taking forward in relation to any of these initiatives.

Clinical Strategy 2010-15

35. The last few years has seen a major expansion of the hospital. It was clear that following the growth of the hospital it was now a suitable time to take stock of progress and effectiveness and take a longer term view of what the hospital should look like in the next 5 years and beyond. You recognised the need for the hospital to be able to proactively plan ahead on a longer term basis and this has led to your vision documents for the Heart and Lung centre and the whole of the hospital. The current draft documents are very clear but considerable work will be required in taking this work forward, that is why I have asked my officials to work with the Board to develop it further before its is shared wider with key stakeholders including other NHS Boards. There are exciting opportunities ahead and I was encouraged by the real enthusiasm of staff in taking this forward.

Beardmore Centre for Health Science

36. You reported that following approval by the National Waiting Times Centre in April 2009 that the Clinical Skills and Research Centre has progressed and during this time has focused on a number of key areas including plans for internal building work which are due to commence later this year. The research centre will be called the 'Beardmore Centre for Health Sciences' and will consist of two distinctive areas, the Clinical Research Facility (CRF) and the Clinical Skills Area. You advised that the facilities are soon to appoint a Centre Manager and that they will play a pivotal role in the marketing and management of the Centre.

Beardmore Hotel and Conference Centre

37. I was very pleased that during 2009-10, NHS and public sector business continued to grow and accounted for 43% of income. In the light of the financial challenges currently being faced by the hospitality and leisure industry it was extremely encouraging that business remained ahead of target. The hotel continues to go from strength to strength in playing an important role in supporting the hospital with approximately 7,555 bed nights for patients/relatives/doctors being used. I was very pleased to see that the Hotel and Conference Centre are continuing to look at ways of making sure that they remain at the forefront of the hospitality and leisure business particularly in the current economic climate.

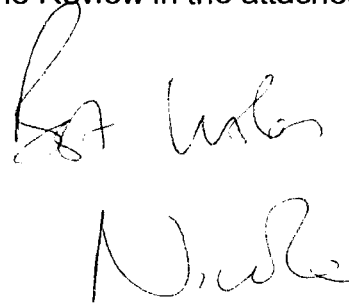
Public Involvement

38. A member of the audience asked on sending communications electronically to patients. You explained that E-health would consider this. Another member of the audience asked about cardiac cancellations. You explained in some detail about the strict monitoring under 'New Ways' and patient choice. A further member of the audience enquired about plans for an express bus service from the city centre to the hospital and you indicated that discussions were ongoing with Strathclyde Partnership for Transport (SPT) to establish an 'express' route. A member of the audience then asked about numbers of junior doctors and patient safety which may become an issue. Dr Flowerdew, Medical Director gave an assurance on the recruitment of external doctors and on positive developments over the past 12 months.

Conclusions

39 I congratulated you and your colleagues on another very successful year during which you demonstrated sound financial control, effectively met your activity target and successfully established the Heart and Lung Centre, which is now providing an extensive range of heart and lung surgery, diagnostic and interventional cardiology services, on a regional and national basis. The Beardmore Hotel and Conference Centre is now clearly established as a national and public sector conference and training facility. I believe you should be extremely proud of becoming Business Hotel of the Year 2010 as well as receiving an Investor in People silver award. Overall, you have delivered a genuinely good performance over the past year. Of course, many challenges lie ahead in the coming year, not least taking forward the clinical strategy and ensuring that in the present economic climate you continue to deliver a range of high quality services to patients across Scotland.

40. I have set out the key action points arising from the Review in the attached Annex.



NICOLA STURGEON

ANNEX

NATIONAL WAITING TIMES CENTRE BOARD ANNUAL REVIEW 2010

ACTION POINTS

- The Golden Jubilee Hospital has agreed with NHS Boards to undertake 21,395 procedures in 2010-11.
- Work with Health Directorate officials to develop the detail of the future strategy for the Heart and Lung Centre and on the hospitals overall Clinical Strategy – prior to wider consultation with NHS Boards.
- Implement the introduction of the Beardmore Centre for Health Sciences