# NHS Golden Jubilee

### **Meeting: NHS Golden Jubilee Board**

### **Meeting date: 28 September 2023**

### **Title: Realistic Medicine 6 Monthly Report**

### **Responsible Executive/Non-Executive: Mark MacGregor, Medical Director**

### **Report Author: Helen Mackie, Assistant Medical Director**

## 1 Purpose

### This is presented to the Committee for:

### Awareness

### This report relates to a:

* Annual Operation Plan
* Government policy/directive
* NHS Board/Integration Joint Board Strategy or Direction

### This aligns to the following NHSScotland quality ambition(s):

* Safe
* Effective
* Person Centred

**This aligns to the following NHSGJ Corporate Objectives:**

## 2 Report summary

## 2.1 Situation

The Golden Jubilee Realistic Medicine team is small and has suffered several changes in membership/ staff absences over the last few months. The RM steering group membership has also changes significantly which has contributed to a loss of the initial momentum of the RM program relaunched in 2021.

Scottish Government have confirmed ongoing support for Realistic Medicine at the Golden Jubilee. £30K for Clinical lead roles and £20K for program management support.

The PM post is currently vacant and recruitment was put on hold to allow exploration of a joint post with the Performance and planning team. This has not been feasible at this time therefore we have informed SG that we are unable to accept the PM funding at this point, and will go out to advert for the part-time fixed term post.

Funding is conditional on meeting key conditions, which support the Boards planned care delivery plan. Following submission of our action plan in spring the SG RM team have asked for more detail in the action plan and assurance of how the team will be supported to deliver this given the gap in programme management support and departure of leading AMD.

## 2.2 Background

Realistic medicine is a key policy of the CMO for Scotland and it is by practicing Realistic Medicine that NHS Scotland will deliver Value Based Health and Care. Key elements of Realistic Medicine is supporting clinical teams to have meaningful conversations with patients and ensure Shared Decision making about their care. Realistic Medicine also encourages clinicians to ask if the care we offer is of value to the person and to avoid the overtreatment. Which can result in harm and waste. The six key principles of Realistic medicine also urge us to tackle unwarranted variation within our systems, manage risk more effectively and be innovators and improvers.

Scottish Government has been supporting health boards by funding Clinical leads and Program managers since 2018. Initially 2 consultants shared this lead role however both stepped back from this role in 2020.

In August 2021 a new GJ RM team was formed. This was led by the AMD for NES and consisted of 2 clinical leads (4hrs per week), one AHP and one Nurse and a part time program manager (2 days per week). This small but enthusiastic team have worked hard to raise awareness and this was been well received by clinical teams.

Key successes have been

* Comms to raise awareness of Realistic medicine
* Series of educational sessions at CME days for several staff groups
* Development of RM steering group
* Development of governance and reporting processes
* Individual Clinical lead projects e.g. Use of Near Me virtual consultations and introduction of Treatment escalation plans

 Key Challenges

* Small team
* Staff absences and vacancies have reduced the capacity of the team
* Lack of programme management support

## 2.3 Assessment

 The realistic medicine team is still fairly new and has experiences some challenges in terms of continuity at the Golden Jubilee. There is now an established steering committee and reporting process through clinical governance. There however are gaps in terms of program management support and the program would benefit from a wider network of support.

 The leading AMD is leaving the GJ but will be handing over to the Exec Director and the steering group membership has been widened to include CfSD and “Clinical Mentors” that is Consultant who have agreed to support the current clinical leads with their key

 Individual projects.

 The SG team is keen to support the Golden Jubilee and a site visit is planned for the 13th October.

 An updated and detailed action plan is in development.

 Options for recruiting to the PM vacancy are being explored, with a possibility of partnering with CfSD for a joint PM.

## 2.4 Recommendation

* **Awareness** – For Members’ information only.
* **Discussion**

## 3 List of appendices

The following appendices are included with this report:

* Appendix 1. Action plan July 2023
* Appendix 2. Flash report
* Appendix 3. Offer of support letter from SG
* Appendix 4. RM Programme Manager Job Description