

<b>NHS Greater Glasgow and Clyde</b>	<b>Paper No. 25/02</b>
<b>Meeting:</b>	<b>NHSGGC Board Meeting</b>
<b>Meeting Date:</b>	<b>25 February 2025</b>
<b>Title:</b>	<b>Health and Social Care Reform Board Update</b>
<b>Sponsoring Director:</b>	<b>Professor Jann Gardner, Chief Executive</b>
<b>Report Author:</b>	<b>Claire MacArthur, Director of Planning</b>

## 1. Purpose

**The purpose of the attached paper is three-fold:**

- To update Board members on the key components Health & Social Care Reform set out by the First Minister for Scotland on 27<sup>th</sup> January 2025
- To set out how the Reform agenda will further support the implementation of our 'Moving Forward Together' clinical transformation strategy and our Quality Strategy 'Quality Everyone Everywhere'
- To share the key elements of our emerging model and outline the key conditions needed for this new chapter within NHSGGC.

## 2. Executive Summary

**The paper can be summarised as follows:**

### 2.1 Strategic Context

In August 2024, following public and staff engagement the Board approved the MFT Clinical Vision and Roadmap. The Clinical Roadmap sets out the proposed key themes for a transformed GGC over the three horizons of 0-2 years, 3-5 years and 5 years plus.

In December 2024, NHS Scotland Delivery Plan guidance was issued by Scottish Government, the guidance included a focus on NHS Renewal and Health & Social Care Reform. On January 27<sup>th</sup> this was further strengthened when the First Minister of Scotland gave a policy speech setting out the key elements on the NHSScotland renewal framework and Health & Social Care Reform.

## 2.2 Developing our 2025/26 Delivery Plan – Harnessing Health & Social Care Reform Opportunities

Our Delivery Plan this year therefore focuses on aligning our priorities for 2025-26 as well as setting out our vision to transform how we deliver care over the next 3 years to evolve our services and optimise our resources with a focus on whole system working.

Our plan reflects Scotland's Programme of Reform for Health and Social Care, aligned with the focused policy priorities set out in the First Ministers speech in January 2025, and through the implementation of our 'Moving Forward Together' clinical transformation strategy and our Quality Strategy 'Quality Everyone Everywhere'.

In support of this we have set out our key objectives as follows:

1. **Improve Access** - Deliver and sustain the changes required to reduce immediate pressures across our system and improve access to treatment
2. **Harness Digital & Innovation to support access and prevention** - Implement digital and technological innovation to support prevention and improve access to and delivery of care
3. **Shift the Balance of Care** - Taking a whole system approach, we will shift the balance of care between acute services & our communities
4. **Improve Population Health** – Working with people to prevent illness and more proactively meet people's needs we will support proactive prevention through our existing work and through the additional investment in general practice and community-based teams. In addition, we will support the implementation of the new Population health Framework when published in Spring 2025.

Our programme of reform and renewal is ambitious and will require us to deliver significant transformational change and improvement at pace and scale.

During early 2025, we will therefore develop a detailed 3-year transformation plan to describe how we will further transform the delivery of care, through the re-engineering of care pathways to ensure that every person receives the right care, in the right place, at the right time. Central to our transformation plan will be how we better support our immediate and significant urgent care pressures by shifting the balance of care to enable more patients to be safely and effectively cared for at home. Our plan will be co-created by senior whole systems leaders & senior clinicians from across our system.

## 2.3 Developing our Three-year Transformation Plan - Emerging Key Elements

The key components of our three-year transformational plan will include:

- **Co-creation & development of a whole system interface care division**  
This will support the development of an **FNC+ Plus** connecting care model, the development of a new model of **eTriage** and **Rapid Assessment and Care (RAaC)** across our front doors, and the creation of an ambitious new '**NHS GGC Virtual Hospital**' connecting and building from our virtual bed

capacity and the expansion of the range and coverage of clinical support and treatments at home.

- **Expansion of our planned care capacity**

Our plan will set out how we will improve access to planned care through further investment to **expand our Surgical Hubs** at Gartnavel General Hospital and Inverclyde Royal Hospital. We will also **maximise our Ambulatory Care Hospitals capacity** to direct further elective capacity away from the main hospital sites and separate further the interdependency of emergency and elective care. We will also **optimise additional National Treatment Centre capacity** to reduce waiting times for patients.

## **2.4 Key Conditions for our New Chapter**

### **Co-designing our Transformation Plan**

Our programme of transformational change will be co-designed and will ensure significant and ongoing staff involvement and engagement. Integral to our success in delivering transformational change will be our ability to effectively engage with staff, fully utilising their passion and expertise. A key objective of this programme is to re-engage and empower staff and patients.

### **Digital Transformation**

We remain committed to being at the forefront of digital and technological innovation which will drive positive transformation, ultimately leading to enhanced performance, increased efficiency, improved access and better outcomes for our patients. Our plan will be underpinned by further investment in digital innovation to support a redesigned services including remote monitoring and virtual care digital platforms.

### **Financial Context: Optimisation of our Resources & Additional Investment**

We will ensure we continue to optimise all our available resources, however, to deliver our ambitious transformational plan at both scale and pace there will be a requirement for significant investment and a drive for effective deployment and utilisation of resources with a continues focus on efficiency, productivity and reduction in non-value added service elements.

We will look to harness the opportunities of the NHS Scotland Reform programme and work with Scottish Government on the strategy and investment profile required. Early indication is our plan will require additional investment of ~ £20m. This early forecast we believe is proportionate to the initial direction of travel and scale of change required. This value has been noted with the Director of Finance at Scottish Government, to allow this to be recognised while our plans are being finalised for submission. It should be acknowledged that no formal agreement is in place at this stage.

It is likely that any initial allocation, if successful, may not be able to be immediately confirmed on a recurring basis. Whilst this would present a risk the need for transformation and reform is such that we would look to work with SG colleagues to ensure this would not delay implementation.

### **Measuring the Impact of our Transformation Plan**

We will measure the impact of our programme of transformation to ensure we deliver sustainable change for our patients and staff. Through the development of a quality & performance monitoring framework we will closely monitor the impact of each of our whole system changes. Our framework will include both quantitative and qualitative measures. Monitoring the impact of the plan will ensure we deliver enhanced performance, increased efficiency, improved access and better outcomes for our patients.

### **Summary**

Our draft Delivery Plan this year is set within the context of an exciting period of change and renewal within NHS Greater Glasgow and Clyde.

During the next 2 months we will co-design and develop our 3 year transformational plan in more detail. At the end March Board Briefing session we plan to share a detailed walk through of the model with Board members.

It is our intention to develop our 3 year transformational plan through review of the existing whole systems plan submitted to SG in December further aligning it to the MFT clinical roadmap and the Health & Social Care reform objective set out by the First Minister for Scotland.

## **3. Response Required**

This paper is presented for **awareness**.

## **4. Impact Assessment**

**The impact of this paper on NHSGGC's corporate aims, approach to equality and diversity and environmental impact are assessed as follows:**

- |                        |                        |
|------------------------|------------------------|
| • Better Health        | <u>Positive</u> impact |
| • Better Care          | <u>Positive</u> impact |
| • Better Value         | <u>Positive</u> impact |
| • Better Workplace     | <u>Positive</u> impact |
| • Equality & Diversity | <u>Positive</u> impact |
| • Environment          | <u>Positive</u> impact |

## **5. Engagement & Communications**

**The issues addressed in this paper were subject to the following engagement and communications activity:**

This is an initial briefing paper to support Board awareness of the recently shared Health & Social Care Reform objectives set out by the First Minister and start to discuss how this has shaped both our one-year delivery plan and also a new three-year transformation plan. The detail of our transformation plan will now be co-designed with senior system leaders and clinicians in the coming weeks and a walk through of the proposed plan will be discussed and shared with the Board at the end of March.

## **6. Governance Route**

**This paper has been previously considered by the following groups as part of its development:**

As set out above this is an initial briefing paper, once worked up fully, the detail of the 3-year transformation plan will be shared through CMT, FP&P and the Board. Ahead of this a walk through of the proposed plan will be discussed and shared with the Board at the end of March.

## **7. Date Prepared & Issued**

**Paper prepared on: 13 February 2025**

**Paper issued on: 17 February 2025**