

Meeting:	NHS Grampian Board
Meeting date:	14 March 2024
Item Number:	8
Title:	Strategic Plan for Dr Gray's Hospital
Responsible Executive/Non-Executive:	Simon Bokor-Ingram, Moray Portfolio Lead
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1 Purpose

This is presented to the Board for:

- Assurance – to note the early successes and reported progress to date.
- Endorsement - endorse the re-centring of the Programme to include significant service redesign that sustainably delivers the Strategic Intent and supports the people of Moray

This report relates to a:

- NHS Board/Integration Joint Board Strategy or Direction

This aligns to the following NHS Scotland quality ambitions:

- Safe
- Effective
- Person Centred

2 Report summary

2.1 Situation

NHS Grampian has a 10 year Strategy for Dr Gray's Hospital (DGH) with a set of clear objectives as its Strategic Intent. This paper provides an update on progress, outlines some of the challenges and risks facing the Strategy Programme and describes the refocusing on affordability and sustainability that is necessary to ensure delivery of the Strategic Intent.

2.2 Background

In 2023, the Board approved an Implementation Plan for the Dr Gray's Strategy 2023-2033 based on an agreed Strategic Intent. This was closely linked with the broader work undertaken to develop Plan for the Future, and acknowledged the need for a specific view of Dr Gray's Hospital and its future as part of the wider system.

Dr Gray's Hospital – Strategic Intent

People	Place	Pathways
<ul style="list-style-type: none"> • Staff being enabled to fulfil their potential • Centre for excellence for remote health provision • Test bed for interdisciplinary/ multi-disciplinary models of care • Centre for excellence for teaching undergraduate students and development post-graduate trainees 	<ul style="list-style-type: none"> • An anchor organisation for Elgin and Moray • Expert provision for local population • Delivery of service for Grampian and North regions • Moray Portfolio as an integrated system • Utilisation of technology and innovation 	<ul style="list-style-type: none"> • Networked with Aberdeen and Inverness • Delivery of general unscheduled services, expert in assessment, diagnosis and stabilising and either (1) local treatment, or (2) onward transfer • Residual capacity to deliver planned care services in Dr Gray's and in network • Separate planned and unplanned care

Robust engagement highlighted the pressures in the hospital on services and staff, with particular challenges in workforce retention and recruitment. These were seen to be linked to local workforce availability, the fragility of smaller teams, and the subsequent impact on service sustainability, and the challenges of delivering specialist services in a smaller, rural location.

As well as an enthusiastic local staff group, the general community voice in Moray is strong and has helped shape the national commitment to a full obstetric model in the hospital, which requires a 24/7 clinical infrastructure. Moray is the recipient of Levelling Up funding, Growth Deal funding and there is significant investment by the military, all of which serves to highlight the flourishing development in the area.

2.3 Assessment

Since the Programme approach was developed to deliver the Strategy there has been progress as well as a number of challenges, including limited project capacity.

The need to focus on balancing the hospital's budget is demonstrated by a projected overspend anticipated to be around £12m for 2023/24. Related to this is the recent direction from the Scottish Government that, based on the medium term funding outlook, development work on the National Treatment Centre - Grampian, including the MRI for Dr Gray's Hospital, should pause. This funding outlook also impacts the associated improvements works in Ward 4 and the temporary relocation of mental health facilities, with capital funding received in 2024/25 financial year directed towards the maintenance of the existing estate and essential equipment replacement programmes.

Given the implications of the medium term funding outlook to delivering the Strategic Intent, the Dr Gray's Leadership Team has considered the risk this represents with the Chief Executive Team at recent Critical Thinking sessions. As a result, it has become clear that there is a necessity to adapt the planned Programme to refocus on affordability and sustainability.

In addition to the financial challenge, there are a number of wider considerations that have a bearing on the Strategic Programme.

Workforce availability - in particular, consultant roles in Acute & General Medicine, Anaesthetics and theatre nursing roles are not attractive, and feedback indicates this may be in part due to the imbalance of emergency vs planned activity. Supplementing teams with locum and agency staff is a consequence and a direct cause of the scale of the hospital overspend.

Professional development and education – high occupancy rates in unscheduled care medical beds has led to lower levels of elective activity and resulting skills maintenance concerns in Orthopaedics, and there are NHS Education Scotland (NES)/General Medical Council (GMC) concerns relating to supervision capacity and curricular achievement.

Infrastructure limitations – these are well described in a Space, Quality and Functionality report produced as part of the Strategy Programme. Highest areas of risk are the ED footprint, the theatre capabilities (mainly related to ventilation) and a lack of staff training environment.

Stand-alone services – there a number of specialist services which are delivered by a single clinician, presenting risks to continuity, governance, supervision / peer support, all of which is a threat to sustainability.

To re-centre Programme Implementation in order to deliver the Strategic Intent in a way that ensures affordability and sustainability, three key areas of redesign (in line with the scale of the challenge faced) are proposed.

The redesign areas described below would enable the Programme to deliver the Strategic Intent and the outcomes described in the Annual Delivery Plan. Enablers including the Programme approach itself; change management methodology and workforce planning tools will support success as well as continued cross-Programme links with the Value and Sustainability workstream and the Maternity Collaborative. A key factor for the redesign would be to design and deliver services that can be provided and sustained at a high level of quality; for the hospital to focus on doing what it can do well.

Redefine the menu of surgical services to be delivered with an associated workforce plan

The sustainability of some surgical services is already at risk as a result of national shortages and operational pressures; a redesigned menu of surgical services to be undertaken at DGH would address this, as well as the linked issues of quality and capacity of limited theatre facilities and resources. Accelerated work on designing networked models with Aberdeen and Raigmore is required here.

Re-configure the bed base and theatre model to align with this and the associated workforce plan

Viable theatre resource is a necessary and fundamental element of clinical infrastructure at DGH. Drivers for this include the Emergency Department (ED) and the maternity model. Early reviews of theatre facilities and their use indicate the need for significant improvement and redesign of utilisation to provide capacity and sustainability

Re-imagine the 'Front Door' model & workforce plan

Acute medical assessment represents much of the presentation mix at the front door. Redesign and realignment to a new model or working, with pathways designed to match this activity will improve flow through the hospital.

Early Successes

With reduced capacity, the Programme has focused on early successes that demonstrate strategic wins and to build staff confidence. These include:

- Established programme approach with identified leads for the workstreams in:
 - Workforce
 - Pathways
 - Digital Healthcare and Innovation
 - Infrastructure
 - Communications.
- Clinical Leadership Group formed with recent appointments, first of quarterly meetings held.
- Programme Board has established links with Moray Portfolio Board to strengthen the governance approach.
- Links with Maternity Collaborative on shared objectives related to peri-operative activity.
- Strengthened links with Moray Anchor Network and Chamber of Commerce to support work with partners across Moray.
- Accommodation Review completed in support to scope and address workforce challenges.
- 5 properties in Elgin secured and furnished for medical staff use, available from 1 March 2024 and in use to support the maternity staff expansion.

<ul style="list-style-type: none"> Produced a Development Framework to look ahead up to 30 years for a vision of capital estate and infrastructure.
<ul style="list-style-type: none"> Produced a report on Space, Quality and Functionality of the hospital in its current state, highlighting infrastructure issues.
<ul style="list-style-type: none"> Development of a dedicated and staffed Clinical Skills Centre in the hospital, supported by Aberdeen University and ACT Funding to open in March 2024.
<ul style="list-style-type: none"> Hosting a Stakeholder Event for anchor organisations in Moray to raise awareness of shared challenges in housing and childcare and foster collaborative solutions.
<ul style="list-style-type: none"> Planning to host an informational event for the public to raise awareness of progress in the Strategy, maternity developments as well as local funding news on Levelling Up and Moray Growth Deal.
<ul style="list-style-type: none"> Production of a dedicated Theatres Sustainability Plan in March incorporating improvements in utilisation and infrastructure priorities.
<ul style="list-style-type: none"> Staff stakeholder workshop in March to achieve shared understanding of the Strategy Programme's focus on affordability and sustainability, and to develop a target operating model in line with a rural general hospital. (Appendix 1 Link - Rethinking acute medical care in smaller hospitals Nuffield Trust)

2.3.1 Risk

Operational -

There is a risk that a medium to long term strategy does not address the immediate operational concerns and issues facing the hospital. This has the potential to lead to stakeholder frustration and the possibility that decisions made for the short term will undermine focus on the medium to long term objectives. This is being mitigated by re-centring the implementation plan to prioritise the actions needed now.

Governance -

The Implementation Plan sets out ambitious aspirations for the hospital. These range from significant challenges around service delivery, recruitment/retention, education and training, sustainability and network development. The risk of these not being achieved by a single site is being mitigated by strengthening the links with the Moray Portfolio and other NHS Grampian Portfolios to ensure a cross-system approach and awareness.

Resource Capacity

The resource and programme structure approved for implementation has not been possible because of the budget being frozen, with only one member of staff delivering planning, programme management and project management. This is being mitigated by linked working with the Maternity Programme and with some support from the Planning, Innovation and Programmes and (PIP) Directorate on two projects. It is anticipated the risk of this continuing will be managed in 2024/25 by the release of funds to increase resource capacity.

Finance

The risk to Programme Finance is linked to the resource capacity as described above, however the system risk is from the current level of overspend for the hospital. This will be managed through service redesign for the hospital which will focus on affordability and sustainability.

Workforce

Risks to workforce are mainly centred on availability and have been well described; the current recruitment campaign for Moray focuses on attracting new people into the area, and the Programme is engaged with the local Anchor network to address housing and childcare as risk factors for workforce availability.

2.3.4 Equality and Diversity, including health inequalities

NHS Grampian, as a public body, has a legal duty to impact assess any potential changes in service provision against the Public Sector Equality and Fairer Scotland Duties. This is to ensure we are working towards reducing inequality gaps, are not inadvertently discriminating against anyone with a protected characteristic, or negatively impacting anyone who accesses our services.

As well as fulfilling our statutory obligations, it is our ambition to have continual and meaningful impact assessment conversations going forward. This will be best achieved through partnership working between the various organisations and constructs, including Moray Portfolio, Community Wellbeing and Public Health Teams, the Moray Wellbeing Hub, and Third Sector Interface Moray (TSI Moray).

In particular, where the redesign of service models is sufficiently impactful, the Programme will undertake the required Planning with People process supported by the Public Engagement team in Corporate Communications.

2.3.5 Communication, involvement, engagement and consultation

The development of the Strategy involved robust engagement and is covered in a separate report which has been shared with the Board previously.

The Communications group is led by the Head of Public Engagement and supported by the Director of Marketing and Communications, both of whom have shaped previous and forthcoming Stakeholder events. Further support is provided on a limited basis from a local Communications Officer who is currently developing online resources for the Programme to communicate with and update all stakeholders on progress.

The re-centred approach outlined in this paper is likely to lead to proposed changes to existing services. The process for consulting on proposed service change will be followed and supported by expert colleagues in the Corporate Communications Directorate.

2.3.6 Route to the Meeting

This paper has been approved by the Dr Gray's Senior Leadership Team prior to submission to the NHS Grampian Board.

2.4 Recommendation

The Board is asked to:

- note the early successes and reported progress to date
- endorse the re-centring of the Programme to include significant service redesign that sustainably delivers the Strategic Intent and supports the people of Moray.

List of appendices

- Appendix 1: [Rethinking acute medical care in smaller hospitals | Nuffield Trust](#))