

NHS Dumfries and Galloway

Tactical Priorities 2023/24

At the NHS Board meeting on Monday 17th April 2023, the following tactical priorities were agreed for NHS Dumfries and Galloway during 2023/24.

- Delivery of our Culture Improvement programme and Integrated Workforce Plan to increase the capacity, capability and resilience of our health and social care workforce.
- Development and delivery of a financial recovery plan for Health and Social Care.
- Work across the health and social care system with our local communities to tackle health inequalities and support a shift towards a focus on prevention and early intervention.
- Development of a sustainable model of Community Health and Social Care for the next 1-5 years.
- Deliver on key elements of our Primary Care Transformation Programme to support ongoing redesign of General Medical Services (GMS) services as per the 2018 Contract and support sustainability of general practice.
- Develop proposals to address the significant risks emerging in the delivery of General Dental Services.
- Define the model of Hospital Based Services in the medium to long term.
- Women & Children Services.
- Develop proposals for a truly Integrated Intellectual Disability Service which meets the needs of adults with complex needs and provides opportunities to meet the aspirations of the Coming Home report.
- Continued focus on public protection priorities (Adult Support and Protection (ASP), Child Protection (CP), Drug Related Deaths, Suicide, Violence Against Women and Girls (VAWG))
- Digital Transformation
- Carbon Reduction
- Delivery of a Realistic Medicine and Values Based Healthcare Programme as per the Chief Medical Officer (CMO) publication of December 2022 "Delivering values-based care: A vision for Scotland"

More detail on each of the approved priorities can be found in the following pages.

BOARD PUBLIC

Priority Title	1. Delivery of our Culture Improvement programme and Integrated Workforce Plan to increase the capacity, capability and resilience of our health and social care workforce.
Priority Description	<p>In 2023/24, to improve recruitment and retention, we will</p> <ul style="list-style-type: none"> • Develop and agree a revised 5 year Culture Improvement Plan reflecting current organisational position and learnings from the pandemic • Deliver priority year one actions within the reviewed Culture Improvement Plan • Consolidate and build on the services already available to improve the health and wellbeing of our workforce, • Continue to support international recruitment of nurses, AHP's and medical staff • Develop and deliver our Young Peoples Agenda • Develop models of lifelong learning to support people in their roles and with their role and career development. • Deep dive of workforce NHs and partnership demographics and development of plan to help mitigate reduction in availability of staff across partnership. • Establishment of new teams and roles as part of service transformation, incorporating local and / or national skills and competencies where developed.
Lead Director	Workforce Director
Governance Committee	Staff Governance Committee
Performance Measures	<ul style="list-style-type: none"> • i-matter employee engagement score • Target for international recruitment • Delivery of event for S4's to educate re roles across health and social care • Week of Work Experience • Evidence of impact on Hard to fill • Directorate KPI's (sickness absence levels, redeployment, recommend as place to work) • Appraisal compliance rates
Link to Corporate Risk	<p>Workforce sustainability Organisational Culture and Positive Staff Experience Health and Wellbeing of Staff</p>
Achievable In-Year or Ongoing	In year goals are set within individual workplans, however aspects will require ongoing development beyond 23/24.

BOARD PUBLIC

Priority Title	2. Development and delivery of a financial recovery plan for Health and Social Care.
Priority Description	<p>From the start of 2023/24 we will improve our financial governance, reduce our controllable spend and begin to implement our agreed savings programme, delivering demonstrable progress towards reducing our financial deficit.</p> <p>Rationalisation of the NHS Board's estate as part of the savings programme including review of number of buildings and sites and hybrid working.</p>
Lead Director	Director of Finance
Governance Committee	Performance and Resources Committee
Performance Measures	<ul style="list-style-type: none"> • Unmodified audit opinion received for 2022/23. • Delivery of £6.0m recurring savings by end of 2023/24 • Delivery of £4.7m non recurring savings by end of 2023/24 • Reduction of directorate overspend and existing cost pressures from opening financial plan estimates • 50% of cost containment reviews completed on identified areas of controllable spend by 31st March 2024 • Reduction in number of authorised signatories by 5% at Q1 2023/24 compared to end of Q3 2022/23 following formal review. • 95% compliance on financial governance training by end of Q1 2023/24 • PO breaches are maintained at less than 2% per quarter • Reduction in count of salary overpayments by 5% at end of 2023/24 compared to 2022/23 total. • No limited assurance audits received • Increased number of property disposals • Reduction in m2 of property owned by the Board • Hybrid working – ratio of desks to staff from 7:10 to 5:10.
Link to Corporate Risk	<p>Failure of the Board to meet financial targets risk</p> <p>Failure to manage the finance departments roles and responsibilities in relation to financial governance risk</p> <p>Infrastructure is inadequate to meet both physical and technological service user needs in future risk</p>
Achievable In-Year or Ongoing	Ongoing, the three-year financial plan does not identify any improvement in the reducing the brought forward deficit, this will only start to improve over the longer financial recovery timeframe.

BOARD PUBLIC

Priority Title	3. Work across the health and social care system with our local communities to tackle health inequalities and support a shift towards a focus on prevention and early intervention
Priority Description	<ul style="list-style-type: none"> • Annually from 2023/24 we will reassign part of our budget to initiate, test and mainstream a range of new initiatives that will offer alternatives to traditional services, encourage responsibility for self care and management, and deliver preventative and proactive care, all aimed at helping people to live the healthy, happy, active life they want. • Proactively engage with our Partners in the Third Sector and Independent Sector to identify opportunities to enhance our approach to supporting people to live well for longer in our communities • Operationalising the Health and Wellbeing Model with Home Teams • Strengthening a preventative approach within Home Teams through the Prevention and Early Intervention Workstream • Working with our partners to deliver the agreed actions within the Poverty and Inequality Partnership Action Plans • Continue our development journey as an Anchor Organisation
Lead Director	Director of Public Health
Governance Committee	Public Health Committee
Performance Measures	It is probably impossible to identify tangible performance measures for this, apart from reporting on progress on work in these areas.
Link to Corporate Risk	Health Inequalities and Population Health and Wellbeing.
Achievable In-Year or Ongoing	Ongoing

BOARD PUBLIC

Priority Title	4. Development of a sustainable model of Community Health and Social Care for the next 1-5 years
Priority Description	<ul style="list-style-type: none"> • Right Care, Right Place (Intermediate Care) / Community Bed Review – Implement outcomes • Home Teams • Care and Support at Home • Care Home Commissioning Plan • Unscheduled Care, Interface Care and Redesign of Urgent Care
Lead Director	Chief Operating Officer
Governance Committee	Performance and Resource Committee Information Assurance Committee
Performance Measures	<p>Outcome of Consultation and Engagement (Intermediate Care)</p> <p>Commissioning Report (monitoring and management of commissioned services)</p> <p>Performance Indicators related to Community Transformation Programme:</p> <ul style="list-style-type: none"> • 4 hour performance • Unmet Need data (clarity on definitions for reporting) • Length of Stay • Bed Days Saved • Community Waiting Times Reporting (under development) • People lived experience / outcomes <p>Annual Delivery Plan</p>
Link to Corporate Risk	<p>Transformation Risk</p> <p>Strategic Commissioning Risk</p> <p>Inadequate Redesign of Services Risk</p> <p>Infrastructure Risk</p> <p>Delayed Discharge Risk</p> <p>Health and Wellbeing of Population Risk</p>
Achievable In-Year or Ongoing	Ongoing

BOARD PUBLIC

Priority Title	5. Deliver on key elements of our Primary Care Transformation Programme to support ongoing redesign of GMS services as per the 2018 Contract and support sustainability of general practice.
Priority Description	<ul style="list-style-type: none"> • Community Treatment and Care Service (CTAC) • Pharmacotherapy / linked to Clinical Pharmacy Model • First Contact Practitioners • Urgent Care • Mental Health Provision • Community Link Workers • E-Health Developments
Lead Director	Chief Operating Officer
Governance Committee	Performance and Resource Committee
Performance Measures	Programme Plan for Primary Care Transformation to monitor full implementation of MoU PCIP Data Reporting (finance) Performance reporting on eHealth Development (EMIS to Vision) via Digital Programme Board Annual Delivery Plan
Link to Corporate Risk	Transformation Risk Strategic Commissioning Risk Inadequate Redesign of Services Risk Infrastructure Risk Health and Wellbeing of Population Risk
Achievable In-Year or Ongoing	Ongoing

BOARD PUBLIC

Priority Title	6. Develop proposals to address the significant risks emerging in the delivery of General Dental Services
Priority Description	Access to NHS Dental Services presents a significant challenge to the region. A Dental Task force has been established and developed a dental action plan to this area.
Lead Director	Director of Public Health
Governance Committee	Healthcare Governance Committee
Performance Measures	<p>NHS Dental Registration and Participation Figures will continue to be monitored.</p> <p>Key priority areas to be taken forward in 2023/24 include:</p> <ul style="list-style-type: none"> • Developing a business case for a Dental Access Centre in Gardenhill Health Centre. • Development and piloting of a scheme to secure provision of emergency care for unregistered patients • Undertaking a Dental Health Needs Assessment within Dumfries and Galloway • Reviewing Public Dental Service (PDS) staffing model including targeting of resources to meet greatest need and potential requirement for additional staffing to help support unregistered emergency provision, noting ongoing recruitment challenges to these posts • Collaboration with other rural NHS Board areas to share good practice • In partnership with Scottish Government developing longer term sustainable service delivery model for Dumfries and Galloway maximising use of independent contractor model and PDS model where required
Link to Corporate Risk	Corporate risk around Access to NHS Dental Services
Achievable In-Year or Ongoing	This is likely to be an ongoing area of work, but the areas outlined are the key areas of focus for 23/24.

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Priority Title	7. Define the model of Hospital Based Services in the medium to long term
Priority Description	<ul style="list-style-type: none"> • Define the role of our DGH for the next 1-5 years • Review the role of the GCH including the model for Unscheduled and Urgent Care in the West of the Region • Delivery of CfSD agreed priorities • Service Reviews (i.e. Ophthalmology, Orthopaedics, Cardiology) as part of Annual Delivery Plan
Lead Director	Chief Operating Officer
Governance Committee	Performance and Resources Committee
Performance Measures	<p>Engagement and Consultation (to be planned)</p> <p>Programme Plan to be developed for the re-modelling of Hospital Based Services including GCH</p> <p>CfSD Heat Map</p> <p>Planned Care Reporting (e.g. TTG, Outpatient, Cancer, Diagnostics)</p> <p>Service Level Reporting – linked to Service Reviews</p> <p>Annual Delivery Plan</p>
Link to Corporate Risk	<p>Transformation Risk</p> <p>Delayed Discharge Risk</p> <p>Strategic Commissioning Risk</p> <p>Inadequate Redesign of Services Risk</p> <p>Infrastructure Risk</p> <p>Health and Wellbeing of Population Risk</p> <p>Quality of Care Risk</p>
Achievable In-Year or Ongoing	Ongoing

BOARD PUBLIC

Priority Title	8. Women & Children Services
Priority Description	<ul style="list-style-type: none"> • Define the model of a Safe Effective Maternity Service in the West of the Region • Develop and deliver a new model of Short Breaks for Children & Young People with Complex Needs
Lead Director	Chief Operating Officer
Governance Committee	Healthcare Governance Committee
Performance Measures	<p>Outcome of Engagement and Consultation</p> <p>Options appraisal report to IJB (for both Maternity and Children and Young People with Complex Needs)</p> <p>Programme Plan for Maternity Service Review / Short Breaks (performance indicators to be part of the planning / outcomes)</p> <p>Annual Delivery Plan</p>
Link to Corporate Risk	<p>Transformation Risk</p> <p>Strategic Commissioning Risk</p> <p>Inadequate Redesign of Services Risk</p> <p>Health and Wellbeing of Population Risk</p> <p>Quality of Care Risk</p> <p>Health Inequalities Risk</p>
Achievable In-Year or Ongoing	Ongoing

BOARD PUBLIC

Priority Title	9. Develop proposals for a truly Integrated Intellectual Disability Service which meets the needs of adults with complex needs and provides opportunities to meet the aspirations of the Coming Home report
Priority Description	Providing assessment, intervention and review of health and social care needs for adults with learning disabilities as part of a multidisciplinary team.
Lead Director	Chief Operating Officer
Governance Committee	Performance and Resource Committee
Performance Measures	Engagement and Consultation (to be planned) Development of Assertive Outreach Service Outcome of the Coming Home Report Outcome of the Community Change Living Fund Development of Programme Plan for Intellectual ID Service (performance indicators to be part of the planning / outcomes) Annual Delivery Plan
Link to Corporate Risk	Transformation Risk Strategic Commissioning Risk Inadequate Redesign of Services Risk Health and Wellbeing of Population Risk Quality of Care Risk Health Inequalities Risk
Achievable In-Year or Ongoing	Ongoing

BOARD PUBLIC

Priority Title	10. Continued focus on public protection priorities (ASP, CP, Drug Related Deaths, Suicide, VAWG)
Priority Description	<ul style="list-style-type: none"> • Alcohol and Drug Services - Delivery of MAT Standards • Implement agreed actions from the forthcoming Alcohol and Drug Partnership Strategy • Delivery of ASP plans/CP agenda
Lead Director	Chief Operating Officer
Governance Committee	Healthcare Governance Committee
Performance Measures	<p>The national MAT Standards programme consists of 10 standards that all ADPs must implement to improve drug treatment services. The programme runs from 2021-2026. Separate assessments are carried out by: (1) the MAT Standards Implementation Support Team (MIST) in Public Health Scotland, and (2) the Scottish Government.</p> <p>The 10 MAT Standards are:</p> <p>Standard 1: All people accessing services have the option to start MAT from the same day of presentation.</p> <p>Standard 2: All people are supported to make an informed choice on what medication to use for MAT, and the appropriate dose.</p> <p>Standard 3: All people at high risk of drug-related harm are proactively identified and offered support to commence or continue MAT.</p> <p>Standard 4: All people are offered evidence based harm reduction at the point of MAT delivery.</p> <p>Standard 5: All people will receive support to remain in treatment for as long as requested.</p> <p>Standard 6: The system that provides MAT is psychologically informed (tier 1); routinely delivers evidence-based low intensity psychosocial interventions (tier 2); and supports individuals to grow social networks.</p> <p>Standard 7: All people have the option of MAT shared with Primary Care.</p> <p>Standard 8: All people have access to independent advocacy and support for housing, welfare and income needs.</p> <p>Standard 9: All people with co-occurring drug use and mental health difficulties can receive mental health care at the point of MAT delivery.</p> <p>Standard 10: All people receive trauma informed care.</p>

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	<p>By March 2024, each of the 10 standards has to be assessed as Green (fully implemented) on RAGB status by MIST.</p> <p>In addition, Scottish Government requires that all the actions/deliverables identified in the MAT Implementation Plan have been met.</p>
Link to Corporate Risk	<p>Health Inequalities Risk</p> <p>Health and Wellbeing of the Population</p>
Achievable In-Year or Ongoing	<p>Ongoing</p>

BOARD PUBLIC

Priority Title	11. Digital Transformation
Priority Description	From 2023/24 we will deliver our local plan for digital transformation, in line with the Digital Health and Care Strategy for Scotland, with a focus on building digital skills, tackling social inclusion and improving digital access for our staff and those who use our services. This will enable us to spread and sustain the use of Virtual Consultations and remote patient monitoring, while improving the efficiency of our business processes.
Lead Director	Chief Operating Officer
Governance Committee	Performance and Resources Committee
Performance Measures	Planning of Digital Priorities via Digital Programme Board where key actions to be taken forward with alignment to the Digital Strategy Annual Delivery Plan
Link to Corporate Risk	Transformation Risk Strategic Commissioning Risk Inadequate Redesign of Services Risk Health and Wellbeing of Population Risk Quality of Care Risk Health Inequalities Risk
Achievable In-Year or Ongoing	Ongoing

BOARD PUBLIC

Priority Title	12. Carbon Reduction						
Priority Description	Maintain progress in developing and implementing carbon reduction plans to ensure we are on track to be a net zero health service by 2040.						
Lead Director	Director of Finance						
Governance Committee	Performance and Resources Committee						
Performance Measures	<p>KPIs under development as part of Board Performance Framework which was agreed at P&R in March 2023 and through the Climate Emergency and Sustainability Programme Board.</p> <p>Focus will be on:</p> <ul style="list-style-type: none"> • The following percentage reductions in net carbon emissions have been set. <table style="margin-left: 40px; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">Year</th> <th style="text-align: center;">% Reduction (1990 Baseline)</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">2030</td> <td style="text-align: center;">75%</td> </tr> <tr> <td style="text-align: center;">2040</td> <td style="text-align: center;">Net zero</td> </tr> </tbody> </table> <ul style="list-style-type: none"> • All NHS owned or leased buildings to be heated by renewable energy by 2038. • A planned reduction in metered dose inhaler related emissions through Green Prescribing. • Ceasing the use of desflurane in our theatres • Reducing the miles travelled by patients for appointments • Reduce Waste by 15% by 2025 • Reduce food waste by 33% by 2025 • Ensure 75% of all non clinical waste is recycled • Shifting the fleet to more sustainable alternatives; Pool Car EV by 2025; Commercial fleet by 2032 <p>Key enablers for some of this work will be Energy and Property Strategies, due for Board consideration by Q3 of 23/24.</p>	Year	% Reduction (1990 Baseline)	2030	75%	2040	Net zero
Year	% Reduction (1990 Baseline)						
2030	75%						
2040	Net zero						
Link to Corporate Risk	Failure to deliver reductions in CO2 risk						
Achievable In-Year or Ongoing	Ongoing						

BOARD PUBLIC

Priority Title	13. Delivery of a Realistic Medicine and Values Based Healthcare Programme as per the Chief Medical Officer (CMO) publication of December 2022 “Delivering values based care: A vision for Scotland”
Priority Description	Appointment of a Realistic Medicine and Values Based Healthcare Clinical Director tasked with leading a team to scrutinise Discovery data to eliminate variation, use the CollaboRATE tool to establish a baseline understanding of shared decision making in NHS Dumfries and Galloway, work with the Primary Care / Secondary Care Interface to improve referral pathways and to develop a clear communications package to promote this project
Lead Director	Medical Director
Governance Committee	Healthcare Governance Committee
Performance Measures	<ul style="list-style-type: none"> • Demonstrate significant uptake of clinical teams using the CollaboRATE Tool. • Address unwarranted variation, identify areas of concern using Discovery data and produce Action Plans. • Implementation of Right Decision Service in Dumfries and Galloway. • Progress ongoing work in Frailty throughout Dumfries and Galloway. • Link with Medicines Transformation work addressing polypharmacy etc. • Demonstrate a clear Communication/Promotion package to raise awareness and understanding of Realistic Medicine & Values Based Healthcare.
Link to Corporate Risk	Quality of Care Risk Transformation Risk Failure of the Board to meet financial targets risk
Achievable In-Year or Ongoing	Ongoing