

Dr Gray's Hospital

Plan for the Future Implementation Plan (2023-2033)

Draft April 2023

Contents

	Section	Page
	Why Do We Need an Implementation Plan?	3
1	Introduction	3
	Implementation	4
2	How will we implement these actions?	4
	Table 1: Proposed Project Board	4
2.1	Performance Monitoring	5
2.2	Links with other Programmes of Work	5
	What We Will Do	6
3	Strategic Intent	6
3.1	People	6
3.2	Place	7
3.3	Pathways	9
4	Project and Programme Management	10
	Table 2:Project Plan	11
5	Resource	15
6	Engagement	15
7	Risks	15

Why do we need an Implementation Plan for Dr Gray's Hospital?

1 Introduction

The NHS Grampian Board adopted its <u>Plan for the Future</u> in June 2022 and in February 2023 it approved the Dr Gray's Hospital - Plan for the Future - Strategic Intent.









The need for a clearer role and function for Dr Gray's Hospital was acknowledged and the development of the Strategic Intent set out the priority areas and principles for how the future of the hospital could be ensured as a highly valued part of the health and care system in the north of Scotland.

The process to understand the priorities highlighted the enthusiasm amongst public and staff stakeholders for Dr Gray's Hospital to flourish in its role as an anchor organisation in the Moray area and for it to continue to provide many of the services it currently does. This was balanced by an interest in the hospital forging success in new areas that would allow a sustainable future for the hospital and its staff and service users.

The use of the Double Diamond approach, as outlined in the Strategic Intent approved by the Board in February 2023, offered a robust engagement undertaking and the detailed process and feedback received is available.

Implementation

2 How will we implement these actions?

The implementation plan is ambitious and will create an exciting and vibrant future for Dr Gray's Hospital, as required by the Strategic Intent commissioned by the NHS Grampian Board in 2022. Capacity will be key to unlocking the potential of Dr Gray's Hospital, and investment for clinical and managerial capacity will be available as part of the NHS Grampian budget allocation starting in 2023/24. This support, the wider capacity of the organisation, and the Portfolio arrangement, will help drive the work needed to make Dr Gray's Hospital the vibrant and sustainable asset to which we aspire.

A key feature of the overall strategy is the need for a networked approach to ensure the sustainability for the future of local services. The nature and configuration of this networked approach is a key part of the work that will be taken forward in this Implementation Plan. This will include examples of clinical pathways that can be shared and delivered across traditional Board boundaries, such as developing surgical specialities and maternity. It also includes a whole system approach within the scope of NHS Grampian, incorporating and linking the work across hospitals, across Portfolios and across geographical boundaries. In this way a genuinely system wide approach will capitalise on success across the organisation.

It is proposed that a small Project Board is commissioned to steer the implementation plan and provide coordination and leadership to the actions set out in this plan, ensuring alignment to the strategic intent and driving the projects, partnerships and support that will deliver the required outcomes. Membership can be drawn from the cross system group that has produced the Strategic Intent and would be expected to comprise the following representation:

Table 1: Proposed Project Board to manage and deliver against the Implementation Plan						
Input Required	Cross system role					
Local operational leadership	Hospital General Manager					
	Operational Managers					
Local Clinical Leadership	Clinical Lead					
	Chief Nurse					
	Clinical Advocates for change					
Staff Representation	Staff Side Rep					
Community and staff engagement	Engagement Manager					
Estates	Physical Planning					
Innovation	PIP Innovation Team					
Workforce design	Workforce Planning Lead					
Network and partnership working	NES					
	NHS Highland					

Programme and project management	PIP Programme Management
Executive Leadership	Moray Portfolio Lead

As a crucial element of how NHS Grampian delivers healthcare in the north east of Scotland, the NHS Grampian Board will need to ensure that the plan can be delivered effectively if the aims set out in the Strategic Intent are to be achieved. Commitment to resourcing a dedicated Project Board to oversee that is necessary and is linked to how the Board will be assured of progress.

2.1 Performance Monitoring

It will be important to ensure that actions set out here or developed from these workstreams are successful and remain within the strategic direction of the wider Plan for the Future and support the Delivery Plan. The above Project Board will report via the Moray Portfolio Board on the performance of the Implementation Plan every six months, and through the reporting mechanism of the wider NHS Grampian Delivery Plan.

2.2 Links with other programmes of work

This plan is designed to succeed within a cross-system model of operation and as such there are a number of links with other groups and areas of work, some of which are already in place and some which may need further enhancement.

The link with the work to establish a new model of maternity services in Moray is clear and both workstreams are underpinned by partnership working and the development of a networked model. There is a synergy across these programmes that will produce a mutual benefit and progress in each area, which will be actively harnessed by linking where possible.

Similarly there is cross over between the Portfolios; a key focus of the Implementation Plan is in the planning and delivery of elective activity and in unscheduled care. Actions here will link closely with ongoing and future work of the ISCP and the Medicine and Unscheduled Care Portfolio.

Reference has been made to working closely with colleagues in NHS Highland to develop a networked model and networked pathways, which will be crucial, as will be the inclusion of Aberdeen as part of that networked model. In addition there are important links with other partners which are needed to achieve success, such as NES and SAS. We will continue to work jointly with these partners to reflect an integrated approach and mitigate any risks.

What We Will Do - Implementation Plan

3 Strategic Intent

In February 2023, the NHS Grampian Board approved the Strategic Intent for Dr Gray's Hospital as part of the wider NHS Grampian Plan for the Future.

Dr Gray's Hospital – Strategic Intent People Place **Pathways** Staff being enabled to fulfil An anchor organisation for Networked with Aberdeen their potential Elgin and Moray and Inverness Centre for excellence for Expert provision for local Delivery of general remote health provision population unscheduled services, expert Delivery of service for Test bed for interdisciplinary/ in assessment, diagnosis and multi-disciplinary models of Grampian and North regions stabilising and either (1) local Moray Portfolio as an treatment, or (2) onward Centre for excellence for integrated system transfer teaching undergraduate Utilisation of technology and Residual capacity to deliver students and development innovation planned care services in Dr post-graduate trainees Gray's and in network Separate planned and unplanned care

This is set out in the main areas of People, Place and Pathways and there is a strong connection across all three themes. These points now form the strategic aims for Dr Gray's Hospital for 2023-2033 and are the basis for the strategic objectives and actions proposed in this paper.

3.1 People

Staff being enabled to fulfil their potential

We will

- Review teams and roles to identify any significant diversion between identified and actual role, in order to understand staff and team development needs so we can better support change.
- Consider opportunities for innovative work patterns including flexible working and seven day working models that expands the opportunity for new recruits and better staff retention.

- Seek opportunities for new ways of meeting service needs through recruitment and development of trained volunteer roles.
- Seek to optimise real integration and efficient use of skillmix and pathways by developing integrated roles across the hospital and community
- Use innovative recruitment marketing to attract candidates to better support the overall staffing level

Centre of excellence for remote health provision

We will

- Identify pathfinder clinical pathways that offer opportunities for networked care, and develop expertise and excellence in delivering them.
- Identify clinical leadership across the hospital to support clinical staff and drive excellence.
- Identify partners for support and joint working; in education, research, and innovation to create the conditions for cultivating excellence.
- Develop plans that optimise the use of technology that enhances clinical and support roles, and makes the best use of space across the site

Test bed for inter-disciplinary / multi-disciplinary new models of care We will

- Design and hold a seminar with partners to identify opportunities to develop and design enhanced and innovative models of care
- Ensure cultural, technical and professional support is in place to enable staff to adopt new models sustainably (capacity, training, environment)
- Fully engage with the opportunity afforded by the Digital Health Innovation strand of the Moray Growth Deal

Centre of excellence for teaching undergraduate students and developing post-graduate trainees

We will

- Commission the Educational Forum to produce a roadmap to educational excellence in Dr Gray's Hospital
- Work with partners to incorporate and address the wider factors of experiencing excellence at Dr Gray's Hospital –
 - Wider employment opportunities
 - Advantages of military investment and commitment to Moray
 - o Planning gain and accommodation via local property developers
 - Childcare capacity in the area

3.2 Places

Anchor organisation for Elgin and Moray

We will

- Establish open dialogue with local suppliers and NHSG procurement teams to optimise what can be purchased locally
- Develop a small community engagement group to consider how Dr Gray's Hospital space could be more public-focused and welcoming
- Focus on local recruitment opportunities by using local marketing channels
- Plan and hold a Developer Contributions seminar to identify opportunities for partners from planning gain to benefit Moray.
- Plan and hold a seminar to increase understanding of and opportunities offered by the Moray Growth Deal.
- Complete the Development Framework for Dr Gray's Hospital to establish how we make best use of its constrained footprint, and seek approval from the Moray Council Planning Authority

Expert provision for local population

We will

- Design a practical group exercise that will help people to explore and shape what services must be delivered on site and what could be delivered elsewhere.
- Ensure communication of the Space Quality and Functionality Assessment results with all local staff groups

Delivery of service for Grampian and North regions

We will

- Coordinate current projects designed to improve flow across the integrated system, e.g. Home First with new ideas
- Commission a review to define the scope of planned/unplanned activity
- Devise a plan for elective activity based on wider Grampian and Highland system using a networked approach
- Test the networked approach with selected pathways

Moray Portfolio as an integrated system

We will

- Moray Portfolio Board to commission an Integrated Pathways Group (primary and acute interface)
- Design integrated pathways that utilise and optimise all resources skillsets, buildings
- Look at how we can widen access to fully utilise the assets we have- eg. 7 day access to MRI scanner

Utilisation of technology & innovation

We will

- Review the existing and previous use of telehealthcare, e.g. Virtual Ward and do so in partnership with NHS Highland and other health boards.
- Scope the options for telehealthcare by linking across north of Scotland

- Develop programme of telehealthcare trials and test, using a 'review to adopt' approach
- Link with Innovations Team to identify any opportunities for test-bedding new models, approaches or technology
- Forge closer links with the Digital Healthcare Institute's Programme (£5M) to link to tests of change project as part of Moray Growth Deal
- Implement IT networking upgrades in weak spots in building
- Ensure plan for implementing new technology includes training for staff

3.3 Pathways

Networked with Aberdeen and Inverness

We will

- Enhance the network relationship with Aberdeen by developing specialty based pathways e.g. cardiology, gastroenterology
- Explore options for stabilising acute medicine through a robust network approach and utilising available technology and role design
- Develop a shared understanding of networks and their features, benefits and how to develop sustainability, in partnership with colleagues from other Boards and agencies.
- Understand the financial implications for service costs of networked pathways.

Delivery of general unscheduled services, expert in stabilising and either (1) local treatment or (2) onward transfer

We will

- Review the site bed capacity, utilising the recently commissioned bed modelling report from Buchan and Associates and determine a mechanism to organise the existing hospital capacity for the next ten years
- Review the level of critical care capability delivered in the hospital and ensure robust networks and pathways are in place across the region for the population of Moray
- Review the joint assessment model at the front door, with consideration of approach described in Nuffield Report, in order to meet the aspirations of the Home First model
- Commission a group to examine the opportunity for non-medics (pharmacy, AHPs, nurses etc.) to develop extended roles and to redesign the pathways of care
- Establish a local "clinical interface group" between hospital / primary / community care to ensure integrated pathways

Separate planned and unplanned care and ensure residual capacity to deliver planned care services in Dr Gray's and in network

We will

 Undertake a review of operating theatres to consider appropriate utilisation and any necessary investment required

- Undertake a review of endoscopy activity to maximise sustainability, resilience, scheduling and efficiency.
- Explore ERCP delivery plans in partnership with NHS Highland as part of a networked approach.
- Review the local outpatient activity to consider what specialties might be delivered off the acute site and within Moray to increase local access.

4 Project and Programme Management

The narrative above sets out the actions which will underpin the realisation of the strategic intent for Dr Gray's Hospital. A coordinated and programmed approach is offered by considering these actions in a series of workstrands or projects as set out in the table below. This enables a clear read across for areas of focus and synergy and supports performance monitoring and tracking. It will also support the ability to link with other pieces of work in other Portfolios, services and parts of the wider system, aiding a genuinely system wide approach for a locally focused Implementation Plan

It can also be seen that in addition to the identified and programmed workstrands that will focus on actions, there is a need for ongoing cultural support to ensure that people are supported and the conditions are optimal for achieving success. This cultural support spans elements such as communication; at organisational and at team level, capacity and safe staffing levels; confidence, capability and job satisfaction. As an enabler underpinning the overall success of the Implementation Plan, the Moray Portfolio and the Project Board will identify and deliver the mechanisms needed to deliver this cultural support.

Table 2 :Dr Gray's Hospital Plan for the Future Project Plan

	Action		d to Stent Th	rategic eme	Lead Responsibility	Timescale	
		People	Place	Pathways		2023-24	2023-2026
	Review teams and roles to identify any significant diversion between identified and actual role, in order to understand staff and team development needs so we can better support change.	•			Project 1 - Workforce Planning Lead	•	•
2	Consider opportunities for innovative work patterns including flexible working and seven day working models that expands the opportunity for new recruits and better staff retention.	•		•	Project 1- Workforce Planning Lead	•	
	Seek opportunities for new ways of meeting service needs through recruitment and development of trained volunteer roles.	•	•		Project 2 - Engagement Lead	•	
	Seek to optimise real integration and efficient use of skillmix and pathways by developing integrated roles across the hospital and community	•		•	Project 1 - Workforce Planning Lead	•	•
	Use innovative recruitment marketing to attract candidates to better support the overall staffing level	•			Recruitment Marketing Strategy <i>linked to Maternity</i>	•	
	Identify pathfinder clinical pathways that offer opportunities for networked care, and develop expertise and excellence in delivering them	•		•	Project 3 - Clinical Lead	•	•
7	Identify clinical leadership across the hospital to support clinical staff and drive excellence.	•			Project 3 - Clinical Lead	•	
	Identify partners for support and joint working; in education, research, and innovation to create the conditions for cultivating excellence.	•			Partnership Approach - Implementation Group	•	
	Develop plans that optimise the use of technology that enhances clinical and support roles, and makes the best use of space across the site	•		•	Project 4 - Innovation Lead	•	
10	Design and hold a seminar with partners to identify opportunities to develop and design enhanced and innovative models of care	•		•	Seminar - Programme Lead	•	
	Ensure cultural, technical and professional support to enable staff to adopt new models sustainably (capacity, training, environment)	•			Operational Management Team	•	•
	Fully engage with the opportunity afforded by the Digital Health Innovation strand of the Moray Growth Deal	•		•	Project 5 - Portfolio Lead	•	
	Commission the Educational Forum to produce a roadmap to educational excellence in Dr Gray's Hospital	•			Project 6 - Clinical Lead	•	
	Work with partners to incorporate and address the wider factors of experiencing excellence at	DGH-					· II
	Wider employment opportunities	•			Project 7 - Portfolio Lead	•	
14	Advantages of military investment and commitment to Moray	•			Project 7 - Portfolio Lead	•	
	Planning gain and accommodation via local property developers	•	•		Project 10 - Physical Planning Lead	•	
	Childcare capacity in the area	•	•		Project 7 - Portfolio Lead	•	

Table 2: Dr Gray's Hospital Plan for the Future Project Plan

	Action		d to Str ent The		Lead Responsibility	Timesc	ale
	Establish open dialogue with local suppliers and NHSG procurement teams to optimise what can be purchased locally		•		Project 8 - Hospital General Manager	•	
	Develop a small community engagement group to consider how DGH space could be more public-focused and welcoming	•	•		Project 9 - Engagement Lead	•	
20	Focus on local recruitment opportunities by using local marketing channels	•	•		Recruitment Marketing Strategy <i>linked to Maternity</i>	•	
	Plan and hold a Developer Contributions seminar to identify opportunities for partners from planning gain to benefit Moray.	•	•		Project 10 - Physical Planning Lead	•	
	Plan and hold a seminar to increase understanding of and opportunities offered by the Moray Growth Deal.	•	•		Project 5 - Portfolio Lead	•	
	Complete the Development Framework for Dr Gray's Hospital to establish how we make best use of its constrained footprint, and have this approved by the Moray Council Planning Authority, informed by the Space Quality and Functionality Assessment.		•		Project 10 - Physical Planning Lead	•	
	Design a practical group exercise that will help people to explore and shape what services must be delivered on site and what could be delivered elsewhere.		•		Project 10 - Physical Planning Lead	•	
	Ensure communication of the Space Quality and Functionality Assessment results with all local staff groups	•	•		Operational Management Team	•	
	Coordinate current projects designed to improve flow across the integrated system, e.g. Home First with new ideas		•	•	Portfolio Lead	•	•
27	Commission a review to define the scope of planned/unplanned activity		•	•	Project 11 - Portfolio Lead	•	
	Devise a plan for elective activity based on wider Grampian and Highland system using a networked approach		•		Project 11 - Portfolio Lead	•	
29	Test the networked approach with selected pathways		•	•	Project 3 - Clinical Lead	•	•

Table 2: Dr Gray's Hospital Plan for the Future Project Plan

	Action		d to Str ent The		Lead Responsibility	Timesca	ale
	Moray Portfolio Board to commission an Integrated Pathways Group (primary and acute interface)		•	•	Project 12 - Portfolio Lead	•	
	Design integrated pathways that utilise and optimise all resources – skillsets, buildings			•	Project 12 - Portfolio Lead	•	•
31	Look at how we can widen access to fully utilise the assets we have- eg. 7 day access to MRI scanner		•	•	Project 1- Workforce Planning Lead	•	
	Review the existing and previous use of telehealthcare, e.g. Virtual Ward and do so in partnership with NHS Highland and other health boards		•	•	Project 13 - Programme Lead	•	
34	Scope the options for telehealthcare by linking across north of Scotland		•	•	Project 13 - Programme Lead	•	
35	Develop programme of telehealthcare trials and test, using a 'review to adopt' approach		•	•	Project 13 - Programme Lead	•	•
	Link with Innovations Team to identify any opportunities for test-bedding new models, approaches or technology		•	•	Project 14 - Innovation Lead		
37	Forge closer links with the Digital Healthcare Institute's Programme (£5M) to link to tests of change project as part of Moray Growth Deal		•	•	Project 5 - Portfolio Lead	•	•
38	Implement IT networking upgrades in weak spots in building		•		Project 10 - Physical Planning Lead	•	
39	Ensure plan for implementing new technology includes training for staff	•	•	•	Operational Management Team	•	•
40	Enhance the network relationship with Aberdeen by developing specialty based pathways e.g. cardiology, gastroenterology			•	Project 3 - Clinical Lead	•	•
	Explore options for stabilising acute medicine through a robust network approach and utilising available technology and role design			•	Project 3 - Clinical Lead	•	•
	Develop a shared understanding of networks and their features, benefits and how to develop sustainability, in partnership with colleagues from other Boards and agencies.			•	Developing a Networked Approach linked to Maternity	•	•
42	Understand the financial implications for service costs of networked pathways.			•	Developing a Networked Approach linked to Maternity	•	•

Table 2: Dr Gray's Hospital Plan for the Future Project Plan

Action		d to Str ent The		Lead Responsibility	Times	cale
Review the site bed capacity, utilising the recently commissioned bed modelling report from Buchan and Associates and determine a mechanism to organise the existing hospital capacity 44 for the next ten years		•	•	Project 11 - Portfolio Lead	•	•
Review of the joint assessment model at the front door, with consideration of approach described in Nuffield Report, in order to meet the aspirations of the Home First model			•	Project 11 - Portfolio Lead	•	•
Review the level of critical care capability delivered in the hospital and ensure robust networks and pathways are in place across the region for the population of Moray			•	Project 11 - Portfolio Lead	•	•
Commission a group to examine the opportunity for non-medics (pharmacy, AHPs, nurses etc.) to develop extended roles and to redesign the pathways of care.	•		•	Project 1 - Workforce Planning Lead	•	•
Establish a local "clinical interface group" between hospital / primary / community care to ensure integrated pathways			•	Project 12 - Portfolio Lead	•	
Undertake a review of operating theatres to consider appropriate utilisation and any necessary investment required		•	•	Project 10 - Physical Planning Lead	•	
Undertake a review of endoscopy activity to maximise sustainability, resilience, scheduling and efficiency.			•	Project 15 - Hospital General Manger	•	
Explore ERCP delivery plans in partnership with NHS Highland as part of a networked approach.		•	•	Project 15 - Hospital General Manger	•	•
Review the local outpatient activity to consider what specialties might be delivered off the acute site and within Moray to increase local access.		•	•	Project 10 - Physical Planning Lead	•	

5 Resource

Implementing the Dr Gray's Plan for the Future as set out in the Strategic Intent and this Implementation Plan will require both local leadership and focus as well as system wide support. The Project Board referenced earlier in this paper should be authorised and able to coordinate the necessary efforts needed to achieve this leadership and support, and should be commissioned by the NHS Grampian Board to do so.

In addition to the resource required to establish the Project Board there is likely to be further support and resource required as part of implementing this plan. Infrastructure is likely to be an area where financial support is necessary, with the results of the Space Functionality and Quality Assessment able to inform this. Specifically, there may be capital investment necessary to ensure the sustainability of the theatres at Dr Gray's, and the Board has already been advised of the potential need for a dedicated obstetric theatre.

NHS Grampian is committed to fulfilling the strategic direction for Dr Gray's Hospital and is committing additional resource. For 2023/24 there will be an additional investment of £0.5M towards the implementation of the strategic intent. As the revised Medium Term Financial Framework is further developed, there will be greater clarity for the ongoing investment in Dr Gray's Hospital beyond the next financial year.

The Project Board will identify and seek to secure appropriate funding streams wherever possible, including through capital investment planning and other sources such as the Moray Growth Deal, however there is potential for further resource needing to be identified as part of implementing the plan. Within the current financial constraints, any need for additional funding will be mindfully managed within the NHS Grampian standard of achieving financial value and sustainability.

6 Engagement

As has been noted earlier and on the Strategic Intent, as well as detailed in Engagement reports, there has been a thorough and highly valuable engagement undertaking which has informed and supported the formation of a strategic plan for Dr Gray's Hospital. In addition to the engagement work identified as part of the Implementation Plan, there will be an ongoing approach to engagement with local stakeholders and there is already a dedicated role within Corporate Communication identified locally.

This will incorporate sharing and communicating the Implementation Plan, which has already begun with the opportunity for staff to discuss proposed actions and give feedback. This ongoing approach will continue to refine and shape how the Implementation Plan is taken forward.

7 Risks

With the establishment of the Project Board, its Terms of Reference will include the requirement to establish and manage a risk register, as will each of the associated

project groups. Some high level risk areas can be identified at this stage and are set out below with the linked mitigation.

Area of Risk	Mitigation
OPERATIONAL There is a risk that a medium to long term strategy does not address the immediate operational concerns and issues facing the hospital, leading to stakeholder frustration.	Clear communication that this is a long term view for 2023-33. Additional and separate focus on the more immediate issues that were highlighted as part of the engagement process has been developed for local operational management teams to progress.
GOVERNANCE The Implementation Plan sets out some ambitious aspirations for the hospital, ranging across significantly challenging aspects including service delivery, recruitment, retention, education and training, sustainability and network development.	The establishment of a dedicated Project Board, with commission and support from the NHS Grampian Board will incorporate the leadership and specialist knowledge needed to navigate and drive towards the ambitions set out in the Plan
PROGRAMME MANAGEMENT A high level of focus on Dr Gray's increases the pressure on the wider system, especially at a time when there already a high level of scrutiny and attention on the Moray maternity services, which may lead to confusion or duplication of efforts.	The work on delivering the new maternity model has been closely linked to the work to develop a strategy for Dr Gray's Hospital and there is mutual crossover and benefit from each area of work. This is enhanced by having shared Programme and executive leadership which will continue.
FINANCE The Implementation Plan does not identify any financial requirements for delivering the strategy.	Financial management of and investment in NHS Grampian's hospitals is already part of the Board's allocation. The Project Board will identify specific financial requirements as part of delivering the 2023-2033 strategy and will form proposals for securing any additional funding.
WORKFORCE Ensuring the retention of existing staff, highly valued for their experience and commitment and the successful recruitment of new staff with many working in new ways across a developing network is recognised as a risk to realising the strategic intent for the hospital.	To some extent this is already being managed as an issue, the additional risk is aligned to the new ways of working in a developing model. This will be mitigate by the involvement of workforce planning expertise from network Boards as well as

joint working with NHS Education for
Scotland.