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NHS
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Value Driven, Sustainable Transformation to Support NHS Scotland Recovery

Welcome



- We are delighted to be joining this HFMA event with a focus on how the finance community is a key enabler for transformational change. We have a busy afternoon lined up:

Time	Session	Leads
1330-1350	Value Driven, Sustainable Transformation to Support NHS Scotland Recovery	Jann Gardner
1350-1405	Refreshment Break	All
1405-1435	Workshop 1: Optimising national programmes at a local level – making the most of your local heat map	Katie Cuthbertson Juliette Murray
1435-1505	Workshop 2: Innovating sustainably: making value based investments in new innovations	Jess Henderson John Thomson
1505-1530	Reflections and Close	Jann Gardner Craig Marriot



Interactivity – menti.com



- Interactive questions are a key component of this session
You have three options

Go to menti.com enter code **17 07 80 8**

OR scan the QR code on the screen

OR the link in the chat <https://www.menti.com/jca8xwdyv9>



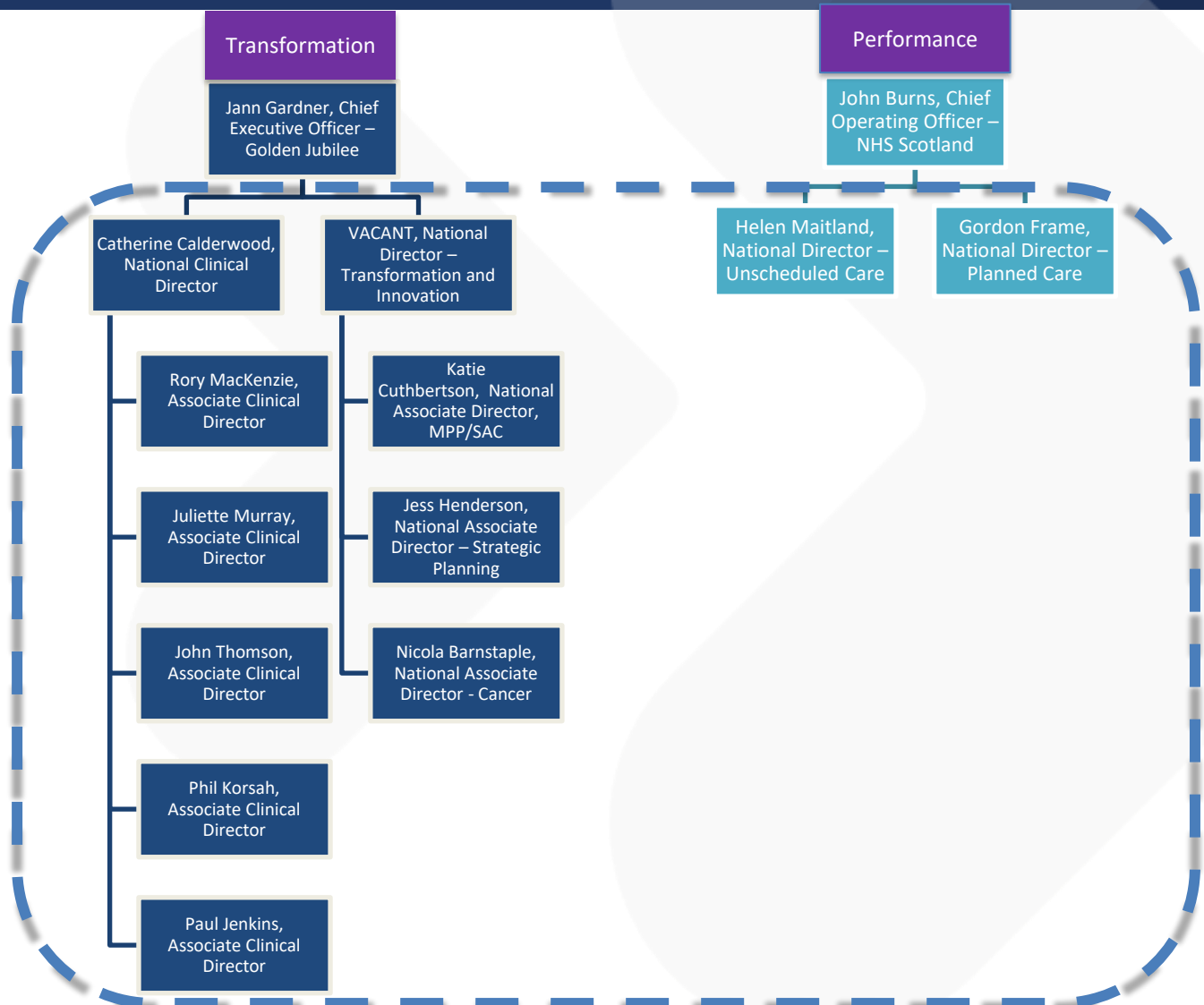
- Use whichever is easiest for you on the device easiest for you
- The next question will appear at menti.com automatically
- There will be **different** codes for the breakout workshops

Aims of session



- Provide an overview of the CfSD
- Highlight the productive and transformational opportunities associated with the CfSD National Programmes
- Generate ways of working with the finance community to ensure that programmes:
 - Are shaped and developed in a way which meets the needs of the finance community
 - Have the right inputs from the finance community and there are clear engagement mechanisms in place
 - Ensure local ownership of CfSD initiatives within the finance community

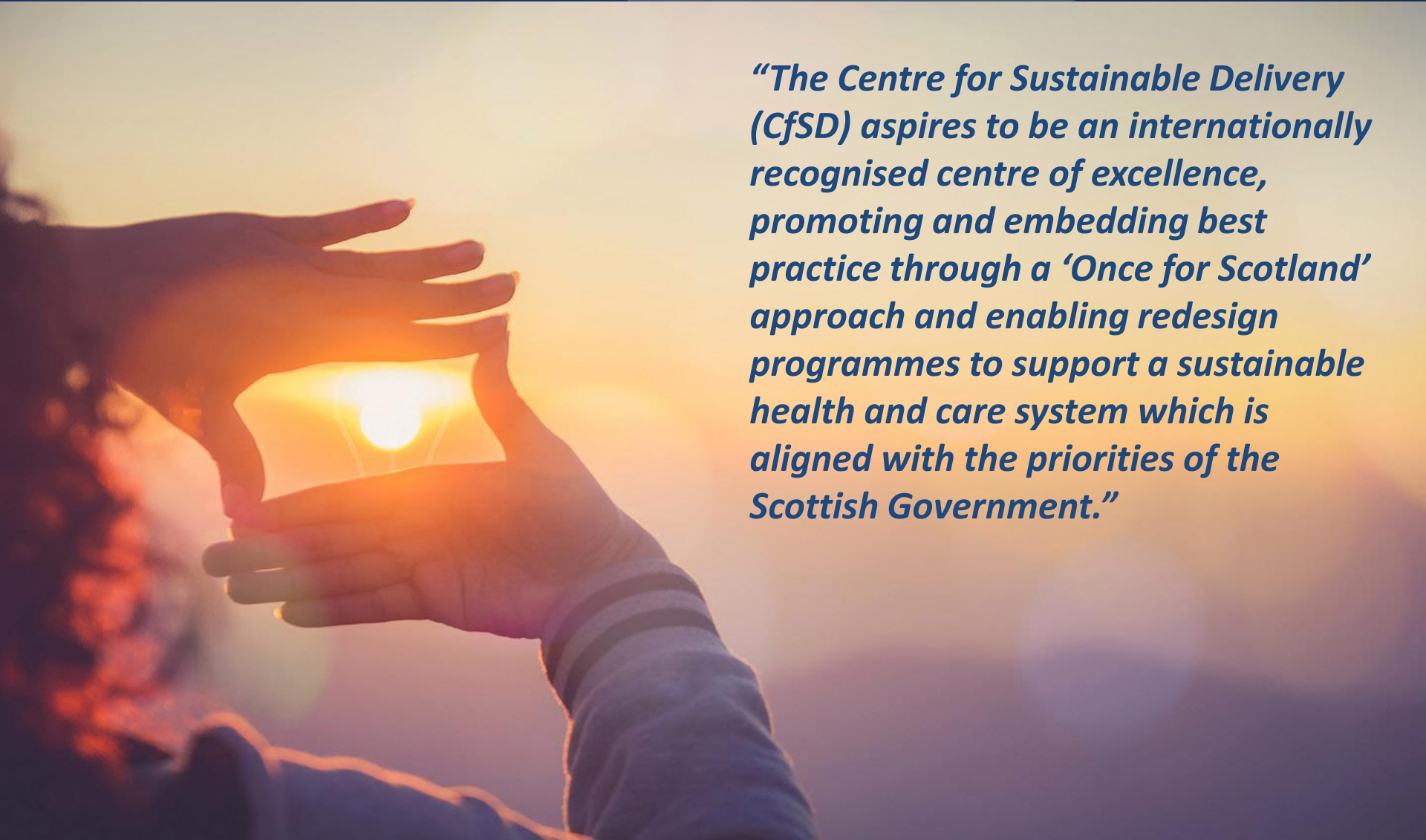
CfSD Leadership Team



The CfSD Vision



“The Centre for Sustainable Delivery (CfSD) aspires to be an internationally recognised centre of excellence, promoting and embedding best practice through a ‘Once for Scotland’ approach and enabling redesign programmes to support a sustainable health and care system which is aligned with the priorities of the Scottish Government.”



The CfSD has 6 objectives focused on supporting NHS Scotland Recovery

Maximise capacity

Reduce unnecessary demand

Harness innovation

Enhance staff capability and capacity

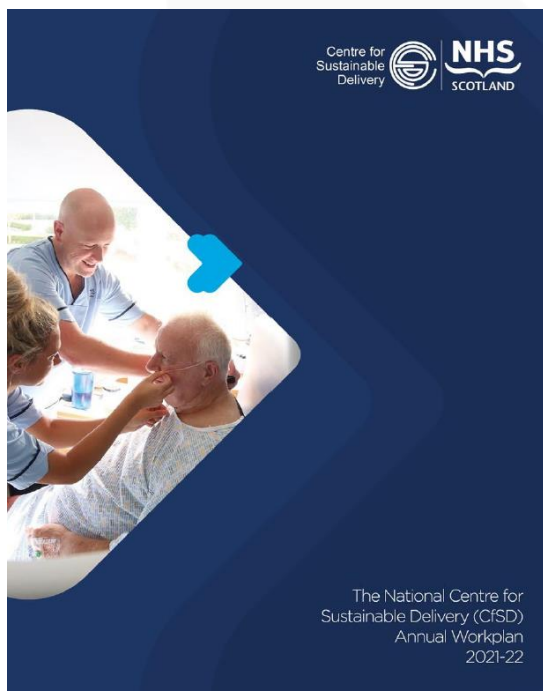
Safe and effective patient care

Form strategic partnerships

The high level of clinical leadership provides the organisation with credibility



How many of you have seen the CfSD Work Plan?



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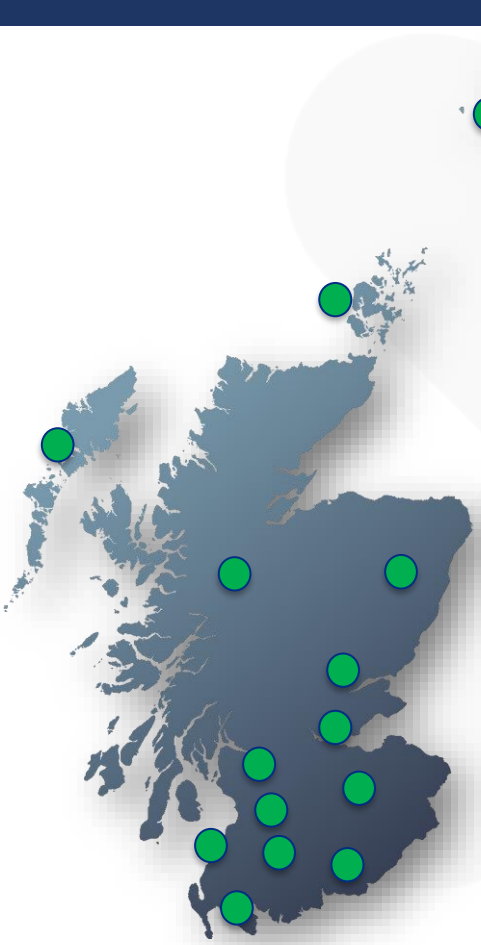


Ways of Working

- Annual Workplan & SG Commission
- Steer from Care Programmes
- Board by Board engagement, heatmap and joint plans embedded in RMP/AOP
- Local and Regional CfSD Champions & Leads connected through a new CfSD relationship management function



Recovery is an NHS Scotland Team Effort. We are greater than the sum of our parts.



Systematic Board by Board engagement to understand front line pressures and priorities.

Optimise national programmes at a local level.

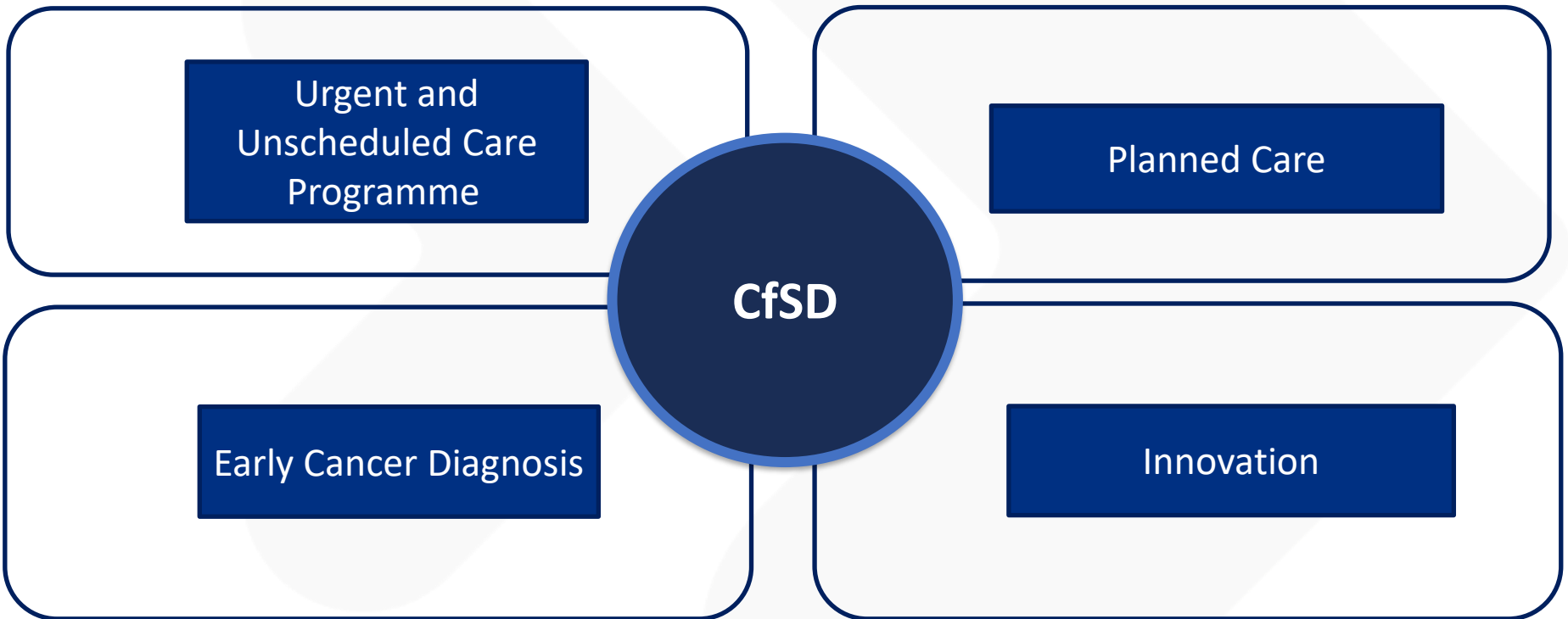
Link NHS Scotland Academy for workforce priorities.



Engagement with professional groups, National Health Boards and others to consider partnerships



Optimising National Programmes



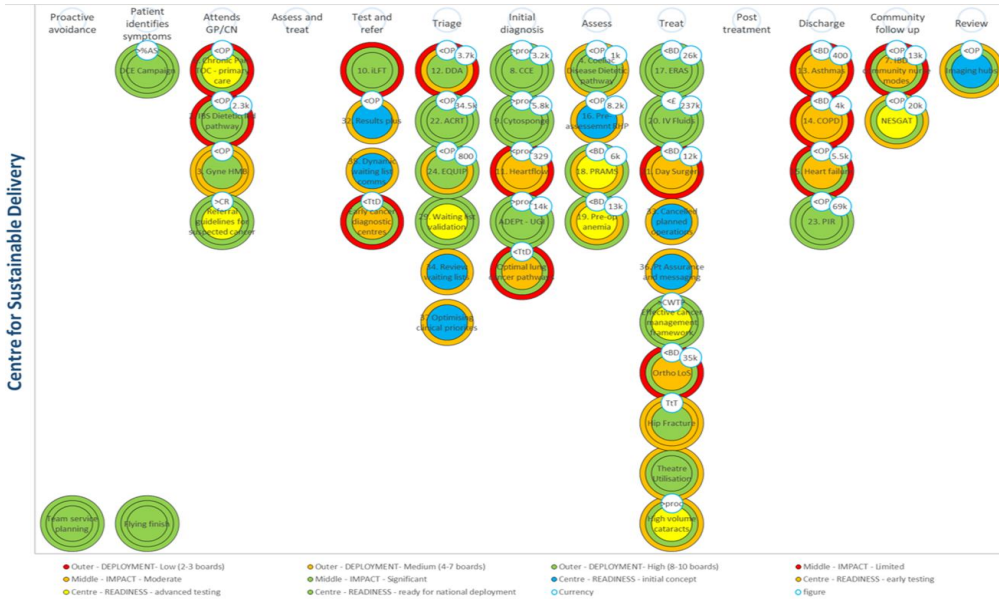
How much involvement have you had with your local CfSD Heat Map?

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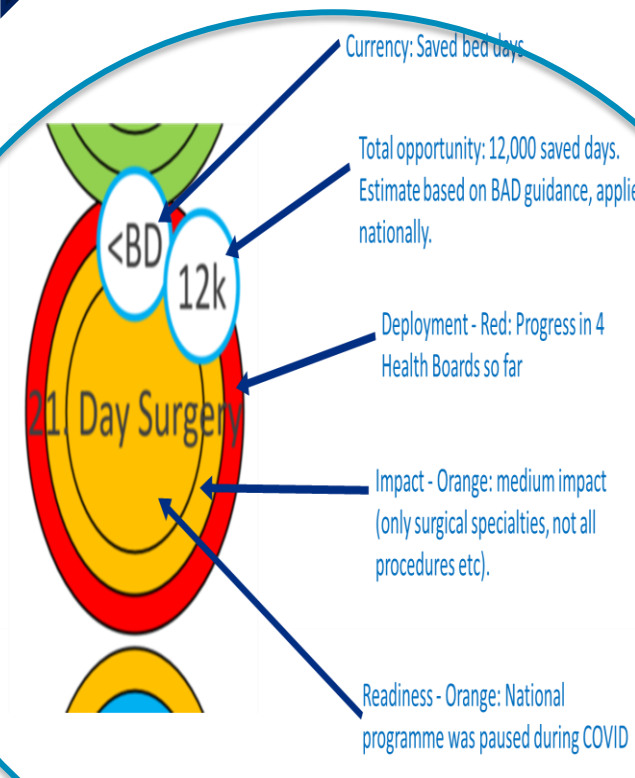
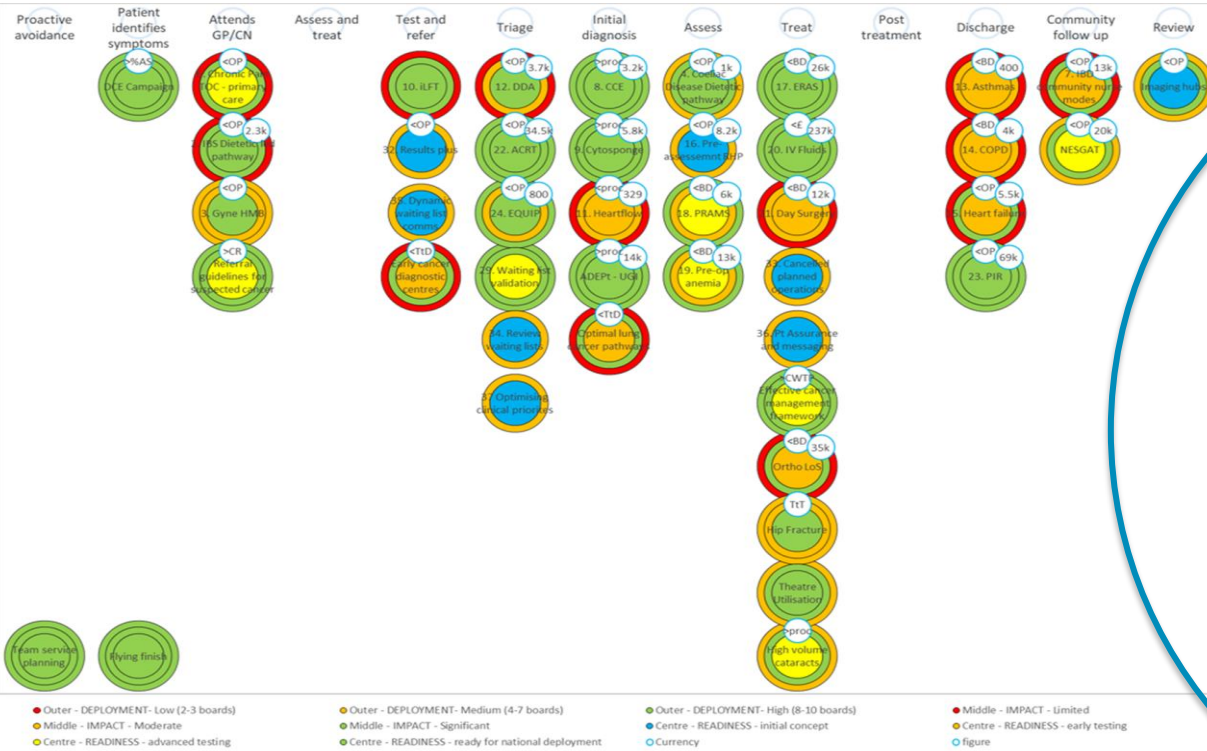
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Optimising National Programmes – Heat Map Methodology

IPC - Patient Pathway



Optimising National Programmes – What is Possible?



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Planned Care

REDUCE Outpatient
Appointment DEMAND
>150,000 per annum

INCREASE Outpatient
CAPACITY >18,000 appts
per annum

INCREASE procedure
numbers by >12,000 per
annum

INCREASE diagnostic
CAPACITY by >12,000
per annum

DECREASE BED DAYS
>75,000 per annum

What word springs to mind when you consider the term value?

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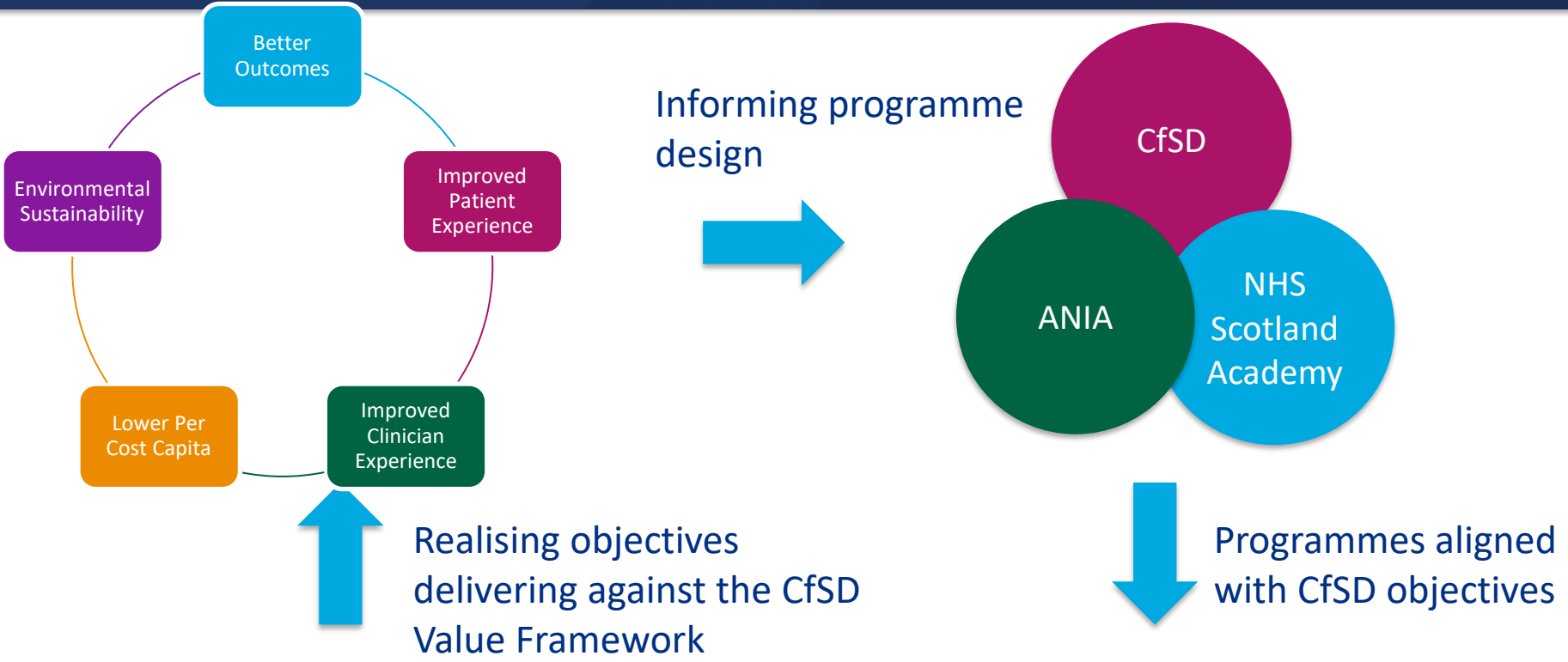


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The CfSD predicates on the delivery of value based care...which is a core component for recovery



- Enhance staff capability and capacity
- Reduce unnecessary demand
- Form strategic partnerships
- Harness innovation
- Maximise capacity
- Safe and effective patient care

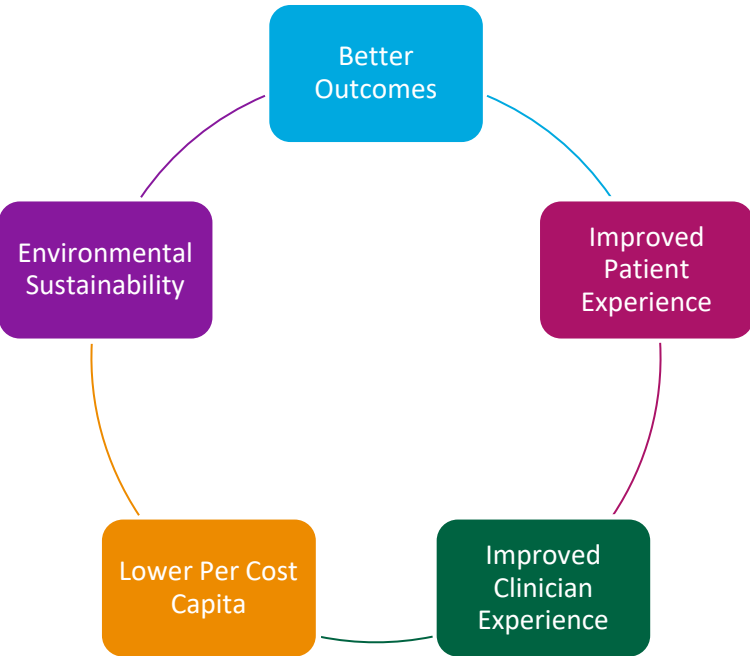
Maximising opportunities through modernising patient pathways



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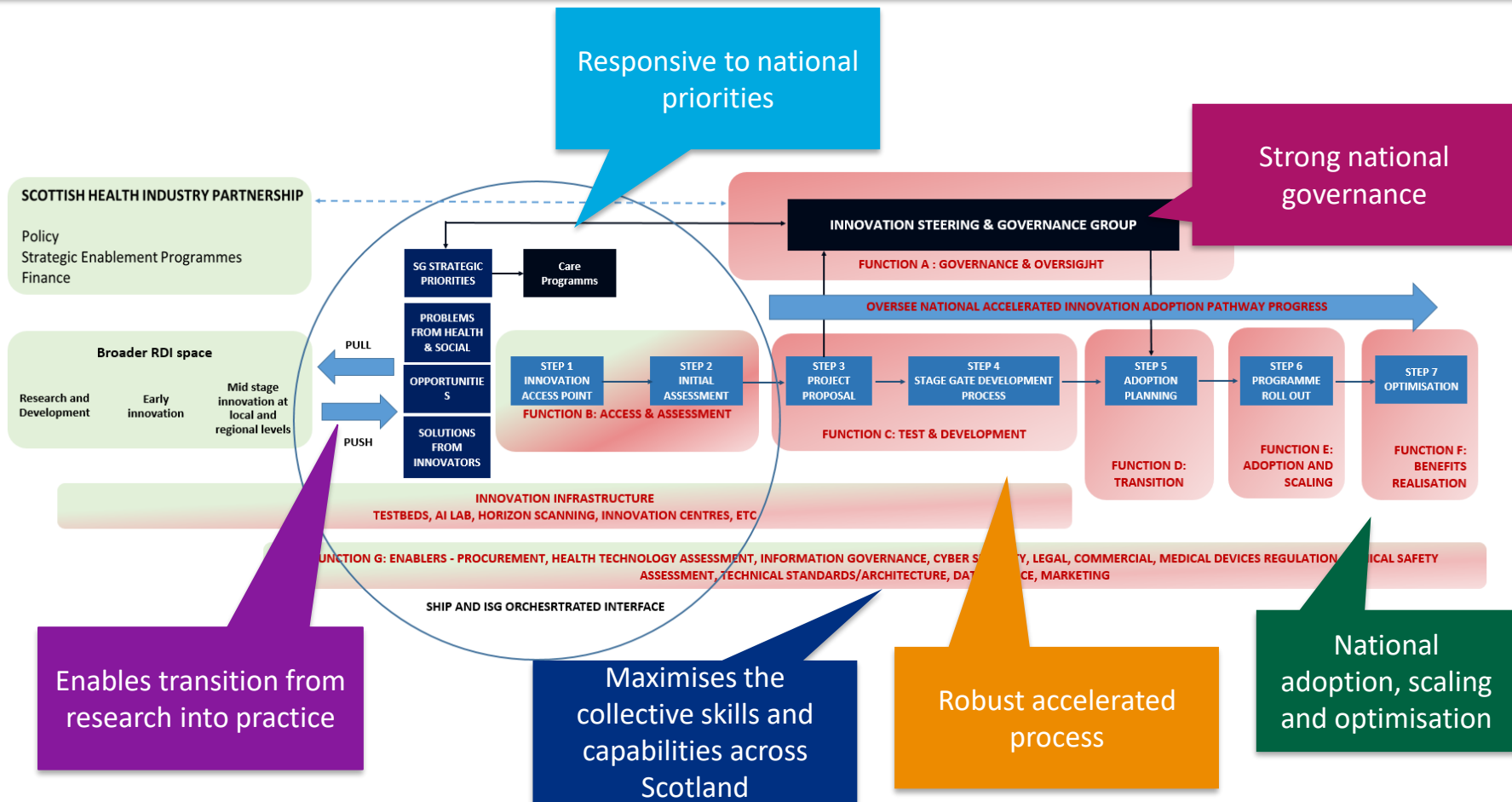
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How?
Reduction in unnecessary demand
Optimising of virtual opportunities
Lower cost pathways
Patient choice
Reduced waiting times
Maximisation of MDT working
Reduction in travel
Less time off work for patients

Collaborate. Redesign. Innovate. Transform.

Accelerated National Innovation Adoption Pathway



Impact – the CfSD creates system level value and some highlights are captured below

35-45% cost saving in large IV bags for boards who embedded IV fluid guidelines

Enhanced Recovery Relative **reduction of 85%** in 30 day mortality

IBS Pathway – **25% reduction in GI OP appt**

Enhanced recovery – **over 2000 bed days saved**

CCE won **two national awards** and finalist for third

Over 4000 procedures undertaken for CCE and cytosponge

HeartFlow test of change project; circa **50% reduction** in need to travel off-island for invasive testing or revascularisation procedure

Coeliac pathway – **saved 2000 GI appts** a year

Day 1 discharges for elective c-section now **39%**

Over 3000 dermatology digital assessments

57% increase in the proportion of stage 1 lung cancers diagnosed in most deprived areas of Scotland, since the DCE Programme began

Opened two Early Cancer Diagnostic Centres, with a further one planned

Next Steps



- There will be a **15 minute** refreshment break
- You will be allocated to the first workshop
- And will then be moved to the second workshop so that you have the opportunity to engage in both
- Once both workshops are concluded you will be returned to the plenary

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Optimising National Programmes at a
Local Level – How can we make the
most of your local Heat Map?

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Working Together



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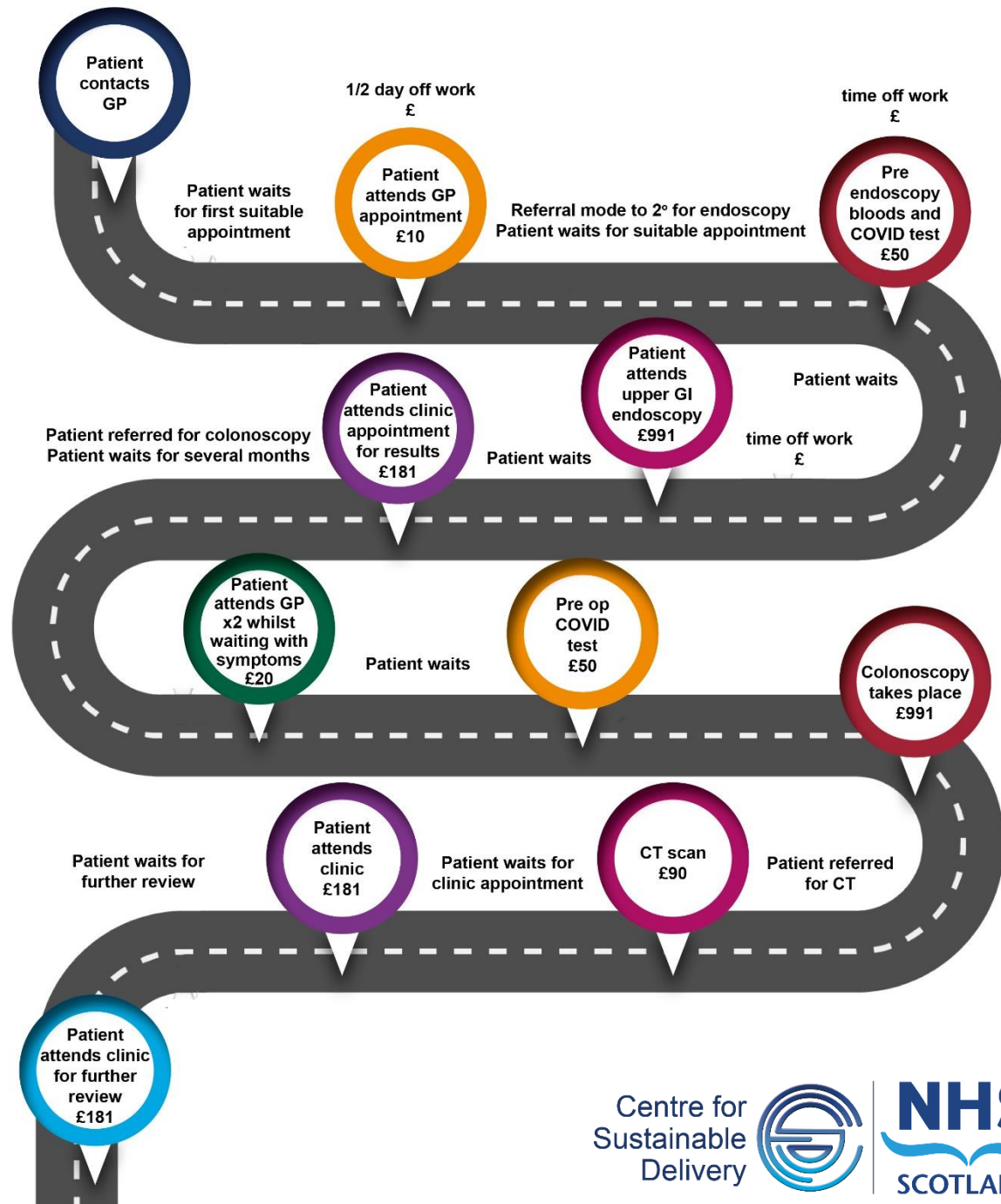
- CfSD Champions
- Jointly created workplan

Pathway area	Programme	areas of local board focus	CfSD support required	measurement/analysis strategy	Project point of contact - email address
Attends GP/CN	IBS Pathway	YES	CfSD support - Input from national clinical lead	tbc	

**Pathway Redesign
Case Study –
What difference will
it make?**

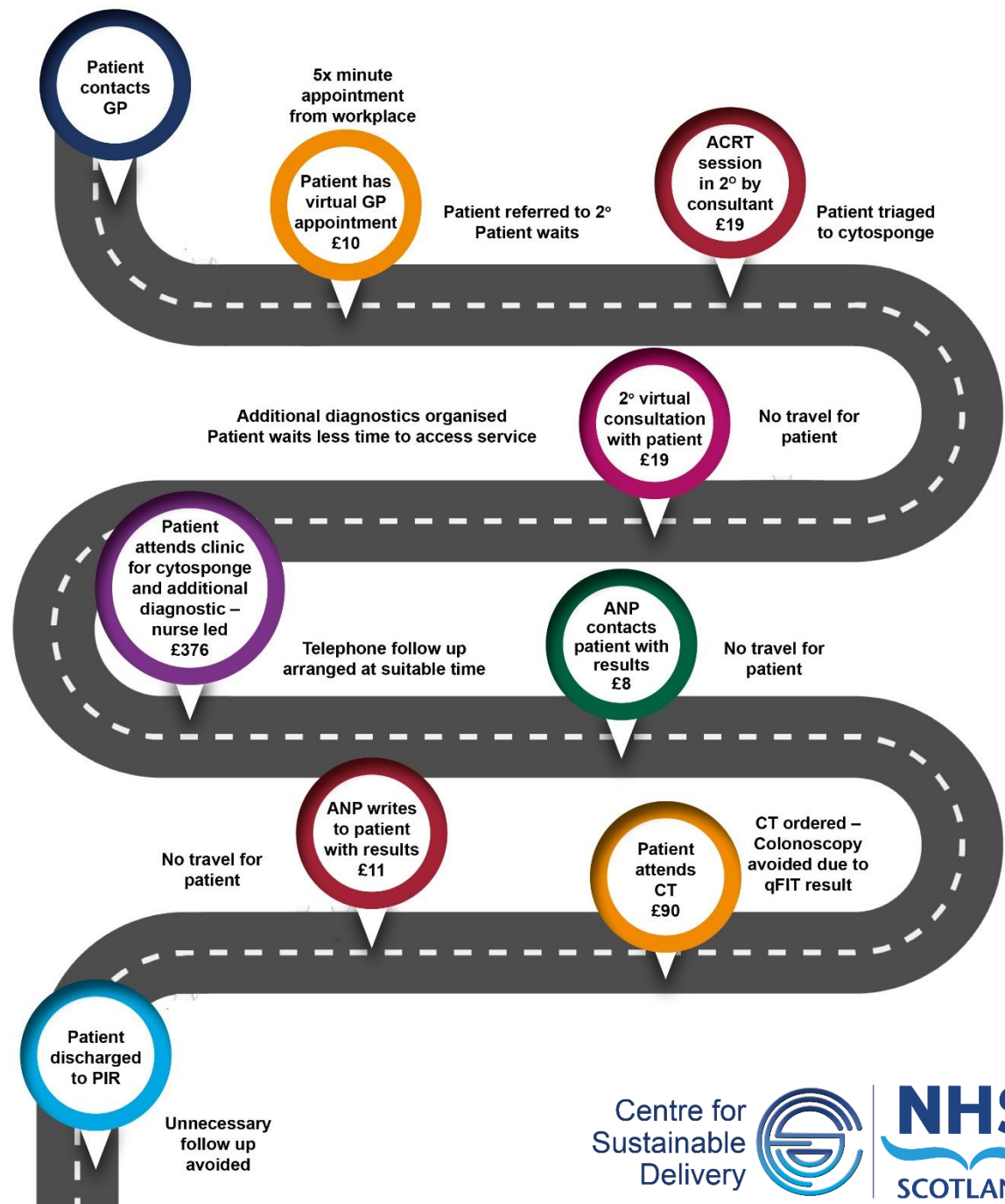
Pathway 1 – Pre Pandemic

- **Patient:**
Busy working parent
- **Scenario:**
Age 50
Has noticed some reflux symptoms, abdominal discomfort and weight loss



Pathway 2 – Post service redesign

- **Patient:**
Busy working parent
- **Scenario:**
Age 50
Has noticed some reflux symptoms, abdominal discomfort and weight loss



Summary



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Scenario 1	Scenario 2
Face to face GP Appointments	Virtual GP Appointment
Extra hospital appointments for bloods/ covid testing	2 x Hospital virtual consultations (1 x consultant, 1x nurse-led)
Upper GI Endoscopy – long waiting time, more invasive procedure	Cytosponge (done in outpatient clinic with short wait for appointment and results provided by phone)
CT	CT (but with results provided by letter)
Colonoscopy (with lengthy wait for slot), morbidity	Less time off work
4 x outpatient appointments	Faster overall time to reach diagnosis
2 x pre-procedure COVID tests	
Time off work ++++ (loss of earnings)	

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Opportunity Appraisal



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Pathway Episode	NHS Resource	Patient Time	Waiting Time
GP Attendances	£90	6 hours of patient time inc. travel saved	Up to a week per appointment
Bloods	£25	2 hours	Time to schedule appt and to get results
Procedural Costs	£1575	18 hours & 30 mins of pt time inc. travel saved	At least 6 week wait for urgent endoscopies, currently considerably longer
Outpatient Attendances	£724	8 hours of patient time inc travel/ parking and waiting for appointment	Significant delays of many weeks/months due to reduced capacity and focus on new pts
Total Saved	£2414	34 hours & 30 mins of pt time saved inc. travel	43 weeks faster to reach diagnosis with new pathway

Question for you!



What role could finance have in support of heat map delivery at a local and national level?

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Question for you!



What challenges might there be with this be at a local and national level?

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Innovating sustainably: making value based investments in new innovations

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What do you think are the biggest barriers to adoption of innovation?

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Innovation: some of the problems we need to solve

Problem 1



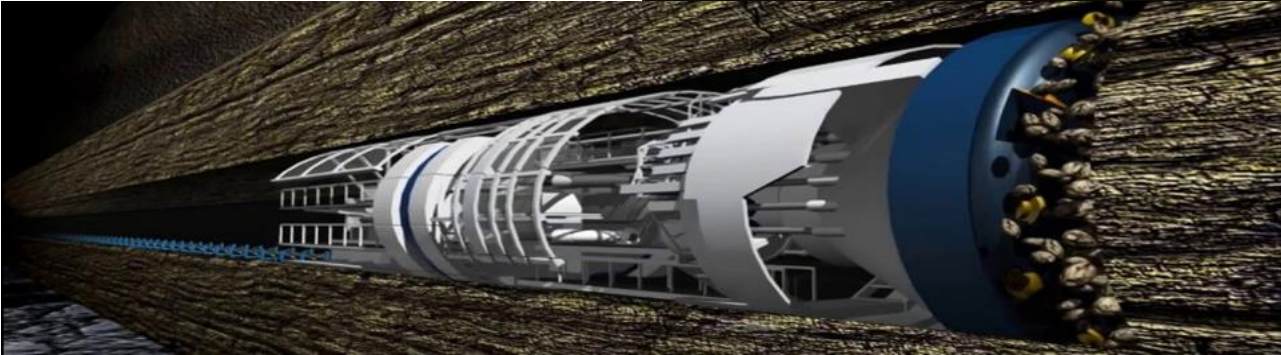
Problem 2



Problem 3

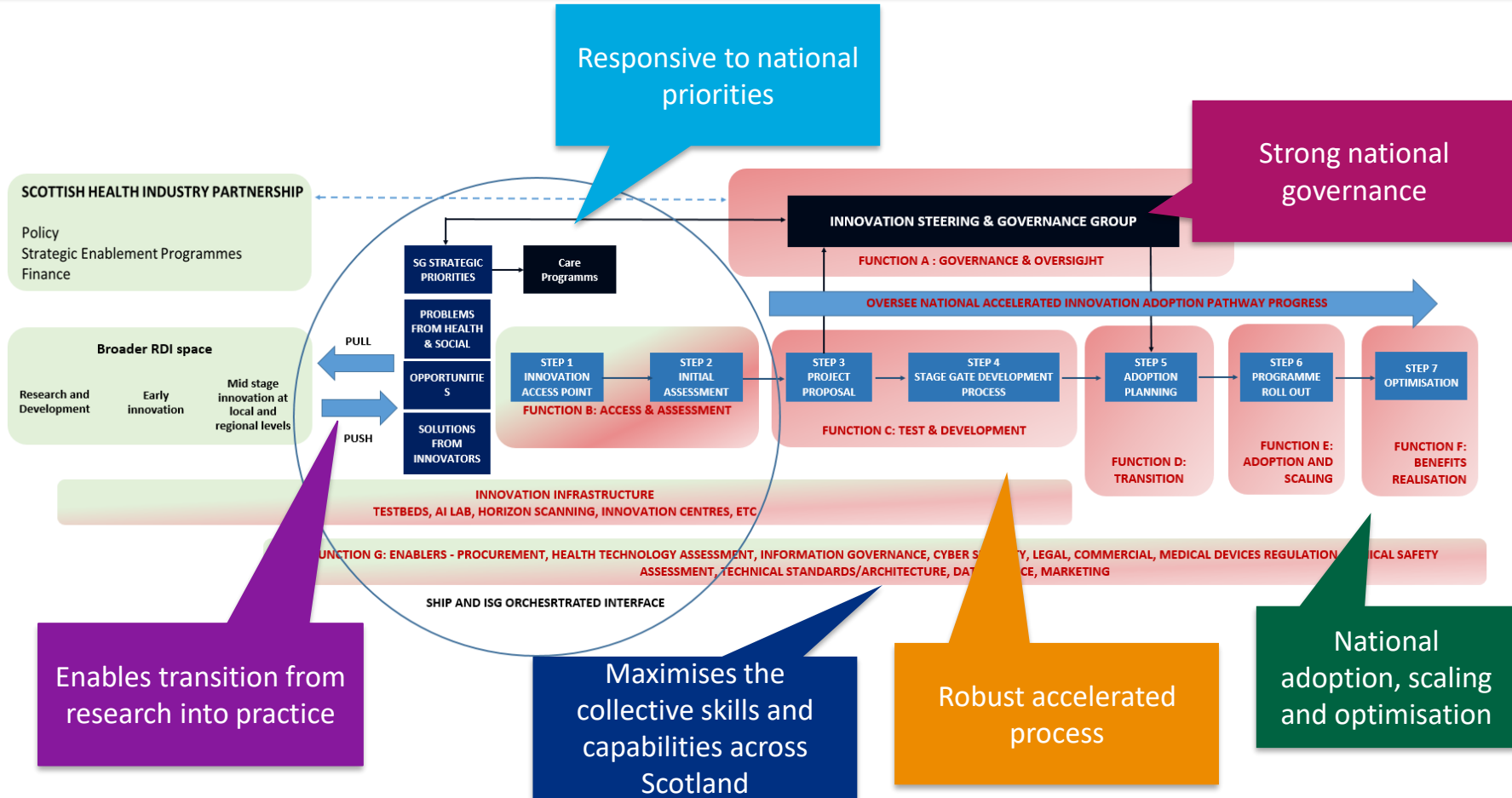


Clinical Perspectives



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Innovation Adoption Pathway



Question for you!



What are important components to consider when making an investment decision in a new innovation?

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Question for you!



How should finance engage with ANIA?

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Closing Remarks

Jann Gardner and Craig Marriot

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Workshop Reflections



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To what extent should the finance
community engage with CfSD initiatives?

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Where do you feel you could engage?



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Thank you!



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