

WEST DUNBARTONSHIRE COUNCIL

Report by the Director of Community Health & Care Partnership

Community Health and Care Partnership Committee: May 2013

Subject: NHSGGC Clinical Services Fit For The Future - Update

1. Purpose

- 1.1 The purpose of this report is to bring to the Committee's attention the NHSGGC Health Board's decision to approve the Clinical Services Fit for the Future: Case for Change at its December 2012 meeting.

2. Recommendations

- 2.1 The CHCP Committee is asked to note the content of this report

3. Background

- 3.1 The Clinical Services Fit for the Future programme was launched at the NHSGGC Health Board meeting in February 2012:
www.nhsqgc.org.uk/fitforthefuture.
- 3.2 The programme aims to look at the shape of clinical services beyond 2015 to make sure NHSGGC can adapt to future changes, challenges and opportunities.
- 3.3 The key aims of designing a new strategy for Greater Glasgow and Clyde are to ensure:
- Care is patient centred with clinical expertise focused on providing care in the most effective way at the earliest opportunity within the care pathway.
 - Services and facilities have the capacity and capability to deliver modern healthcare with the flexibility to adapt to future requirements.
 - Sustainable and affordable clinical services can be delivered across NHSGGC.
 - The pressures on hospital, primary care and community services are addressed.
- 3.4 The first stage of the programme has focused on what needs to change in the future to make sure NHSGGC can achieve this; and subsequently, the attached paper was presented by the Health Board's Medical Director at the December 2013 Board meeting.

Members will also recall that their Board's Medical Director gave a presentation on this topic at the Business Day session on 27th March.

4. Main Issues

- 4.1** The case for change has been developed through the work of the eight clinically led groups: Population Health; Emergency Care and Trauma; Planned Care; Child and Maternal Health; Older People's Services; Chronic Disease Management; Cancer; and Mental Health.
- 4.2** Nine key themes are expanded upon within the paper as having been identified as driving a clinical case for change and which must be addressed to ensure high quality clinical care in the future, i.e.:
- The health needs of our population are significant and changing.
 - We need to do more to support people to manage their own health and prevent crisis.
 - Our services are not always organised in the best way for patients.
 - We need to do more to make sure that care is always provided in the most appropriate setting.
 - There is growing pressure on primary care and community services.
 - We need to provide the highest quality specialist care.
 - Increasing specialisation needs to be balanced with the need for co-ordinated care which takes an overview of the patient.
 - Healthcare is changing and we need to keep pace with best practice and standards.
 - We need to support our workforce to meet future changes.
- 4.3** The attached Case For Change is an important milestone in the Clinical Services Fit for the Future programme, as it forms the basis of the next two stages of the programme:
- The development of service models. Each of the clinical groups is currently working on the patient pathways and service models we will require in future to meet best practice, clinical standards and improve patient outcomes.
 - Developing options to deliver the new service models. Once the service models are developed, NHSGGC will model the implications of these and how they can best be delivered with the resources, infrastructure and workforce expected to have available.
- 4.4** The NHSGGC Medical Director has committed to bring updates to the Health Board on each of these stages as they progress; and the Health Board Chief Executive has committed to ensuring that Council Chief Executives and Elected Members are also kept informed.

5. People Implications

- 5.1** The attached Case for Change underlines that services depend on having the right number of appropriately trained staff in place. Failure to plan for this could lead to services being unsustainable or facing crises. All professions are under pressure so it is important need to look at how services can be delivered better by teams working across professions and agencies (such as is already being progressed under the CHCP).

6. Financial Implications

- 6.1 The attached Case for Change emphasises that the health service is facing a period of rising demand resultant from demographic pressures at the same time as facing a period of significant financial constraint. It is therefore important that in planning for future services the funding available is spent effectively to ensure the best outcomes for patients.

7. Risk Analysis

- 7.1 The attached Case for Change details a picture of health services which need to change to make sure that NHSGGC can continue to deliver high quality services and improve outcomes.

8. Equalities Impact Assessment (EIA)

- 8.1 No significant issues were identified in a screening for potential equality impact of this report. The attached Case for Change does highlight that there are stark differences in health and outcomes across different social groups that require to be addressed.

9. Consultation

- 8.1 The clinical working groups have involved patient representatives and have been supported by wider patient reference groups, involving patients, carers and voluntary groups.

10. Strategic Assessment

- 10.1 The issues considered within the Case for Change are particularly relevant to the following Council strategic priorities:
- Improve life chances for children and young people.
 - Improve care for and promote independence with older people.
 - Improve the well-being of communities and protect the welfare of vulnerable people.



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Appendices: Greater Glasgow & Clyde Health Board
Board Paper No. 12/55 by the Medical Director - Clinical
Services Fit For The Future: The Case for Change

Background Papers: None

Wards Affected: All