Grampian and Orkney Realistic Medicine Programme

Report Date	17/03/2022

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Progress since last meeting

- 3 VIF applications submitted by Grampian
- 1 VIF application submitted by Orkney
- The GP Minor Surgery project continues to progress
- Poster Abstract submitted to NHS Scotland Event on GP Minor Surgery project
- Work is progressing to improve rheumatology pathway NHS Orkney
- Three GP's and two GP Cluster Leads in Grampian to pilot the Atlas of Variation (AoV) with national roll out still planned for 01.04.22
- Presented at Quality and Safety sub-group 16/3/22
- Supported Decision Making in Maternity Services Guideline out for peer review in NHSG
- NHS England interested in taking up Supported Decision Making resource for mode of birth

Making an Impact

People receiving care feel at the centre of decisions about their care.
Waste, variation and harm are reduced and innovative approaches are taken across the pathways of care provided. Risk is managed.

Key issues/risks

The key risks that pose concern to the programme are:

- Project Manager support no longer in place for the programme
- Due to staffing challenges within the Transformation Team, PM time on RM has been reduced at times
- Potential for rapidly changing COVID 19 situation and the requirement for services to be agile in their priority response
- Pace of cultural change – both historical and recent
- Funding – lack of clarity re recurring SG funding and non-recurring element for shortfall of Programme Manager
- Staff health and wellbeing
- Workforce capacity and engagement at service level/improvement fatigue
- Public understanding and engagement

Next steps

- Next Programme Action Plan in development
- Update on implementation of 21/22 action plan to Policy Team due end of April 22
- To review and develop VIF process to maximise ongoing funding opportunities
- To progress BRAN questions in OP letters – prev. stalled
- To attend Operational Sustainability Group Meeting
- Engaged with Innovation and Sustainability special interest group to discuss potential research projects
- Learning Disability Team to write next blog piece to be shared in April
- Linking in with clinicians to gain a baseline of Shared Decision Making in practice using collaboRATE to measure this
- Recording colleagues "sound bites" for what Realistic Medicine means to them/how they practice RM to share locally and nationally

Data points/measures

Overall

- 10/18 actions completed
- 8/18 actions progressing or partially completed
- Social media stats increasing

In development

- Measures to be developed during test from Atlas of Variation
- Baseline survey of Shared Decision Making from patients and staff for "It's OK to say no" project
- GP Minor Surgery waiting list progression

- PROMS and PREMS to be collated to show the impact of Realistic Medicine
- Annual evaluation by U of A of the entire programme – link to PID

REALISTIC MEDICINE

NHS Grampian

NHS Orkney

Project Progress Reporting

Principles

 CHANGE OUR STYLE TO SHARED DECISION-MAKING

 BUILD A PERSONALISED APPROACH TO CARE

 REDUCE HARM AND WASTE

 TACKLE UNWARRANTED VARIATION IN PRACTICE AND OUTCOMES

 MANAGE RISK BETTER

 BECOME IMPROVERS AND INNOVATORS

Measurable Outcomes

Outcome	Baseline	Actual
Use of a public and staff facing RM Web page will be monitored	None currently	201 'hits' to date
Clinical Staff will engage with the NES (TURAS) online "Shared Decision Making" module		
Quantitative and Qualitative feedback will demonstrate embedding of RM principles across Grampian	TBC	63% of Dr (Med Conf.) aware of the BRAN

Outcome	Baseline	Actual
Maximise the use and impact of digital technology (Near Me Virtual Consultation)		
Reduction in low-value (unnecessary) appointments	TBC	

Outcome	Baseline	Actual
Reduction in Outpatient appointments		
Monitor impact of pathway improvement projects through use of QI Methodology		

Outcome	Baseline	Actual
Service Delivery Plans will specifically describe principles and outcomes relating to RM across HSCP.		

Outcome	Baseline	Actual
Reduced ED attendances		

Outcome	Baseline	Actual
There will be an increase in the use and impact of Innovative Technology		

Key Actions/Deliverables

Change our style to shared decision-making
- Raise awareness for Public and Staff of BRAN Questions-social media/Intanet/Internet/Netwroks
- Promote Bran in physical waiting rooms
- Actively promote NES online RM "Shared Decision Making" module
- Promote engagement with RM with easy access to RM tools and learning modules.
- Review patient information ensuring it is reliable, current and accessible
- Develop a landing page to ease patient access to patient information
- Engage with Advisory Committees pan Grampian
- Create a Grampian Webpage with Pubic and Staff Information

Build a personalised approach to care
- Ensure individualised care plans that suit patients wants, cares & needs
- Review virtual consultation (Near Me) use and develop a targeted improvement plan to increase use where appropriate.
- Review complex patient pathways and redesign to minimise multiple hospital visits
- Values-based Healthcare – "It's OK to Say No"

Reduce harm and waste
- Link to Modernising Pathways Programme which provide guidance to support services to implement ACRT, PIR & Asynchronous consultation..
- Identify pathways and cross system pathway issues where the Clinical Interface Group can support improvements.
- Link in with clinical governance structures to promote a culture of learning from excellence & mistakes – regular M&M reviews across specialities

Tackle unwarranted variation
- Review secondary care discharge pathways across Grampian to reduce delays, waste and variation.
- Encourage and support the use of tools such as Quality Improvement in pathway improvement projects.
- Encourage and support the use of data to inform areas for improvement.

Manage risk better
- Guide remobilisation by the use available data to manage risk and support whole pathway transformation.
- Link with the Redesign of USC programme to offer support in access to ED ensuring improved signposting and redirection.
- Promote KWTT, NHS Inform and all self care/self management resources.

Become improvers and innovators
- Consider output of benchmarking exercise to identify proposed innovative technology RM activity and provide targeted support.
- Identify services where ongoing innovative technology projects could also be applied and facilitate shared learning.
- Support & encourage key stakeholders to undertake RGU "Leading Strategic Innovation in Health and Social Care"
- Support implementation of innovative technology including
  - CCE
  - Cytosponge
  - New Robotics

Status Key

✓ Delivered	⧗ On Track	⧗ Min Delay	⧗ Maj Issues