PERSONALISING REALISTIC MEDICINE

EXECUTIVE SUMMARY
This is the Executive Summary of the Chief Medical Officer (CMO) for Scotland’s Annual Report 2017-2018. You can find the full Annual Report at:

INTRODUCTION

Realistic Medicine aims to improve patient care by creating a personalised approach where the person receiving care is at the centre of decision-making. It seeks to reduce harm, waste and unwarranted variation, whilst acknowledging and managing the inherent risks associated with delivering care, as well as championing innovation and improvement. These ideas will help us to deliver better value care to our patients, realise the aspirations of our health workforce and sustain the NHS in the future.

Over the last three years, building a personalised approach to care has become the central theme in people's minds when they think about delivering Realistic Medicine. Personalising Realistic Medicine explores this in greater detail. How do we personalise Realistic Medicine for our patients and for our staff? How do we overcome the challenges in our health and care system to deliver personalised care? How do the other domains of Realistic Medicine support us to achieve our aim?

Dr Catherine Calderwood MA Cantab FRCOG FRCP Edin
Chief Medical Officer for Scotland
THE VISION

REALISTIC MEDICINE

WE CAN:

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
PERSONALISING REALISTIC MEDICINE FOR OUR PATIENTS

There is often a disconnect between what patients want and need and what health professionals believe patients want and need. To address this, we must build a more personalised approach to care. This does not mean that we always give people what they want because we know that there are times when it may not be appropriate or practical for us to do so. But we should always consider what matters to the person and try to better understand how their disease and our treatment fits into the broader context of their lives. We must also be respectful of a person’s most precious resources – their time, energy and attention – and try to minimise the impact of healthcare upon these.

THE CHALLENGES OF PERSONALISING REALISTIC MEDICINE

Challenges must be overcome to deliver a more personalised approach to care. However, engaging our patients and our citizens allows us to understand and co-create the care they really value. The Citizens’ Jury on shared decision-making is a fantastic example of how, by building a dialogue with the public based on trust and mutual respect, we can learn how to provide better value care to those we serve.

Although our health and care system has never felt busier, giving time to patients can often save time for professionals, and the appropriate redistribution of work – using all the assets of our diverse teams – can improve patient care, rather than undermine it.

SUPPORTING OUR WORKFORCE TO DELIVER PERSONALISED CARE

Creating environments where staff feel valued, respected and supported is vital if we are to retain and develop our workforce to respond to the challenges of delivering a world class health service for the people of Scotland. To do this, we must understand the challenges faced by our staff and we must support them with effective, compassionate leadership at all levels and in all places. We must also develop a culture of stewardship to deliver Realistic Medicine into the future. This means taking responsibility, not only for the health service of today, but also for the health service of tomorrow. Our workforce is our most valuable asset and needs to be supported now and in the future.

PERSONALISING REALISTIC MEDICINE ACROSS OUR PRINCIPLES

While the principles of Realistic Medicine are presented visually as distinct entities, they are, in practice, inter-related and inter-dependent. But building a personalised approach to care is the running motif throughout our Realistic Medicine vision and remains our most important objective. Through pursuit of personalised care, we lay the foundation for shared decision-making and innovation, we are better placed to manage uncertainty and risk and we deliver better value care, by reducing harm, waste and unwarranted variation.
WHAT WE NEED
To deliver a more personalised approach to care, we need four components:

- Engaged patients;
- A supported workforce;
- Compassionate leaders; and
- A culture of stewardship.

My report describes in more detail how each of these can be fostered.
FEEDBACK AND FUTURE

I look forward to continuing to work with you to champion Realistic Medicine so we can deliver a modern and innovative health and care system for all the people of Scotland.

I’d really welcome your views. If you have any feedback I can be reached at:

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