

NHS Tayside Transformation Support Team

**Report on NHS Tayside's progress to
implement the recommendations in the
Assurance Advisory Group's Staging Report.**

September 2017



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Introduction

On 27 June 2017, the NHS Tayside Assurance and Advisory Group (AAG) submitted their Staging Report¹ on the robustness of NHS Tayside's financial projections and recovery plans to Paul Gray, Director General of Health and Social Care and Chief Executive of NHS Scotland.

As a result of the findings and the 10 recommendations for NHS Tayside, Paul Gray asked me to lead a Transformation Support Team (TST) to work alongside NHS Tayside to provide help and support to implement the recommendations. The other members of the TST are:

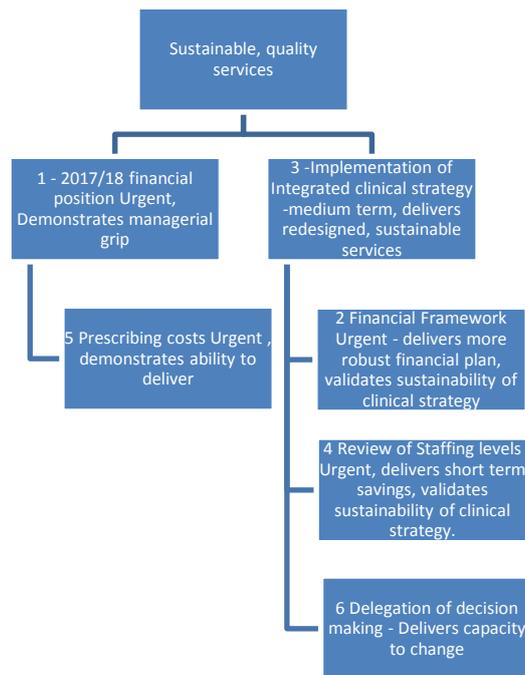
- Barbara Anne Nelson - Interim Director of Workforce, NHS Fife
- Professor Alex McMahon – Executive Director, Nursing, Midwifery and Allied Healthcare Professionals, NHS Lothian

Alan Gray, Director of Finance, NHS Grampian, was a member of the TST up until early September when he withdrew from the group in order to take up a new role as Strategic Finance Lead for the North, which includes provision of strategic support for NHS Tayside.

The team is also being supported by Alpana Mair and Simon Hurding from the Effective Prescribing and Therapeutics Team in the Scottish Government.

The recommendations of the AAG report are designed to deliver an immediate improvement in the in-year financial position of the Board (Recommendation 1) and also to address issues of longer term sustainability through significant transformational service change (Recommendation 3). Delivery of recommendations 2, 4 and 6 are fundamental to being able to model that transformational service change and to be assured that it will deliver sustainable quality services. Recommendation 5 is essential to both the short term and the longer term financial position of the Board. This understanding is reflected in the diagram on the next page.

¹ NHS Tayside Assurance and Advisory Group Staging Report of Findings and Recommendations, 27 June 2017, <http://www.gov.scot/Publications/2017/06/8615>



Recommendations 7 to 10 are important as enablers of the work that will need to be done to deliver short and long term changes and to ensure that the totality of the endeavour is appropriately led and managed.

In its programme of work, the TST has sought to ensure that the Board retains an urgency of focus on the short term financial position while at the same time developing the processes and approach that will deliver the transformational change required for long term sustainability of quality services. We have been very conscious of the dependencies intrinsic in the relationship between the recommendations.

TST members have worked with the Executive Directors responsible for the delivery of the recommendations and provided advice and support to them, as well as acting as a critical friend to challenge the appropriateness of the action being taken. This has involved commenting on draft Board papers, attending meetings, liaising with stakeholders and sharing professional experiences. The TST worked with NHS Tayside to produce an action tracker to facilitate monitoring of actions designed to deliver the AAG recommendations. As part of this work we described the outcomes that we expected the recommendations to deliver and the impact that achieving the recommendations would have. We also sought to set out some high level measures. This proved challenging in some areas which are noted in this report.

The purpose of this report is to inform the AAG, who have been asked by Paul Gray to report back, at the end of September, on NHS Tayside's progress towards delivering their recommendations. This report is broken down into the 10 recommendations and sets out the TSTs analysis of progress against each. This analysis is based on the evidence the TST has gathered in the last 3 months and from NHS Tayside's own self-assessment which details both the outcomes which are anticipated to arise from the agreed actions along with the work completed to date and evidence to support the Board's assessment of progress. The self-assessment

has been a valuable exercise for NHS Tayside to take stock three months in and to reflect on whether the actions identified in the tracker are the right ones to deliver the transformational change required.

As part of the assessment, a Black, Red, Amber or Green (BRAG) rating was given to each recommendation, based on the definitions below:

- Black – there is no confidence that plans will deliver the anticipated outcomes, or there is a complete lack of a plan for a recommendation.
- Red – significant activity is still required to develop realistic plans that will give confidence that the outcomes will be realised timeously, or substantial activity may have already begun but there is a high level of risk that anticipated results will not be realised.
- Amber – realistic and credible plans are in place to deliver the outcomes but they have not yet been implemented, or have been partially implemented, and results are still to be seen.
- Green – plans are robust with activity already leading to results in line with the anticipated outcomes.

“Our commentary on NHS Tayside’s assessment includes key areas where we want to see demonstrable progress by the end of December. We will meet with, and agree a set of metrics with NHS Tayside’s Executive Team, to ensure there is clarity in how we will judge whether progress has led to tangible benefits.”

Finally, I would like to acknowledge NHS Tayside’s Executive Team openness and willingness to fully engage with the TST and their commitment to delivering transformation change.



Caroline Lamb
Chief Executive, NHS Education for Scotland
Chair, NHS Tayside Transformation Support Team

1. AAG Recommendation 1 – Financial Outturn

“We recommend that NHS Tayside should take urgent and robust action in order to maximise the likelihood of achieving the planned in-year savings and delivery of NHS Tayside’s projected financial outturn for 2017/18. Detailed action plans must have support from key stakeholders and include anticipated financial impact, identified timetables and milestones. There should be clear trigger points for escalation to ensure swift action when delivery is found to be at risk.”

1.1 NHS Tayside’s Assessment – Rating = Red

“The Board has initiated a rigorous continuous review of its financial position in the current year to revise the financial forecast outturn for 2017/18 and has developed a schedule of additional risk-assessed efficiency savings to aim to meet the agreed financial target. We will require to increase the level of efficiency savings further to ensure that there is sufficient volume of savings to meet our financial objectives in year when taking account of risk assessment against delivery and will produce delivery plans for each initiative to mitigate the risk of underperformance. In the second phase, between October and end of December 2017, we will ensure that there is further strengthened budgetary control on current spend while implementing the additional savings plans. At this stage, given the need to deliver substantial additional savings in the second half of the year, the status of this recommendation is assessed as ‘Red’.”

1.2 TST comment - Rating = Red

This recommendation is a priority area and while the Director of Finance is the responsible lead, the whole Executive Team needs to work collectively and take corporate responsibility in order for it to be achieved. NHS Tayside recognises this and has identified further areas for potential savings although further work is needed to establish clear processes and timescales for implementation. The paper which went to the Finance and Resources Committee on 12 September reflects this. The TST took a view that the steps taken to produce robust, detailed action plans should have been initiated sooner and progressed more rapidly. Although momentum has now been built up and all internal stakeholders have a more realistic assessment of the expected out-turn, there is a need for the Board to demonstrate that they can take and implement decisions rapidly, in order to see real improvements in the position before the end of the financial year.

In terms of future action, to retain confidence in the delivery of the agreed outcomes the TST would expect to see, between the end of September and the end of December, concrete evidence of savings being delivered against the original plan and against new areas identified for action.

2. AAG Recommendation 2 – Financial Planning Process

“Over the next three months, NHS Tayside should subject its financial planning framework to rigorous and comprehensive review. This should help to ensure that projections and targets for future years are based on a thorough service by service understanding of cost drivers, risks and opportunities.”

2.1 NHS Tayside’s Assessment – Rating = Amber

“We have undertaken, in conjunction with NSS [National Services Scotland], the development and implementation of a new Business Planning and Budgeting Programme (BPB) over the past nine months to build towards a recurring, sustainable financial balance position through 2018/19, incorporating service, workforce and financial planning. We have held a Board Development Event to position the Board around the BPB and to understand their appetite for risk and service change. Under the BPB, the services are due to submit their group service plans, associated budgets and efficiency measures for budget review scrutiny in October and December 2017. Although there has been considerable support to individual groups and service teams, this is a new process and will be heavily supported to ensure that it delivers plans for achieving financial balance in the next financial year 2018/19. In the next phase, between October and December 2017, we will need to demonstrate that the service plans are realistic and achievable and can evidence affordability in the short to medium term. At this stage, as we implement a new financial planning process, the status of this recommendation is assessed as ‘Amber’.”

2.2 TST comment - Rating = Amber

The TST agrees with NHS Tayside’s assessment that this recommendation currently has an Amber risk rating, given that the results of the revised process will not be seen until next financial year. However, from the evidence seen by the TST, NHS Tayside has done a considerable amount of ground-work to develop a more robust budget review process and embed the new processes within the various business units. For the revised process to be fully effective, it will be vital for each service area to have a good understanding of what is actually driving the higher costs. Much of this is dependent on the delivery of Recommendation 4.

NHS Tayside has set a deadline of 30 September for each service to present their initial plans. Therefore, between then and the next progress report due at the end of December, the TST would expect to see service plans built up according to the new process and the outcomes of the two Business Planning and Budgeting Reviews which are timetabled to be completed by December 2017.

3. AAG Recommendation 3 – Integrated Clinical Strategy

“Over the next six months, NHS Tayside should continue to work with its partners to agree the content and a realistic timeline for completion of the Integrated Clinical Strategy, already in progress. We would expect that the completed Integrated Clinical Strategy would set out a comprehensive and evidence based case for transformational change. This would build upon the HSCPs’ [Health and Social Care Partnerships] strategic plans for social care, primary healthcare and unscheduled hospital care, taking account of public health imperatives. It should provide a clear strategic direction for acute and community healthcare in Tayside, including the development of Regional Plans. The Integrated Clinical Strategy should take full account of present and future challenges, including those set out in the National Clinical Strategy, Realistic Medicine and the Health and Social Care Delivery Plan. It should provide concrete and detailed options for long term strategic positioning of NHS Tayside’s role within a local and regional setting. We would encourage NHS Tayside to accelerate its work together with HSCPs, Local Authorities, the Third Sector, Universities and other partners.”

3.1 NHS Tayside’s Assessment – Rating = Amber

“To support the major transformation of our health and care services, we have commenced the development of an Integrated Clinical Strategy (ICS), incorporating a programme of stakeholder engagement; the first of a series of rapid development events; and agreed the programme to produce a strategic framework and consultation and engagement approach to help shape future affordable and sustainable service delivery. There is recognition within Scottish Government, the Assurance and Advisory Group, the Transformation Support Team and NHS Tayside Transformation Executive Group that a critical success factor for the delivery of recommendation 3 is the ability to secure dedicated resource for Strategic Planning and a related infrastructure. Priority resource requirements were escalated by NHS Tayside to Scottish Government in July 2017 and work has continued throughout July, August and September 2017 to identify and secure personnel with the skill, experience and knowledge to support this significant whole system transformation programme.

Whilst significant work has been progressed to support initial phases of the programme, it is fundamental to the ICS programme and outcome to establish the planning and development infrastructure that will ensure stakeholder engagement, activity and improvement with pace and that can inform the strategic direction of the Integrated Clinical Strategy. A road map of staged delivery has been developed to complement the Programme Initiation Document (PID), setting out the programme and process for the ICS development. The recent two day event was highly successful with around 100 delegates attending on each day and outputs will be used to inform organisation development, the transformation programme and the ICS. We have developed a communication and engagement strategy and plan, including a stakeholder engagement process. We are in the process of commissioning a public engagement resource to facilitate the wider dialogue and consultation with staff and the public.

The next stage through to end of December and beyond will need to deliver a clear and supported strategy that will enable the major service change to progress within an agreed framework. At this stage, with the scale of planning and engagement required, the status of this recommendation is assessed as ‘Amber’.”

3.2 TST Comment - Rating = Amber

NHS Tayside is clearly making progress in relation to the specific actions it has committed to as part of the development of an Integrated Clinical Strategy (ICS). The update to the Board in August and the successful 2 day event where the ICS was at the centre of discussions, provide relevant evidence to support this progress. The TST is also encouraged by the range of internal engagement meetings to date with staff groups, and the broadening of the focus and the Leadership Team for the ICS to include greater recognition and emphasis on the role of Integrated Joint Boards and delegated services beyond the acute sector. Nonetheless, as yet there is little in the way of tangible outputs from these processes. The results of engagement meetings have now been written up but have still to be collated and it is unclear what level of detail regarding ‘current state’ issues or information regarding the scale of the challenges has been made available to inform these discussions. Further work has been done to construct a more comprehensive and road-map to document the whole ICS process including details of plans for external and public engagement although this does not yet go much beyond the December Staging Report. Careful scrutiny will be required over the coming months to ensure adequate resources are available to support the ambitious timeline of work set out in project plans.

The TST acknowledges the considerable challenge arising from the continued lack of a strategic planning function within the Board. We continue to work with NHS Tayside and Scottish Government to identify options to address this gap.

Between now and end December – and particularly for the Board update in October - we would expect to see a comprehensive roadmap and programme of work, which takes into account the key themes and next steps coming out of the 2 day event and the internal engagement to date, and which gives a clear indication of what will be delivered, when and who is responsible. We will also expect to see early action to agree and implement the next phase of the communication and engagement strategy which widens this process out to encompass targeted and pro-active engagement with key external stakeholders.

4. AAG Recommendation 4 – Workforce

“NHS Tayside should undertake an early and comprehensive review of staffing levels across all services and sites, including those delegated to or utilised by HSCPs [Health and Social Care Partnerships]. This review should aim to clarify key drivers of NHS Tayside’s workforce levels compared to peer Boards and to identify safe options for bringing redesigned services and sites within available resources.”

4.1 NHS Tayside’s Assessment – Rating = Red

“Our staff are our greatest asset and we have developed the means to produce a detailed analysis of our workforce. We will use this to build a full workforce profile, enabling the service to determine revised workforce trajectories to the financial year end and to inform recruitment planning and effective use of staff turnover to reshape the workforce. We continue to undertake a wider workforce efficiency programme and benchmarking exercise to re-profile our workforce within available manpower and affordable resourcing, by the end of December 2017. We now need to build this workforce profiling and benchmarking analysis into our forward service planning and budgeting process and into our day to day business management to ensure the most efficient and effective utilisation of available staffing.

A refreshed and revised Vacancy Management Group has been established to review all requests to fill current and future vacancies for all job families to ensure that only critical and essential vacancies are filled. Work on effective rostering, operation of standardised shifts and implementation of a workforce toolkit across our Nursing and Midwifery workforce will enable a safe switch-off of premium cost agency staffing. The next stage, through to the end of December 2017, will evidence that steps are being taken to bring staffing levels within agreed establishments for all our services and, where appropriate, to identify and implement plans to reduce our workforce costs by reference to workforce plans, benchmarks and service redesign. At all times our actions will be predicated on ensuring safety for care and practice within the context of clinical and care governance. At this stage, given the importance of workforce as a major cost driver and with the plans still to have impact, the status of this recommendation is assessed as ‘Red’.”

4.2 TST Comment - Rating = Red

The TST agrees that this recommendation should be rated Red. This is a challenging and complex recommendation with both short and longer term actions to be planned and managed in parallel.

In the immediate term, a range of actions is required to improve the efficient use of existing resources – which also requires better information about cost drivers and the impact of current models of service delivery. A number of those are described above and further detail is available in NHS Tayside's self-assessment document (available on their website.)

NHS Tayside has developed improved workforce reporting which enables monitoring of actual workforce levels against establishment. More work remains to be done to analyse benchmark information and to grasp the opportunities for bringing establishment levels more into line with relevant benchmarks.

However, many of the outputs of these immediate actions will also be essential to properly inform the longer term development and assessment of scenarios for redesigned services which will emerge through the Integrated Clinical Strategy.

NHS Tayside has provided evidence of how they can deliver in-year savings but the impact is yet to be felt. Going forward, timescales and benefits associated with these savings require further clarification.

Between now and December, the TST would expect to see evidence that establishment control is being strictly maintained with all business areas operating within establishment – the Vacancy Management Group will no doubt play a key role in this process. We would also expect to see plans to reduce the establishment developed and being implemented, and clear arrangements for modelling and assessing the workforce requirements in relation to redesigned services. We would also expect to see robust proposals, developed in partnership, to respond to the results of benchmarking and clear arrangements for feeding in robust workforce information to inform the further development of any service reconfiguration proposals arising from the next stage of the ICS work.

5. AAG Recommendation 5 – Medicines Management

“In relation to service development, the clear focus on optimal drug prescribing and wastage minimisation should continue unabated”

5.1 NHS Tayside’s Assessment – Rating = Red

“The organisation has developed a revised NHS Tayside Drugs Formulary with measures to establish high levels of compliance, incorporating alignment with the NHS Lothian Joint Formulary and NHS Fife Formulary. Working with the Scottish Government Prescribing Support Unit, the Pharmacy Team has developed a range of dashboards and measures to ensure effective tracking of improvements, together with a software support kit to GP practices to facilitate the switch to cost effective prescribing choices and to achieve cost reductions. Through the Prescribing Management Group and weekly huddles, the focus has been on understanding and tackling variation in medicines use, building a robust infrastructure and analysis and review of the comparative prescribing practice and clinical engagement, to address variation and best practice.

In addition to the work on formulary compliance and variation in prescribing practice, there has also been a range of work on primary and secondary care improvement interventions, including pain pathway, anti-coagulation and biosimilars. There is evidence to demonstrate that this work is delivering ahead of trajectory for both primary and secondary care but is yet to provide a visible reduction in overall costs of prescribing. Additional work is required to explore further opportunities within respiratory prescribing, diabetes and polypharmacy, while implementing key changes in the chronic pain pathway and associated prescribing.

At this stage, given the need to evidence substantial change in overall prescribing costs and variation from the extensive range of actions and interventions, the status of this recommendation is assessed as ‘Red’.”

5.2 TST Comment – Rating = Red

The TST agrees that there should be a RAG rating of Red against recommendation 5 in recognition of the potential challenges of clinical engagement regarding the revised formulary processes, and the desire to understand better the variation in medicines use in comparison to the other Boards.

Activity since the publication of the AAG Staging report (27th June 2017) has focussed on ensuring that there is a robust infrastructure to deliver the change required through: consolidation of the Prescribing Management Group (PMG) and delivery teams; review of current comparative prescribing situation; agreement of interventions that align with existing strategies and that will deliver realistic efficiencies. Currently the focus has shifted towards: engagement of clinical groups; development of effective data presentation and further analysis of where variation is appropriate.

Of particular note is the focus on formulary review and compliance which fits with the national focus on more effective use of formularies, ultimately working towards the Single National Formulary. Formulary compliance interventions are focussing on direct oral anticoagulants (edoxaban); combination inhalers; long acting muscarinic agonists (tiotropium); sulfasalazines and melatonin. Though these are logical choices for focus there may be areas for further opportunity identified as work progresses.

Though no formulary compliance reports have been submitted with the AAG Action Plan Progress Report, examples have been shared at meetings with the SG Therapeutics Branch.

In addition to the formulary work, there are a range of primary and secondary care prescribing improvement interventions outlined within the 2017/18 Realistic Medicine projects. By 31st June 2017 the primary care projects achieved 35.8% greater than the YTD target and the secondary care targets achieved 35.5% greater than the YTD target. The comparative assessment carried out by the Therapeutics branch shows that the work on respiratory prescribing demonstrates what NHS Tayside can achieve in terms of prescribing improvement.

In terms of future work, whilst recognising the challenges, the TST is keen to see the Board explore potential opportunities to include polypharmacy and diabetes improvement activities within the plan. Chronic pain prescribing is also a clear and challenging area requiring continued focus. Work now needs to focus on developing robust interventions to address any inappropriate variation. In particular, there is the need to address inappropriate use of lidocaine patches, for which NHS Tayside is a high prescriber compared with the rest of the UK. Work in this area has started to derive efficiencies.

6. AAG Recommendation 6 – Effective Delegation

“Further and appropriate delegation of decision-making to managers and staff at operational level is required in order to ensure that executive director level capacity is released for strategic development and transformation of services.”

6.1 NHS Tayside’s Assessment – Rating = Amber

“The ERT [Executive Review Team] has specifically re-focussed on strategy and has moved to shift operational management and governance responsibilities to the appropriate level. This will be underpinned by a scheme of delegation covering clinical, operational and financial management. The Board has also commenced implementation of a clinically led and managerially supported approach with a structure designed to empower the clinical service and middle management. Work has also been ongoing to develop an extended Senior Leadership Team and to redefine its leadership role. A number of executive team members have been assigned portfolio lead responsibilities across the 10 recommendations from the AAG Report and a collective, collegiate approach across the ERT is supporting this lead role to ensure active delivery of the outcomes. The executive structure has been revised and, following the senior manager job evaluation by National Evaluation Committee (NEC), a report on progress and cost effectiveness will be considered by NHS Tayside Remuneration Committee.

A corporate governance framework for addressing the accountabilities across NHS Tayside Board and Health and Social Care Partnerships has been developed. There has been a series of engagement events with professional advisory groups, committees and staff groups and a two day event that identified 7 key themes to be taken forward, including organisational change and leadership. The next stage, to December 2017, will involve completion of revised structures, schemes of delegation and new operational management arrangements together with a management development programme and series of workshops to realign governance, accountability and responsibility at each level. At this stage, given the requirements to complete the governance and structures, the status of this recommendation is assessed as ‘Amber’.”

6.2 TST Comment - TST Rating = Amber

The TST acknowledges that a great deal of work has been done in developing proposals to redesign the operational team with appropriate clinical and managerial leadership. However, work to explain, implement and support these changes is still in its early stages. Early indications of the effects of this work are beginning to be felt in areas such as the more strategic content of the agendas for Executive Team meetings but effective delegation is not yet working across all levels of the Board in a manner which allows executive director level capacity to be substantively released for strategic development and transformation of services.

7. AAG Recommendation 7 – Engagement

“In order to continue to ensure safe and effective services for the people of Tayside in a challenging and changing environment, the Board must ensure early, meaningful and sustained engagement in partnership with its staff, its stakeholders and moreover the public and political representatives.”

7.1 NHS Tayside’s Assessment – Rating = Amber

“The strengthening of the staff partnership has continued and new terms of reference have been agreed for the Area Partnership Forum, supported by a development programme undertaken by a short life working group. Progress has also been made in strengthening Local Partnership Fora arrangements. A Communication and Engagement Strategy has been prepared and endorsed by NHS Tayside Board. The organisation continues to develop a Compassionate and Inclusive Leadership and Culture Change programme and is well advanced in its programme to embed iMatter action planning across services within the organisation. An additional programme of feedback sessions with staff side and management partners, facilitated in conjunction with the lead from the TST, will further inform the strengthening of our partnership working.

The decision to move the business of the NHS Tayside Transformation Programme Board into open session will enable and enhance the openness and transparency of the transformation programme. With the involvement of staff partnership within the ERT and across the improvement programme and our financial planning framework, the sense of constructive engagement through partnership has been significantly enhanced.

The next stage, will seek to evidence a significant shift in working relationships and our ability to collectively manage challenges through a constructive partnership relationship. At this stage, given the need to demonstrate the strength of partnership and joint working in the challenging tasks and decision making ahead, the status of this recommendation is assessed as ‘Amber’.”

7.2 TST Comment - TST Rating = Amber

The TST agrees that this recommendation has an Amber rating. NHS Tayside has provided evidence of a commitment to improved transparency and engagement with staff and the public by publishing Transformation Programme Board papers on their website. The Board meeting in August also considered and agreed an overall Communications and Engagement Strategy for the whole programme of work in response to the AAG report and is now working on how to extend its internal engagement around its Integrated Clinical Strategy to encompass a wider range of stakeholders.

The TST has linked with both staff and management partners to assess the current climate of partnership working. The TST believes the relationship is improving but it needs to be acknowledged that demonstrating tangible progress against this recommendation is inherently difficult as it requires an objective assessment of relationships. The indications to date do speak to a shared commitment to finding mutually acceptable ways to move the Board forward. The output from that commitment has still to be assessed in terms of the level of maturity and shared ownership of the partnership relationship as it faces challenging decisions going forward. There are also early indications of closer partnership working with IJBs, to ensure a more holistic approach to the planning design and delivery of services.

Between now and December, the TST expects to see indicators of a real shift in relationships, including the ability to manage difficult issues and hard decisions, constructively and collaboratively in partnership. We anticipate that the operation and outcomes from the Vacancy Management Group referenced under recommendation 4, may offer an early opportunity to demonstrate this kind of approach in a real-time and challenging context. In a similar timescale, we would expect to see development of the Local Partnership Fora to support the transformational change agenda with the Area Partnership Forum enhancing their strategic role within the Board.

8. AAG Recommendation 8 – Corporate Structure

“The Board should build on current restructuring of the senior executive team and recruitment of non-executive members, addressing skill-mix gaps, particularly for effective strategic planning and oversight. It should maximise opportunities for induction and development of non-executive members to ensure robust and effective governance and scrutiny of the executive function of the Board.”

8.1 NHS Tayside’s Assessment – Rating = Amber

“The Executive Team re-structuring is substantially complete with the remaining redesign of the Operational Unit, Corporate Services and Strategic Change structures progressing through organisational change under the guidance of the Central Transition Team. Recruitment and induction for new Non-Executive appointments has progressed, taking account of identified skills gaps. The daily huddles and weekly reviews involving the members of the ERT, including executive team members and staff side partnership, has helped to build a strengthened team approach to tackling the improvement actions on a collective, collegiate leadership basis building upon the facilitated executive development sessions. There remain outstanding significant skill gaps within the team, specifically within planning and performance, and over the next three months, we will continue to develop our leadership, partnership and team work. At this stage, we require to complete the restructuring programme and development work and, therefore, the status of this recommendation is assessed as ‘Amber’.”

8.2 TST Comment - TST Rating = Amber

There remains a significant skills gap in the team, particularly around planning and performance, and the Chief Executive does not have sufficient support across all areas of the business. We are also aware of work being done to strengthen team working. NHS Tayside has produced a timetable for the production of Board papers which would allow scrutiny by the Executive Team prior to the Board meeting, and for the Executive Team to collectively agree to the required outcomes.

Over the next three months, the TST would like see the Executive Team reflect on their experience over the past 3 months, what has that demonstrated in relation to assets and deficiencies in the team, and in their team working; and importantly, how these will be addressed.

9. AAG Recommendation 9 – Scrutiny

“The Board should ensure that the actions (Actions 1-6) recommended for the senior executive team are rigorously scrutinised and governed to ensure effective and timely delivery. Restructuring of its financial framework control systems must ensure that budgetary control is assured for all its functions (see Action 2). In particular, leadership and continuous scrutiny of a very high order will be required for all aspects of strategic planning to deliver sustainable transformation over the next five years.”

9.1 NHS Tayside’s Assessment – Rating = Amber

“The Board and Executive Team are fully focussed on the 10 recommendations from the AAG Report to take forward improvement action across financial delivery and planning, service strategy, transformation, organisational design and development. There is strong evidence of executive leadership portfolios and collective leadership through the establishment of an Extended Senior Leadership Team (ESLT) and Executive Review Team (ERT). The ERT works on a daily huddle basis to review and monitor ongoing actions while the development of an action plan tracker has enabled the progress to regularly updated and reviewed on a weekly basis supported by an evidence base and shared with the TST. The lead executives have developed strong partnership working with lead staff side representatives for each of the improvement recommendations and associated action plans, working closely with designated TST members. There was an observed positive and constructive challenge from non-executive members at the most recent Board meeting and its supporting sub-committees, further evidencing an enhanced level of scrutiny and challenge. At this stage, given the steady progress made and the need to maintain momentum, the status of this recommendation is ‘Amber’.”

9.2 TST Comment - Rating = Amber

The TST acknowledges the action that the Board has taken to track progress against the AAG recommendations and agrees that these arrangements have been proved to work effectively over the last few months. TST members attending Board meetings have also observed a welcome focus on key priorities, informed debates and engaged Non-Executive Directors providing constructive challenge to the senior management team. However, we note that, at this stage, all the recommendations are rated Red or Amber. The question, therefore, becomes how is how quickly these might be expected to move to green and how effectively any necessary corrective or supplementary action is identified and put in place on the back of the Board’s scrutiny processes.

Finally, and as noted elsewhere, NHS Tayside is still lacking senior level Strategic Planning capacity. The TST recognises that this is a significant gap and that securing dedicated capacity in this area would facilitate and augment delivery. We are committed to supporting resolution of the situation as soon as possible.

Over the next three months, the TST would expect to see continued scrutiny of progress by the Executive Team and the Board. This should include a regular focus on ensuring that the actions being taken are delivering the impact anticipated or agreeing how the situation will be remedied. The TST will also continue to work with the Board to address the skills gap in relation to Strategic Planning.

10. AAG Recommendation 10 – Leadership Development

“The Board must continue to foster and enable leadership development at all levels. As NHS Tayside moves forward, strong clinical leadership will be essential to realise the ambitions of the Chief Medical Officer’s Report on Realistic Medicine and the National Clinical Strategy.”

10.1 NHS Tayside’s Assessment – Rating = Amber

“The initiation of executive team development, culture, design and compassionate and inclusive leadership programmes are enhancing the capability of the organisation to develop leadership at every level. The “clinically-led, managerially-supported” approach to operational management will enhance our ability to deliver clinical service change. There are now coaching arrangements in place for key senior staff and there are plans to revise the clinical leadership structure. The involvement of clinical leaders and managers at every level in the rapid improvement events and ICS developments has further ensured effective leadership engagement within the transformation and strategy work. At this stage, given the need for fuller, wider and deeper engagement, the status of this recommendation is ‘Amber’.

We would wish to gratefully acknowledge the expert advice and support provided by the Scottish Government Transformation Support Team and NHS National Services Scotland in assisting NHS Tayside in the design and implementation of improvement actions.

In summary, NHS Tayside has made steady progress to deliver improvement actions against each of the AAG recommendations. There remains, however, a demanding programme of work to be completed by the end of December 2017. Our aim is to strengthen our delivery within a recurring, balanced financial framework.”

10.2 TST Comment - rating = Amber

Coaching arrangements have been put in place for all Executive Directors, individually and as a team. There is also a high-level plan to implement the King’s Fund diagnostic tools on workplace culture by designing and implementing communication and leadership strategies.

The TST would expect to see an analysis of the outcomes of the coaching arrangements together with a detailed leadership development plan by December. This should include detail of how the development plan is anticipated to impact upon the organisation’s culture at all levels, and how this will be measured.



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