

Strategic Plan Endoscopy

*2022-2027
RAIGMORE HOSPITAL
NHS HIGHLAND*

Our Vision

The endoscopy team's vision is for all patients, in every community, to experience high quality care in a timely manner from staff who are skilled and support to carry out their roles.

Our Mission

We will provide updates to our patients about the changes we are making to improve the endoscopy service through our website and patient involvement strategy. We will collaborate and take action where experiences and outcomes are not meeting individual needs.

Our Values

| | | |
|---|--|--|
| Person-centered: | Respectful: | Efficient: |
| we will put patients and staff at the heart of everything we do | we will be respectful in all that we do by promoting quality, diversity, and inclusion in all our work | we will provide the best possible quality and public value from our work |

Our four strategic outcomes to achieve our vision

- ❖ High quality patient care being delivered for all
- ❖ Improving access for patients
- ❖ Everyone's rights are respected and realised
- ❖ Our people are skilled, confident and well supported to carry out their roles

Our four key sections to achieve our vision

- ❖ Patients and their support network
- ❖ Staff and people we work with
- ❖ Equipment and the environment
- ❖ Finance



FOREWORD

As NHS Highland continues to recover from Covid-19 pandemic, there is significant pressure on the Endoscopy service to provide a diagnostic service which is often the first stage of treatment for patients. Providing care at the right place, right time is key is our main objective. To achieve this, we have set aims in each of the four sections and the actions which we will work on to achieve these. In setting these, the team have linked to the Scottish Government's Endoscopy and Urology Diagnostic Plan released in November 2021.

*Raymond Oliphant, Clinical Lead
Amie Westwater, Service Manager*

“the friendliest unit I have ever worked in”

“the staff made it easy for me, explaining everything as we went, checking things over and quite frankly just lovely, kind and compassionate”

“the team surpassed my expectations. Not a negative comment from me, only superlatives”

“I was met with such kindness and understanding and at no point did I feel uncomfortable or embarrassed”



320,000

Population in NHS Highland

32,500

Sq km making it one of the largest and most sparsely populated Health Boards in the UK

32,500

Sq km making it one of the largest and most sparsely populated Health Boards in the UK

4,591

Elective GI patients attended the Raigmore unit in 2020

6,191

Elective GI patients attended the Raigmore unit in 2021

4

Procedure rooms in Raigmore unit

4

Non-medical endoscopists



Who we are and what we do



463

Patients who had a Colon Capsule Endoscopy in 2021

53%

Patients removed from surveillance waiting list across NHS Highland in line with BSG polyp guidelines. This work was completed by the staff nurse team with clinical oversight from nurse endoscopist team

3

Emergency GI sessions every week

72%

Uptake from population for bowel screening programme

2

Elective ERCP sessions every week

Where are we now

Covid-19 continues to significantly impact patients' lives and livelihoods, more so than any events of recent times. It has brought tragedy to Scotland, as it has around the world, and has presented the most challenging of times. Health professionals across Scotland have shown dedication, compassion, professionalism and talent in caring for Scotland's population throughout. The Endoscopy service has adapted and learned because of the challenges of the pandemic and will continue to do so. We are committed to delivering a quality service and to providing our patients with the quality of care we would expect for our own family and friends. It is the leadership team's responsibility to support staff to enable them to deliver an exceptional level of care to all our patients. Working together is essential to inform, influence and improve what we do. We support the team with quality improvement to the endoscopy service

Where are we going

Throughout the pandemic, we have worked closely with our colleagues around the organisation to support the health and wellbeing of those patients requiring access to the endoscopy service. The pandemic has highlighted the interdependencies across the departments within healthcare from referrals to the decontamination technicians and pathologists; there is a need for system-wide approach. As we look ahead to the next five years, it is essential to continue to apply our learning as we live with Covid-19 and ensure that we now deliver the level of service for patients which we would wish for our own family and friends. We must ensure that we have a holistic, collaborative system with the required capacity to continue to meet the needs of those referred to endoscopy, both now and in the future.

The Raigmore unit achieving JAG accreditation will directly impact on the morale of our staff and support services. As we continue to work towards JAG accreditation this will continue with our aim to achieve a streamlined, consistent and collaborative service.

SECTION ONE

Patients and their Support Network

Patients are at the heart of all we do, from the initial referral pathway to booking appointments through to the procedure and outcomes of investigation. To deliver the best patient care, we must ensure we provide a timely diagnosis so patients can leave endoscopy unit feeling informed and aware of next steps. We will work with patients to continually improve the service we provide, remembering that every patient has a network of family and friends who are also impacted by the service we provide.

- Implement a central booking system for Endoscopy service across all NHS Highland to remove variation at each site. This should work alongside NHS Highland's local access policy
- Model demand and capacity, by endoscopy procedure type and skill mix of endoscopists
- Ensure our patient information is accurate and shared promptly. This will be developed through electronic referral system, review of waiting list and feedback to national databases
- When attending the endoscopy unit at Raigmore, we will ensure the 'you said, we did' board is visible with the aim of promoting to patients that we do action their feedback
- When leaving the endoscopy unit at Raigmore, we will encourage patients to complete the patient feedback survey and we will review feedback monthly to ensure we are continually listening to our patients
- Update website to ensure information is accurate and relevant for patients. This will include patient information booklets and key contact details
- Promote our Patient Involvement Strategy on our website so patients know how we are creating opportunities for patients to engage
- Ensure patients have contact details for NHS Highland's feedback team and Endoscopy patient survey

SECTION ONE
Patients and their Support Network

Key Outcome Indicators

- High number of patients who rate the service excellent in our patient survey
- Introduce centralised booking system
- Ensure the patient information we provide is accurate and relevant

Key Performance Indicators

- % of our patients participate in the patient survey
- % of patients who rate our patient information as excellent
- By June 2023, 3 sites will be booked by central booking team
- By June 2024, all 4 sites will be booked by central booking team
- Reduce DNA rate to less than 3% overall
- % of complaints that were resolved within the relevant timescales

SECTION TWO

Staff and People We Work With

The endoscopy team is made up of a diverse group of individuals who have the ability to influence change and make the pathway for patients continually better. With this in mind, suggestions and feedback from all of the team is welcomed. We also recognize the need to develop our workforce and ensure there are opportunities for staff to extend their skillset.

- We will provide staff with a series of questions to answer regarding the endoscopy leadership team. This will be done via 360 feedback to promote professional development in the leadership team
- Regular meetings will continue to run within relevant staff groups to allow discussions to take place and feedback to be given e.g., audit afternoons, admin meetings, GI business meeting
- NHS Highland surveys will be promoted e.g. I-matter with action plans to follow the results
- Promote development of up-skill training for endoscopists and nursing staff e.g., EUS training for endoscopists, Cytosponge for nurse staffing, delivery of small bowel capsule, recruitment of nurse assistants, recruitment of trainee endoscopists
- Ensure all staff have opportunities to develop their knowledge base e.g., admin staff observing a clinical pathway, nurse endoscopist trainee attending clinic/theatre/laboratory
- Work with national colleagues to make changes to endoscopy practitioner role to allow applicants from a clinical background other than nursing to train as an endoscopist
- Leadership team to promote a 'safe to challenge' environment where all staff groups feel they can add their viewpoint
- Staff achievements will be recognized in the department on a monthly basis, these will be made visible in the unit
- Leadership team reviewing staff feedback and providing a response on how staff feedback will be used to improve their approach in the future

SECTION TWO
Staff and People We Work With

Key Outcome Indicators

- Our workforce will be skilled, motivated and diverse. We will attract, develop and retain the right people with the expertise to deliver our strategic priorities
- We will champion our workforce and share their expertise and achievements widely both internally and across the sector supporting continuous quality improvement
- The leadership team will act upon staff feedback and share an action plan of what will happen post-survey

Key Performance Indicators

- % staff completing core learning
- % staff absence
- % staff turnover (admin, nursing, non-medical endoscopist)
- Number of new roles introduced for staff
- % of nursing staff with competencies completed

SECTION THREE

Equipment and the Environment

The equipment and environment in which patient care is delivered by the endoscopy team is continually evolving. We have been supported by Scottish Government in extending the Raigmore unit to include a fourth procedure room and an upgrade to our endoscopy equipment. The environment in which we work is one which should inspire our team that we are a service worth investing in.

- Involve staff in green working group to make changes to the way we work e.g., electronic referral system, reduction in printing
- Work with Scottish Government colleagues to promote new ways of working such as changing Entonox to a greener option
- Centralise booking system across NHS Highland to reduce patient travel where possible
- Include all staff groups on morning huddle to ensure staff are aware of daily challenges
- Encourage staff to be part of changes within the unit by having champions in areas e.g., reception area, admission rooms, recovery room
- Share positive feedback with staff at internal meetings to ensure staff are recognised for their input e.g., weekly leadership huddle, weekly admin huddle, audit afternoons, GI business meeting
- Review new equipment and consumables available across staff groups and make a clinical decision at GI business meeting after trial has been completed
- Where new equipment and/or consumables are introduced, a training package should be made available via training lead and/or practice development nurse to ensure staff are confident with new equipment
- Work with our colleagues in other departments to ensure we are delivering a safe service e.g., decontamination, medical physics, stores

SECTION THREE
Equipment and the Environment

Key Outcome Indicators

- Introduce electronic referral system
- Encourage staff to attend daily huddle in unit
- Continually look for greener ways of working

Key Performance Indicators

- Number of changes to ways of working to make unit more environmentally friendly
- % of referrals received electronically
- % of nursing staff who have all competencies completed

SECTION FOUR

Finances

NHS Highland has an annual savings target to be achieved, this is set via savings and efficiencies. Where possible, the endoscopy service should highlight savings which can be made on a recurring budget to contribute towards a board-level savings target. We will also continually look at ways to make efficiency savings in the unit; although these do not necessarily lead to savings, they often lead to cost avoidance which is a long-term solution to the financial position of NHS Highland.

- Service manager to review monthly spend and highlight any areas of concern with finance lead for surgical division
- Senior charge nurse to review nursing budget to ensure staff are paid accurately
- All staff should be encouraged to look for ways to make savings and efficiency gains in the unit. This should be a key item at meetings
- Where improvements can be made to the patient journey, finance should not be an obstacle in achieving this. A paper will be presented to Finance Sub-Group to detail the proposed change along with the benefits this brings
- Where clinical changes can be made e.g., new consumables a trial should be completed before a savings is declared. The overall patient pathway should be considered i.e., does a new piece of equipment negate the need for previous items
- Work with our colleagues to ensure changes are safe e.g., pharmacy, decontamination, laboratories as often changes within endoscopy can have an impact on support services
- Review staffing pay to ensure staff are working within their pay band, this should be done in line with job description and job plan reviews where necessary
- Ensuring job plans are delivered and additional payment is made to staff who exceed this within the job planning year
- Ensure NHS Highland works is in line with other Scottish health boards in terms of staff banding i.e., nurse endoscopists, nurse assistants

SECTION FOUR

Finances

Key Outcome Indicators

- Deliver 'best value' for the public in everything we do
- Staff being enabled to make changes to make monetary and efficiency gains in the unit
- Work with support services and partners to look at opportunities to make savings across the full pathway, not just within the endoscopy unit
- Endoscopists have agreed job plans

Key Performance Indicators

- £££ savings made each financial year
- Number of consumables changed to a clinically superior product, as per agreement from Finance sub-group
- Delivering endoscopy service within pay budget
- Delivering endoscopy service within non-pay budget

SUSTAINABILITY

Reducing our environmental impact will be at the heart of our decision making and design, whilst promoting a safe and healthy care environment



Where are we now

We recognise our social and environmental responsibility and are committed to improving the sustainability of our organisation by continuing to adopt and improve our sustainable working practices. We are committed to doing so by improving our energy efficiency and adopting more sustainable working practices. We have a Green Group in the service which has participants from various areas, including those outwith the endoscopy service. We value everybody's contribution to improving the way we work.

Where are we going

- Continue to promote our Green Group to encourage all staff to share ideas, enthusiasm and point of contact
- Continue with digital transformation
- Work with our suppliers to reduce the amount of waste with packaging
- Promote awareness amongst staff around what can be recycled
- Encourage staff to walk or cycle to work, use public transport

DIGITAL TRANSFORMATION

Our digital capabilities are key to enabling us to achieve our strategic outcomes and our vision. They underpin everything that we do



Where are we now

Our digital journey has been continual and will continue to evolve as we introduce new ways of working. The next year will be significant in adopting a national endoscopy reporting system across NHS Scotland. We have worked closely with Medilogik who provides our current reporting system EMS. Through this we have been able to support NHS Western Isles with the introduction of Colon Capsule Endoscopy. We have also developed a pathway which enables CorpHealth to make capsule endoscopy reports available for clinicians. This is across the Colon Capsule and Small Bowel Endoscopy pathways. In the last 12 months, the system has further extended to the Cytosponge reporting which involves further collaboration between our internal admin, clinical and management team alongside external stakeholders. The geography of NHS Highland makes the need for continual digital transformation critical to us when we consider NHS Highland covers 41% of Scotland's landmass, including 36 inhabited islands.

Where are we going

- Continue to make submissions and support Scottish Government with national databases e.g, Barrett's database, Bowel Screening. This will also enable us to benchmark our pathways with other health boards.
- Work with ERS colleagues to develop a suite of performance reports
- Work with ERS colleagues to develop internal report tracking so referring clinicians are contacted when a patient has had their endoscopy completed
- Work with ERS to have scope tracking available through EMS
- Work with CorpHealth colleagues to improve the reporting of capsule patients

Resourcing our strategic plan

The financial sustainability of NHS Highland as an organisation remains an overriding concern. This is despite NHS Highland historically demonstrating cost improvement programmes that benchmark well against other Boards in Scotland. To address this, the financial sustainability strategy will be based on prioritising the approach to system financial balance, alongside developing our local financial sustainability in 4 key areas:

1. Tackling financial inefficiencies
2. Changing the way we provide our acute services (for example making more use of digital technology rather than face to face appointments)
3. Reducing duplication and variation between primary, community and secondary care by driving forward the integration of services.
4. Reducing our fixed costs, particularly through procurement, prescribing and reducing our estates risks and maintenance

NHS Highland has been fortunate with a business case in 2020 which enabled an additional procedure room to be built at Raigmore Hospital. This was supported by NHS Highland board and funded by Scottish Government. The endoscopy service has a strong working relationship with Scottish Government colleagues and we have also been able to upgrade our equipment with their financial support. We continue to make savings within the service and work with our internal finance colleagues to produce papers to support change to financial spend. Our budget is pre-set annually and we work within this, producing paper to financial group when our spend is above the set budget.

