NHS Highland



Meeting: NHS Highland Board

Meeting date: 29th November 2022

Title: National Treatment Centre Highland

Update

Responsible Executive/Non-Executive: Deborah Jones, Director of Strategic

Commissioning Planning and

Performance

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1 Purpose

The purpose of the report is to provide NHS Highland with an update on the progress of the development of the National Treatment Centre (NTC-H).

This is presented to the Board for:

- Assurance
- Awareness

This report relates to a:

- Annual Operation Plan
- National Policy

This aligns to the following NHS Scotland quality ambition(s):

- Safe
- Effective
- Person Centred

This report relates to the following Strategic Outcome(s)

Start Well		Thrive Well		Stay Well	Х	Anchor Well	
Grow Well		Listen Well		Nurture Well		Plan Well	Χ
Care Well	Χ	Live Well	Χ	Respond Well		Treat Well	Χ
Journey	Х	Age Well	Χ	End Well		Value Well	
Well							
Perform well	Х	Progress well	Х				

2 Report summary

2.1 Situation

The National Treatment Centre Highland (NTC-H) is part of a national network of 10 treatment centres funded by the Scottish Government. The Treatment Centre Programme aims to provide additional acute, diagnostic and treatment capacity within Scotland.

The building is scheduled to be substantially complete on the 9th December 2022. Some residual commissioning activity and snagging will be undertaken through to 24th January 2023. Operational commissioning will take place between 9th December 2022 and 2nd April 2023. (16 week period)

As at the time of writing this paper 57.5% of the total number of staff (120 of 208.22 WTE) have been recruited with an expectation that this will increase to approximately 70% at the end of November 2022. There remains a challenge with recruiting to peri operative staffing posts and physical constraints within Raigmore outpatients prevents early recruitment to all the outpatient staff required for the NTC-H.

A detailed transfer and mobilisation plan has been developed to ensure that all equipping, staff orientation and staff training can be undertaken within the timescale required prior to opening in April 2023

As part of the post COVID recovery across Scotland, National Treatment Centre activity will be considered a national resource as part of an NHS Scotland approach to clearing the national backlog in care. A regional approach to activity allocation has been identified to minimise patient flow (and administrative requirements) between boards, reduce patient travel time, and support treatment as close to home as possible.

At a local level this builds on the collaborative approach to delivering clinical services with partner organisations aimed at maximising patient care across the North of Scotland.

At this stage, the national commissioning activity applies only to primary arthroplasty.

2.2Background

Planning for the National Treatment Centre Highland (NTC-H) commenced in 2014 and was based on a strategic needs assessment, which confirmed that NHS Highland would be continuously challenged with meeting the national Treatment Time Guarantee (TTG) without additional recurrent capacity being identified.

The full business case (FBC) submitted and accepted by the Scottish Government was predicated on assumptions that a facility comprising 24 beds (3 flexible use for ophthalmic patients) 5 operating Theatres 13 consulting rooms (Inc 2 teach & treat and 4 virtual consulting rooms) and a full range of ophthalmic diagnostic and treatment services would allow NHS Highland to meet the TTG.

Given the location for the NTC-H and its off-site proximity to Raigmore Hospital, it was agreed from a clinical safety perspective, that only the least complex surgery should be delivered in the new facility. This meant that anesthetic risk category (ASA¹) 1&2 patients could be treated within this new facility.

The FBC assumed that 85% of the total activity to be delivered would be primarily Highland patients with 15% coming from Grampian and the Island Boards.

3 Assessment

Construction

Construction works are advanced in all areas with substantial completion scheduled for 9th December 2022. Internal fit out progressing with flooring, whiterock, IPS & cubicles, fixed furniture & equipment, joinery, decorations and sanitaryware installation throughout the building.

Mechanical & Electrical works are well progressed to all areas. Final fixtures e.g., sockets, switches and light fittings are now being installed. Building services commissioning is in progress. Electrical power to the building is now live.

External works are progressing with pavements, fencing and landscape finishes being installed.

It is anticipated that there will be some limited work undertaken after substantial completion on 9th December 2022, but this will not impact on the transfer and mobilization plans, equipping or staff orientation.

Staffing and Recruitment

The NTC-H workforce plan identifies the requirement for an additional 208.22 staff across a range of clinical and operational roles to support the delivery of the new service.

As at the 3rd November 2022:

- 57.5% of the additional workforce required to support the NTCH have been recruited
- Recruitment is live and ongoing.

What this means for the Ward:

• We can currently open 19 out of 24 beds but we still require a small number of band 4 and 5 nurses/ practitioners.

¹ The ASA Physical Status Classification System uses a scale from I to VI, with I being a healthy patient with minimal risks

 We can provide a seven day Occupational and Physiotherapy Service but require 1.4 wte AHP healthcare support workers

What this means for Orthopaedic Theatres:

- We can open 1 Theatre, however, to open all 2.4 orthopaedic theatres we still require:
 - 4wte Band 5 Operating Department Practitioners/ Anaesthetic Assistants and 2.8 Band 5 Recovery Practitioners
 - o 3.5wte Anaesthetic Consultants

What this means for Ophthalmology Theatres:

 We can open 1 Ophthalmology Theatre, however, to open all 2.6 Ophthalmology Theatres we still require a further 8 wte across all nursing / practitioner bandings

Recruitment has completed for decontamination services, the NTCH leadership team and Out of Hours Medical cover.

Interviews are planned for most of the support service roles equating to 36.17 wte (porter/security; catering and domestic services) during the week beginning 14th November 2022.

A further 6% of the roles which have yet to be advertised relate to both ophthalmology outpatient and administrative roles and have been staggered to reflect the additional space that the NTC-H will provide to enable staff to be appropriately deployed.

The main recruitment risks and mitigations are highlighted in the table 1.:

Table1: Recruitment risks and mitigations

MAIN RECRUITMENT RISKS	MITIGATIONS/ CURRENT STATE Exploratory Discussions with NHSG
Anaesthetic Consultants	Advertising for fixed-term posts Re-advertising for Substantive posts early 2023 Short-term Locum use within Raigmore to release substantive capacity
Band 5 Ophthalmology Theatre Nursing roles	Rolling recruitment Programme; Media campaign. AfPP Maildrop Development posts
Band 5 Operating Department Practitioner	Rolling recruitment Programme; Media campaign Increased Training places
Pharmacy (NHSH- wide)	Role appointed to but candidate then accepted position elsewhere
Re-alignment of NTC-H Contracted staff may de-stabilise Raigmore	Weekly Task & Finish Group established to provide oversight of Raigmore vacancies and to formulate mitigation plan for Raigmore. Vacancies within Ward 3C and Raigmore visibility through established NTC Recruitment Huddle with Recruitment Team
Recruitment Team Capacity	Pilot of "Always on" Targeted Adverts for all NTC Rolling Recruitment.

Transfer and Mobilisation

A detailed transfer and mobilisation plan has been established to ensure that once handed over, the building, services and people will be ready for the delivery of care from 3rd April 2023.

Network and communications implementation will be completed by the end of February 2023.

Equipping staff training and orientation will be ongoing from handover.

Clinical services are expected to continue with some changes expected but aiming to minimise disruption to patients.

Ophthalmology

There will be some inevitable reduction of clinic availability as equipment is transferred to the New Eye Care Centre within the NTC-H.

It is expected that from week commencing 24th March 2023 there will be limited ophthalmic operating, but the eye day care unit will be open for emergencies,

From the week commencing 27th March 2023 there will be daily

- o injection clinics
- o casualty clinics
- o urgent consultant appointments

Orthopaedics

Orthopaedic operating is expected to continue as planned up until Friday 31st March 2023.

Staffing

From the 1st January, all NTC-H contracted staff are required to re-align to the NTC-H to ensure that the transition and mobilisation phase of the Programme can successfully conclude. Planning for this has highlighted existing workforce gaps within Raigmore.

To support the re-alignment process, a weekly task and finish group was established with the aim of providing oversight of Raigmore vacancies in both Ward 3C and the main theatre suite and to formulate a mitigation plan for both areas. This is being progressed by the Raigmore Management Team

Service Delivery Model

The Demand Capacity Activity and Queue (DCAQ) modelling has been completed and used to inform consultant job planning for both orthopaedics and ophthalmology services. In addition, this work has informed the ophthalmology outpatient schedule, the theatre schedules and activity information to agree the services that will remain on

the Raigmore campus (e.g., emergency pathways, pediatrics and the complex ASA3&4s).

A Data Readiness Working Group has been established to deliver the technical and operational requirements across NHS Highland to ensure that the NTC-H can book and schedule patients from the 3rd April 2023. This work will be completed by the 13th February 2023 to allow the communication to be sent to patients in accordance with our Local Patient Access Policy.

Several NHSH patient booking office staff have transferred with effect from 7th November 2022 joining existing administrative staff within the NTC. These staff are required to support patient booking services. There is ongoing work to finalize this activity in advance of opening next April.

A major redesign process has been undertaken for ophthalmology outpatient services to identify the DCAQ by patient pathway and to align this with consultant and other practitioner job plans. This has resulted in a revised outpatient clinic timetable that ensures level loading of activity across the morning and afternoon sessions across the working week. This will maximize resources improving efficiency and productivity.

The waiting list for orthopaedic patients is being reviewed and validated to ensure that clinically suitable patients can be given clear communication as to when and where they need to come for their treatment.

National Activity Commissioning and Performance

NCT-H is part of a national network of treatment centres, aimed at increasing capacity across a range of diagnostic and treatment areas to improve patient access to care and to reduce the impact of long waiting lists and extended waiting times across Scotland.

Therefore, the NTC-H will be considered a national asset hosted within Highland. As part of the National Treatment Centre Programme a short life working group was established to support the development of the principles and methodology to enable the Scottish Government in agreeing activity allocations for National Treatment Centres (NTCs) opening over the next year.

A range of Performance Measures have been agreed by the Scottish Government Health Department (SGHD) for all National Treatment Centres and these have been used to calculate the projected capacity of the NTC-H.

The SGHD have based the allocations of capacity at the NTCs on the length of waiting lists by individual Health Boards. In an allocation letter received by NHSH on the 30th September 2022, it was confirmed that for 2023/24 the NTC-H should plan to see 434 long-waiting patients from NHS Grampian and that this number would be reviewed in March 2023 and on a 6 monthly basis thereafter.

The SGHD will undertake monthly performance meetings to monitor the effective operation of the NTC-H and ensure maximal use of the additional capacity. This will also include monitoring relationships with NTC partner boards (NHS Grampian in the case of NHS Highland) to ensure the efficient flow of patients. A monthly data

collection mechanism to monitor performance against these allocations will be established and confirmation of this will be announced in December 2022.

At this stage the SGHD have given no indication of a need to commission ophthalmology activity. There will be an opportunity to open discussion about what additional capacity could be offered out beyond NHS Highland once recruitment to all vacant ophthalmology posts has been completed.

A national Short Life Working Group has been set up by the Centre for Sustainable Delivery to agree a national Pre-operative and Assessment Model for NTCs and this has formed the basis of early discussions with NHS Grampian.

To support this a local working group has been established to agree both the clinical and technical pathways to support the safe and sustainable delivery of care in the NTC-H for Grampian patients. The collaborative approach is being led by the NTC-H Clinical Director supported by the NTC Project Team.

Early indications suggest a clinical appetite to maximize the opportunity the NTC Highland brings to the North of Scotland with positive and productive discussions aimed at delivery of clinically safe and effective care to patients.

It is anticipated that this work will complete by the end of December with the required service level agreement ready for sign off in the New Year.

Table 2 – Demand vs Capacity for NTC-H Patients

	NHS Hi	ghland		Commissioned Activity	
Procedure	Projected Demand NTC	Annual Capacity NTC	Variance		Comments
Primary Hips & Knees	1155	1072	83	434	41.8% of planned capacity in 2023/24 for NHS Grampian
Hands	202	159	43	To be confirmed	Plans to increase the Process for Scheduling Theatres being developed to bring this into balance
Foot & Ankle	130	175	-45	To be confirmed	Day Cases only for 2023/24

Notes:

- Assumes all Primary Hips and Knees (ASA1s and 2s) for NHSH will be undertaken at the NTC-H
 and that the remaining capacity is utilized at Raigmore for Revision Joints and ASA3s and
 ASA4s
- Assumes no change to the morbidity on the waiting list since 2019

The numbers in table 2 reflect the following assumptions,

Primary Joint Capacity in 2023

- 100% Capacity Assumes 2 Theatres are fully staffed from 3rd April and would allow 38 arthroplasties per week with 4 joints per day Mon to Thurs and 3 joints per day on a Friday (training list)
- 1550 joints per annum over a 48 week operating year with theatre efficiency at 85% in the year

Activity

A phasing approach to delivering activity has been agreed with the clinical team and modelled as follows

- April to June 75% = 315 Joints
- July to March 85% = 1070 Joints
- Total activity in 2023-24 = 1385 Joints if 2 arthroplasty theatres fully operational from 3rd April
- Total activity in 2023-24 if only 1.5 arthroplasty theatres are operational = 1038

The percentage of the capacity available to NHS Grampian changes to reflect the assumptions on theatre availability and are as follows,

- Allocated Activity 434 or 31% assuming 2 theatres are fully operational
- Allocated Activity 434 or 41.8% assuming 1.5 are operational

4. Conclusion

The National Treatment Centre Highland will be substantially complete on 9th December 2022 with some residual on site contractor presence during the commissioning period.

The transfer and mobilisation of equipment and staff will commence from 9th December 2022 towards the opening of NTC-H on Monday 3rd April 2023.

Recruitment is ongoing with several clinical posts remaining unfilled impacting on how many beds and theatres can be open. Further effort will be made to seek to fill these posts between now and opening in April 2023.

The development and opening of the National Treatment Centre Highland in April 2023, provides and an exciting and dynamic opportunity to deliver world class care for the population of Highland and the North of Scotland. The national approach to capacity allocation will a focus on people rather than postcode maximising the scope of delivery

at local and regional level consistent with the expectations set out in the Full Business Case

Ongoing collaborative working with NHS Grampian will enable the delivery of a seamless service for patients across the A96 corridor.

4 Proposed level of Assurance

This report proposes the following level of assurance:

Substantial	Moderate	X
Limited	None	

5 Impact Analysis

5.1 Quality/ Patient Care

The NTC -H will increase surgical capacity for both orthopaedic and ophthalmology services.

5.2 Workforce

The NTC-H is looking to recruit an additional 208 staff. The People Plan developed through extensive staff engagement encapsulates the aspirations of staff to deliver world class service and outcomes for patients

5.3 Financial

The NTC-H is being funded through Scottish Government investment with a capital budget of £45.3m . The revenue budget is expected to be in the region of £16.5m per annum. Work is underway to finalise the non-pay element of the revenue budget

5.4 Risk Assessment/Management

The key risks to the project are as follows,

• If the NTC-H recruitment programme fails to secure all the staff required to open all of the operating theatres and beds a phased opening will need to be undertaken in line with recruitment activity.

5.5 Data Protection

At this stage in the development data protection does not apply from a patient information perspective

5.6 Equality and Diversity, including health inequalities

Equality diversity policies and process are being followed

5.7 Other impacts

N/A

5.8 Communication, involvement, engagement, and consultation

Extensive staff engagement has taken placed throughout the programme and will continue as part of the process of developing the service model.

An increased presence through social media is included in the communication plan.

Patient representatives are including in the Project Board membership.

The NTC-H microsite provides regular updates and information for staff, members of the public etc.

6 Recommendation

It is recommended that Board members note the progress of both the construction programme and development of the service model for care delivery for the National Treatment Centre Highland.

Board members are asked to note that the NTC-H will be considered a national asset by the Scottish Government hosted by NHS Highland and that a 'People not postcode' approach will be taken in the allocation of activity within all National Treatment Centres.