

NHS Greater Glasgow & Clyde	Paper No. 20/17
Meeting:	NHS Greater Glasgow and Clyde Board
Date of Meeting:	25th February 2020
Purpose of Paper:	For Noting
Classification:	Official Sensitive
Sponsoring Director:	Jane Grant, Chief Executive

Paper Title – Strengthening the senior management team within NHS Greater Glasgow and Clyde

Recommendation:

Board members are asked to:

- Note the proposal in relation to strengthening the senior management team
- Note that appropriate approvals and updates will be taken to the Remuneration Committee and Finance, Planning and Performance Committee

Purpose of Paper: To update the NHS Board on progress towards strengthening the senior management team to address the current challenges.

Key Issues to be considered:

There is a need to strengthen the senior management team at this time due to the multiple demands on the team, in order to ensure there is the ability to address the current challenges in a robust and constructive manner.

Any Patient Safety /Patient Experience Issues

None identified at this time.

Any Financial Implications from this Paper:

An assessment of the overall financial implications will be made once the final configuration/ grade of the posts is confirmed and the non-recurring costs are fully defined.

BOARD OFFICIAL

As stated in the paper, the majority of the changes can be accommodated by a redesign / realignment of existing budgets.

Any Staffing Implications from this Paper:

As noted above, the final staffing implications will be reported to the Remuneration Committee and the Finance, Planning and Performance Committee.

Any Equality Implications from this Paper:

None at this time.

Any Health Inequalities Implications from this Paper:

None at this time.

Has a Risk Assessment been carried out for this issue? If yes, please detail the outcome.

Not at this time.

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Strengthening the senior management team within NHS Greater Glasgow and Clyde

1. Introduction

NHS Greater Glasgow and Clyde faces unprecedented challenges in a number of areas and consideration has, therefore, been given to strengthening the senior leadership team to address these challenges in a robust and constructive manner. This paper outlines a number of actions already completed, along with a number of other proposals which are currently being finalised.

There are a significant number of Reviews being undertaken associated with the Queen Elizabeth University Hospital/Royal Hospital for Children (QEUH/RHC) campus and this has stretched the capacity of the senior team. In addition, the recent escalation to level 4 of the performance framework in relation to infection control processes and associated communication/engagement issues, along with the further escalation in relation to performance issues, has also lead to significant demands being placed on the senior team.

In response to these pressures, a number of changes are being proposed, some on a recurring basis and others for a fixed period. A number of changes have already been made, with others underway at present.

2. Service Delivery

2.1 Scheduled Care

One of the key priorities for NHS Greater Glasgow and Clyde relates to elective waiting times. In order to strengthen cross sectoral working and ensure robust capacity planning and monitoring processes are in place, it is proposed to recruit a new Director of Access and an Access Manager to promote Board wide processes and maximise the use of all of the elective capacity. The Director of Access post is currently being advertised and an internal secondment has been put in place during the recruitment period. In the short term, additional capacity is also being provided by an experienced external resource.

2.2 Unscheduled Care

Additional support has been provided by Scottish Government colleagues and, in addition, NHS GGC, in conjunction with the Scottish Government, appointed the North East Commissioning Support Unit (NECS) to undertake a review of unscheduled care at QEUH. This review has now been completed and the NECS team are providing programme management support to ensure a swift implementation of their recommendations.

Further consideration of any recurring resources, will be defined once the Recovery Plan for Unscheduled Care is fully drafted.

2.3 GP Out of Hours

The provision of a sustainable GP OOH service is also a priority area for NHS Greater Glasgow and Clyde. Sir Lewis Ritchie was recently commissioned by the Chief Executive of NHS GGC to review the service and has made a number of urgent recommendations to improve the sustainability of the service. In response, a Chief Officer has been seconded on a full time basis to lead the GP OOH service and she commenced early in January 2020. An experienced Clinical Director has also agreed to provide additional clinical leadership to support the service and she has recently commenced that role. Support is also being provided by Scottish Government colleagues, along with the Director of Primary Care in NHS Lothian.

These additional resources are non-recurring in nature until, again, the Recovery Plan is fully developed, when a full assessment of any additional recurring resource will be defined.

2.4 Integration

Within NHS Greater Glasgow and Clyde, there are six internal Health and Social Care Partnerships (HSCPs) and the Board also works closely with colleagues within eight neighbouring HSCPs. Significant progress has been made in promoting whole system working but there is a considerable workload associated with these arrangements and it is, therefore, important that this area of work is strengthened to co-ordinate and streamline the processes of whole system working. Consideration is also being given to the appointment of a Director of Primary Care, such as that within NHS Lothian. A job description for this post is currently being developed at the present time, which again may require the approval of the Remuneration Committee, depending on its grade. Further discussion will take place with the internal Chief Officers by the end of February to finalise how best to improve the co-ordination across all the HSCPs, taking cognisance of the proposed new role of the Director of Primary Care.

2.5 Acute Division

Within the Acute Division, a new Acute Nurse and Medical Director have been appointed. In light of the very significant challenges within the Acute Division at present, the Acute Medical Director has agreed to reduce his clinical commitments for the next period to ensure enhanced clinical leadership is available.

Additional Business Manager support has also been made available to the Chief Operating Officer.

In addition, the Acute Division Directors have been realigned with a senior Director being seconded into the MFT programme and a number of the remaining Directors being moved to alternative Sectors / Directorates.

Again, the majority of these posts involve the redesign of existing posts, although there will be an additional resource requirement to backfill the post which has been moved to MFT.

3. Delivery of Change

3.1 Communications/Public Engagement

Additional senior communications support has recently been identified to assist the current team. The process to appoint a substantive Communications and Engagement Director has been concluded and it is now the intention to advertise the Deputy Director post during February. The communications team has also been enhanced with support from a neighbouring Board and advice from the Communications lead within the Scottish Government has assisted the Board. A further member of staff has also been recruited and commenced in January 2020. External support has also been provided from the Board's external training provider.

With regard to public engagement, it has now transferred to the new Director of Communications and Engagement who will work with the local team to consider the future arrangements.

It is also the intention to work with the Consultation Institute who will provide external advice in the short term, with a proposal being finalised at present.

3.2 Moving Forward Together Programme

An Associate Head of Planning was appointed in May 2019 to lead this programme, However, due to the management of the change programme and the need for a swifter pace of implementation, it is proposed that additional senior support is made available in this area and a senior Acute Director will commence work on MFT on 2 March 2020 with her substantive post requiring backfill.

3.3 Quality/Person Centred Care

In order to enhance the Board's capacity in this area, it is proposed to appoint a Deputy Director of Nursing who will increase the management capacity in this important area. This post will be funded by redesigning the current roles within the Nursing Directorate.

The Board has also been successful in its bid to the Scottish Government to undertake the Value Management Collaborative, and an appointment has recently been made to the programme lead for this initiative.

4. Support Arrangements

4.1 Finance and Performance

It is proposed to strengthen the finance team by recruiting three Senior Finance Managers to support the finance team. In addition, a Programme Manager for the Financial Improvement Programme is currently being advertised to lead that programme of work. External support is also being provided in a number of key areas. These posts involve a realignment of existing resources to deliver the current key priorities and, therefore, no additional recurring resource will be required.

It is the intention to enhance the performance team by appointing a Director of Performance. A job description is being developed for evaluation at this time which, depending on the grade of the post, may require approval from the Remuneration

Committee. Should this be approved, it will incur additional recurring resource but it is considered important to increase the focus on performance across the whole range of performance indicators that NHSGGC is required to address.

4.2 Estates and Facilities Directorate

Within the last few months, the Director of Estates and Facilities has reviewed the structure within the Directorate and a number of senior Estates posts have been advertised and appointments made to strengthen the operational and governance aspects of this Directorate. An Assistant Director of Estates has also been appointed to enhance senior leadership in this area. All posts have been incorporated into the existing Estates and Facilities resource.

4.3 Support for the Head of Corporate Governance and Administration

As outlined above, there is a very significant workload associated with the ongoing Reviews and the Oversight Board and its sub groups. In order to ensure this work is addressed timeously and in a responsive manner, a PMO has been established under the auspices of the Head of Corporate Governance and Administration. Two staff have been seconded into this office and an additional senior manager has also been seconded to ensure the routine business of the Board is maintained in an effective manner.

These posts mainly involve secondments that have not, at present required backfill, however, this will be reviewed as the work associated with the Public Inquiry increases.

4.4 HR and Organisational Development

There are a number of senior vacancies within the HR and Organisational Development Team at present. It is the intention to enhance the staff engagement processes with a redesigned senior post dedicated to this important area. Approval is also being sought to allow NHSGGC to work towards the achievement of the Investors in People Award to provide external validation for the NHS Board, as outlined elsewhere in the NHS Board papers.

5. Summary

In summary, NHS Greater Glasgow and Clyde is facing a number of very significant challenges and, in order to ensure appropriate senior leadership capacity is available, the above proposals are being implemented at present with a view to ensuring stability and sustainability over the next period.

The majority of the changes will be absorbed by realigning existing budgets. However, recurring additional resource will be required in relation to a number of the senior posts and, once the precise nature of these posts is finalised, full details of the proposed additional requirement for the senior posts will be reported through the Remuneration Committee and Finance, Planning and Performance Committee.