

# How you can help to make a real difference

**The NHS is Scotland's most valued public asset. It has served the nation very well in the past and will continue to do so into the future, if we plan ahead properly.**

Things are changing fast in the health service, and there are opportunities for making it even better. That is why Scottish Ministers have established an independent advisory group to lead the development of a new national framework for the future shape of NHS Scotland.

## Informed plans

It is vital that the group's plans are informed by the views of frontline staff, patients, carers and the general public. And you are being invited to help.

"I want to see as wide a discussion as possible so that the advisory group can deliver a bold and confident vision," says Scottish Health Minister Andy Kerr. "Listening to everyone is crucial. That means hearing the views of the professionals, and the opinions of the people in our communities."

You can contribute in a variety of ways. Postal and e-mail addresses are on the back page of this newsletter. There will also be a series of meetings for the public, starting in December, in regional centres across Scotland so people can discuss the issues directly with the advisory group.

Overleaf, you will find information outlining the main challenges facing NHS Scotland. Addressing these will lead to the development

of a health service that is fully equipped to meet the needs of Scotland's patients and staff over the years to come.

## Further information

If you have any questions or comments about the advisory group's work, or you would like to receive the information contained in this newsletter in any other languages or formats, please let us know.

You can **write free** to:

National Planning Team,  
FreePost Plus,  
RLRS-EHHE-JTXC,  
Room GE.16,  
St. Andrew's House,  
Edinburgh EH1 3DG.

Or **e-mail**:

[nhsfuturedebate@scotland.gsi.gov.uk](mailto:nhsfuturedebate@scotland.gsi.gov.uk)

"People are living longer, and advances in medicine as well as new patterns of care mean that the health service must adapt," says Andy Kerr. "Patients expect that their care will be personal to their needs, easily accessible and of the highest quality. We are totally committed to delivering that."

The Advisory Group on Service Change is chaired by cancer specialist Professor David Kerr.

"Our aim is to ensure maximum benefit for patients and their families," he says. "I am well aware of the concerns there are in some areas, and the very strong feeling that communities have for their hospitals. Our task is to ensure

that we can provide the best care, and meet local needs."

The advisory group is not involved in the detail of local NHS planning. Instead, it will provide a blueprint for the health service that will set out shared principles. This will help the NHS and Ministers to reach a view about how health care can be best delivered in different localities.

## Exciting opportunities

"We need to take a hard look at how the NHS can plan to provide top-quality health services for the future," says Andy Kerr. "It is clear that long-term decisions need to be informed by a national framework, built on the best evidence from professionals and the public, and bringing in lessons from elsewhere."

"By exploring all the opportunities that are available to us, I am sure we can reach constructive and even exciting conclusions. I hope you will get involved."



*Pictured above: Minister for Health, Andy Kerr*



# Looking to the future

Professor David Kerr, who is pictured above, is one of the world's top cancer specialists and chairman of the Advisory Group on Service Change in NHS Scotland. Here, he shares his personal view of our national health debate.

**I was really delighted when the Minister for Health asked me to lead the advisory group that is working to create a new blueprint for the future of NHS Scotland.**

We have to report to Andy Kerr next year, and we need your help to devise a vision that meets everyone's needs.

Over the coming weeks we will be starting to hold meetings to hear first-hand what NHS staff and the public think of the options for making positive change.

There is a great deal about NHS Scotland that works extremely well, and we must build on that. But there are also significant challenges that we have to face. The main issues are set out across the page, and they pose questions that we plan to answer.

For instance, in some parts of the country there is concern about the future of local services. However I believe that proper planning could mean more care being available closer to people's homes.

New treatments and technologies offer unprecedented scope for expanding community-based health services. But on the other hand, where the evidence is clear that specialist centres offer the best outcomes for patients, we have to be able to deliver that.

Our task now is to address these complex issues, and to develop a national plan for NHS Scotland that will bring future improvements.

It is not about change for change's sake. Since I qualified as a doctor at Glasgow University in 1980 I have seen the NHS undergo repeated reforms. What is different this time around is that the plans will be firmly based on the views of NHS staff and the Scottish public.

Members of the advisory group are in the process of meeting NHS staff around the country to hear their views. There will also be meetings for the public, where members of Scotland's communities can share their thoughts. More information about the first of these is overleaf. I hope you will be able to join us and contribute to this important debate.

Working together, I have no doubt that we can create a vision to ensure that Scotland's health service will adapt and flourish. We look forward to hearing what you think.

● **David Kerr**, who comes from Glasgow, is Rhodes Professor of Cancer Therapeutics and Clinical Pharmacology at the University of Oxford. The other members of the advisory group are listed over the page. For more information please log on to the website - the address is shown below.

# Why is

## Patient safety

There is clear evidence that some specialist health services are best delivered by expert teams whose workload is large enough to maintain their skills.

In cancer care and major heart surgery, for instance, there is proven benefit from being treated in centres where expertise, training and equipment are concentrated.

In these cases research shows that patients' quality of life and survival rates are improved, and people are willing to travel for such treatment.

However, if centralisation makes no significant difference to patient safety, people would prefer specialist care to be available locally.

One limiting factor is a world-wide shortage of specialist staff. This means new ways have to be found to ensure that patients can receive the highest-quality care, no matter where they live.

- **Q:** Are there other ways of delivering specialist services locally?
- **Q:** Can there be better networking between specialist centres and outlying communities?
- **Q:** Could new technology be used to link patients with experts?

## Public expectation

We believe users of the NHS want fast access to top-quality services, delivered as close to home as possible. People are prepared to travel for very specialist treatment, but in their communities they rightly expect to receive the most up-to-date care, delivered to a consistently high standard.

- **Q:** Does this reflect your view?
- **Q:** How can we reduce waiting times for treatment?
- **Q:** How can we maximise community-based care?

# What change necessary?

## The background

Scotland's NHS has been continually developing since it was formed in 1948. Then, infectious diseases were rife. Now, there are very different challenges to be tackled.

The pressures driving change in the modern health service are outlined here. They pose hard questions that must be answered, but they also offer exciting opportunities for developing new ways of delivering the best care for Scotland.

It is clear that the old-fashioned way of doing things no longer meets expectations. Because the NHS is always improving, the public rightly expects more of it. We want fast access to high-quality care, available locally wherever possible.

Already, more than 90% of health care is delivered in Scotland's communities. Less than 10% takes place in hospitals, and there is the potential to reduce that still further by offering even more treatment in local communities. But there is also strong evidence to show that some very specialist services can only be delivered safely in larger centres.

The NHS in Scotland has to get this balance right in order to achieve greater public satisfaction and continue to improve patient safety. The advisory group believes this can be achieved by taking a fresh look at the way the national health service is organised. Your input is important, and all views will be listened to. Information on how you can join the debate is over the page.

## Staffing issues

New working time regulations for NHS staff are being introduced to protect patient safety and to improve the professional experience.

For instance, doctors are no longer allowed to work the long hours they might have done in the past. This means they are not over-tired on shift, and reduces errors. However it also restricts the number of doctors available to staff the existing service around-the-clock.

Clinical practice is also changing. Whereas in the past hospital patients were often seen by general doctors who treated a wide range of conditions, the complexity of modern medical and surgical work has led to a concentration of expertise. The challenge for us is how to retain appropriate general skills while developing the specialist care that is required.

As doctors are in particularly short supply, the skills of other health professionals are being enhanced to enable them to provide more patient care. Nurses and paramedics, for instance, are taking on extended roles. This is proving professionally rewarding and patient satisfaction with the service they provide is high. Making NHS careers more attractive will also help the service to recruit and retain the staff it needs, both now and in the future.

- **Q:** How can we provide a better service for patients, and at the same time continue to reduce working hours for doctors?
- **Q:** How can we improve recruitment and retention of all NHS staff?
- **Q:** What skills will NHS staff of the future require?

## Population changes

Largely because of better treatment, Scotland's health record is improving and life expectancy is increasing. This means that in future there will be a larger number of elderly people, many of whom will require long-term health care.

Overall, the population is set to shrink because of a falling birthrate, and by 2031 it is predicted that almost one third of Scots will be beyond retirement age.

As a result, chronic diseases such as diabetes, heart problems and stroke will become more prevalent, and health services will have to adapt.

Fewer people of working age means fewer taxpayers to meet the costs of the NHS, and potential staff will also be in shorter supply.

- **Q:** How should services adapt to meet changing needs?
- **Q:** How can we make NHS careers attractive in future?
- **Q:** Will more community-based care be needed?

## Cost effectiveness

The NHS in Scotland is receiving more investment than ever before. However the demands on it are also increasing.

Health service staff are benefiting from new pay deals, but it is clear that the structure they work within has to change to better meet expectations.

New ways of working and new treatments and technologies offer opportunities for doing things differently and improving the experience of patients.

- **Q:** How can we ensure that taxpayers' money achieves all it can in the NHS?
- **Q:** How do we demonstrate progress?
- **Q:** What else can be done to improve efficiency in the NHS?

## Who's who on the advisory group

**Professor David Kerr**, the group chairman, is Rhodes Professor of Cancer Therapeutics and Clinical Pharmacology at the University of Oxford. The group members are: **Peter Bates**, Chairman, NHS Tayside; **Jaе Ferguson**, Public Representative, NHS Argyll; **Roger Gibbins**, Chief Executive,

NHS Highland; **Dr Lesley Holdsworth**, Clinical Effectiveness Co-ordinator, NHS Forth Valley; **Alexis Jay**, Director of Social Work Services, West Dunbartonshire Council; **Professor Nora Kearney**, Professor of Cancer Care, University of Stirling; **James Kennedy**, Chairman, Scottish Partnership Forum; **Dr Jill Morrison**, Bathgate GP and Professor of General Practice at Glasgow University; **Professor Gillian Needham**, Postgraduate Medical Dean for North East

Scotland; **Lesley Summerhill**, Director of Nursing, NHS Tayside; **Dr Charles Swainson**, Medical Director, NHS Lothian; **Irene Sweeney**, Chairperson, Scottish Pensioners' Forum; **Professor Graham Teasdale**, President, Royal College of Physicians and Surgeons of Glasgow.

• More information about the group and its members is on the website - details are at the foot of this page.

# Meetings for the public begin

The advisory group is holding meetings for the public, starting in December. The first of these take place in centres across mainland Scotland. The dates, times and venues are listed below.

We appreciate that it may be difficult for people in remote and rural and island areas to take part in these meetings, so further regional meetings will be held. If you would like to be involved in other events, or to receive further information, please complete the form below.

There are also other ways you can share your views. Please write free to: **National Planning Team, Freepost Plus, RLRs-EHHE-JTxc, Room GE.16, St. Andrew's House, Edinburgh EH1 3DG.**

Or e-mail your comments to: [nhsfuturedebate@scotland.gsi.gov.uk](mailto:nhsfuturedebate@scotland.gsi.gov.uk)

All your views will be taken into account by the advisory group as it prepares its plans. The final report on options for service change will be presented to the Minister for Health in the early part of next year.

- **Glasgow** Royal Concert Hall, Buchanan Street - **Wednesday 1 December, 7-9pm**
- **Inverness** Drumossie Hotel, Old Perth Road - **Thursday 2 December, 7-9pm**
- **Edinburgh** Usher Hall, Lothian Road - **Monday 6 December, 7-9pm**
- **Dundee** The Caird Hall, City Square - **Monday 13 December, 7-9pm**
- **Aberdeen** Exhibition & Conference Centre - **Wednesday 15 December, 7-9pm**

## Please keep me informed

If you would like to be kept up-to-date with the advisory group's work, or to receive details of other meetings for the public, please complete this form, cut it out and send it (no stamp is required) to:

**National Planning Team, Freepost Plus, RLRs-EHHE-JTxc, Room GE.16, St. Andrew's House, Edinburgh EH1 3DG.**

Or e-mail your details to: [nhsfuturedebate@scotland.gsi.gov.uk](mailto:nhsfuturedebate@scotland.gsi.gov.uk)

Please indicate whether you want to be involved in the meetings listed above, or whether you would prefer to attend meetings in other areas of Scotland. And if you choose to be updated, we will make sure you receive further information about progress towards the development of a new national framework for NHS Scotland.

- I would like to join the meeting in Glasgow/Inverness/Edinburgh/Dundee/Aberdeen (please circle your choice)
- I would like to attend another meeting closer to my home
- I would like to be kept informed about progress

Your name

Your address

Telephone contact number

E-mail address