

Vascular Task and Finish Group Terms of Reference

1. Context

The purpose of the Task and Finish Groups is to focus on supporting sustainability by planning on a population basis across Scotland to improve access to safe, quality services for our population. Other Task and Finish groups have been established to support sustainability within diagnostic services, oncology and, rural and islands. This Task and Finish Group will focus on Vascular acute healthcare.

Each of the Task and Finish Groups will be a collaborative and partnership arrangement involving representatives across NHS Scotland. Members of the group will offer each other peer expertise, support, and challenge to improve consistency where appropriate across NHS Scotland.

They will work at scale to develop a single plan and sustainable operating model for NHS Scotland to support effective decision-making arrangements to:

Reduce unwarranted variation and Inequality in health outcomes.

- Working together to develop new evidence-based models of care and standardised protocols. Consider opportunities to embed joint accountability, improve equity of access to appropriate and timely services, and ensure the needs of underserved communities can be considered over whole pathways of care.

Improve access to services and experience.

- The review group should always consider what matters most to people who access or may access care and support, and people who work in services, communities, and partners. Review groups should share and build on the good practice that exists in their Boards, such as co-production approaches and partnerships with experts by experience (third sector). The review groups should use insight and feedback from patient surveys and complaints.

Improve Resilience

- Develop recommendations for improvements in quality of care and can develop combined capacity and capability. Strong leadership will be required to support sustainability and improve quality or navigate complex change. This may require workforce changes and working in partnership will be key so that staff may need to work more flexibly across a wider footprint of accountability through aligned contracts, processes, and cultures. This could reduce agency spend, improve patient experience, and make it easier to respond to demand changes in real time across Scotland. The review group may provide recommendations that specialisation and consolidation occur where this will provide better outcomes and value.

2. Purpose

This Group will determine a single plan for delivery of sustainable care for our Vascular Services, which will consider the Scotland (population planning) requirements and bringing collaborative professional clinical leadership together.

The Task and Finish group is responsible for:

- Developing a framework for vascular services that allows consideration of core services to develop an understanding for all Boards providing Vascular Services by Summer 2024. This will also be coherent with the principles within the National Clinical Strategy and developing National Clinical Framework.
- Developing a Vascular sustainable operating model that acknowledges the unique challenges of delivery and the rural credentials approach, in order to actively pursue a different approach by September 2024

3. Background





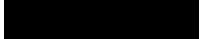
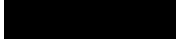

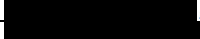









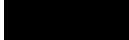
Following fragility of services providing Vascular Services flagged in Board Sustainability Returns, In response, the DG-HSC approved that a Vascular Services Task and Finish Group was established, reporting through the NHS Scotland Planning and Delivery Board. Working at pace NSD have identified a clinical lead, arranged site visits and (working with SG Clinical Priorities Team) have pulled together stakeholders for the task and finish group.







The sustainability review identified a number of themes, set out in Annex 1.

Representation will be requested from across NHS Scotland for the Vascular Task and Finish Group with a view to addressing the identified issues in the service area. Below is outlined the intended membership of the Task and Finish Group and the role/function and expertise each role is expected to provide as part of the Task and Finish Group.

Task and Finish Group Leadership

Name	Email	On Behalf Of
Paul Blair	[REDACTED]	CHAIR Independent Vascular Consultant
Karen Murphy	[REDACTED]@nhs.scot	NHS Fife, Consultant Vascular Surgeon and Clinical Lead
William Edwards	[REDACTED]@ggc.scot.nhs.uk	NHS GGC, Chief Officer Acute
Andrew Murray	[REDACTED]@nhs.scot	CHAIR

		NHS Forth Valley Medical Director
Claire MacArthur	 @ggc.scot.nhs.uk	NHS GGC/NHS Forth Valley
Scott Davidson	 @ggc.scot.nhs.uk	NHS GGC/NHS Forth Valley
Keith Hussey	 @ggc.scot.nhs.uk	NHS GGC/NHS Forth Valley
Ali Marshall	 @ggc.scot.nhs.uk	NHS GGC Deputy Director of Planning and Acute Services
Wesley Stuart	 @ggc.scot.nhs.uk	NHS GGC Consultant Vascular Surgeon
Paul Bachoo	 @nhs.scot	NHS Grampian, Acute Portfolio Lead, Acute Medical Director
Bryce Renwick	 @nhs.scot	Consultant Vascular & Endovascular Surgeon and Clinical Lead
Elaine Henry	 @nhs.scot	NHS Highland
Katherine Sutton	 @nhs.scot	NHS Highland, Chief Officer Acute
Tam Siddiqui	 @lanarkshire.scot.nhs.uk	NHS Lanarkshire, Deputy Clinical Director
Margaret Meek	 @lanarkshire.scot.nhs.uk	NHS Lanarkshire, Director of Hospital Services University Hospital Hairmyres
John Keaney	 @lanarkshire.scot.nhs.uk	NHS Lanarkshire, Acute Medical Director
Caroline Whitworth	 @nhs.scot	NHS Lothian, Acute Medical Director
Kirstie Tinkler	 @nhs.scot	NHS Lothian Clinical Service Manager for Vascular and General Surgery
Andrew Tambyraja	 @nhs.scot	NHS Lothian, Clinical Director for Vascular surgery
Aris Tyrothoulakis	 @nhslothian.scot.nhs.uk	NHS Lothian Site Director
Graeme Guthrie	 @nhs.scot	NHS Tayside, Clinical Lead
Shilpi Pal	 @nhs.scot	NHS Tayside, Consultant Interventional Radiologist

Julie Greenlees	 @nhs.scot	NHS Tayside, Associate Director for Vascular Services
James Cotton	 @nhs.scot	NHS Tayside, Medical Director
Christina Beecroft	 @tayside.nhs.scot	NHS Tayside Consultant Anaesthetist
Julie Christie	 @tayside.nhs.scot	NHS Tayside Associate Medical Director
Samuelde Bono		Senior Vascular Trainee NHS Greater Glasgow & Clyde
Fiona Kerray	 @nhs.scot	Senior Vascular Trainee NHS Tayside/Lothian

5. Reporting and Escalation

Reporting Routes

The Task and Finish Group to the NHS Scotland Strategic Planning Board into the NHS Scotland Planning and Delivery Board. The Group will also provide regular updates to the Sustainability Steering Group to ensure coherence and consistency with the other service reviews under way.

Formal reporting updates are required at the Strategic Planning Board (bi-monthly).

Escalation Routes

An escalation process may be initiated to ensure a clear, consistent, and transparent process for the escalation of issues where:

- consensus is not reached and blockage to the Task and Finish Group's ability to function is identified.
- there is a significant lack of progress resulting in increased service issues causing media attention, or serious safety concerns.

6. Review

Once reporting indicates improvement over a sustained period the Task and Finish Group will produce a final progress report and lessons learned report. These will be presented to SPB and NHS Planning and Delivery Board.

SPB will consider the impacts of changes made to the service, evaluate whether more could be considered to make the service more sustainable.

SPB will evaluate the continuation of the Vascular Task and Finish Group and stand the group down once final recommendations are delivered.