

# National Elective Coordination Unit

Centre for  
Sustainable  
Delivery



**NHS**  
SCOTLAND



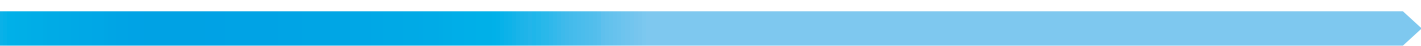
**Annual Report 2022/2023**



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## Introduction

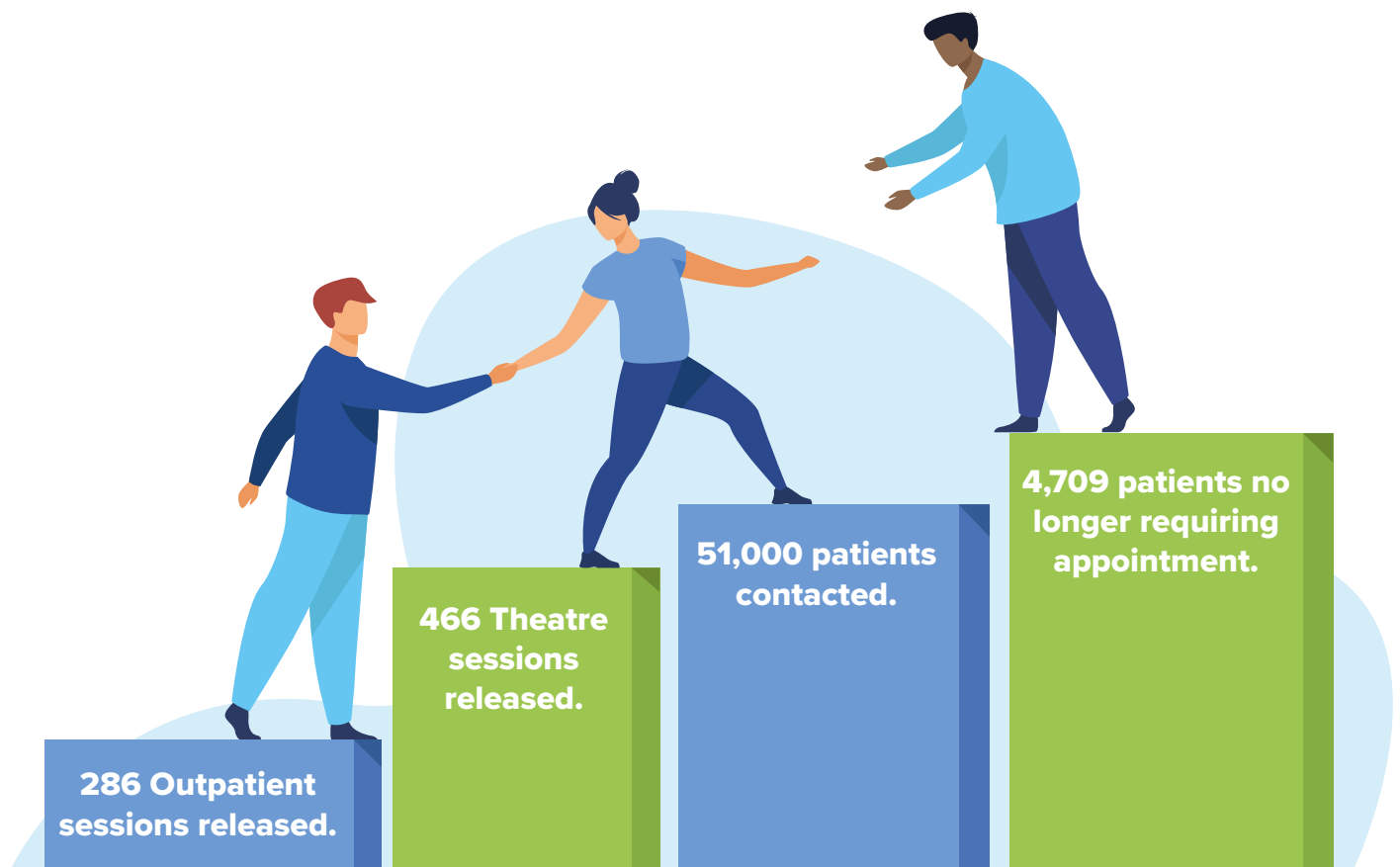
Established in July 2022 by NHS Golden Jubilee's national Centre for Sustainable Delivery (CfSD), the National Elective Coordination Unit (NECU) set out with the mission to work with NHS Scotland Health Boards collaboratively to maximise capacity and provide centralised, coordinated, and innovative approaches to waiting times recovery.

Since its establishment, the National Elective Coordination Unit (NECU) has proven the concept of the benefit of national coordination of capacity within NHS Scotland. In its first 12 months, NECU has supported 39 capacity campaigns across 10 partner NHS Boards, matching clinical teams and patients to ensure timely and person-centred care to NHS Scotland service users. This has resulted in an additional 3245 patients being treated.

At the same time, NECU has implemented innovative and nationally coordinated work that ensures greater optimisation of waiting lists within NHS Scotland, reducing wasted appointments, and supporting NHS Boards to identify patients who still require to be seen and/or treated.

Through a digital first and Once for Scotland approach, NECU have validated over 52,000 in 4 months, averaging 13,000 patients per month, nationally and have identified over 4,500 appointment slots that can now be allocated to patients who still require these.

Supporting NHS Boards and their patients through a combination of both automated, administrative, clinical waiting list validation and patient treatments, NECU have developed a robust governance and approval model for resource sharing between NHS Boards, improving equity of care and reducing variation for the longest waiting patients across NHS Scotland.





# Our Team

Hosted and as part of the wider NHS Golden Jubilee National Waiting Times Centre, NECU's team report to the National Centre for Sustainable Delivery (CFSD). This opportunity to bridge both operational, innovation and improvement is crucial to supporting NHS Scotland Health Boards in a coordinated way.





# Our playbook

As a business unit working collaboratively with, and supporting NHS partner Health Boards, our playbook sets out the principles of how we work. Reportable through the national Centre for Sustainable Delivery, to NHS Golden Jubilee, NECU’s playbook provides reassurance to our governance and oversight groups, ensuring that the work undertaken by us is safe, effective and person-centred.



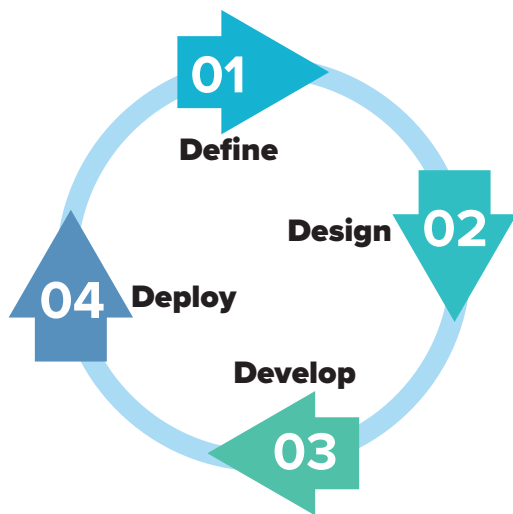
Aligned with NHS Golden Jubilee’s vision of delivering care through collaboration as well as their aim to lead quality, research and innovation for NHS Scotland, NECU has made this a priority in our approach to delivery. Ensuring the core vision of NHS Golden Jubilee is at the heart of everything we do to ensure quality, person-centred care is achieved.

Our playbook crystallises this approach in how we operate as individuals, a team and as a delivery unit for the wider NHS Scotland organisation.



## How we deliver

Our campaign roadmap describes how NECU Define, Design, Develop and Deploy nationally coordinated capacity campaigns.



### Define

#### NECU Support request submitted by requesting Health Board

At this initial stage, the participating Health Board submit a support request into the NECU Campaign Resource Manager (CRM) for specific service or business area. NECU review this request and discuss at NECU Operational group and NECU Programme Board for endorsement to scout capacity/service provision with provider Health Boards.

- NECU support request and campaign resource management system used for logging and audit of requests.
- Interface document shared with participating Health Board. The interface framework sets out the key fundamental, operational, financial, workforce, clinical and process governance principles that NHS Scotland Health Boards sign up to when engaging with NECU.

### Design

#### Campaign planning begins

Once endorsed by the NECU operational and Programme Board, the NECU team work with the requesting Health Board and Provider Health Board to plan the campaign.

- NECU Campaign proposal drafted and submitted to each Health Boards governance and approval route, including workforce arrangements, financial arrangements, and clinical pathway arrangements to support the campaign.
- RACI (Responsible, Accountable, Consulted, and Informed) Matrix developed detailing the specific arrangements to support the campaign.
- Once approved the campaign will move to the development phase.



## Develop



### NECU in collaboration with all parties, develops the campaign

At this stage, following approval across NECU and Participating Health Boards, NECU develops the key levers to support each campaign, to include:

Workforce framework considerations:

- Clinical on boarding of staff to the campaign, through NECU clinical onboarding process
  - Employment verification and clinical access rights for movement of staff supporting the local capacity campaign.
- Provider/Participator SLA
  - Detailing key clinical, HR, Operational and financial arrangements to support the capacity campaign.
- Formal documenting of provision of services
  - Capacity allocation.
  - Clinical pathway agreed/finalised.
  - Patient workflow and pathway.
  - Reporting and monitoring of campaign through NECU CRM.
  - Sign off of all documentation to allow the campaign to move to deployment phase.

## Deploy



### Capacity Campaign Begins

- At this stage, the capacity campaign begins with NECU taking a supportive role to both provider and participator operational teams to support the safe transfer of patients. Performance is monitored through the NECU Operational and Programme Boards.





# Risk and good governance

Our risk appetite is aligned to NHS Golden Jubilee to drive and support innovative ways of delivering services.

At the forefront of our risk and governance strategy, is safety, with a strong commitment to learn and improve. We understand that risk is inherent in everything that we do and are committed to ensuring this is robustly managed.

We are focused in maintaining the strong and positive reputation of both the national Centre for Sustainable Delivery (CFSD) and NHS Golden Jubilee.

Our risk profile is aligned to the core clusters used across NHS Golden Jubilee.

We recognise that any appetite for risk will vary according to the issue and therefore different appetites and tolerances to risk will apply.

NECU Risk Profile	NECU Internal	NECU Directly Commissioned Work	Campaign Capacity Programmes
Strategic	Open	Open	Open
Safety/Experience	Cautious	Cautious	Cautious
Reputation	Moderate	Moderate	Moderate
Financial	Open	Moderate	Open
Regulation	Cautious	Cautious	Cautious
Operational	Open	Moderate	Moderate
Workforce	Open	Moderate	Moderate

Open	Moderate	Cautious	Averse
Will take justified risks . Will choose option with highest return and accepts some possibility of failure.	Preference for safe delivery. Will accept risk if choice is limited and benefits heavily outweigh risk.	Extremely conservative. Will choose to accept risk only if essential and limited possibility of failure.	Avoidance of risk is core objective. Will always choose the lowest risk option.





## Underpinning governance

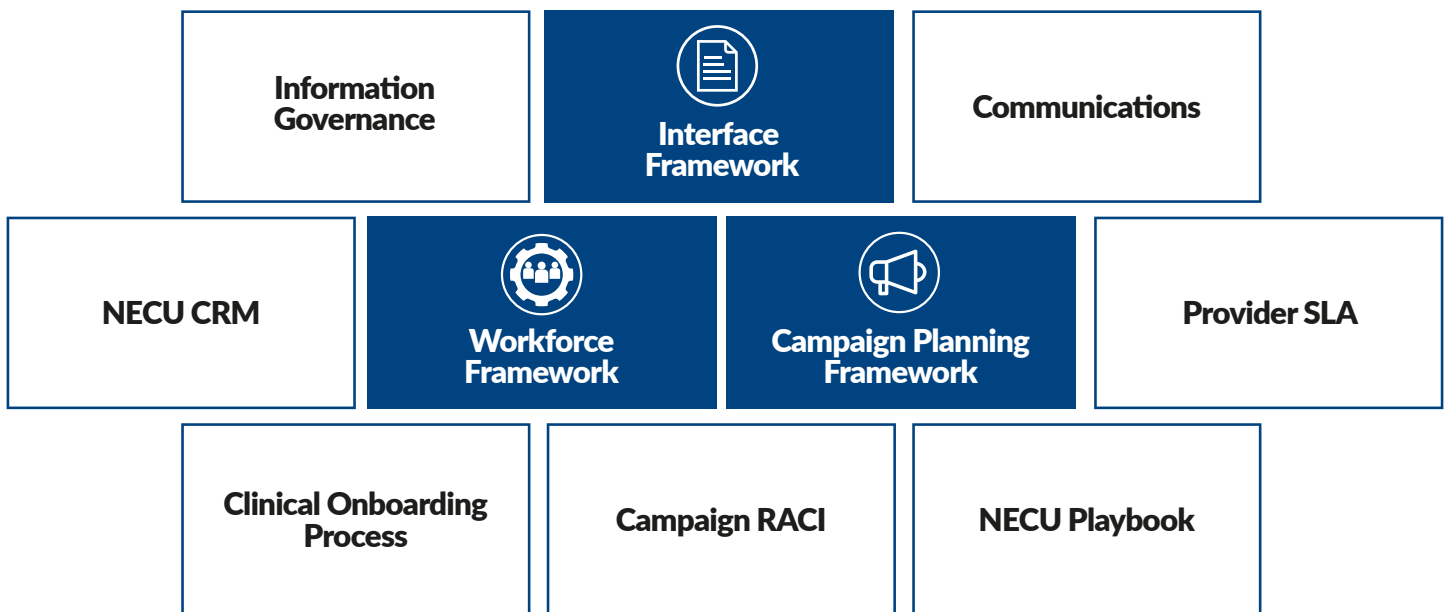
The Board of NHS Golden Jubilee provides overarching governance and is responsible for the work delivered by NECU. Supporting the overarching governance structure and accountable to NHS Golden Jubilee, CFSD and NECU have developed robust governance frameworks that underpin and support NECU delivery.

Both the NECU Operational Delivery Group and Programme Board, work collaboratively internally and with partner Health Board governance routes to ensure clinical, process, operational and financial governance is achieved in the delivery of local, regional, and nationally coordinated capacity campaigns.

Our underpinning governance is founded in our key frameworks that support good governance.



## NECU Governance Pillars



To support robust governance across NECU workstreams and NHS Board partnerships, we have developed critical governance and business processes that support robust governance when supporting NHS Boards to engage in NECU’s portfolio offering.

Each element of this underpinning governance is implemented throughout NECU’s portfolio from initial engagement through to delivery, on behalf of, and in collaboration with, NHS Boards.



# NECU Governance Pillars



## Interface Framework

The NECU Interface framework is the key foundation document that sets out the fundamental principles that support relationships between provider and participating Health boards and NECU.



## Workforce Framework

Supports the underlying principles of employment validation and verification when supporting NHS Scotland staff to work within national campaigns.



## Campaign Planning Framework

This framework supports the planning of capacity campaigns, capturing the key stages from initial request to delivery.

### Information Governance

Our information governance documentation provides reassurance to Health boards on the legal basis for contacting patients for validation purposes to ensure compliance with data protection and privacy standards.

### Clinical Onboarding Process

This process is supported by the workforce framework to ensure clinical staff working within the scope of campaign capacity are confident and competent with verification of all employment checks with their substantive employer.

### Campaign RACI

Details the roles, responsibilities, accountabilities and relationships between partners when delivering campaigns.

### Provider SLA

Contractual agreement that sets out the agreed pathway for capacity campaigns, including liability provisions, workforce finance and operational arrangements.

### NECU CRM

The NECU Campaign Resource Manager is our main repository for tracking and monitoring campaigns with a full audit trail.

## Communications

Working closely with NHS Golden Jubilee Communications team, NECU have developed robust communications to support NHS Boards when engaging in NECU campaigns. This communications strategy supports multi channel communications for staff and patients.


## NECU Playbook

NECU's playbook sets out the principles of how we work. The playbook provides reassurance to our governance and oversight groups, ensuring that the work undertaken by NECU is safe, effective and person centred.



# Delivery plan standards

As well as supporting CFSD and NHS Golden Jubilee Board priorities, NECU has developed a local delivery plan for the first year of operation that supports collaborative partnerships with NHS Boards to promote a joined-up approach to delivery of waiting times recovery.

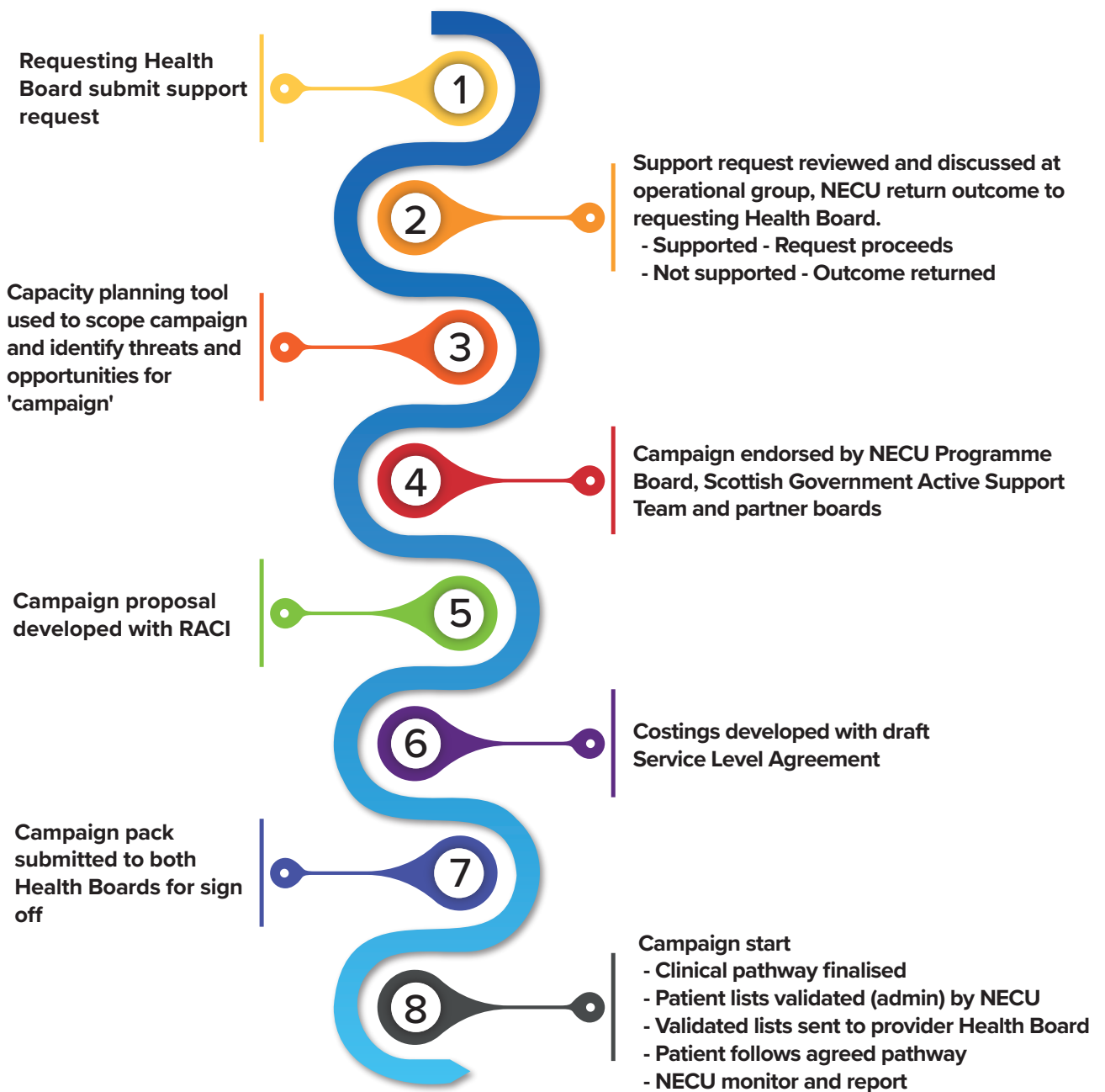
 <b>What we said we'd do.</b>	 <b>What we did.</b>	 <b>RAG Status.</b>
Agree national model for campaign capacity.	Process and governance approved.	
Agree NECU product Offering.	Product offering for year 1 complete.	
Undertake national waiting list validation exercise.	Validation of >51,000 patients, with >4,700 removals.	
Deliver capacity campaign programmes.	39 Campaigns within workplan across 10 health boards.	
Optimise pathways that support cross board working.	Campaign planning and workforce framework approved and deployed.	
Establish core NECU team permanently.	Core team established with administrative posts agreed permanently	
Develop innovative approaches to validation and front loading of patient assessment, optimizing treatment pathways.	Digital partner procured to support automated pathways for validation and patient assessment.	



# Campaign capacity model

Campaign capacity relates to short term projects facilitated by NECU that supports and promotes the best use of capacity across territorial Health Board borders. Through a collaborative and standardised approach, since 2022 NECU has supported:

- 39 campaigns,
- 10 NHS Scotland Boards, and
- 4,500 patients treated.



## NECU product offering

We have developed a product offering since establishment that is now embedded in business as usual for NECU. This product offering has been in collaboration with participating Health Boards and national waiting times recovery targets to develop the highest impact for recovery.

### Automated and administrative validation

At scale administration validation has been pioneered through the NECU process.

This involves:

- using teamwork with participating NHS Boards to rapidly validate patient waiting lists;
- using a digital first approach; and
- administrative support.

Since January 2023, NECU has administratively validated over 41,000 patients with 60% of patients responding to the digital validation system within the first 24 hours of a campaign go live. On average, participating Boards record between 8-10% removal rate.

### Clinical validation campaigns

Following the capacity campaign methodology, NECU can support and deliver bespoke clinical validation locally for participating NHS Boards.

### Bespoke capacity campaigns

These campaigns can be formed of elements of administrative and clinical validation, as well as treatment of patients across Board boundaries. To date, NECU are actively supporting 39 bespoke capacity campaigns across 10 NHS Scotland Health Boards.



# NECU results

In the first 12 months of establishment, NECU has:

- Proven the concept of a ‘Once for Scotland’ coordination approach to capacity utilisation.
- Supported the appointing and/or treatment of over 4,500 patients nationally.
- Validated over 51,000 patients.
- Removed over 4,700 patients who no longer needed an appointment or treatment allowing NHS Boards to re-allocate these to patients who still require to be seen/treated.



## Digital validation

**112**

Quick Question Campaigns

**45,000**

Patients Successfully Contacted

**26,000**

Responses

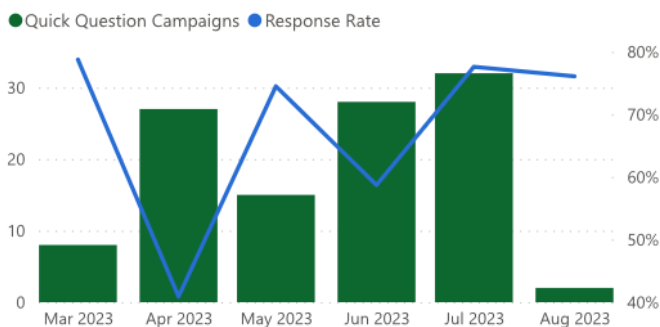
**59.7%**

Response Rate

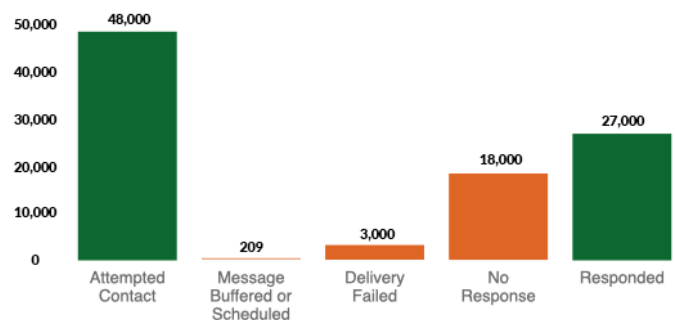
**22.6**

Average Response Hours

### QQ Campaigns Over Time



### Patients Contacted Drop Off



Month	Campaigns	Patients Contacted	Responses	Response Rate	Avg Response Hours	Active Campaigns	Actioned Responses	Message Delivery Success
Mar 2023	8	3,167	2,335	78.8%	25.14			93.6%
Apr 2023	27	21,849	8,255	40.9%	15.91			92.4%
May 2023	15	3,861	2,724	74.5%	26.00			94.7%
Jun 2023	28	2,964	1,648	58.7%	31.35			94.7%
Jul 2023	32	12,284	8,852	77.6%	23.22			92.9%
Aug 2023	2	4,314	3,111	76.1%	29.37			94.8%
<b>Total</b>	<b>112</b>	<b>48,439</b>	<b>26,925</b>	<b>59.7%</b>	<b>22.63</b>			<b>93.1%</b>

# Combined validation

**51,300**

Total patients validated

**4709**

Recommended Removals

**8.3%**

Removal Rate  
Removal rate

**89%**

Combined Validation  
Response Rate

**2863** OR **286**

Outpatient appointments saved

Outpatient clinic sessions released

**932** OR **466**

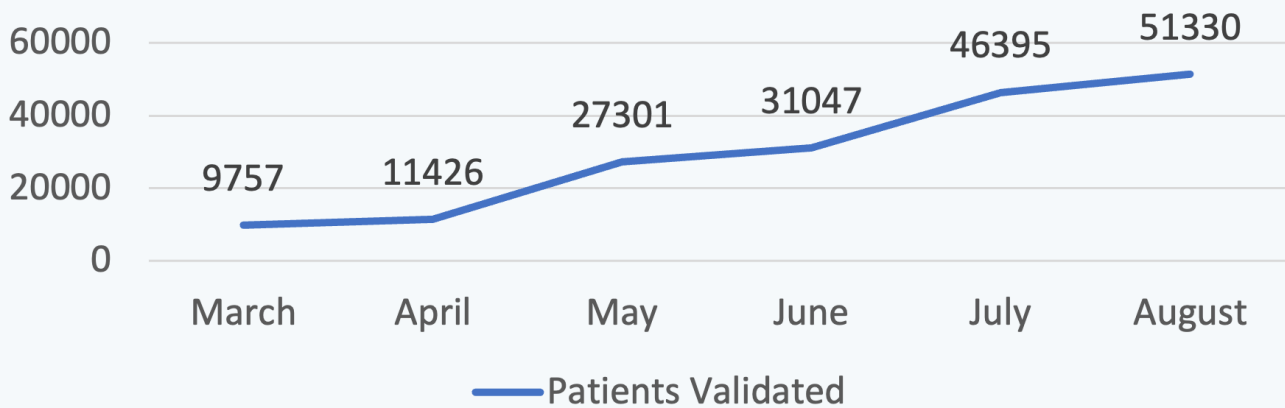
Inpatient treatment slots saved

Theatre sessions released

Clinical days released based on 20 patient per day clinic template.

Theatre sessions released base on 2 patient per 0.5 day theatre session template.

## Patients Validated



## Financial Impact

**£2.8M**

Cost Avoidance

Cost avoided to NHS Scotland from national validation activity.

Based on removal volume and average marginal cost per outpatient appointment and theatre procedure of £129 and £2,566 respectively.



**Total Cost Avoidance**  
**+£2,760,000**



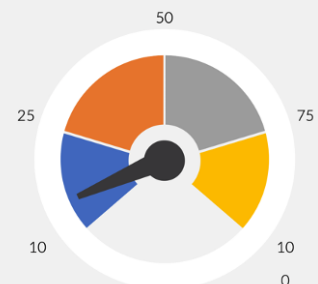
**Total NECU Investment**  
**-£360,000**



**Net Cost Avoidance**  
**+£2,460,000**



**Total Direct Cost Saving Through avoided DNA**  
**+£240,000**




**13%**

NECU cost against total cost avoidance measure



## Feedback

 **98% of patients who have been treated through bespoke cross border capacity campaigns have said the service was good or excellent in patient feedback questionnaires.**

The support NECU has provided across NHS Scotland is clear from a patient perspective. We are committed to ensuring that every patient involved in NECU has a positive experience. It is also important that local operational teams manage, clinicians care for their patients and administrative teams focus on the local tasks at hand.

We work collaboratively with teams within our partner NHS Boards to make sure that whether you are a patient or an NHS staff, you feel engaged and involved in every step of the NECU process.

By being open, transparent and inclusive, we work across Scotland to support where necessary, and when there is opportunity to build local sustainable delivery, we will ensure that delivery occurs as close to home as possible.

The supportive nature of NECU, in addition to other CfSD programmes of work, aim to help NHS Boards across Scotland find long term sustainable solutions to provide services that are fit for the future.

“  
I think that establishing NECU, and the learning process that we have gone through in establishing arrangements has highlighted several bigger issues which NHS Scotland can now address at an early stage to enable modern, flexible and digitally supported care to be delivered across Board boundaries in the future.  
⊕ NHS Board Feedback ”

“  
The NECU coordination has simplified the process of inter-Board contracts and so has really helped us to get these arrangements in place more quickly.  
⊕ NHS Board Feedback ”

“  
Overall, a great experience. Made an anxious experience much easier.  
⊙ Patient Feedback ”

“  
This was a fast-tracked appointment, only waiting one week so the distance to travel didn't affect my decision to accept the appointment; staff were very efficient.  
⊙ Patient Feedback ”

“  
Experience was excellent from start to finish.  
⊙ Patient Feedback ”





## Continuing to develop our service into 2023/2024

NECU has developed a robust model that supports both NHS Boards, but equally the population of Scotland. Through development of transparent and well governed frameworks that incorporate clinical, operational, process and financial governance, NECU has accelerated the operational delivery of a Once for Scotland approach to national waiting times capacity matching. With capability to collaboratively work across boundaries, NECU has and will continue to deliver support to NHS Scotland through its current product offering.

As NECU plans for the years ahead, we continue to work closely with the national Centre for Sustainable Delivery (CFSD), NHS Golden Jubilee and colleagues across NHS Scotland to support sustainable delivery of waiting times recovery, ensuring that we continue to add value to the entire patient pathway from referral to treatment.

In the months ahead, we look forward to applying the well evidenced waiting list validation methodology to new areas of focus, including diagnostics and national treatment centres, working closely with clinical colleagues to ensure a safe, effective, and person-centred approach is delivered.

Building on the success of our cross-board capacity campaigns, we look forward to continuing to work with partners to develop bespoke campaigns that ensure patients are seen and treated in a timely way.

Having worked closely with digital partners, we continue to innovate in this area and are focused on ensuring that a digital first approach is taken in all that we do, to not only reduce the administrative burden within NHS Boards, but to also ensure patients are engaged and communicated with regularly throughout their journey.

As we move into the year ahead, we look forward to continuing to build a strong team and stronger relationships with all our partners that have supported in our delivery to date.





# Glossary of Terms

## A

<b>AST</b>	Access Support Team
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## C

<b>CRM</b>	Campaign Resource Manager
<b>CFSD</b>	Centre for Sustainable Delivery
<b>Capacity Campaign</b>	Delivery of treatment through the matching of capacity within NHS Scotland to demand, supporting timely treatment for patients.

## H

<b>HB</b>	Health board
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## N

<b>NECU</b>	National Elective Coordination Unit
<b>NHS</b>	National Health Service

## O

<b>OKRs</b>	Objectives and key Results
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## P

<b>PCC</b>	Patient Coordination Centre
<b>PB</b>	Programme Board

## Q

<b>QQ</b>	Quick Question
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## R

<b>RACI</b>	Responsible, Accountable, Consulted, and Informed
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## S

<b>SMART</b>	Specific, Measurable, Achievable, Relevant and Timely
<b>SLA</b>	Service Level Agreement



**The national Centre for Sustainable Delivery is  
part of the NHS Golden Jubilee family.**



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