

Thank you for your email of 14<sup>th</sup> June following up Professor Hiscox's commitment to provide details of fees paid to medical and nursing agencies. NHS Grampian has paid the following amounts in commission to agencies in each of the last 3 financial years:

	2020/21 (£m)	2021/22 (£m)	2022/23 (£m)	<b>Total (£m)</b>
Nursing	0.6	0.9	1.5	<b>3.0</b>
Medical	1.6	1.1	1.3	<b>4.0</b>
<b>Total</b>	<b>2.2</b>	<b>2.0</b>	<b>2.8</b>	<b>7.0</b>

Professor Hiscox also offered to share details of the evaluation of NHS Grampian's Waiting Well project with the committee. The evaluation document is attached for the Committee's information. The evaluation covers the first cohort of patients, Orthopaedics. The total number of patients covered by specialty since the Waiting Well service started on 20 June last year is as follows:

<b>List size</b>	<b>Successfully contacted</b>	<b>Wellbeing Conversations</b>
Orthopaedics ARI	3630	3278
Orthopaedics DGH	844	819
Gynaecology	432	426
General Surgery	2799	2584
ENT Paediatrics	57	45
<b>Total Up to 26th May 2023</b>	<b>7762</b>	<b>7152</b>
Current list: Outpatient Local Anesthetic Plastics	752	545

# NHS Grampian Public Health Waiting Well Service

## Cohort 1 report

### Introduction

The Public Health Waiting Well Service is a test of change being delivered by the Healthpoint service. With the waiting lists for elective surgery increasing as a result of Covid19, this test of change was initiated to build on the existing Healthpoint service and to support the wellbeing needs of elective patients on the waiting list. If people can be supported as they wait for procedures the service aims to; improve their quality of life while waiting, prepare them better for their treatment, reduce their length of stay in hospital and enable them to re-cover faster.

NHS Grampian Public Health Healthpoint is a health information service, offering free, confidential information, advice, support, and signposting to reputable services.

Working in partnership with colleagues from the Acute Sector, the role of the service was developed and included a process for validating patients and reporting. The first cohort of patients identified to receive the service were those waiting for Orthopaedic procedures. Throughout the test of change, a small working group comprising representatives from Public Health, Acute Clinical, Service Managers and Medical Secretarial met regularly to discuss progress

### Delivery of Service

The Healthpoint team contacts each patient by telephone and has a 'wellbeing' conversation where they listen to the patient and look at practical ways to support the patients to 'wait well' and signpost to local services/groups. They discuss vaccination and screening and encourage uptake.

The Advisors take the opportunity to update the patient's details held on Trak and inform clinical colleagues of patients who wished to be removed from the list or have periods of unavailability for their procedure. For patients who disclosed that their symptoms have significantly deteriorated, a Tier 2 service is provided where a Nurse contacts the patient to provide support and escalate to the clinical teams if necessary.

For each patient, an In-Patient Waiting List (IPWL) Surveillance form is completed by the Healthpoint team and uploaded on to Trak. This allows clinical colleagues to view the details of the Waiting Well conversations including advice given and signposting to services.

The delivery of the service commenced on 20 June 2022, with the first cohort of patients being completed by 14 November.

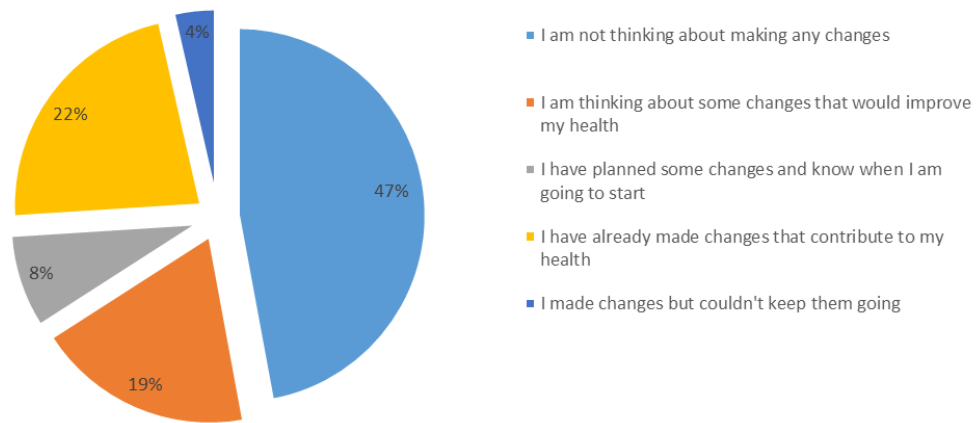
	Cohort 1
Number of calls made	4119
Number of answered calls	3278
Number of patients who answered call but did not want to engage	142 (4.3%)
Patient requested to be removed from waiting list	23
Patient provided unavailability dates	500
Patient referred to Tier 2 clinical advisor	180 escalated to Tier 2
Waiting well conversation completed	3162

### Evaluation of Waiting Well Service – post conversation

As part of the evaluation of the service, patients were contacted by telephone, 1 week and 4 weeks after the initial Waiting Well conversation.

After the Waiting Well call, 22% of the respondents said they had already made changes that contributed to their health, with a further 27% planning or at least thinking about changes to improve health or wellbeing. About half the respondents (47%) were not thinking about making any changes around their health and wellbeing as a result of the service. 4% of respondents stated that they had made changes but couldn't keep them going.

Thinking about what you talked about during the Wellbeing Call, how would you describe any plans around your health and wellbeing?



Most people expressed positive views about the service and the information they received. 85% thought the information they received was useful or might be useful in the future, and an additional 9% reported that the information they received had led to improvements in their life. Many appreciated the call or were reassured to know they had not been forgotten. About 4% felt it was a waste of their time.

A full report on the service is available upon request.

Linda Duthie, Public Health Lead

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