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NHS Board Meeting 28th March 2018

### NHS LANARKSHIRE HEALTHCARE STRATEGY "ACHIEVING EXCELLENCE" – ONE YEAR ON

### 1. PURPOSE This paper is coming to the NHS Board For approval For endorsement To note $\boxtimes$ The final version of Achieving Excellence was approved by the Lanarkshire NHS Board on 1st March 2017, and endorsed by the Cabinet Secretary on 28th April 2017. This paper reports the current position on the Plans for Service Change set out in Section 7 of Achieving Excellence. Board members are asked to note the service improvements made to date and note that future service change plans were the subject of more detailed consideration at the NHS Board Development Session which took place on 20th March 2018. ROUTE TO THE BOARD This paper has been: $\boxtimes$ Prepared Reviewed $\boxtimes$ Endorsed By the Corporate Management Team on 19th March 2018.

#### 3. SUMMARY OF KEY ISSUES

3.1 One Year On

"Achieving Excellence", section 7 Plans for Service Change summarised - at that point in time - the changes we could expect to see in order to make services fit for the future needs of the

people of Lanarkshire. Some of these changes were specific, some a work-in-progress and some aspirational.

The Strategy Delivery Team (SDT, co-chaired by the IJB Chief Officers and NHS Board Chief Executive) established a series of Short Life Working Groups in June 2017 to progress the implementation of Achieving Excellence. The SDT has had 5 review meetings.

During the period of Achieving Excellence implementation we will continue to see a "pipeline" of specific change projects evolving from initial ideas, through partially defined proposals to structured implementation programmes (with clear governance, programme, finance, workforce and other co-dependencies well understood and managed).

It is recognised that some of the plans which were set out in spring 2017 will be modified or adapted to meet changing circumstances, or challenges faced in their gestation and implementation.

One year on, section 7 is re-presented in Appendix 1 to this paper in a modified form. The Appendix shows the "pipeline" of projects from initial ideas through to completed work (as at March 2018).

Much has been achieved in the last 11 months to progress our strategic ambitions, particularly in the work to reduce the admissions and lengths of stay in hospital. Looking to the short and medium term future, NHS Lanarkshire and its partners has set out an exciting and innovative agenda for service change, shown in the second and third columns.

At the January meeting of the NHS Board, the Director of Strategic Planning & Performance was tasked with collating the detail behind some of the service change proposals. NHS Board members will recognise that many of those listed on the appendix are very complex pieces of work which can have local, regional or national co-dependencies. Some projects, such as Monklands Replacement/Refurbishment Project, have been reported in detail to the NHS Board/PP&RC regularly whilst other areas of work will be less familiar to NHS Board members. It was, therefore, agreed that priority be given to those areas which have higher prominence/risk, with these forming the substantive part of the agenda for the NHS Board development day on  $20^{th}$  March 2018.

#### 3.2 NHS Board Development Day Agenda in March

Part of the Agenda for the day was a detailed briefing by the Executive lead from the respective Short Life Working Group and other subject-matter experts, followed by a question and answer session for each. The main focus was on those areas of service change which have most significance in delivering the strategic vision set out in Achieving Excellence.

The format for these topics was a focus on five key areas of assurance for the NHS Board:

- 1. Benefits to be delivered;
- 2. Timescales and programme;
- 3. Staff governance;
- 4. Clinical governance; and
- 5. Financial Governance.

#### 4. STRATEGIC CONTEXT

This paper links to the following:

Corporate objectives	LDP		Government policy	
Government directive	Statutory requirement		AE/local policy	
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Urgent operational	Other	ΙШ		
issue				

### 5. CONTRIBUTION TO QUALITY

This paper aligns to the following elements of safety and quality improvement:

#### Three Quality Ambitions:

#### Six Quality Outcomes:

Everyone has the best start in life and is able to live longer healthier lives; (Effective)				
People are able to live well at home or in the community; (Person Centred)				
Everyone has a positive experience of healthcare; (Person Centred)				
Staff feel supported and engaged; (Effective)				
Healthcare is safe for every person, every time; (Safe)				
Best use is made of available resources. (Effective)				

#### 6. MEASURES FOR IMPROVEMENT

"Achieving Excellence" sets out a plan for person-centred, innovative healthcare to meet the current and future needs of the people of Lanarkshire.

#### 7. FINANCIAL IMPLICATIONS

Costs associated with the implementation of "Achieving Excellence" will be reflected in the NHS Board's Annual Operational Plan (AOP).

#### 8. RISK ASSESSMENT/MANAGEMENT IMPLICATIONS

The Strategy Delivery Team will be responsible for the ongoing evaluation and mitigation of risks to the strategic programme as a whole.

#### 9. FIT WITH BEST VALUE CRITERIA

This paper aligns to the following best value criteria:

Vision and	Effective partnerships	Governance and accountability	
leadership			
Use of	Performance	Equality	
resources	management		
Sustainability			

### 10. EQUALITY AND DIVERSITY IMPACT ASSESSMENT

EDIAs have been completed for the work so far, and will be regularly reviewed and updated by the short-life working groups. For further information please contact Roslyn Rafferty, Planning & Development Department.

#### 11. CONSULTATION AND ENGAGEMENT

"Achieving Excellence" was subject to full public consultation. Further engagement and communications plans will be prepared and implemented through the Strategy Delivery Team in partnership with the Scottish Health Council and other stakeholders.

#### 12. ACTIONS FOR THE NHS BOARD

The NHS Board is asked to:

> note the revision to Achieving Excellence section 7

#### 13. FURTHER INFORMATION

For further information about any aspect of this paper, please contact

Colin Lauder, Deputy Director of Strategic Planning Telephone: 01698 858269.

Colin Sloev

Director of Strategic Planning & Performance

#### APPENDIX 1 SERVICE CHANGE "PIPELINE" AS AT FEBRUARY 2018

## Projects Completed in 2017/18

Since we published Achieving Excellence we have:

Received approval of the Monklands Replacement Refurbishment Project (MRRP) Initial Agreement (IA)

Completed the first phase of the Primary Care Improvement Programme

Upgraded the neonatal unit at University Hospital Wishaw (UHW)

Expanded the ophthalmology service at University Hospital Hairmyres (UHH)

Created the rapid assessment unit (REACT) at University Hospital Monklands (UHM)

Expanded day surgery facilities at UHM



### Fully Defined Projects

(In date order)

Enhance Home Care by March 2018 and beyond (South)

Review of the Intermediate Care Model - Carrickstone and Parksprings by March 2018

Develop Discharge Hubs into Locality Hubs by March 2018

Technology Enabled Programme of service development by March 2018

Udston - Continuing Care of the Elderly – closure of Douglas Ward by March 2018

Implementation of the Carers (Scot) Act by April 2018

## Partially Defined Projects

(In date order where dates have been confirmed)

Review of the Intermediate Care Model - Cumbernauld Care Home, Hattonlea and Udston tbc. Overall project plan to be defined in early 2018.

Implementing New GMS
Contract (Primary Care
Improvement Programme) 2018
-2021

Laundry business case – the case for change and the options paper will be reviewed by CIG in March 2018

Trauma & Orthopaedics - options appraisal for elective care will take place on 20<sup>th</sup> March 2018. The implementation plan will then be completed by the project board including cost profile, workforce and infrastructure

## **Emerging Proposals**

Building & Celebrating Communities (B.C.C.) and Prevention & Community Capacity including Third Sector Supports tbc

Acute Adult Psychiatry – finalise strategic plans for the location of Adult MH beds across UHM, UHH and UHW by December 2026

Vascular surgery - high level options being developed which may include expanded service at UHH, case for change and implications will be developed into summer 2018.



## Projects Completed in 2017/18

Created a same day assessment unit at UHM

Created an outpatient investigations unit at UHM

Created a daybed and Systemic Anti-Cancer Therapy (SACT) unit at UHW

Implemented a new service for stroke spasticity.

Created North and South Lanarkshire Alcohol and Drugs Partnerships.

### Fully Defined Projects

(In date order)

Working with the Scottish Ambulance Service (SAS) and Strathclyde Partnership for Transport (SPT) in a test of change to be completed by April 2018

Aseptic pharmacy – concentration of service from 4 locations to 1 will be completed in June 2018.

Cardiac catheterisation laboratory replacement – upgraded regional service will be completed in June 2018.

HEPMA (Hospital Electronic Prescribing Management System) Go-Live – Monklands General Inpatients by August 2018

Development of a Transport Hub by September 2018

### Partially Defined Projects

(In date order where dates have been confirmed)

implications (laminar flow and ED). Implementation of trauma unit is co-dependent on the West of Scotland Major trauma implementation plan

Establish a Long term Conditions Hub by April 2018

SACT unit within ward 15 at UHM – stage 1b design/cost report expected in June 2018, CIG will then review business case.

General surgery/
Gastroenterology - case for change and options paper is being finalised by the project board, with a view to an options appraisal in June 2018.

Northern corridor clinics feasibility study will report in July 2018, North IJB and CIG will then review the business case.





# Projects Completed in 2017/18

### Fully Defined Projects

(In date order)

Modernising Outpatients Programme Phase 1 completed by Nov. 2018

eCasenote Project complete by December 2018

Disposals & Acquisitions programme completed by December 2018

Property - space utilisation to be enhanced through detailed surveys by December 2018

Review of the Intermediate Care Model - Wester Moffat, Coathill and Kilsyth Victoria by March 2019;

Implementation of Universal Health Visiting Pathway by March 2019

### Partially Defined Projects

(In date order where dates have been confirmed)

Parking Management - test of change of parking management proposals to be completed by September 2018

Identify technology requirements for information sharing by December 2018

Conduct a major upgrade to the IM&T infrastructure, including Windows 10 roll-out tbc

Forensic Psychiatry – reconfiguration of low secure & forensic rehabilitation facilities by December 2018

Adult Mental Health Community Services - scope out model & develop business case re. "Centres of Excellence" in the community by December 2018

Review of Day Care & Residential Care by March 2019



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# Projects Completed in 2017/18

### Fully Defined Projects

(In date order)

Create new Integrated Locality Teams by March 2019

Create a new model of Rehabilitation by March 2019

Create a new model of Home Support by March 2019 (North)

Introduction of Intermediate Care/Reablement/Adults with Incapacity (AWI) by March 2019

Create a new MH Crisis and Distress Interventions service model by March 2019

### Partially Defined Projects

(In date order where dates have been confirmed)

Diabetes - Capitalise on Telecare and Telehealth by March 2019

On-going implementation of Palliative Care Strategy (including provision of P.C. beds & enhanced community support) by March 2019

Hospital at Home (H@H) – ongoing evolution of service / redefinition of management arrangements (2yr project) completion by March 2020

Further implementation of Out Of Hours Review tbc

Determination of possible outcomes following completion of PFI contracts at UHW/UHH.



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# Projects Completed in 2017/18



(In date order)

LIMS (Laboratory Information Management System) implemented by April 2019

HEPMA Go-Live – Hairmyres General Inpatients by April 2019

HEPMA Go-Live – Wishaw General Inpatients by July 2019

MRRP Outline Business Case (OBC) by July 2019

GP IT Update by September 2019

Development of generic pathways for Long Term Conditions by March 2020

Development of disease specific pathways for Long Term Conditions by March 2020

### Partially Defined Projects

(In date order where dates have been confirmed)

Modernising Outpatient Programme Phase 2 tbc

Hysteroscopy unit within ward 8 at UHM – business case being prepared by acute division, will then be reviewed by CIG tbc

Implement Discharge to Assess to reduce delayed discharges tbc





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# Projects Completed in 2017/18

## Fully Defined Projects

(In date order)

HEPMA Go-Live – Complex Specialties and Outpatients by March 2020

LIMS Labs and Order Comms Implementation by April 2021

Maternity & Neonates Improvement Programme:

- 1.Monitoring Impact of Care
- & Services by June 2020
- 2. Integrating Further Care
- & Services by March 2022
- 3. Review & Refine Models of Care & Services by January 2021
- 4. Transforming Patient Care
- & Services by March 2022:
- 5. Continuous Improvement in Outcomes from Care & Services by March 2022

### Partially Defined Projects

(In date order where dates have been confirmed)