

## HEALTH PROMOTING HEALTH SERVICE (HPHS)

### HPHS CMO (2018) 3: Baseline self-assessment against HPHS outcomes and indicators 18/19

Completed baseline self-assessments for 2018/19 should be submitted by **31<sup>st</sup> May 2019** to:

[nhs.healthscotland-hphsadmin@nhs.net](mailto:nhs.healthscotland-hphsadmin@nhs.net)

REQUIRED SUBMISSION DETAILS	
<b>NHS Board</b>	NHS Lanarkshire
<b>Submission date</b>	31 May 2019
<b>HPHS Lead</b>	Kerri Todd
<b>Contact email address</b>	<a href="mailto:Kerri.todd@lanarkshire.scot.nhs.uk">Kerri.todd@lanarkshire.scot.nhs.uk</a>
LIST ALL HOSPITALS SITES REPRESENTED WITHIN THE SUBMISSION (specified by site category)	
<b>Acute</b>	University Hospital Hairmyres, University Hospital Monklands, University Hospital Wishaw
<b>Community</b>	Airbles Road Centre, Beckford Lodge, Caird House Centre, Cleland Hospital, Kirklands, Kilsyth Victoria Cottage Hospital, Lady Home Hospital, Lockhart Hospital, Stonehouse Hospital, Udston Hospital, Wester Moffat Hospital.  The main focus of activity has been on the three acute hospital sites with delivery of services such as Tobacco Control Service being available within the community settings.
<b>Maternity</b>	Inpatient unit at University Hospital Wishaw. Outpatient services at all three acute hospital sites and community clinics across Lanarkshire.
<b>Paediatric</b>	Inpatient unit at University Hospital Wishaw. Outpatient services at all three acute hospital sites and community clinics across Lanarkshire.
<b>Mental Health</b>	Three acute sites plus Beckford Lodge and Coathill Hospital and the Mental Health and Learning Disabilities Team

List all hospitals sites not included in this reporting (specify category as above) and brief rationale.

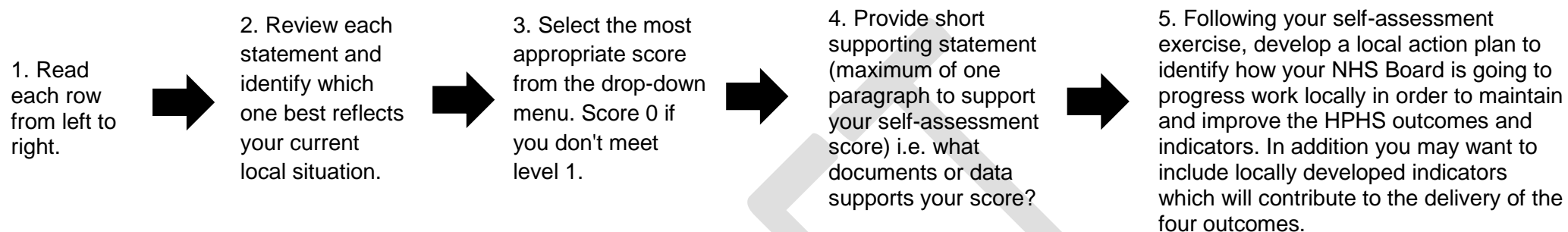
### Self-assessment of readiness level descriptor

- 0 = no evidence of indicator currently being met
- 1 = some aspects of the indicator are being met
- 2 = all areas of the indicator are being met
- 3 = all areas of the indicator are fully met, and there is evidence of monitoring and evaluation of impact and / or improvement approaches being applied

**ⓘ** The levels are intended to show progression. Boards should choose the level which best represents the current status, and only if all of the dimensions of that level are met. The supporting statement allows for further detail, including where there are elements of the next level which are currently being met.

### Guidance for completion

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**OUTCOME 1 - Prevention, improving health and reducing health inequalities are core parts of the system and planned, delivered and performance managed as such.**

Indicator	Level			Self-assessment score	Evidence to support self-assessment score
	1	2	3		
1.1. There is an evidence-based, resourced plan for embedding prevention, improving health and reducing health inequalities activity in the organisational structure, and systems and processes. For example, it is monitored through existing, local governance and performance arrangements.	Prevention, improving health and reducing health inequalities are identified within corporate aims and objectives.	A long-term strategy, framework or equivalent is in place alongside a governance structure and delivery plan to progress prevention, improving health and reducing health inequalities.	All HPHS related outcomes are embedded across the organisation and governance and performance monitoring arrangements are in place.	2	<p>There is an overarching <b>NHS Lanarkshire Board High Level Inequalities Action Plan</b> with underpinning frameworks and action plans that are person-centred, safe and effective. These are as follows:</p> <ul style="list-style-type: none"> <li>NHS Lanarkshire Board, Corporate Objectives of 2018-2019</li> <li>Achieving Excellence 2017 <i>'person centred, innovative healthcare to help Lanarkshire flourish'</i></li> <li>Strategic Commissioning Plans for Health and Social Care North Lanarkshire and South Lanarkshire Health and Social Care Partnership</li> </ul>

					<ul style="list-style-type: none"> <li>• NHS Lanarkshire Workforce Plan 2017-2020</li> </ul> <p>This latter plan is in compliance with the national Staff Governance Standards, Healthcare Quality Strategy for Scotland, the three Quality Ambitions and Quality Outcomes and the Strategic Narrative setting out our 20:20 vision for healthcare.</p> <p>Further NHS Lanarkshire frameworks and action plans to provide focus, support and monitoring to implement the high level outcomes include:</p> <ul style="list-style-type: none"> <li>• Care Assurance and Accreditation System Standards for Acute and GP Hospitals 2017 (CAAS)</li> <li>• Everyone Matters: 20:20 Workforce Vision NHS Lanarkshire Implementation Plan 2019-2020</li> <li>• Health Improvement Health Inequalities Framework 2016-2019</li> <li>• Good Mental Health for All Action Plans – North and South HSCP</li> <li>• NHS Lanarkshire Mental Health and Wellbeing Strategy in progress</li> <li>• Occupational Health and Safety Governance and Strategic Framework 2017-2020</li> <li>• Risk Management Strategy 2018-2019</li> <li>• Tobacco Control Strategy 2018-2023</li> </ul> <p>The governance structure is via the following strategic groups:</p> <ul style="list-style-type: none"> <li>• Acute Clinical Divisional Management Team</li> </ul>
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					<ul style="list-style-type: none"> <li>• North HSCP Integrated Joint Board</li> <li>• South HSCP Joint Integrated Board</li> <li>• Population Health, Primary Care &amp; Community Services Governance Committee</li> <li>• North and South Health and Social Care Divisional Partnership Forums</li> <li>• Occupational Health and Safety Performance Group</li> <li>• Staff Governance Committee</li> </ul> <p>Whilst there is evidence of inequalities sensitive practice embedded across the organisation, with Mental Health and Learning Disabilities (MHL) a prime example of this, not all areas are equal. The MHL team use a Health Equalities Framework (HEF) with each patient seen to assess need and reduce inequalities measured against the relevant <b>CAAS Standards for Mental Health and Learning Disabilities.</b></p>
1.2. The increased emphasis on prevention, improving health and reducing health inequalities is championed by senior staff and supported by effective communications and engagement with staff and trade unions.	Executive staff communicate the importance of prevention, improving health and reducing health inequalities with staff, trade unions and staff side.	Executive buy-in is demonstrated by leadership of a range of health improvement activities across variety of settings/ services/ clinical pathways.	Executive buy-in and leadership of prevention, improving health and reducing health inequalities across the system is reflected through the corporate action planning and reporting process.	2	<p>There is corporate support for prevention and reducing health inequalities and the relevant plans are available on staff facing and public facing sites and communications.</p> <p>There is staff side representation within the NHSL HPHS Steering Group.</p> <p>The Annual Public Health Report by the Director of Public Health</p>

					(DPH), showcases the work progressed on inequalities sensitive work. The DPH is chair of the following HI committees: <ul style="list-style-type: none"> <li>• Tobacco Control Strategy</li> <li>• Healthy Weight Strategy</li> <li>• Green Health Partnership</li> </ul>
1.3. Clinical and non-clinical staff are clear about their respective roles and responsibilities and the CPD and wider resources available to them to support the delivery of prevention, health improvement and inequalities activities.	A range of CPD and resources are available to clinical and non-clinical staff. Training plans are in place, and delivered, which reflect local, and national prevention, health improvement and inequalities priorities.	Completion of training across range of clinical and non-clinical staff groups.	Delivery of prevention, health improvement and inequalities activities can be demonstrated by range of clinical and non-clinical staff. A process is in place to measure the outcomes of the activities.	1	There is an <b>NHS Lanarkshire Learning Plan 2019 – 2021</b> . Learnpro is the learning platform used across NHS Lanarkshire now linking with TURAS. Staff are asked to complete compulsory modules that are monitored within departments. However, there is no collation of data across non-compulsory/mandatory modules where Health Improvement and inequalities modules are housed.  Access to Improving Health: Developing Effective Practice (IH: DEP) training is available for all staff across NHS Lanarkshire. A total of 63 staff have completed the course, 15 of whom completed in 2018. However, as with all training provision, there are barriers to access for many clinical staff in particular, reducing the number accessing this course. There is a proposal to create a shortened

					<p>course for acute clinical staff in the future.</p> <p>There is a Practice Development Centre for NMAHPs ensuring a quality and inequalities sensitive practice ethos is applied across the NMHAP spectrum. This is outlined in the <b>NHS Lanarkshire NMAHP 5year Strategic Enhancement Plan</b> and the <b>NHS Lanarkshire (Local Delivery Plan) NMAHP Strategy Map 2019/20</b>.</p> <p>Examples of training combining prevention, health improvement and health inequalities are delivered via the BBV Networks. In the last year there have been 372 participants at training offered by the BBV and Sexual Health Promotion Team.</p>
<p>1.4. There are robust arrangements in place for monitoring and evaluating the impact of prevention, health improvement and inequalities activity on patient and staff outcomes. Where data and systems need to be developed and/or improved, there is senior support and plans for</p>	<p>Plans in place to monitor and evaluate the impact of prevention, health improvement and inequalities activity on patient and staff outcomes.</p>	<p>Implementation underway with progress made in embedding health improvement prompts within clinical processes and systems.</p>	<p>Health improvement and inequalities prompts are embedded within clinical processes and systems and monitoring and evaluation arrangements are in place to capture the impact on</p>	<p>2</p>	<p>A <b>Health Inequalities Framework (HEF)</b> is used to assess and evaluate patient outcomes within the MHL D service. However, this is not embedded elsewhere.</p> <p>Routine Enquiry in Health Visiting for financial inclusion, undertakes screening and referral where required.</p> <p>MIDIS reports on financial inclusion, but not all IT systems</p>

<p>doing so - for example, IT systems for referrals and audit.</p>			<p>patient and staff outcomes.</p>		<p>provide these reports, however the MILAN system can collect data from all the different systems, auditing the information.</p> <p>Maternity Services operate the Badgernet IT system for collecting data (including health inequalities and health improvement data) referral and support is provided dependent upon findings e.g. tobacco control, financial inclusion.</p> <p>The Practice Development Centre have devised a system to measure health inequalities in the <b>Missed Care Tool</b>.</p>
<p>1.5. There is a plan for embedding prevention, health improvement and inequalities within action to address local clinical priorities, and aligned to existing and planned health and social care initiatives and transformational programme changes.</p>	<p>Plans in place for embedding prevention, health improvement and inequalities within action to address local clinical priorities.</p>	<p>Progress has been made on embedding prevention, health improvement and inequalities within local plans.</p>	<p>Health improvement and inequalities interventions are embedded across a range of local clinical priorities, and improvement and monitoring arrangements are in place to capture the action undertaken.</p>	<p>2</p>	<p>Person Centred Care (PCC) is embedded throughout <b>Achieving Excellence 2017</b> and the <b>CAAS Standards</b>.</p> <p>Prevention and PCC is embedded in the <b>Health and Social Care Strategic Commissioning Plans</b> for North and South Lanarkshire and in the <b>NHS Lanarkshire Local Delivery Plan 2018-2019</b> and <b>Realistic Medicine</b> agenda.</p> <p>NHS Lanarkshire's Healthcare Strategy "<b>Achieving Excellence</b>", advocates the development of pathways for all Long Term</p>



					<p>Conditions (LTC) with particular focus on multi-morbidity.</p> <p>To achieve this ambition, NHS Lanarkshire established a LTC Short Life Working Group (SLWG) in April 2017, one of its main objectives was to facilitate the evolution of disease specific MCNs into a single LTC Hub working to the original key principles of Networks but encompassing all LTCs.</p> <p>In addition, NHS Lanarkshire has introduced House of Care through the Transformation of Primary Care and Mental Health Programme. The main focus of this workstream has been to support the implementation of Care and Support Planning (C&amp;SP) within GP Practices as well as some Community and Specialist teams.</p>
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**OUTCOME 2** - Patients are routinely assessed for health improvement and inequalities as part of their person centred assessment and care. Where appropriate, they are offered quality assured interventions that improve their health outcomes and support their clinical treatment, rehabilitation and on-going management of long term conditions.

Indicator	Level			Self-assessment score	Evidence to support self-assessment score
	1	2	3		
2.1 The organisation embeds health improvement interventions and builds evidence of impact on patient outcomes. Activity should take account the new national public health priorities.	Pathways to a range of health improvement and health inequalities services according to local and national priorities are in place.	Health improvement and health inequality interventions are embedded in systems and person centred care planning and delivery.	A process to measure (delivery) impact of health improvement interventions and build evidence is in place, to support scale and spread of activity.	1	<p>Health Improvement outcomes are included in the NHS Lanarkshire, <b>CAAS standards for Acute and GP Hospitals 2017</b>.</p> <p>The NHS Lanarkshire, <b>HPHS Holistic Needs Assessment Tool</b> is operational within wards at one acute hospital, University Hospital Hairmyres, but not embedded within patient pathways and not measurable.</p> <p>HEF is used in Mental Health and Learning Disabilities.</p> <p>Key Performance Indicators (KPIs) are reported via Chief Executive Performance Reviews. Health Inequalities and Prevention is reported into the <i>Governance Committee</i>: Healthcare Quality Assurance and Improvement via <b>Lanarkshire NHS Board</b>,</p>

					<p><b>Integrated Corporate Performance Reports.</b></p> <p>There are examples of good practice within certain areas but work is required to embed this practice more widely, e.g.</p> <ul style="list-style-type: none"> <li>• Active and independent living programme</li> <li>• Cancer Research UK – weight management</li> <li>• MHL D - HEF</li> </ul>
<p>2.2 Staff are supported to develop their knowledge and skills and to incorporate prevention, health improvement and inequalities sensitive practice into routine responsibilities and practice.</p>	<p>There is promotion of local and national training to relevant clinical and non-clinical staff.</p>	<p>Agreement of priority areas, and delivery of, targeted training for clinical and non-clinical staff is in place to support the adoption of prevention, health improvement and inequalities sensitive practice into routine responsibilities and practice.</p>	<p>The adoption of prevention, health improvement and inequalities sensitive practice is embedded into routine responsibilities and practice. Learning and personal development plans support individuals demonstrate their competence in, and delivery of, health improvement and inequalities activities.</p>	<p>2</p>	<p>Staff complete their individual PDP and TURAS requirements annually. This is monitored by individual departments.</p> <p>The Health Improvement and Public Health departments offer CPD and training opportunities in relation to prevention, health improvement and inequalities sensitive practice within rolling programmes that are available to clinical and non-clinical staff.</p> <p>There are links with the NHS Lanarkshire Practice Development Centre and University West of Scotland Nursing and Midwifery faculty, to embed health improvement and inequalities sensitive practice into routine nursing and midwifery practice and</p>

					<p>Future Nurse education, via the NMC Standards of Proficiency for Registered Nurses (Platform 2 - Promoting Health and Preventing Ill Health).</p> <p><b>CAAS Standards for Acute and GP Hospitals 2017</b> identifies need for staff training to deliver behaviour change techniques and awareness of health inequalities. Database of training offered and taken-up in relation to BBV and Sexual Health. IH: DEP course offered bi-annually in Lanarkshire where capacity allows.</p>
<p>2.3 To build and sustain clinical leadership, relevant professional with governance groups such as Managed Clinical Networks, Area Clinical Forums and Area Partnership Forum. Ensuring that engagement and leadership are aligned to systems for prevention, health improvement and inequalities to</p>	<p>There is evidence of engagement with relevant professional and governance groups such as Managed Clinical Networks, Area Clinical Forums and Area Partnership Forum.</p>	<p>Evidence of delivery of prevention, health improvement and inequalities to support local clinical priorities which has resulted from engagement with one or more of the fora.</p>	<p>Monitoring and improvement approaches are in place to identify the impact of clinical leadership and engagement on prevention, health improvement and inequalities.</p>	<p>2</p>	<p>MCNs exist for the following disciplines</p> <ul style="list-style-type: none"> <li>• Blood Borne Viruses</li> <li>• Stroke</li> </ul> <p>There are now Special Interest Groups formed from the Long Term Conditions Hub/House of Care and along with the MCNs which have prevention, health improvement and inequalities embedded within delivery and action plans. See Indicator 1.5 re LTC and HoC.</p>

support local clinical priorities.					
2.4 Routine assessment for health improvement and inequalities is embedded within person-centred care planning and evidence based support pathways are in place.	Awareness and training for routine assessment is in place, supported by a range of pathways within person centred care planning.	Patient documentation (any) contains prompts / questions for health improvement and health inequalities and evidence based support /referral pathways are in place.	Monitoring and improvement approaches, such as routine audit cycles, are in place to identify the impact of delivery of routine assessment and subsequent onward referrals.	2	There is evidence of health improvement in the <b>CAAS Standards for Acute and GP Hospitals 2017</b> applied in PCC planning. Routine enquiry of physical activity, smoking cessation, weight management, financial stress, alcohol, homelessness and other social and environmental factors. HPHS HNA Tool contains prompts to raise the issue with individuals though not used routinely across all settings.
2.5 In addition to health improvement needs, the broad social needs of patients are identified and supported through the development of onward referral pathways including, for example, financial inclusion, fuel poverty, homelessness, employability, food poverty and carers' support.	Social need referral pathways are in place, according to local and national priorities.	Referral pathways are in place and embedded within person centred care planning.	Monitoring and / or evaluation arrangements are in place which can demonstrate the contribution that local referral pathways make to the causes of ill health.	2	Refer to <b>CAAS Standards for Acute and GP Hospitals 2017</b> . The <b>HPHS HNA Tool</b> also supports routine enquiry regarding social needs of patients. North and South HSCPs have Child Poverty plans in progress and will be submitted to Scottish Government in June 2019. Currently, the Badgernet maternity system is equipped to prompt midwives around financial inclusion and onward referral where necessary.

<p>2.6 The organisation has a structured approach to partnership working with public and voluntary sector partners to jointly plan and resource the provision needed to meet patient needs.</p>	<p>Identifying and engaging with partners based on local and national priorities.</p>	<p>Partnership agreement or equivalent is in place – resource/ plan.</p>	<p>Reporting and evaluation mechanisms are in place.</p>	<p>3</p>	<p>There is wide engagement with voluntary sector agencies related to local need and in line with local priorities and plans.</p> <p><b>NHS Lanarkshire Public Reference Forum</b> is a collaborative partnership involving members of the public and staff to discuss subjects of public interest in relation to health and social care within NHS Lanarkshire. Membership of the Forum includes representatives from</p> <ul style="list-style-type: none"> <li>• North Lanarkshire Public Partnership Forum (NLPPF);</li> <li>• South Lanarkshire Health and Social Care Forum (SLHSCF);</li> </ul> <p>This list is not exhaustive.</p> <p>Service Level Agreements (SLA) are in place for third sector agencies employed to carry out work for BBV Networks. These are measured via Performance Review processes. North and South Lanarkshire HSCPs have commissioning frameworks with third sector interfaces. House of Care, links with Voluntary Action South Lanarkshire (VASLAN) and Voluntary Action North Lanarkshire</p>
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					(VANL) in relation to local priorities. Examples of agencies providing support other than VANL and VASLAN are as follows: <ul style="list-style-type: none"> <li>• LANDED Peer Education</li> <li>• Phoenix Futures</li> <li>• Positive Support</li> <li>• Princes Royal Carers Trust</li> <li>• Terrence Higgins Trust</li> <li>• Waverley Care</li> </ul>
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**OUTCOME 3 - All staff work in an environment that promotes physical and mental health, safety and wellbeing.**

Indicator	Level			Self-assessment score	Evidence to support self-assessment score
	1	2	3		
3.1 The organisation has a strategy for prevention, health improvement and inequalities, developed in conjunction with staff, workforce leads and including local and national Staff Governance arrangements, for improving staff health.	Prevention, health improvement and inequalities incorporated into organisational strategy.	The strategy has a delivery/ action plan and governance arrangements in place, with executive staff buy-in and leadership.	All staff health and wellbeing outcomes embedded within organisational performance management arrangements.	2	NHS Lanarkshire has a Healthy Working Lives Team providing strategic and operational support to staff health and wellbeing. A <b>Healthy Working Lives Corporate Strategy 2015-2018</b> and Action Plan, is in place with the new strategy for 2019-2021 in the process of being finalised. Direction and governance is provided by the Occupational Health and Safety Performance Group (OHSPG) with strategic direction via the <b>Occupational Health and Safety Governance and</b>

					<p><b>Strategic Framework 2017-2020.</b> The OHSP Group report to the Staff Governance Committee and provide reports to the Corporate Management Team. The supporting structures and their associated strategies and action plans are detailed here:</p> <ul style="list-style-type: none"> <li>• NHS Lanarkshire SALUS Occupational Health and Safety</li> <li>• Staff Governance Action Plan</li> </ul> <p>NHS Lanarkshire have a Spiritual Care and Wellbeing Department, endorsed and supported by NMAHP Senior Leadership Committee under governance of the Healthcare Quality Assurance and Improvement Committee.</p> <p>The National Health and Social Care Chaplaincy and Spiritual Care Strategy is followed with a local strategy being developed. Currently, there are <b>Spiritual Care Good Practice Guidelines 2018-2021</b> in place.</p> <p>The Spiritual Care and Wellbeing Department works in tandem with the services offered by Occupational Health, HR and Healthy</p>
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					<p>Working Lives, providing staff support as requested.</p> <p>There is great breadth and depth of work being undertaken enabling and improving the lives of all staff and patients in Lanarkshire.</p> <p>Some elements of the Spiritual Care service is available 24 hours a day e.g. bereavement support telephone line.</p>
<p>3.2 The strategy is developed in the context of wider staff policies and is based on a robust understanding of local staff health profile and the key contributors to ill-health. Short, medium and long term actions are developed with staff and relevant services, such as Occupational Health.</p>	<p>Evidence of local staff health needs being assessed and identification of harder to reach health groups' needs incorporated into strategy.</p>	<p>Short, medium and long term action plans and performance indicators are developed in partnership with staff.</p>	<p>Long, medium and short term actions on staff health and wellbeing are integrated into organisational development and all staff work in an environment that promotes physical and mental health, safety and wellbeing.</p>	2	<p>The Healthy Working Lives Team carried out an <b>Employee Wellbeing Survey (EWS) in 2016</b>. This is due to be repeated in Autumn 2019. Following survey results, action plans are developed by the HWL co-ordinators group. The impact of second-hand smoke on employees was identified as an issue in the previous EWS and a test of change implemented to address this.</p> <p>Staff Health and Wellbeing is supported by SALUS Occupational Health with a range of support services in place e.g. mental health; counselling. Quarterly and Annual Health and Safety reports are</p>

					<p>submitted to the governing structure of OHSP Group and action plans developed from there.</p> <p>Health &amp; Safety Control Books provide the infrastructure to manage Health and Safety across NHS Lanarkshire. Control Books are audited on a three year cycle to ensure compliance with NHS Lanarkshire policies and procedures including, but not restricted, to the reporting of Health &amp; Safety issues and identification of new risks.</p> <p>NMAHP are in the process of carrying out a <b>Psychological Safety Survey</b> for all members, profiling how staff feel in the workplace. Action plans will result from the evidence obtained.</p> <p>The Money Worries app is available for staff and patients providing access to financial inclusion services.</p> <p>The HPHS Health Needs Assessment Tool is available to support staff as well as patients with access links to amongst others, physical activity programmes.</p>
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3.3 In addition to absence monitoring data, the organisation has an evaluation framework to support the strategy and monitoring and impact arrangements should be developed.	A clear plan is in place to support the monitoring of, and assess associated impact of the strategy.	Monitoring and evaluation arrangements are in place and evaluation findings are discussed with staff.	Evaluation of the impact of the strategy on staff health and wellbeing is reported, and learning is incorporated into actions.	1	<p><b>Everyone Matters: 20:20 Workforce Vision NHS Lanarkshire Implementation Plan 2019-2020</b> provides performance monitoring to the national plan.</p> <p>The strategies/action plans for Mental Health, Occupational Health, Spiritual Care, help to support the vision. However, further monitoring and assessment of impact out-with the 3 yearly Employee Wellbeing Survey and iMatter conduit, is required.</p> <p>Opportunities to take a more coordinated and strategic approach to this work are being scoped.</p>
3.4 In line with national Staff Governance and Workforce 20:20, staff feel able to raise their own health issues and are aware of the support available. To improve equity in health outcomes, the organisation should specifically address the needs of harder to reach staff who do not	Mechanisms are in place to identify harder to reach staff and staff are aware of health and wellbeing support available to them and know how to access it.	Interventions are targeted accordingly and proportionately for the needs of harder to reach staff.	Monitoring and improvement processes are in place to identify impact on staff outcomes of interventions and the impact on harder to reach staff.	2	NHS Lanarkshire, as an organisation, ask that all staff have access to 1-2-1 sessions, at regular intervals, with their line manager. This is a forum to raise concerns around their health and to seek further support via Staff Side or Occupational Health.

traditionally take up health improvement support; e.g. those who are lower paid, higher risk of sickness absence, etc.

Information on staff support services is available on the local NHS Lanarkshire intranet site, Firstport, with information on how to self-refer. SALUS, Occupational Health has dedicated pages on the site.

Initiatives through the Healthy Working Lives Team and Occupational Health, have identified harder to reach groups and implemented specific programmes for them to improve identified health concerns (reported on last year). However, further work is required to identify and support all groups of staff.

The Spiritual Care and Wellbeing department have the facility to provide support for staff in a number of ways:

- Values Based Reflective Practice (VBRP)
- Critical Incidence Stress Management (CISM)
- Bereavement support and helpline (24hrs) for staff
- Mindfulness sessions
- Paws for Stress – therapist sessions for staff
- Schwartz Rounds

					<p>Not all of these supportive services are available on all sites.</p> <p>Access to information on Spiritual Care services is available in a variety of formats but similarly, not all staff may be aware of the support available.</p> <p>‘What Matters to You?’, days are held annually that aim to encourage and support meaningful conversations between people who provide health and social care and the people, families and carers who receive health and social care.</p> <p>A staff choir has recently been set-up to perform at the annual Staff Awards ceremony, recognising and celebrating the success of staff throughout NHS Lanarkshire.</p>
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**OUTCOME 4 - The hospital environment is designed and maintained to support and promote the health and wellbeing of staff, patients and visitors.**

Indicator	Level			Self-assessment score	Evidence to support self-assessment score
	1	2	3		
4.1 The organisation, while maintaining existing hospital food standards in relation to retail, catering and trolley services as well as patient food, strives to improve the hospital experience by offering more choices.	The organisation is fully compliant with national hospital food retail, trolley services (Healthcare Retail Standard) and hospital catering (Healthy Living	A local quality assurance system is in place to support achievement and ongoing compliance with national hospital food standards.	The organisation is an exemplar in their offer of healthier food options in catering and retail establishments and through the leadership shown for a healthier food environment and	2	NHS Lanarkshire is fully compliant with the Healthcare Retail Standards and Healthy Living Plus Award. NHS Lanarkshire banned the sale of full sugar drinks in vending machines and on-site shops, which is above the national standard. Compliance

	Award +) standards.		culture across the organisation.		with the standards is assessed by regular audits. Food co-operatives (Roots and Fruits) is in place across the three acute hospital sites and in a number of community settings. These co-ops offer fruit and vegetables at keen prices. There is a <b>Catering Hospitality Policy (on NHS Lanarkshire sites) 2018</b> , endorsed and governed by the Corporate Management Team in place and this ensures that hospitality complies with the <b>NHS Lanarkshire Healthy Eating Policy for Staff and Visitors</b> .
4.2 The organisation has introduced relevant criteria to areas not yet in compliance, in particular around vending, hospitality, pop-up shops and mobile vans operating in their areas. The organisation must be able to demonstrate that affordable, healthy options are available at any point of the day, including for	The organisation has plans in place to assess and measure compliance for one or more of vending, hospitality and pop-up shops operating in their areas, against local or national criteria.	The organisation assesses compliance of all vending, hospitality and pop-up shops operating in their areas, against local or national criteria, and a local process is in place to address breaches.	The organisation is fully compliant with vending, hospitality and pop-up shops operating in their areas, against local or national criteria, and a local process is in place to address identified breaches. The organisation has plans in place for the provision of healthier	1	<b>NHS Lanarkshire Healthy Weight Strategy 2017</b> is in place. Amongst the Strategic Objectives, are the following: <ul style="list-style-type: none"> <li>• To reduce exposure to energy dense food and drink and offer opportunities for choosing healthier food and drink options.</li> <li>• To reduce health inequalities and premature mortality by</li> </ul>

<p>those staff working night shifts.</p>			<p>food options for staff and visitors during any part of the day, including night shifts.</p>		<p>reducing overweight and obesity in all communities</p> <p>A monitoring group has been set up and an Implementation Plan has been developed that is utilised as a monitoring framework. Activity is monitored through the Population Health and Primary Care and Community Services Committee in NHS Lanarkshire. The LHWS will also report to the Joint Integration Boards in both North and South Lanarkshire.</p> <p>Vending machines comply with the Healthy Living Plus Award and healthy options are on offer at all times, including on night-shift. These are monitored by the Hotel Services Manager. Mobile vans and pop-up shops require vigilance and supporting plans require to be written to ensure compliance.</p>
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<p>4.3 The organisation can demonstrate that opportunities for physical activity (including active travel) in both the indoor and outdoor estate are available and are promoted to patients, staff and visitors.</p>	<p>Physical activity opportunities, including active travel opportunities, are available in either the indoor / outdoor estate for patients, staff and visitors.</p>	<p>Clinical services are routinely raising the issue of physical activity through the delivery of brief advice, signposting and or referral.</p> <p>Physical activity opportunities, including active travel opportunities, available and promoted to patients, staff and visitors.</p>	<p>Clinical services apply the national physical activity pathway in the design and delivery of routine patient care. Active Travel Plan developed at NHS Board level and is implemented across all NHS Board sites. Monitoring arrangements are in place to establish uptake of opportunities, including measurement of uptake by harder to reach staff groups.</p>	<p>2</p>	<p>NHS Lanarkshire is the first health board to have a Green Health Partnership and aims to improve health and reduce health inequalities by making more use of Scotland's outdoors as 'Our Natural Health Service'. A 3 year plan to monitor and assess progress against local and national outcomes is in place. This aligns with the <b>Lanarkshire Mental Health and Wellbeing Strategy and Health and Social Care Delivery Plans</b> and with the national plans of Active Scotland Delivery Plan 2017 and the GMS Contract Scotland 2018. Other areas of development include:</p> <ul style="list-style-type: none"> <li>• The Greenspace portal - information on green health activities across Lanarkshire, is promoted to staff and patients: <b><a href="http://www.bit.do/lan-greenspace">www.bit.do/lan-greenspace</a></b></li> <li>• An active travel guide is in the process of being produced called '<b>Walk, Ride Lanarkshire</b>.'</li> <li>• 4 community hospital sites offer weekly</li> </ul>
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					<p>gardening sessions for staff, patients and volunteers.</p> <ul style="list-style-type: none"> <li>• £12k funding received from Sustrans to work with partners to improve awareness and use of an active travel route from Wishaw train station to University Hospital Wishaw.</li> <li>• NHSL has a Bike Users Group (BUG) for staff. HWL reps also undertook a review of bike lockers and shower facilities to support this leading to improved facilities on some sites.</li> <li>• Healthy Working Lives provide regular staff walking challenges. In addition to this, there is a Paths For All workplace walking challenge, offering at least 4 challenges per year open to staff.</li> <li>• 'Medal Routes' are short walking routes available around the hospital grounds for staff/patients/visitors.</li> <li>• The <b>Active Travel Plan</b> is being refreshed and active travel is encouraged with a</li> </ul>
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					<p>staff bike loan scheme available (BUG).</p> <ul style="list-style-type: none"> <li>A corporate gym membership is available for staff across the organisation.</li> </ul> <p>Further evidence available on request.</p> <p>Using the National Physical Activity Pathway, staff can raise the issue of physical activity in a number of ways. There is a referral system called the <b>Physical Activity Prescription</b> in South Lanarkshire where patients can access local gyms for free for a set period. There is a similar programme in North Lanarkshire, called <b>Active Health</b>. The <b>HPHS Health Needs Assessment Tool</b> also provides information on physical activity and how staff can raise the issue with patients.</p>
4.4 The organisations can demonstrate that staff and contractors are appropriately trained and supported to provide advice and guidance for staff, visitors, contractors	A smoke-free policy is in place, and staff are aware of their roles and responsibilities in relation to smoking on hospital grounds.	Policy is implemented and embedded across organisation.	Local monitoring of compliance of smoke-free grounds is underway, and monitoring informs local actions to support compliance.	1	A smoke-free strategy is in place: <b>Smoke-free Lanarkshire – For you, for children, forever: Lanarkshire Tobacco Control Strategy, 2018-2023</b>

<p>and patients who attempt to smoke on hospital grounds.</p>					<p>with a concomitant 5 year action plan.</p> <p>There is a management of nicotine addiction tool and <b>Standard Operating Procedures</b> for supporting hospital staff to implement the no smoking policy however this is not embedded in practice and further work is required with acute management to review and agree improvement actions and monitoring through regular audit cycles. The forthcoming national smoke free grounds legislation should support policy implementation.</p>
<p>4.5 In line with the Procurement Reform (Scotland) Act 2014, procurement policy supports fair work practices, sustainability, community benefits and ethical supply chain.</p>	<p>Local procurement policy is in line with the Procurement Reform (Scotland) Act 2014.</p>	<p>Prevention, health inequalities and inequalities are considered as part of the scoring and evaluation of bids for local contracts.</p>	<p>The organisation can demonstrate health inequalities value and /or community benefit across a range of procurement activities.</p>	<p>2</p>	<p>There is an <b>NHS Lanarkshire Procurement Strategy 2017/2018 – 2019/2020</b> compliant with the Procurement Reform (Scotland) Act 2014, committing to the requirements of Corporate Social Responsibility re sustainability community benefits and ethical supply chain, when procuring goods and services. Evidence of health inequalities value and community benefit is seen in</p>

					<p>the 'once for Scotland' framework of procuring a range of products e.g. condoms.</p> <p>NHS Lanarkshire is also accredited as a Real Living Wage (RLW) employer and was the first territorial board in Scotland to achieve this status. NHS Lanarkshire Procurement was instrumental in achieving accreditation as this required considerable engagement with the supply base and providing the appropriate evidence supporting accreditation.</p>
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