NHS Board Meeting 30 October 2019

Lanarkshire NHS Board Kirklands Fallside Road Bothwell G71 8BB Telephone: 01698 855500 www.nhslanarkshire.scot.nhs.uk



SUBJECT: "ACHIEVING EXCELLENCE –PROGRESSING THE STRATEGY DELIVERY PLAN - YEAR 3"

1. **PURPOSE**

The progress paper is coming to the Board:

For approval		For endorsement		To note	
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Achieving Excellence (AE) 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 (Year 3) on the Plans for Service Change as set out in Section 7 of Achieving Excellence.

Board members are asked to note the AE 2019/20 Reporting Programme and the completed and planned service improvements as detailed in the "Pipeline" table.

2. ROUTE TO THE BOARD

The paper has been:

Prepared Reviewed Endorsed

by the Corporate Management Team on 21st October 2019.

3. SUMMARY OF KEY ISSUES

3.1 Reporting Progress

The Achieving Excellence (AE) Short Life Working Group (SLWG) status reports and Pipeline Table updates have been used throughout 2018 and 2019 to produce progress reports for the PP&RC/NHS Board. This reporting structure continues to evolve and now reflects the Frailty Strategy work-stream within the Long Term Conditions Hub (previously a SLWG) and the work undertaken by the Child Health Commissioner Steering Group.

3.1.1 Achieving Excellence – 2019/20 Progress Reporting Programme

The NHS Board agreed in January 2019 that this reporting process should be augmented with a more detailed reporting programme which would facilitate forward planning to identify what work stream elements should be reported on in detail throughout the year to both the PP&RC and the NHS Board. This Programme has continued to develop and the most recent version of the Programme is listed at Appendix 1.

3.1.2 Projects Completed Year Three & Beyond

Since we published Achieving Excellence, a significant number of service improvements have been achieved, a summary of projects completed during 2019/20 is listed below. A detailed list of service achievements and future planned service changes are listed in the "Pipeline" table at Appendix 2.

During the period April to September 2019 we:

- identified technology requirements for information sharing and a Strategy was approved by the NHS Board in April;
- implemented the LIMS (Laboratory Information Management System) in April;
- established community delivery as default option for all appropriate oral SACT (Systemic Ant- Cancer Therapies) by June;
- fully implemented the Re-ablement Teams in North Lanarkshire by June;
- concluded the sale of the Law Hospital site in June;
- completed the Aseptic pharmacy facility (concentration of service from 4 locations to 1) in July;
- implemented HEPMA (Hospital Electronic Prescribing Management System) Go-Live at UHM General Inpatients by August;
- concluded the first round of space utilisation surveys, with information shared and actions agreed by August;
- completed the commissioning of carer support services in North Lanarkshire by August;
- developed the Mental Health & Wellbeing Strategy which was approved in September; and
- reviewed and refreshed the ADP Infrastructure within North Lanarkshire and developed a plan to address national and local imperatives in September.

3.1.3 Achieving Excellence Forum

The Achieving Excellence Forum was established in recognition of the value of having the senior leadership team from across the whole system meet to review the overarching service improvement plan and to consider the progress of Lanarkshire in fulfilling the key ambitions of Achieving Excellence. The Forum provides senior staff an opportunity:

- to acknowledge what has been achieved;
- for wider understanding of the whole-system approach;
- for engagement between the work-streams and the wider clinical and general leadership; and
- for networking.

The Achieving Excellence Forum will meet twice a year, with the NHS Board Chief Executive and work-stream leads delivering presentations on key work programmes. The inaugural event took place in October 2018, with the second event held in May 2019. Feedback from each event has been very positive and has informed the development of subsequent events, with planning now underway for the third event scheduled to take place in November 2019.

3.2 Internal Audit Review

The progress reports produced for the Strategic Delivery Team (SDT) summarise progress, providing assurance on the overall AE implementation programme. This approach was reviewed by Internal Audit in May-June 2019 to ensure "the overall management of delivery of Achieving Excellence and the delivery of effective and efficient person-centered services, planning and performance management with community planning partners and other NHS bodies".

The specific areas examined by Internal Audit as part of the review in relation to the Strategic Planning were:

- the overall Achieving Excellence work plan to deliver objectives of the strategy and the associated control measures to enable adjustments to the work plan;
- work plan progress monitoring by the Strategic Delivery Team and reported to the Board/PPRC; and
- strategic support to drive delivery of Achieving Excellence.

The specific areas that were covered as part of the review in relation to the Achieving Excellence Programme – Assurance & Governance were:

- Achieving Excellence has been approved and promoted throughout the organisation and the wider public;
- the NHS Board has received and approved governance structures and performance reports in relation to the implementation of Achieving Excellence; and
- in relation to the Achieving Excellence Programme, the role of established committees and/or groups and their reporting to the relevant governance group was clear and comprehensive.

The Internal Audit review concluded that, "based on the examination of the control structure and the procedures in place, we consider that the system provides substantial assurance that objectives are met".

Two areas were identified as meriting attention: development of an assessment of risk for the Achieving Excellence programme; and inclusion of a RAG definition within regular status reports. This has since been addressed and is now reflected in the bi-monthly status reports prepared by the AE Short Life Working Groups for consideration by the Strategic Delivery Team.

4. STRATEGIC CONTEXT

This paper links to the following:

Corporate objectives	AOP	Government policy	\square
Government directive	Statutory requirement	AHF/local policy	\square
Urgent operational issue	Other		

5. **CONTRIBUTION TO QUALITY**

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

Three Quality Ambitions:

Safe 🛛 Effective 🖾 Person Centred

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)	\square
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 Strategic Delivery Team (SDT) 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 leadership	Effective partnerships	Governance and	
		accountability	
Use of resources	Performance	Equality	
	Management		
Sustainability			
Management			

10. EQUALITY AND DIVERSITY IMPACT ASSESSMENT / FAIRER SCOTLAND DUTY

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 Strategic Delivery Team in partnership with the Scottish Health Council and other stakeholders.

12. ACTIONS FOR THE BOARD

The Board is asked to:

Approve	Endorse	Identify further actions	
Note	Accept the risk identified	Ask for a further report	\square

- > note the updated Achieving Excellence 2019/20 Progress Reporting Programme;
- note the updated Pipeline Table;
- ▶ note the outcome from the Internal Review; and
- agree to receive performance and assurance reports from the SDT at future meetings.

13. FURTHER INFORMATION

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

Roslyn Rafferty, Strategy & Performance Manager, Telephone: 01698 858210.

Colin Lauder, Director of Planning, Property & Performance

Achieving Excellence - 2019/20 Progress Reporting Programme

Board/	Date of	SLWG & Work-stream	Lead	Status
Committee	Meeting			
NHS Board	30 th Jan. 2019	Acute Planned Care SLWG – SACT (Systemic Anti-Cancer Therapy)	Heather Knox	\checkmark
PP&RC	27 th Feb. 2019	Building Community Capacity SLWG – Configuration of non - Acute Beds in Lanarkshire	Val De Souza/ Ross McGuffie	\checkmark
NHS Board	27 th Mar. 2019	Infrastructure SLWG – MRRP Location of New Hospital - deferred	Colin Lauder	deferred
PP&RC	24 th Apr.2019	Infrastructure SLWG – -Capital Investment Plan & -AE Consolidated Report (incl. Pipeline & Outcomes updates)	Colin Lauder	~
NHS Board	29 th May 2019	Mental Health Strategy	Anne	\checkmark
			Armstrong	\checkmark
		Acute Planned Care SLWG –	Heather Knox	
PP&RC	26 th Jun. 2019	T&O Project Acute Planned Care SLWG –	Heather Knox	B/F to May Board
Franc	20 Jun 2013	T&O Project - brought forward to May Board	Treather Knox	
				\checkmark
	a ath i a a i a	AE 2019 Progress Reporting- Update	Colin Lauder	
NHS Board	28 th Aug. 2019	Building Community Capacity SLWG –	Val De Souza	\checkmark
		Primary Care Improvement Programme	Ross McGuffie	
		Mental Health Strategy Group	Anne Armstrong	\checkmark
		Infrastructure SLWG -		deferred
		Car parking policy development deferred	Colin Lauder	
PP&RC	25 th Sept. 2019	Long Term Conditions Hub	Alastair Cook	\checkmark
		Infrastructure SLWG - Car parking policy development	Colin Lauder	\checkmark
NHS Board	30 th Oct. 2019	Best Start Strategy Steering Group	Irene Barkby	\checkmark
		AE Consolidated Report (incl. Pipeline)	Colin Lauder	\checkmark
PP&RC	27 th Nov.2019	Acute Planned Care SLWG –	Heather Knox	
		General Surgery		
			Colin Lauder	
		Infrastructure SLWG -		
NHS Board	29 th Jan. 2020	Transport Hub Acute Planned Care SLWG –	Heather Knox	
	23 Jan. 2020	Modernising Outpatients		
PP&RC	26 th Feb.2020	Long Term Conditions Hub	Alastair Cook	

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NHS Board	25 th Mar 2020	Building Community Capacity SLWG –	Val De Souza	
		Maximising the Impact of Third Sector	Ross McGuffie	
		Contributions		

		Position at 14 th October	2019	APPENDIX 2
Projects	Fully Defined Projects	Partially Defined Projects		Emerging Proposals
Completed in	(In date order)	(In date order, where available)		
2019/2020				
Identify technology requirements for information sharing – a draft Strategy was consulted on, and approved by the NHS Board in April 2019 (eHealth SLWG)	General Surgery Redesign – programme board has been established. On-going review of options has delayed option appraisal that was anticipated in Autumn 2019. (Planned Care SLWG)	Review of Day Care & Residential Care undertaken and paper agreed at Social Work Committee on 2 October 2019 re. next steps in implementing same. (BCC SLWG)		Families are happy with the Maternity and Neonatal support, care and service provision in response to their unique set of needs by March 2020. (Best Start SSG)
LIMS (Laboratory Information Management System) implemented by April 2019. (eHealth SLWG)	Mental Health & Wellbeing Strategy launch on 24 th October 2019. (MH Strategy Group)	Undertake workforce and workload planning, financial tracking and performance reviews to identify workforce needs, cost analysis and developmental needs to support the provision of person centred care and implementation of Best Start by November 2019. (Best Start SSG)		Improve and enhance service delivery of the new model by engaging families, staff and key stakeholders by March 2020. (Best Start SSG)
Establish community delivery as default option for all appropriate oral SACT – introduce systems for community pharmacy dispensing of enzalutamide and abiraterone for patients attending the urology oncology clinic by June 2019. (Planned Care SLWG)	Working with the Scottish Ambulance Service (SAS) and Strathclyde Partnership for Transport (SPT) in a test of change, which informed the development of a Transport Hub. Progress report to the PPRC in November 2019. (Infrastructure SLWG)	Rebranding of Community Capacity Building and Carer Support to Community Solutions being actioned in North by December 2019. (BCC SLWG)		Roll out implementation of shared care model for monitoring and prescribing of hydroxycarbamide for patients with ET and PRV (Planned Care SLWG)

			Position at 14 th October 201	9 APPENDIX 2
Projects		Fully Defined Projects	Partially Defined Projects	Emerging Proposals
Completed in		(In date order)	(In date order, where available)	
2019/2020				
Full implementation of the Re- ablement teams by June 2019 (North). (BCC SLWG)		Assess medical workforce requirements to ensure optimisation of cancer units by December 2019. (Planned Care SLWG)	Further implementation of Out Of Hours Review by December 2019. (BCC SLWG)	Office 365 collaboration environment being considered at a national level (eHealth SLWG)
Sale of the Law Hospital site concluded in June 2019. (Infrastructure SLWG)		MRRP public consultation commenced in July 2018 and was completed in October 2018. A report was due to go to the NHS Board in November 2018. This was delayed pending the outcome of the Independent Review which reported in June 2019. Further public engagement is now planned to commence in 2019 to implement the Independent Review Panel's recommendations. (Communications & Engagement SLWG)	Establishment of a Regional Centre of Excellence for Vascular Surgery at UHH will serve the populations of NHS Lanarkshire, NHS Dumfries & Galloway and NHS Ayrshire & Arran. By Summer 2020 all emergency vascular care and all elective inpatient and complex day case vascular care for patients in these three Boards will be delivered at UHH. Outpatient and non-complex Day Case elective work will continue to be delivered as close to the patient as possible. Business case for capital enabling works to be finalised in Autumn 2019 and model of care developed with partners throughout 2019. (Planned Care SLWG)	Patient Notification Service being developed to support 'patient confirmation' process for clinical appointments. This will also introduce digital communication to replace paper based communications. (eHealth SLWG)
Aseptic pharmacy facility	F	Implementation of various aspects of	Revised North Locality and Area Wide	Test of change underway to
(concentration of service from 4		the Carers (Scot) Act by December	structure being implemented following	support the management of
locations to 1) was completed in		2019. (South)	the Review of Integration.	patient early warning scores. This
July 2019.		(BCC SLWG)	Appointments to the revised structure	will lead to the development of a

			[Position at 14 th October	2019	APPENDIX 2
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Completed in		(In date order)		(In date order, where available)		
2019/2020						
(Infrastructure SLWG)				by Jan 2020. (BCC SLWG)		FBC. (eHealth SLWG)
HEPMA (Hospital Electronic Prescribing Management System) Go-Live – UHM General Inpatients by August 2019. (eHealth SLWG) Property – first round of space utilisation surveys concluded, with information shared and actions agreed by August 2019. (Infrastructure SLWG)	se lo 20 Pa pa ar es re of	Indertake a review of community ervice provision as part of wider ocality planning /BCC processes cross South Lanarkshire by December 019. (BCC SLWG) arking Management - proposals aper approved by CMT in January nd short life working group being stablished with staff and patient epresentatives to undertake a series f "tests-of-change" by December 019. (Infrastructure SLWG)		Introduction of revised Locality modelling in South Lanarkshire to incorporate Intermediate Care, rapid access, discharge to assess and Re- ablement by Feb. 2020. (BCC SLWG) Test various models of care delivery to identify best fit for the provision of person-centred care ensuring quality, safety and cost effectiveness throughout this process. Including partnership and HR in this process by March 2020. (Best Start SSG)		Engage workforce, families and key stakeholders to inform, support and enhance implementation of new models. (Best Start SSG) Development of a Lanarkshire children and young people health plan 2020-2023. (Child Health Commissioner Steering Group)
Commissioning of carer support services complete and fully operational in North Lanarkshire providing assessment and supports, as well as collective representation by August 2019. (BCC SLWG)	Im in as Sc Ex cc w cc in	mplement the new model of ntermediate care provision and ssociated use of care facilities in outh Lanarkshire through 2019/20. xtensive consultation work has ontinued through Summer 2019, vith planning consent due to be onsidered for Blantyre development in December 2019. BCC SLWG		Neonatal Level 3 units – four areas are carrying out a pilot and a report from this should be released March 2020. Decision is still awaited in regards to number of level 3 units nationally. (Best Start SSG)		Develop ME-CFS Pathway (LTC SLWG)

		Position at 14 th October 2019	APPENDIX 2	
Projects	Fully Defined Projects	Partially Defined Projects	Emerging Proposals	
Completed in	(In date order)	(In date order, where available)		
2019/2020				
Mental Health & Wellbeing Strategy developed and approved by September 2019. (MH Strategy Group)	Conduct a major upgrade to the IM&T infrastructure - Windows 10 roll-out project confirmed, with funding and plan in place for completion by February 2020. (eHealth SLWG)	Development of the locality model in North Lanarkshire to incorporate Rehabilitation Teams and Discharge to Assess by March 2020. (BCC SLWG)		
ADP Infrastructure within North Lanarkshire reviewed and refreshed. Plan developed to address national and local imperatives by September 2019. (MH Strategy Group)	Implementation of Palliative Care Strategy by February 2020. (BCC SLWG)	Implement Primary Care Mental Health Liaison Nurse Service by March 2020 (MH Strategy Group)	,	
	Full implementation of the Lanarkshire children and young people's health plan (2018-2020) by March 2020. (Child Health Commissioner Steering Group)	Through communication and training engender a culture of person centred leadership and ownership among staff by March 2020. (Best Start SSG)		
	Implement Discharge to Assess - to reduce delayed discharges by March 2020. Work ongoing with acute colleagues to review decision making within acute setting. This has been accelerated during Sept/Oct with SL HSCP staff working in UHH to seek to encourage utilisation of same.	Establish alternative care models and utilise IT systems and digital support to ensure efficiency and effective use of resources by March 2020. (Best Start SSG)		
	(BCC SLWG) HEPMA Go-Live – UHH General	North ADP Strategy being refreshed by		

		Position at 14 th October 2	2019 APPENDIX 2
Projects	Fully Defined Projects	Partially Defined Projects	Emerging Proposals
Completed in	(In date order)	(In date order, where available)	
2019/2020			
	Inpatients by March 2020. (eHealth SLWG)	March 2020 in line with national guidance. (MH Strategy Group)	
	Hospital at Home (H@H) – on-going evolution of service /redefinition of management arrangements (2yr project) completion by March 2020. (BCC SLWG)	Introduce Mental Health ANPs within a Primary Care setting by March 2020. (MH Strategy Group)	
	Implementation of the 8 months contact and the ante natal visit of the Universal Health Visiting Pathway will be completed by March 2020. (BCC SLWG)	Adult Mental Health Community Services - scope out model & develop business case re. "Centres of Excellence" in the community by December 2020. (MH Strategy Group)	
	Create a new MH Crisis and Distress Interventions service model by March 2020. (MH Strategy Group)	Introduce mental health link workers in line with the Action 15 plan by March 2021. (MH Strategy Group)	
	Introduce further aspects of the Technology Enabled Care Programme by March 2020. (BCC SLWG)	Implementing New GMS Contract (Primary Care Improvement Programme) 2018 -2021 (BCC SLWG)	
	Continuation of the 2019/20 disposals & acquisitions programme as endorsed by the NHS Board. (Infrastructure SLWG)	Review of the Intermediate Care Model - Cumbernauld Care Home, Hattonlea and Udston t.b.c. Overall project plan to be defined in 2019, with delivery in 2020/21. (BCC SLWG)	

		Position at 14 th October	r 2019	APPENDIX 2
Projects	Fully Defined Projects	Partially Defined Projects		Emerging Proposals
Completed in	(In date order)	(In date order, where available)		
2019/2020				
	 Development of First Point of Contact progressing with initial testing planned for March 2020 (BCC SLWG)	Repatriate relevant patient groups from cancer centre to cancer unit/s by April 2021 (Planned Care SLWG)		
	Modernising Outpatient Programme Phase 2 Feb 19 – March 20. Increase the use of technology in outpatient pathways and develop the MDT workforce to support capacity. (Planned Care SLWG)	Type 2 Diabetes Prevention, Early Detection and Early Intervention Framework -Utilise diabetes seed funding to allow NHSL to meet the service delivery requirements of the diabetes framework. Will need primary, secondary care and health & social care partnerships, along with Third sector colleagues and groups to support this. (BCC SLWG)	ĸ	
	MRRP Outline Business Case (OBC) by July 2019. This has been delayed and, following the Independent Review, a new programme is being developed. (Infrastructure SLWG)	Determination of possible outcomes following completion of PFI contracts at UHW/UHH – t.b.c. (Infrastructure SLWG)		
	SACT unit - ward 15 at UHM identified for the Cancer Unit "test of change". Construction to be completed May 2020. (Planned Care SLWG)	Lead development of pathway and guideline strategy and develop test pathways. (LTC SLWG)		

			[Position at 14 th October	APPENDIX 2	
Projects		Fully Defined Projects	·	Partially Defined Projects		Emerging Proposals
Completed in		(In date order)		(In date order, where available)		
2019/2020						
	-	Re-profile relevant existing cancer unit services to outreach facilities by July 2020. (Planned Care SLWG)		Explore generic model of rehabilitation (LTC SLWG)		
		Implement outreach service provision for all cancer types using risk stratification criteria by July 2020 (Planned Care SLWG)	۲	Undertake communication campaign to raise awareness and uptake of the LTC preferred models of care (LTC SLWG)		
		Trauma & Orthopaedics Phase 1a - Redesign to separate trauma and elective inpatient care by site. The service and clinical models have been defined and test of change for		Staff are equipped to exercise professional accountability, feel valued and supported in evidencing the impact of the service delivered. (Best Start SSG)		
		selected pathways is underway. Capital funding for laminar flow theatres agreed. Mobile theatre leased from September 2019.			K	
		Commissioning complete by October 2019 when work installing laminar flow will begin. Phased capital work at UHW to free up additional beds now				
		in design phase with completion expected by July 2020. Implementation of Phase 1a expected by August 2020.				
		(Planned Care SLWG)				

		_	Position at 14 th October	2019	APPENDIX 2
Projects	Fully Defined Projects		Partially Defined Projects		Emerging Proposals
Completed in	(In date order)		(In date order, where available)		
2019/2020					
	HEPMA Go-Live – UHW General Inpatients by October 2020. (eHealth SLWG)		Support operational services to implement ACP SBAR recommendations (LTC SLWG)	-	
	HEPMA Go-Live – Complex Specialties and Outpatients by December 2020. (eHealth SLWG)		IT systems and processes utilised to their full potential to enhance and stream line service delivery. (Best Start SSG)		
	Business Case for Community IT System has been approved. Implementation project now in start- up phase. Implementation of Cambric Morse scheduled over April 19 – March 21. N (eHealth SLWG)		Building & Celebrating Communities (B.C.C.) and Prevention & Community Capacity including Third Sector Supports – ongoing. (BCC SLWG)		
	Implement Primary Care Mental Health Liaison Nurse Service by March 2021 (MH Strategy Group)		Establish LTC Patient Information & Self- management Fund (LTC SWG)	-	
	Northern corridor clinics - feasibility study for replacement clinic facilities at Muirhead reported in July 2018 and a full business case is being prepared as part of the 2020/21 capital plan. Plans being revised to incorporate the Hub developments as part of The Plan for North Lanarkshire. This would increase accessibility and space availability by March 2021.		Utilise LTC Framework to develop disease specific pathways that compliment and interact with the generic LTC pathway. (LTC SLWG)		

		Position at 14 th October 2	2019	APPENDIX 2
Projects	Fully Defined Projects	Partially Defined Projects		Emerging Proposals
Completed in	(In date order)	(In date order, where available)		
2019/2020				
	(BCC SLWG)		-	
	Order Comms Implementation by April 2021. (eHealth SLWG)	Reflect the emerging clinical model for 2027 across Lanarkshire as a whole, progressing property strategy as a key enabler in this. (Infrastructure SLWG)	-	
	Implement NMP best practice principles and tiered competency framework by April 2021 (Planned Care SLWG)			
	Optimise existing NMP workforce to deliver pre-assessment and prescribing of SACT by April 2021 (Planned Care SLWG)			
	GP IT Update – programme being re- scheduled, with roll-out commencing April 2020 with plan completed by 2022. (eHealth SLWG) Host biannual LTC Hub workshops to			
	being together Specialty Improvement Groups. (LTC SLWG)			