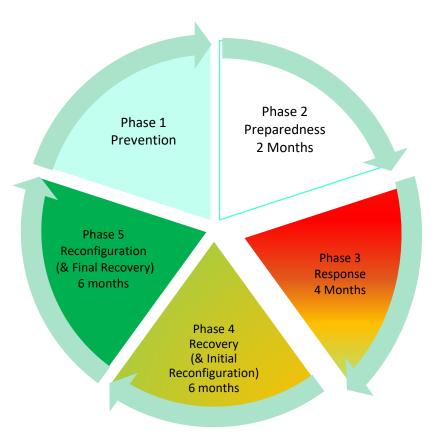
Emergency Reconfiguration and Recovery Organisational SWOT, Strategy Map and Strategic Enhancement Plan

NHS Lanarkshire Emergency Reconfiguration and Recovery SWOT

Strengths (Internal Weaknesses	ternal)
Workforce • Constraints/0	cal Care Resources Capacity of Built Environment stain Several Operational

Opportunities (External)	Threats (External)
Enhanced Partnership WorkingProcesses E-EnablementWhole System Realignment	 Magnitude of the COVID-19 Pandemic Demand for Resources Outstrips Supplies Health and Care Systems Likely to be Overwhelmed

NHS Lanarkshire: Pandemic Strategic Response Phases based on Strathclyde University Modelling



Phase 1 - Reconfiguration & Recovery Prevention

Phase 2 - Reconfiguration & Recovery Preparedness

Months 1-2

Jan - Feb 2020

Phase 3 - Reconfiguration & Recovery Response

Months 3-6

March - June 2020

Phase 4 - Reconfiguration & Recovery Recovery

Months 7-12

July - December 2020

Phase 5 - Reconfiguration & Recovery Reconfiguration

Months 13-18

January - June 2021

NHS LANARKSHIRE <u>EMERGENCY RECONFIGURATION AND RECOVERY</u> STRATEGY MAP 2020/21 <u>v0.9</u>

SGs National

Strategic Object	ctives Wealthi	Wealthier & Fairer Greer		Greener Healthier Safer & Stronger		Smarter				
National Qua Ambitions for NHS		Person Centred		Safe		Effective				
NHS Lanarkshire's Strategic Response to COVID - 19 Whilst Striving to Achieve Excellence and Deliver Person-Centred, Responsive Health and Care to the Population of Lanarkshire										
NHS Lanarkshire's High Level Outcomes Themes	Service Impa	ct Collaboi	rative Impact	Safety/Quality Impact	Financial Impact	Staff Impact	Leadership Impact			
NHS Lanarkshire's Purpose To improve the health of the population of Lanarkshire & support people to live independently at home supported through integrated health & social care working										
NHS Lanarkshire's Essential KPI's	Statutory Responsibility Legislative Requirements Strategic Commissionin Capacity /Capabi Waiting Times Services Strateg	Wo Public Public En Invo Mental I ity Feedbac Concerns	Health and ellbeing Protection gagement and olvement Health Access k, Comments, and Complaints and FOIs	Emergency Planning /Business Resilience /Continuity Infection Prevention and Control Patient Safety and Outcomes Duty of Candour Safety and Quality of the Estate/Built Environment	Revenue, Capital and CRES Integrated Planning Workload and Workforce eHealth and Technology	Recruitment and Selection Health and Safety Health and Wellbeing Workforce Profiles E-Enabled Absence Management Prof Regulation	Communication Clarity of Decisions Ethical Decisions Balance of Controls Ownership and Accountability Culture			

- Process
- Product
- People

2021 Vision: Service stabilised having reconfigured/recovered from the Emergency Response to COVID -19

Issues/Concerns:

Rapid System and Process Changes
Suspension of Multiple Core Services
Ability to Sustain Adequate Staffing
Levels

July – December 2020 Phased Recovery and Reconfiguration Commenced

Current Situation: The Health Board is preparing its Emergency Response to ensure preparedness for the imminent COVID -19 Pandemic

NHS Lanarkshire <u>Emergency Reconfiguration</u> and <u>Recovery</u> Strategic Enhancement Plan (STEP Diagram) 2020/21 <u>DRAFT v0.9</u>

January – June 2021: Fully Recovered and Reconfigured

- Social Care, Primary Care, Community and Hospital Services revised Systems and Processes fully embedded.
- Core Services Re-established with all those identified as being suitable for Redesign scheduled for completion/full implementation aligning where appropriate with the Board Strategy for Achieving Excellence
- Substantive staff deployed effectively. Rolled over Annual Leave allocations absorbed. Any remaining additional temporary workforce being deployed to vacancies or staff bank as appropriate.
- Emergency response being stood down. Lessons Learnt captured and reported. Social Care, Primary Care, Community and Hospital Services gradually reinstating recognised Systems and Processes as appropriate. Areas identified as being suitable for permanent reconfiguration identified and ratified through robust Operational and Corporate Governance mechanisms. COVID19 Community Assessment Centres and Hub function considered.
- Outpatient and Elective Surgical Core Services reinstated as appropriate. Areas ratified for Redesign fully implemented at the earliest opportunity. Home Birthing Option reinstated. Critical Care Capacity gradually reduced.
- Staff returning to substantive roles on a phased basis dependant on ongoing COVID activity. Unused Annual Leave allocations identified and planned on a phased basis. Anticipate and plan for ongoing higher than average absence levels following COVID Pandemic response. Additional temporary workforce reviewed and reduced on phased basis.

March – June 2020 Emergency Response

- All Social Care, Primary Care, Community and Hospital Services operating on an emergency footing as per Mobilisation Plan. COVID19 Community Assessment Centres and Hub established. Annual Operational Plan Performance Tracked and Reported. Revised Corporate governance arrangements aimed at providing essential scrutiny and oversight of key Board business and the response to COVID 19.
- All bar life or limb threatening or urgent suspicion of cancer outpatients and elective surgical services stood down. Exceptions relate to Maternity Services (Albeit Home Births have been suspended); Mental Health; Learning Disabilities; Medical Inpatients; OOHS; A&E; Public Protection and Infection Prevention and Control Services all Sustained. Critical Care Capacity significantly expanded.
- Substantial numbers of staff working out the promal areas of practice. Anticipating significantly higher than average absence levels. Additional temporary workforce rapidly recruited and deployed many with limited experience, skill, knowledge and expertise.