Health Performance and Delivery Directorate Chief Performance Officer, NHSScotland and Director of Delivery and Resilience ITEM 16
Scottish Government
Riaghaltas na h-Alba
gov.scot

T: 0131-244 2480

E: John.Connaghan2@gov.scot

Calum Campbell Chief Executive NHS Lanarkshire Kirklands Fallside Road Bothwell G71 8BB

31 March 2020

Dear Calum

NHS LANARKSHIRE: ANNUAL OPERATIONAL PLAN 2020/21

Thank you for submitting your most recent Annual Operational Plan (AOP) draft, setting out your operational priorities and key actions for 2020/21. May I take this opportunity to thank you and your team for all the hard work that has gone into the preparation of the AOP over the last few months.

I am writing to confirm that I recognise and fully support the fact that the key focus of NHS Lanarkshire at this time is, and for the foreseeable future will be, on responding to the current Covid-19 pandemic and on enacting your Local Mobilisation Plan in conjunction with the National Mobilisation Plan.

In light of this priority, we are taking the latest AOP draft received from you as a 'baseline', which will be held on file for the moment and which will form the basis of a Recovery Plan when we are in a position to begin to consider that process.

For the avoidance of doubt, that does not necessarily mean that we are <u>agreeing</u> your current proposals, particularly in relation to some of the key performance trajectories, but rather that this is the point at which we are pausing our discussions with you on these matters.

I would be grateful if you could note the specific points raised in the paragraphs below.

1. Elective Waiting Times

The WTIP, developed in Oct 2018, outlined the process for reducing the length of time and the number of patients waiting for treatment.

The delivery of the agreed waiting times trajectories within the WTIP, for outpatients and inpatients / daycases by March 2021, represented a significant challenge.

In the present circumstances, and the recent request for all NHS Boards to scale down elective procedures and develop associated mobilisation plans to support actions to address COVID 19, it is recognised that the monitoring of elective performance will require to be paused. Nevertheless, over the preceding period of time, a number of discussions were had,







specifically regarding specialties and quarterly trajectories for 2020 /21. Our final discussion had a provisional position of 800 for outpatients and around 750 for inpatients / daycases by March 2021. We recognise that in these challenging circumstances, these quarterly plans will not be achieved, so this simply indicates the provisional position reached prior to COVID 19. Likewise, no agreement was reached on the allocation of funding to achieve these milestones.

It would be our intention to revisit the elective position post COVID 19, and support you with the development of Recovery Plans. We would envisage that associated with these plans will be financial resource and Insourcing and Outsourcing allocations.

2. Finance

As Accountable Officers, you have responsibility for ensuring that the resources of your Board are used economically, efficiently and effectively. We thank you for the work completed to date to develop your 2020-2023 financial plans and note the scale of challenge facing Boards.

Due to the exceptional circumstances arising from COVID-19, we are pausing work on AOP financial planning and will return to this as soon as possible in 2020-21. At this time, we expect Boards to continue to ensure robust financial management and, as far as possible, to continue to develop plans that secure a balanced financial position.

We will continue to engage with you in respect of the financial implications of COVID-19, and as we receive clarity on the additional funding announced by the UK Government as part of the UK Budget 2020.

Richard McCallum's letter of 20 March 2020, sent to your Director of Finance, provides some additional narrative on this and should be read alongside this letter.

3. Cancer Funding

Delivery of services for cancer, urgent and emergencies will be prioritised throughout the Covid-19 outbreak. To support this your NRAC share of £10 million cancer and diagnostics funding will be released in this month. Any requests for additional funding as part of the overall Covid-19 recovery plan will be discussed and considered at a later date.

4. Winter Planning Funding

Further to advice in the AOP and the agreement to baseline funding of the winter planning allocation we can confirm you will receive an NRAC share of £10m to support early planning for winter pressures across the whole system.

As previously stated, the latest AOP draft will be used as the 'baseline' for engagement later in the year, and we look forward to working with you to deliver on-going improvement of safe and accessible treatment and care.

Yours sincerely

JOHN CONNAGHAN CBE

Chief Performance Officer, NHSScotland and Director of Delivery and Resilience





