NHS Board Meeting 29th July 2020

Lanarkshire NHS Board Kirklands Fallside Road Bothwell G71 8BB



Telephone: 01698 855500

www.nhslanarkshire.scot.nhs.uk

SUBJECT: COVID-19 LESSONS LEARNED

1. PURPOSE			
This paper is coming to	o the Board:		
For approval	For endorsement	To note	
2. ROUTE TO	THE BOARD		
The paper has been:			
Prepared	Reviewed	Endorsed	

by the Director of Public Health and the Director of Human Resources.

3. SUMMARY OF KEY ISSUES

A number of lessons learned exercises have been conducted, principally into the early stages of the Command & Control structures, but also as a direct result of requests for feedback from Scottish Government. This paper provides copies of each of these separate exercises. This is in addition to the lessons learned exercise conducted separately in relation to the Board's Governance Review.

The Resilience Manager commissioned a review of the early lessons learned and a report has been shared with Board Members. The recommendations made have been translated into actions and progress updates forwarded to CMT/Strategic Command for monitoring. The progress made is also captured in the Covid-19 Whole System update paper at item 11.

In addition, Scottish Government sought feedback on two other areas.

The first was through a Covid-19 Lessons Learned - national approach feedback template, which is attached as Appendix 2. This sought feedback on a range of areas, the purpose being to inform the Scottish Government approach to a national programme of work to capture Covid-19 lessons learned across (i) NHSS (ii) the social care sector and (iii) Scottish Government Health and Social Care Directorates.

The second was sponsored through Board Chairs via Directors of Human Resources. NHS Board Chairs were asked to feedback to the Scottish Government about HR processes that have changed, in their view for the better, as a consequence of responding to the pandemic. The reponse from NHS Lanarkshire is set out below in full.

The main areas of practice change in HR during the pandemic in NHS Lanarkshire (NHSL) were in recruitment and employee relations.

Recruitment

In NHSL, we made significant effort to refine process and progress recruitment as quickly as possible—this was supported by enhanced response times from Disclosure Scotland and continuation of this would be supportive going forward. We also introduced an Occupational health self-assessment process which, in discussion with our OHS, is likely to be our long term approach.

However, more fundamentally, what this did give us cause to challenge is the necessity for full preemployment check process when candidates are moving from one NHS Scotland Board to another. When we consider the volume of staff that transfer between Boards, this would afford significant saving and efficiency if this could be reviewed. The drive to National Recruitment is a step towards this but there is potentially quite significant opportunity here.

Employee Relations

The pandemic has required us to conduct employee relation meetings remotely with the support of technology — mainly Microsoft Teams. There is a national partnership agreement to support this and locally we have agreed, in partnership, more detailed rules of engagement. Continuation with this approach is expected to offer greater flexibility, reduce travel and ultimately enable us to respond in a more timely manner to issue / concerns. We would therefore support this continuing going forward.

Similarly, the introduction of virtual national meetings (e.g. HRDs, STAC, etc) has allowed decisions to be made more quickly which has been advantages and be beneficial to maintain going forward.

4. STRATEGIC CONTEXT

This paper links to the following:

Corporate objectives	AOP	Government policy	
Government directive	Statutory requirement	Achieving Excellence/	
		local policy	
Urgent operational issue	Other		

5. CONTRIBUTION TO QUALITY

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

Three	Qual	1ty /	1ml	51t1	ons:
-------	------	-------	-----	------	------

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)	
Best use is made of available resources. (Effective)	

6. MEASURES FOR IMPROVEMENT

These are tracked as actions through the Resilience Team.

7. FINANCIAL IMPLICATIONS

None.

8. RISK ASSESSMENT/MANAGEMENT IMPLICATIONS

There is a risk that lessons learned are not capture timeously, however this has been actioned and is being followed up to improve processes in the event that the Command structure needs to be put back in place.

9. FIT WITH BEST VALUE CRITERIA

This paper aligns to the following best value criteria:

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

10. EQUALITY AND DIVERSITY IMPACT ASSESSMENT

Not applicable.

11. CONSULTATION AND ENGAGEMENT

Senior staff involved in the Command structure attended a facilitated session to draw out lessons learned, which are captured in the report at Appendix 1.

12. ACTIONS FOR THE BOARD

The Board is asked to:

- 1. Note that the lessons learned through the review of the Command structure were shared with Board Members;
- 2. Note the response made to Scottish Government;
- 3. Note the response to Scottish Government in relation to Human Resources lessons learned; and
- 4. Note that the Resilience Team monitor the actions agreed in relation to the lessons learned in Appendix 1.

13. FURTHER INFORMATION

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

Gabe Docherty, Director of Public Health, Tel: 01698 858235