

NHS Board Meeting  
30 June 2020

Lanarkshire NHS Board  
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## SUBJECT: RESPONSE, RECOVERY & REDESIGN – UPDATE

### 1. PURPOSE

The purpose of this paper is to seek formal approval of version 2.1 of the Response, Recovery and Redesign Plan and to provide NHS Lanarkshire Board Members with an update on the development of the Response, Recovery and Redesign work underway in Lanarkshire.

For approval	<input checked="" type="checkbox"/>	For assurance	<input type="checkbox"/>	To note	<input checked="" type="checkbox"/>
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### 2. ROUTE TO THE BOARD

This paper has been prepared by Roslyn Rafferty, Strategy & Performance Manager.

### 3. SUMMARY OF KEY ISSUES

**Response, Recovery & Redesign Oversight Group (RRROG)** - as detailed in 24 June 2020 briefing paper, the Response, Recovery and Redesign Oversight Group (RRROG) continues to meet weekly to consider service recovery proposals.

**Responsible Director** - responsibility for mainstreaming the work of the RRROG has now transferred to the Director of Planning, Property and Performance.

**Response, Recovery & Redesign Plan (RRR Plan)** - the RRR Plan (version 1.0) was submitted to the Scottish Government (SG) on 25<sup>th</sup> May 2020 and has previously been shared with Board Members. In response to Scottish Government (SG) feedback and guidance, the RRR Plan (version 2.1) was developed and submitted to SG on 4<sup>th</sup> June 2020 and is attached for approval as Appendix 1. This will be added to the Board's web site to facilitate public access, as confirmed by the Acting Chief Executive of the NHS in Scotland. This is a dynamic process and elements of the service have moved on from the position detailed in RRR Plan of 4<sup>th</sup> June and these will be captured in future plans.

Consideration is now being given to the next stage of mobilisation and this was the subject of discussions at a recent meeting of the Board Chief Executives with SG representatives. It is anticipated that the following key points of discussion are likely to be reflected in future SG guidance. Namely, future mobilisation plans should:

- reflect a whole system approach and have a purpose and benefit for everyone;
- provide details of the anticipated position at 31 March 2021 and the plans to achieve this target and the associated level of risk – against the framework objectives;
- describe what will be different and how to build in improvement and innovation;
- explain plans to address COVID, winter, BREXIT; and
- reflect the national picture, including the role of the National Boards.

It is understood that the SG will provide NHS Boards with a set of planning assumptions encompassing performance systems, resources available and the scope of paused Annual Operational Plans (AOPs). It is anticipated that SG guidance will be issued at the end of June for submission mid/late July.

At the Board Chief Executive meeting SG representatives outlined a number of draft planning assumptions. Plans should ensure that:

1. surge capacity for COVID 19 patients is maintained to ensure capacity / resilience in the system to respond to a second peak;
2. patient and staff safety are ensured by appropriate streaming of COVID / non-COVID 19 pathways across the health and care system;
3. capacity is retained to deliver health components of Test and Protect and intervention and support in care home sector;
4. strict infection control measures are in place;
5. COVID screening and testing policies are implemented in line with national guidance
6. inter-dependencies are factored in including transport and education;
7. high quality care is delivered including patient experience;
8. new and effective ways of working are maintained and built upon – avoid reverting to previous working practices; and
9. the impact of physical distancing measures across the health and care sector on capacity is continually assessed.

Future mobilisation plans will:

- manage the backlog of planned care (OP / IP waiting lists) to minimise harm;
- ensure unmet demand is managed and ensure safety e.g. referrals and community based services; and
- manage the NON-COVID and COVID 19 unscheduled care demand, recognising that Emergency Department attendances and acute hospital admissions are increasing.

As detailed above, SG guidance is expected at the end of June and work will now commence with service leads in the development of version 3.0 of the RRR Plan.

**Recovery Progress Reporting** - a further report will be provided at the July 2020 NHS Board meeting on the development of a structured process to report on recovery.

#### 4. STRATEGIC CONTEXT

This paper links to the following:

Corporate objectives	<input checked="" type="checkbox"/>	AOP	<input checked="" type="checkbox"/>	Government policy	<input checked="" type="checkbox"/>
Government directive	<input checked="" type="checkbox"/>	Statutory requirement	<input checked="" type="checkbox"/>	AHF/local policy	<input type="checkbox"/>
Urgent operational issue	<input checked="" type="checkbox"/>	Other	<input type="checkbox"/>		<input type="checkbox"/>

#### 5. CONTRIBUTION TO QUALITY

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

*Three Quality Ambitions:*

Safe	<input checked="" type="checkbox"/>	Effective	<input checked="" type="checkbox"/>	Person Centred	<input checked="" type="checkbox"/>
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**Six Quality Outcomes:**

Everyone has the best start in life and is able to live longer healthier lives; (Effective)	<input checked="" type="checkbox"/>
People are able to live well at home or in the community; (Person Centred)	<input checked="" type="checkbox"/>
Everyone has a positive experience of healthcare; (Person Centred)	<input type="checkbox"/>
Staff feel supported and engaged; (Effective)	<input type="checkbox"/>
Healthcare is safe for every person, every time; (Safe)	<input checked="" type="checkbox"/>
Best use is made of available resources. (Effective)	<input checked="" type="checkbox"/>

**6. MEASURES FOR IMPROVEMENT**

The reporting arrangements will be discussed further at the July 2020 Board meeting.

**7. FINANCIAL IMPLICATIONS**

The financial implications arising from each of the proposals discussed are clearly identified in each submission.

**8. RISK ASSESSMENT/MANAGEMENT IMPLICATIONS**

The full impact of COVID 19 on activity and finance is not yet known but COVID-19 is recorded on the Corporate Risk Register as a Very High risk, and information is provided on any financial impacts, via the virtual Silver Command Finance Group that is still operating, to inform regular financial updates made to Scottish Government on Covid-19 related expenditure.

**9. FIT WITH BEST VALUE CRITERIA**

This paper aligns to the following best value criteria:

Vision and leadership	<input checked="" type="checkbox"/>	Effective partnerships	<input checked="" type="checkbox"/>	Governance and accountability	<input checked="" type="checkbox"/>
Use of resources	<input checked="" type="checkbox"/>	Performance Management	<input type="checkbox"/>	Equality	<input type="checkbox"/>
Sustainability Management	<input checked="" type="checkbox"/>				

**10. EQUALITY AND DIVERSITY IMPACT ASSESSMENT**

Not required.

**11. CONSULTATION AND ENGAGEMENT**

The Response, Recovery and Redesign Oversight Group considers proposals brought forward through a supporting structure across both Partnerships, and the Acute Division, and seeks to identify inputs from local services about cross cutting impacts, logistical, and digital support, before these are considered by the Oversight Group.

**12. ACTIONS FOR THE BOARD**

Approve	<input checked="" type="checkbox"/>	Endorse	<input type="checkbox"/>	Identify further actions	<input type="checkbox"/>
Note	<input checked="" type="checkbox"/>	Accept the risk identified	<input type="checkbox"/>	Ask for a further report	<input type="checkbox"/>

The Board is asked to:

1. note the update;
2. approve version 2.1 of the Response, Recovery and Redesign Plan (RRR Plan) which has been submitted to SG (Appendix 1);
3. note that the RRR Plan will be uploaded on to the Board's public web site for public access;
4. note that a further update of the Response, Recovery and Redesign Plan will be prepared in response to expected SG guidance and shared with Board Members in due course; and
5. note that a further update will be provided at the July Board meeting on the development of a structured process to report on recovery.

**13. FURTHER INFORMATION**

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

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*Colin Lauder*  
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