

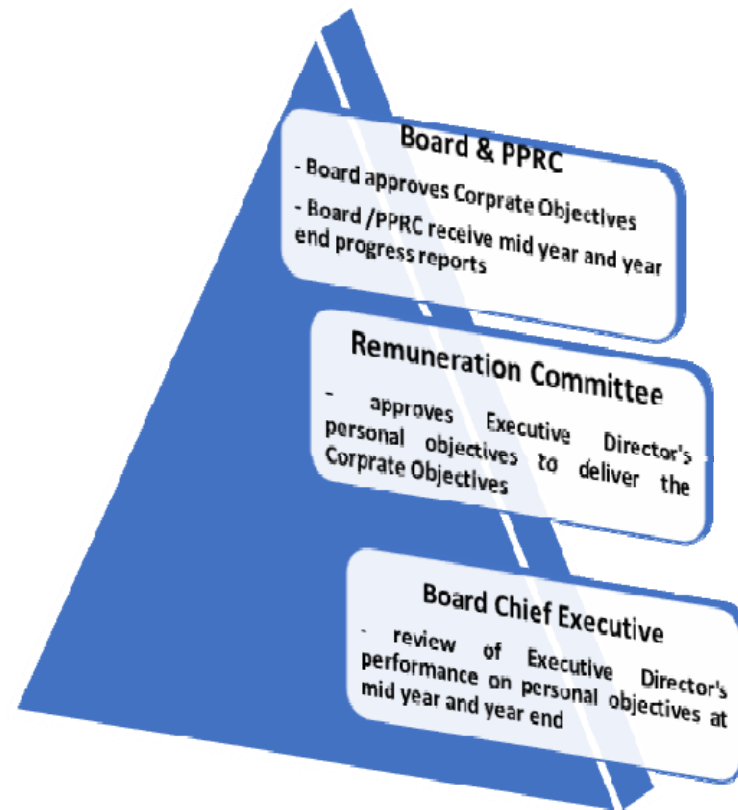
**LANARKSHIRE NHS BOARD – INTERIM CORPORATE OBJECTIVES 2022/2023****NHS LANARKSHIRE'S VISION****Our Health Together: living our best lives in Lanarkshire****NHS LANARKSHIRE'S PURPOSE****To provide safe, effective and person-centred care to the communities we service. In the coming year our focus will be to recover services, through the lens of addressing inequalities, maximising wellbeing and addressing the challenges of sustainability and climate change****DEVELOPMENT OF CORPORATE OBJECTIVES**

Many uncertainties remain with respect to the ongoing and future impact of the global COVID-19 pandemic. NHS Lanarkshire is committed to maximising a successful and sustained recovery of services as quickly as possible. The impact of COVID-19 and non-Covid demands on the service in recent months has contributed to a significant deterioration in our ability to deliver core services, which in turn impacts on our planning assumptions. As such, the scope of our Corporate Objectives is largely focused on our ability to accurately assess how the whole system can address the ongoing challenges of responding to the pandemic and how quickly the remobilisation and recovery process can take effect.

As such these Corporate Objectives should be regarded as interim, with a key focus on the recovery of services, and may be subject to amendment as Scottish Government policies are published.

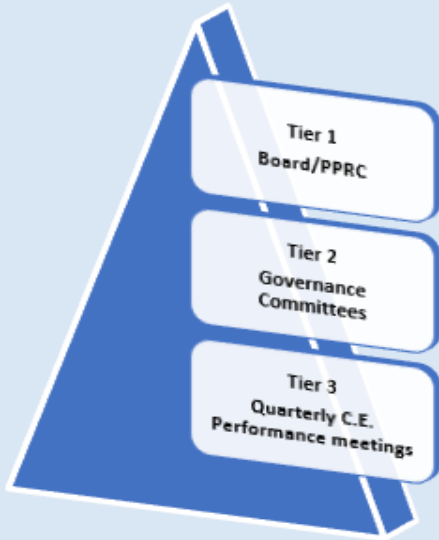
The Corporate Objectives are developed each year by CMT, and signed off by the Lanarkshire NHS Board. They identify the critical areas of business that must be delivered on time and to standard during the forthcoming year. The Corporate Objectives provide the strategic ambition within each area, with more specific detail being set out in the cascade down through divisional, team and personal objectives.

## PERFORMANCE MANAGEMENT OF CORPORATE OBJECTIVES



This approach is supported by the performance management governance structure detailed below.

**PERFORMANCE REPORTING FOR GOVERNANCE & ASSURANCE -process as agreed by Board (May 2019)**



	<b>ROLE</b>	<b>REPORT &amp; PURPOSE</b>
<b>TIER 1</b>	<p><b>Board/PPRC Performance Reports</b></p> <p>To consider whether oversight provided by the respective Governance Committees/ Executive Directors is sufficient</p> <p>The Board/PPRC is asked to note the Quarterly AOP Report and confirm whether it provides sufficient assurance of progress in the delivery of locally agreed standards and AOP targets.</p>	<p><b>Quarterly Annual Operational Plan (AOP) Progress Report</b></p> <p>The Quarterly AOP Report is a summation &amp; confirmation of the information that has already been submitted to, and reviewed by, the respective Governance Committee (G.C.)</p> <p>This is the sole means of reporting against locally agreed standards and AOP targets in a single report to the Board, highlighting variation by means of a traffic light system with agreed parameters for triggering levels for each KPI.</p> <p><b>RAG rated report using validated data, from ICPF</b></p>
	<p>The Board/PPRC is asked to approve the annual reporting template and note the progress reports.</p>	<p><b>Corporate Objectives – Mid-Year and Year-End Reports</b></p> <p>Corporate Objectives (CO) are developed annually by CMT, with progress reports prepared for governance and assurance purposes. COs are the critical areas of business that must be delivered on time and to standard during the forthcoming year. The COs provide high level descriptions of KPIs, with each KPI assigned to an Executive Director and reflected in their objectives.</p> <p><b>RAG rated report using validated, published data</b></p>
<b>TIER 2</b>	<p><b>Governance Committee Reports to Board/PPRC</b></p> <p>Governance Committees have responsibility for the governance and assurance of each of the ICPF performance indicators.</p> <p>This mirrors the process of assurance which is used in compiling and monitoring the Corporate Risk Register and individual G.C. Risk Registers.</p>	<p><b>Quarterly Exception Reports</b></p> <p>Reporting by exception any “Red” rated items and, where appropriate, agree and monitor an action plan to return the metric to compliance. KPIs which are of concern, but are not rated as “Red”, are also identified for escalation.</p> <p><b>RAG rated report using validated data, from ICPF</b></p>
	<p><b>Quarterly C.E. Performance meetings - Chief Officers &amp; Director of Acute Services</b></p>	<p><b>Quarterly Progress Report</b></p> <p>To review KPIs and for assurance on overall performance. The information set contains a mix of unvalidated management information and validated data to allow more real-time performance monitoring and review.</p> <p><b>RAG rated report using validated data &amp; unvalidated management information</b></p>
<b>TIER 3</b>	<p>Board Chief Executive meets individually with the Chief Officers of North and South Lanarkshire HSCPs and the Director of Acute Services on a quarterly basis to review performance measures and for assurance on overall performance.</p>	

**Integrated Corporate Performance Framework (ICPF) or “Dashboard”** reflects validated, publishable data, with Key Performance Indicators (KPIs) grouped into three sections: Person Centred Care , Safe Care and Effective Care. Each KPI is the responsibility of a specific Executive Director/Chief Officer and Governance Committee.

**NHSL Governance Committees** - Staff Governance Committee, Population Health, Primary Care & Community Services Committee (Population Committee), Healthcare Quality Assurance & Improvement Committee (HQAIC), Acute Governance Committee, Planning, Performance & Resources Governance Committee (PP&RC), Audit Committee & Monklands Replacement Project Governance Committee.

<b>CONTENTS</b>
-----------------

<b>1</b>	<b>Pandemic Response &amp; Corporate Resilience</b>	<b>5</b>
<b>2</b>	<b>Recovery of Services</b>	<b>8</b>
<b>3</b>	<b>Workforce</b>	<b>12</b>
<b>4</b>	<b>Development of Our Health Together</b>	<b>13</b>
<b>5</b>	<b>Equalities &amp; Inequalities</b>	<b>18</b>
<b>6</b>	<b>Maximising Staff Wellbeing</b>	<b>20</b>
<b>7</b>	<b>Addressing the Challenges of Sustainability and Climate Change</b>	<b>22</b>
<b>8</b>	<b>Financial Sustainability</b>	<b>24</b>

## 1 Pandemic Response & Corporate Resilience

Respond to the pandemic to ensure resilience and provide a safe environment and interventions that minimise the risk of injury or harm to our patients and staff.

	Objective	Accountable / Responsible	Deliverable(s) & Measurement of Progress
1.1	RESPONSE - Respond to the Covid-19 pandemic and mitigate the impact on the clinically vulnerable and high-risk settings	<b>Public Health Director</b>	Deliverable(s): <ul style="list-style-type: none"> <li>Respond to new variants</li> <li>Testing strategy developed, including ongoing implementation</li> </ul> Measure: <ul style="list-style-type: none"> <li>Monitored through the PH Tactical Plan</li> </ul>
1.2	RESPONSE - Continue delivery of COVID surveillance programme, responding to the changing requirements as the focus of the pandemic response evolves	<b>Public Health Director</b>	Deliverable: <ul style="list-style-type: none"> <li>Understand factors impacting severity and refine systems as required</li> </ul> Measure: <ul style="list-style-type: none"> <li>Monitored through the PH Tactical Plan</li> </ul>
1.3	RESPONSE - Care Homes - provide health protection expertise to manage COVID-19 and communicable disease outbreaks in Care Homes	<b>Public Health Director</b>	Deliverable: <ul style="list-style-type: none"> <li>Provision of health protection expertise to Care Homes</li> </ul> Measure: <ul style="list-style-type: none"> <li>Routine monitoring of all outbreaks via Oversight Committee</li> </ul>
1.4	RESPONSE - Care Homes - ensure care home support is maintained throughout 2022/23 (as required through emergency legislation), with professional oversight and support in place via an expanded care home team	<b>NMAHPs Director</b>	Deliverable(s): <ul style="list-style-type: none"> <li>Work plan developed and agreed with stakeholders which facilitates assurance visits providing professional and clinical advice on IPC and the provision of health care and nursing standards where appropriate.</li> <li>Areas for themed quality improvement work identified and embedded within the work plan.</li> <li>An engagement and communication plan developed to ensure appropriate buy-in and ownership of the current, evolving assurance and support model.</li> </ul>

			Measure: <ul style="list-style-type: none"> <li>Monitor progress against project plan.</li> </ul>
1.5	<p>RESPONSE - deliver a comprehensive Covid Vaccination programme for all eligible members of the population in Lanarkshire.</p> <p>(Where possible, this should be undertaken alongside the seasonal flu vaccination programme).</p>	<b>Chief Officer, South</b>	<p>Deliverable(s):</p> <ul style="list-style-type: none"> <li>Comprehensive vaccination programme developed to cover Covid, seasonal influenza and other 'in-scope' vaccines.</li> <li>Staffing identified and appointed to manage programme accordingly. This will include 'surge' staffing to manage the significant increase in delivery required September through January.</li> <li>Governance arrangements clarified and new reporting arrangements established</li> <li>Vaccine delivered in line with national targets per cohort.</li> </ul> <p>Measure(S):</p> <ul style="list-style-type: none"> <li>% of vaccines delivered per cohort</li> <li>% of staff appointed against required posts.</li> <li>% of people in SIMD categories, BAME, other groups vaccinated</li> </ul>
1.6	RESILIENCE – meet statutory duties and NHS Scotland "Resilience Standards".	<b>Public Health Director</b>	<p>Deliverable:</p> <ul style="list-style-type: none"> <li>Statutory duties and NHS Scotland "Resilience Standards" met</li> </ul> <p>Measure:</p> <ul style="list-style-type: none"> <li>Oversight and monitoring of resilience work via Resilience Group</li> </ul>
1.7	RESILIENCE - review business continuity plans (BCPs), building upon the learning and collaboration that has been reinforced by the pandemic, to ensure that we have a resilient healthcare system for the future.	<b>Public Health Director</b>	<p>Deliverable:</p> <ul style="list-style-type: none"> <li>Business continuity plans (BCPs) reviewed to reflect learning from the response to the pandemic, ensuring a resilient healthcare system for the future.</li> </ul> <p>Measure:</p> <ul style="list-style-type: none"> <li>Monitoring of BCPs by the Resilience Team</li> </ul>
1.8	RESILIENCE – Design, develop and implement an integrated Resilience Management System, which will be a whole systems approach to business	<b>Public Health Director</b>	<p>Deliverable:</p> <ul style="list-style-type: none"> <li>Integrated Resilience Management System designed, developed and implemented</li> </ul>

	continuity/contingency, governance, performance and planning processes. This will ensure a consistent and systematic approach to help secure a resilient healthcare system for now and the future.		Measure(s): <ul style="list-style-type: none"> <li>proposal developed and endorsed</li> <li>Implementation commenced</li> </ul>
1.9	RESILIENCE – Develop the principle of continuous improvement through the concept of a learning organisation by introducing standardised approaches to capturing and embedding lessons learned e.g. debriefing and resilience/response reviews.	<b>Public Health Director</b>	Deliverable: <ul style="list-style-type: none"> <li>Standardised approaches introduced to capture and embed lessons learned as part of a continued improvement approach</li> </ul> Measure: <ul style="list-style-type: none"> <li>Delivery of a standardised suite of debriefing/review processes, including oversight of embedding lessons.</li> </ul>
1.10	RESILIENCE – Build on NHS Lanarkshire’s ongoing positive engagement, profile and influence across the resilience networks and multi-agency forums at local, regional and national levels.	<b>Public Health Director</b>	Deliverable: <ul style="list-style-type: none"> <li>Areas of best practice/expertise shared through taking a lead role on key areas of work and leading forums.</li> </ul> Measure: <ul style="list-style-type: none"> <li>Attendance at local, regional and national meetings</li> <li>Feedback mechanisms developed with partners and key stakeholders</li> </ul>

## 2 Recovery of Services

Remobilise and recover services to re-establish timely and accessible health and social care to all parts of the community we serve.

	Objective	Accountable / Responsible	Deliverables & Measurement of Progress
2.1	Establish internal governance process to lead and oversee the recovery process, involving partner organisations and the local resilience partnership	<b>PP&amp;P Director</b>	Deliverable: <ul style="list-style-type: none"> <li>• Appropriate governance route for reporting progress</li> </ul> Measure(s): <ul style="list-style-type: none"> <li>• Short life whole system remobilisation group established to oversee the stand up of services which remain paused</li> <li>• Performance management process established and working successfully which provide oversight and assurance on recovery</li> </ul>
2.2	Mainstream Covid pathways across the whole system	<b>Acute Director Chief Officer, North Chief Officer, South</b>	Deliverable(s): <ul style="list-style-type: none"> <li>• Safe systems for patients and staff through implementation of local and national Covid guidance (including wellbeing measures)</li> <li>• Revision and reduction of some pathways as focus shifts to living with Covid</li> </ul> Measure(s): <ul style="list-style-type: none"> <li>• increased community based/outreach services in support of respiratory care patients.</li> <li>• Monitor implementation of National and local Pathways and guidance re. access to clinical services</li> <li>• Support systems for patients and staff in place</li> <li>• Staged reduction of measures in line with Living with Covid</li> </ul>
2.3	Remobilisation of Planned Care	<b>Acute Director</b>	Deliverable(s): <ul style="list-style-type: none"> <li>• acute outpatient services remobilised to pre Covid 19 levels</li> <li>• treatment capacity maximised, service efficiency improved</li> </ul>



			<p>(Theatres), new clinical treatment pathways implemented and access to national mutual aid allocations optimised (e.g. Golden Jubilee and National Treatment Centres).</p> <ul style="list-style-type: none"> <li>• approach to reducing TTG waiting list backlogs determined</li> </ul> <p>Measure(s):</p> <ul style="list-style-type: none"> <li>• Monitor outpatients against agreed Scottish Government trajectories</li> <li>• Monitor TTG theatre access against agreed Scottish Government trajectories by priority</li> <li>• Monitor delivery against agreed national targets (e.g. cancer 31 / 62)</li> <li>• approach to reducing TTG waiting list backlogs as agreed with SG</li> </ul>
2.4	Remobilisation of Mental Health & Wellbeing	<b>Chief Officer, North</b>	<p>Deliverable:</p> <ul style="list-style-type: none"> <li>• Mental Health &amp; Wellbeing services remobilised</li> </ul> <p>Measure(s):</p> <p>Monitored via updates on the delivery of the Mental Health and Wellbeing Strategy action plan. Service performance metrics include:</p> <ul style="list-style-type: none"> <li>• CAMHS RTT</li> <li>• PT RTT</li> <li>• Service waiting times</li> </ul>
2.5	Remobilisation of Primary Care	<b>Chief Officer, South</b>	<p>Deliverable(s):</p> <ul style="list-style-type: none"> <li>• New GMS contract implemented during 2022/23 and beyond. Continue to implement, monitor and report on the Primary Care Improvement Plans; and associated financial planning to facilitate the implementation of the new GMS Contract.</li> <li>• Manage GMS sustainability in ensuring continuity of GMS services to the people of Lanarkshire. Measure - Produce sustainability strategy and continued provision of GMS via non 17C routes</li> </ul> <p>Measure(s):</p> <ul style="list-style-type: none"> <li>• Progress will be recorded as per Primary Care Tracker</li> </ul>

2.6	Remobilise national and local programmes/services with a particular focus on prevention and early intervention to re-establish timely and accessible health care to all parts of the community we serve.	<b>Public Health Director/ Chief Officer, North, Chief Officer South</b>	<ul style="list-style-type: none"> <li>• 'Tracker' document submissions to IJB/Scottish Government.</li> </ul> <p>Deliverable(s):</p> <ul style="list-style-type: none"> <li>• Action plan developed for the next 12 months focused on the structured remobilisation actions set out for each service area.</li> <li>• Deliver against national plans and frameworks</li> <li>• Alcohol Harm Prevention Programmes/Services remobilised</li> <li>• Drug Harm Prevention Programmes (including Drug Related Deaths Prevention) remobilised</li> <li>• Blood Borne Virus Prevention (HIV and Hepatitis) Programmes remobilised</li> <li>• Dental Health Promotion Programmes/Services remobilised</li> <li>• Addressing inequalities and access for children and young people</li> <li>• Sexual Health Improvement Programmes/Services remobilised</li> <li>• National Immunisation Programmes delivered</li> <li>• National Screening Programmes delivered</li> <li>• Promoting and encouraging people to engage and reducing inequalities in uptake of screening opportunities.</li> </ul> <p>Measure(s):</p> <ul style="list-style-type: none"> <li>• Progress will be monitored through service performance metrics, including: <ul style="list-style-type: none"> <li>- Cervical screening uptake</li> <li>- Child immunisation uptake at 2 and 5yrs</li> <li>- Addictions waiting times</li> <li>- Self-assessment against new HIS Sexual Health standards</li> </ul> </li> <li>• Delivery progress measured against national plans and frameworks</li> <li>• Maintain high uptake rates for all routine vaccination programmes/ensure the uptake rates are above the Scottish average.</li> <li>• Successful completion of the VTP (By December 2022 there should be a comprehensive Travel vaccination service in place).</li> <li>• Monitor the recovery of screening services</li> </ul>
-----	--	--	--

--	--	--	--

2.7	Develop and implement a NHSL Recovery Plan in line with SG guidelines and timelines	<b>PP&amp;P Director</b>	Deliverable: <ul style="list-style-type: none"> <li>NHSL Recovery Plan developed and implemented in line with SG guidelines and timelines</li> </ul> Measure(s): <ul style="list-style-type: none"> <li>Corporate Recovery plan approved</li> <li>Trajectories developed to measure progress against demand, staff availability and waiting times</li> </ul>
2.8	Agree with SG the level of Covid support for 2022/23, including support for savings that could not be delivered and achieve a year end position in line with that SG agreement.	<b>Finance Director</b>	Deliverable: <ul style="list-style-type: none"> <li>Covid funding support for 2022/23 in place.</li> </ul> Measure: <ul style="list-style-type: none"> <li>Agreed position reached</li> </ul>
2.9	Implementation of Delayed Discharge Programme	<b>Chief Officer, South Chief Officer, North Acute Director</b>	Deliverable(s): <ul style="list-style-type: none"> <li>'Discharge without Delay' programme implemented in line with national agreement/funding.</li> <li>Programme plan milestones developed and agreed</li> <li>Patient flow through acute sites improved</li> </ul> Measure(s): <ul style="list-style-type: none"> <li>Delayed discharges reduced and monitored via             <ul style="list-style-type: none"> <li>Referrals for Supported Discharge</li> <li>Delayed Discharge episodes and bed days</li> <li>Use of Discharge to Assess/home First services</li> </ul> </li> </ul>
2.10	Development of a Winter Plan to mitigate winter pressures on the acute site and ensure continuing safe and effective care through winter months.	<b>Chief Officer, South Supported by Acute Director and Chief Officer, North</b>	Deliverable: <ul style="list-style-type: none"> <li>Winter Plan developed</li> </ul> Measure(s): <ul style="list-style-type: none"> <li>Winter Plan in place by October 2022.</li> <li>Plans in place for each of the respective operational directorates which link with both Lanarkshire Councils and other partners.</li> <li>Metrics available through national and local data sets and reports</li> </ul>

### 3 Workforce

**Ensure we have a diverse, flexible and appropriately trained workforce in place that delivers high quality care that meets the needs of NHS Lanarkshire's population**

	Objective	Accountable / Responsible	Deliverables & Measurement of Progress
3.1	Develop a Workforce Plan for NHS Lanarkshire that aligns with the national workforce strategy and NHSL service recovery plans.	<b>HR Director</b>	Deliverable: <ul style="list-style-type: none"> <li>• Workforce Plan developed and signed-off.</li> </ul> Measure <ul style="list-style-type: none"> <li>• Trajectories in place and monitored/reported on through Board Governance structures.</li> </ul>
3.2	Deliver enhanced recruitment services	<b>HR Director</b>	Deliverable(s): <ul style="list-style-type: none"> <li>• International recruitment programme established</li> <li>• Employability programme to support disadvantaged communities established</li> </ul> Measure(s): <ul style="list-style-type: none"> <li>• Reduction in vacancy to appointment time to c.10 weeks</li> <li>• Increased number of international applicants appointed – comparison between 2021 and 2022</li> <li>• Compare number of employability programmes</li> </ul>
3.3	Develop and/or implement new workforce policies/guidance in response to post Covid requirements	<b>HR Director</b>	Deliverable(s): <ul style="list-style-type: none"> <li>• Home working policy (Once for Scotland) developed</li> <li>• Flexible retirement options developed</li> </ul> Measure(s): <ul style="list-style-type: none"> <li>• No of staff on homeworking,</li> <li>• No of complaints/grievances around homeworking</li> </ul>

## 4 Development of Our Health Together

Work in partnership to deliver 'Our Health Together' realising our strategic ambition to modernise and continuously improve care, engaging with our patients, partners and workforce to ensure health and social care services are sustainable, focused on prevention and early intervention and continue to meet their needs.

*To note – the accountable individuals listed below are those identified within the OHT workplan. The Director of PP&P is responsible for delivering the OHT revised healthcare strategy.*

	Objective	Accountable / Responsible	Deliverables & Measurement of Progress
4.1	Develop and deliver an Engagement & Communication Programme to ensure effective engagement with stakeholders in the development of Our Health Together (inclusive of co-production aspirations)	<b>Director of Communications</b>	Deliverable: <ul style="list-style-type: none"> <li>Our Health Together Strategy developed in partnership</li> </ul> Measure(s): <ul style="list-style-type: none"> <li>Progress monitored against agreed programme</li> <li>Level of engagement achieved</li> </ul>
4.2	Delivery of the Children & Young People work stream (incl. Best Start, Corporate parenting, maternity & paediatrics)	<b>Chief Officer, North / Public Health Director</b>	Deliverable: <ul style="list-style-type: none"> <li>Lanarkshire service models created around key Children and Young People services during 22/23.</li> </ul> Measure(s): <ul style="list-style-type: none"> <li>Child Poverty Action Plans completed for both North and South HSCPs.</li> <li>Children and Young People's Health Plan 2021-23 (year 1) implemented and monitored</li> <li>Implementation of the national Child Death Review processes.</li> <li>Year 1 Corporate Parenting Workplan delivered</li> </ul>
4.3	Delivery of the Digital Health & Technology work stream (eHealth programme board)	<b>Information &amp; Digital Technology Director</b>	Deliverable: <ul style="list-style-type: none"> <li>Digital Health &amp; Technology work stream delivered</li> </ul> Measure: <ul style="list-style-type: none"> <li>Monitor progress against project plan</li> </ul>
4.4	Delivery of the Population Health Needs Assessment work stream	<b>Public Health Director</b>	Deliverable(s): <ul style="list-style-type: none"> <li>Understanding of the direct and indirect impacts of Covid-19</li> <li>Develop monitoring processes, aligned to national work, to</li> </ul>

			<p>understand long term health outcomes in the population including the impact of Covid-19.</p> <p>Measure:</p> <ul style="list-style-type: none"> <li>Initial baseline assessment completed</li> </ul>
4.5	Provide holistic person centred pathways of care for people with long term conditions to maximise their quality of life and reduce the burden of disease	<b>Medical Director, North</b>	<p>Deliverable:</p> <ul style="list-style-type: none"> <li>Framework for the development of long term condition pathways created</li> </ul> <p>Measure:</p> <ul style="list-style-type: none"> <li>Test three LTC pathways by March 2022.</li> </ul>
4.6	Delivery of the Mental Health work stream (incl. CAMHS and Dementia)	<b>Chief Officer, North</b>	<p>Deliverable(s):</p> <ul style="list-style-type: none"> <li>Mental Health and Wellbeing Strategy actions delivered, including: <ul style="list-style-type: none"> <li>roll out of the new CAMHS and PT service models</li> <li>development of plans for future 2-site inpatient model for Lanarkshire.</li> </ul> </li> </ul> <p>Measure:</p> <ul style="list-style-type: none"> <li>Progress monitored via work stream progress updates</li> </ul>
4.7	Ensure appropriate progress is achieved with the Monklands Replacement Project to ensure delivery of the new hospital by 2028.	<b>PP&amp;P Director</b>	<p>Deliverable:</p> <ul style="list-style-type: none"> <li>Developed Outline Business Case (OBC)</li> </ul> <p>Measure(s):</p> <ul style="list-style-type: none"> <li>Monitor progress against project plan</li> <li>Programme risk register maintained</li> <li>OBC submitted within planned timeline</li> </ul>
4.8	Development of a Frailty Strategy for Lanarkshire aiming to reduce the consequence of frailty through prevention, early recognition and intervention and the development of person - centered responsive services (incl. care homes)	<b>Nursing Director, North</b>	<p>Deliverable:</p> <ul style="list-style-type: none"> <li>Develop a Frailty Strategy for Lanarkshire</li> </ul> <p>Measure:</p> <ul style="list-style-type: none"> <li>Monitor progress against project plan</li> </ul>
4.9	Development of clinical work streams to ensure high standards of patient care and improved access to acute care. This would include; service reconfiguration,	<b>Acute Director</b>	<p>Deliverable(s):</p> <ul style="list-style-type: none"> <li>Robotic Assisted surgery implemented in first quarter of 22/23.</li> </ul>

	improvements, developments as well as revised clinical pathways and adoption of new ways of working.		<ul style="list-style-type: none"> <li>• Initial Assessment for National Treatment and diagnostic</li> <li>• New ways of working embedded</li> <li>• Adoption of service improvements working with national bodies (e.g. centre for sustainable delivery)</li> </ul> <p>Measure(s):</p> <ul style="list-style-type: none"> <li>• Delivery measured against project plans</li> <li>• Data set available through National and local NHSL data sets (including discovery).</li> <li>• Additional data sets developed through relevant project work streams</li> </ul>
4.10	Delivery of Primary Care Redesign	<b>Chief Officer, South</b>	<p>Deliverable(s):</p> <ul style="list-style-type: none"> <li>• Work streams developed for Community Care &amp; Treatment and Urgent Care to support primary care redesign in keeping with General Medical Services (GMS) contract development and Unscheduled Care Programme Board.</li> <li>• GMS sustainability plan developed linked to PC strategy and new contract.</li> <li>• new GP IM&amp;T system introduced in line with national programme.</li> <li>• Primary Care premises strategy developed to support above work streams.</li> </ul> <p>Measure(s):</p> <ul style="list-style-type: none"> <li>• Progress monitored via Primary Care (PC) Tracker</li> <li>• GP IM&amp;T system progress as per local and national project plan and associated milestones</li> <li>• Premises strategy integral part of NHSL Capital Planning programme and progress monitored against project plan</li> </ul>
4.11	Delivery of a re-developed Public Health System	<b>Public Health Director</b>	<p>Deliverable:</p> <ul style="list-style-type: none"> <li>• Public Health Strategy and workplan developed</li> </ul> <p>Measure(s):</p> <ul style="list-style-type: none"> <li>• Review completed of current structures</li> <li>• Progress monitored against workplan</li> </ul>
4.12	Realistic Medicine - To create a programme of work that aligns to the remobilisation plan and encompasses	<b>Medical Director</b>	<p>Deliverable:</p> <ul style="list-style-type: none"> <li>• Action plan developed for the next 12 months that facilitates</li> </ul>



	a whole system focus (locally and nationally) ensuring engagement that supports workforce and all service users with realistic healthcare principles.		<p>remobilisation actions that enhance the six principles of Realistic Medicine across all H&amp;SCP; Shared Decision Making<sup>1</sup>, building a personalised approach to care<sup>2</sup>, Manage Risk better<sup>3</sup>, become improvers and innovators<sup>4</sup>, reduce harm &amp; waste<sup>3</sup> and tackle unwarranted variation<sup>3</sup>.</p> <p>Measure(s):</p> <ul style="list-style-type: none"> <li>• <sup>1</sup> Anticipatory Care Plans (ACP) are embedded into four community areas. 20% increase in Turas SDM module completion</li> <li>• <sup>2</sup> Treatment Escalation Plan (TEP) is embedded with clinical teams in all three acute hospitals and used in 25% wards.</li> <li>• <sup>3</sup> A framework for surgical and planned care waiting list management is developed and piloted in 2 areas.</li> <li>• <sup>4</sup> Revised intranet page supports resource access. 20% increase in unique users.</li> </ul>
4.13	Delivery of the Rehabilitation work stream	<b>NMAHPs Director</b>	<p>Deliverable:</p> <ul style="list-style-type: none"> <li>• Rehabilitation Strategy for Lanarkshire developed</li> </ul> <p>Measure:</p> <ul style="list-style-type: none"> <li>• Monitor progress against project plan</li> </ul>
4.14	Delivery of the Unscheduled Care Programme with a specific focus on implementation of the 2 <sup>nd</sup> phase of the national redesign of urgent care and interface pathways, reviewing existing pathways and identifying opportunities for redesign.	<b>PP&amp;P Director</b>	<p>Deliverable:</p> <ul style="list-style-type: none"> <li>• Improved unscheduled care pathways</li> </ul> <p>Measure(s):</p> <ul style="list-style-type: none"> <li>• Review concluded</li> <li>• Areas for change identified</li> <li>• Change programme established</li> </ul>
4.15	Update the strategic direction for quality to ensure that high quality care is delivered across all health care settings within Lanarkshire.	<b>Medical Director/Quality Director</b>	<p>Deliverable:</p> <ul style="list-style-type: none"> <li>• New NHS Lanarkshire Quality Strategy (final draft) developed by March 2023</li> </ul> <p>Measure:</p> <ul style="list-style-type: none"> <li>• planning milestones reached within timescale</li> </ul>

4.16	Establish a Programme of work to plan for the delivery of the National Treatment Centre in Cumbernauld	<b>PP&amp;P Director</b>	<p>Deliverable:</p> <ul style="list-style-type: none"> <li>• Strategic Assessment and Initial Assessment concluded</li> </ul> <p>Measure(s):</p> <ul style="list-style-type: none"> <li>• Programme Board established with agreed membership and terms of reference in place</li> <li>• Phase 1 Project plan developed and agreed with key timelines and leads identified to finalise the strategic assessment and commence work on the initial assessment.</li> <li>• Programme risk register established</li> <li>• Monitor progress against the project plan.</li> </ul>
4.17	Reduce the likelihood and impact of patients falling within NHS Lanarkshire	<b>NMAHPs Director</b>	<p>Deliverable</p> <ul style="list-style-type: none"> <li>• Implementation of Falls Strategy Group</li> </ul> <p>Measure(s):</p> <ul style="list-style-type: none"> <li>• Progress monitored against project plan by the Falls Strategy Steering Group who reports to the Safe Care</li> <li>• Number of falls</li> </ul>

## 5 Equalities & Inequalities

**Establish NHSL as an Anchor organisation, working with partners to tackle socio-economic disadvantage and reduce inequalities and ill health that are associated with being disadvantaged**

	Objective	Accountable / Responsible	Deliverables & Measurement of Progress
5.1	Delivery of agreed actions identified for 2022/23 within the NHS Lanarkshire Equality Strategy 2021 – 2025.	<b>HR Director</b>	Deliverable: <ul style="list-style-type: none"> <li>2022/23 Equality Strategy actions delivered</li> </ul> Measure(s): <ul style="list-style-type: none"> <li>increased number of clinics,</li> <li>increased number of disability confident applications.</li> </ul>
5.2	To develop a range of equality staff networks based on protected characteristics which support the organisation to identify and address discrimination within the workplace.	<b>HR Director</b>	Deliverable: <ul style="list-style-type: none"> <li>3 year work plan to highlight issues, actions agreed and progress achieved.</li> </ul> Measure: <ul style="list-style-type: none"> <li>Monitor progress against workplan</li> </ul>
5.3	Work with local community planning partners/networks and national partnerships to develop programmes to support those most adversely impacted, both directly and indirectly, by Covid-19 to address the inequalities gap which has been widened by the global pandemic.	<b>Public Health Director /Chief Officers North &amp; South HSCPs</b>	Deliverable: <ul style="list-style-type: none"> <li>Key deliverables developed against each of the 6 PHPs and the agreed joint Community Planning Partner (CPP) priorities of employability, drug related deaths and high resource users.</li> </ul> Measure(s): <ul style="list-style-type: none"> <li>Deliver as per national standards</li> <li>Monitor implementation of key priorities through the Directorate of Public Health's workplan</li> </ul>
5.4	Development of NHSL as an exemplar anchor institution in our own NHS care delivery work and in how we support and catalyse action with our local partners.	<b>Public Health Director /All Directors</b>	Deliverable: <ul style="list-style-type: none"> <li>Action plans with agreed measures developed</li> </ul> Measure(s):

			<ul style="list-style-type: none"> <li>• Baseline assessment completed</li> <li>• Measures of progress against action plans</li> </ul>
5.6	Develop a programme towards meeting the requirements of global citizenship	<b>Public Health Director</b>	<p>Deliverable:</p> <ul style="list-style-type: none"> <li>• Key national and local objectives met</li> <li>• Action Plan developed</li> </ul> <p>Measure:</p> <ul style="list-style-type: none"> <li>• Monitor progress against implementation of action plan</li> </ul>

## 6 Maximising Staff Wellbeing

Promote health and wellbeing, implementing programmes that impact positively on the lives of our workforce, reflect the value we place on them, enhance engagement, and build resilience

	Objective	Accountable/Responsible	Deliverables & Measurement of Progress
6.1	Delivery of the Staff Health & Wellbeing work stream	<b>HR Director /NMAHP Director</b>	Deliverable <ul style="list-style-type: none"> <li>Staff Health and Wellbeing Strategy developed by September 2022.</li> </ul> Measure(s): <ul style="list-style-type: none"> <li>Implementation programme developed</li> <li>Monitor progress against project plan (a range of KPIs to assess organisational position including sickness absence rate, vacancy levels, turnover, grievance, etc)</li> </ul>
6.2	Ensure the active promotion and delivery of positive staff experience that enables staff at all levels to be empowered and have their voices heard.	<b>HR Director</b>	Deliverable: <ul style="list-style-type: none"> <li>Staff empowered and their voices heard.</li> </ul> Measure(s):           Four KPIs measured via the National iMatter Staff experience tool. <ul style="list-style-type: none"> <li>Response rate</li> <li>Number of teams that achieve a report</li> <li>Employee Engagement Index Score</li> <li>Number of action plans agreed within 8 week standard.</li> </ul> This objective can be measured on a year on year basis and results tracked against previous years.
6.3	To ensure that all staff have the opportunity to participate in an annual appraisal discussion to fulfil their job role and purpose and increase the	<b>HR Director</b>	Deliverable: <ul style="list-style-type: none"> <li>Staff participate in annual appraisal discussions.</li> </ul>

	effectiveness of the organisations performance		Measure(s): KPI – (Turas) National standard <ul style="list-style-type: none"> <li>• 80% of all staff must have an appraisal recorded in the appropriate recording tool.</li> <li>• Medics (100%)</li> <li>• Exec and Snr Manager (100%)</li> <li>• A further measure is available in the iMatter Staff Experience Report from the Staff Governance Strand Scores relating to Appropriately trained and developed</li> </ul>
--	--	--	---

## 7 Addressing the Challenges of Sustainability and Climate Change

To work towards delivery of net zero health and social care services, responding to climate change while delivering efficient, low carbon patient focused care.

	Objective	Accountable / Responsible	Deliverables & Measurement of Progress
7.1	Develop the Sustainability and Climate Change Strategy for NHS Lanarkshire.	<b>PP&amp;P Director</b>	Deliverable: <ul style="list-style-type: none"> <li>Sustainability and Climate Change Strategy developed</li> </ul> Measure <ul style="list-style-type: none"> <li>Board sign off</li> </ul>
7.2	Secure leadership and resource to champion and deliver the key objectives of the Sustainability and Climate Change Strategy across NHSL, ensuring that sustainability becomes a key consideration in all aspects of service delivery.	<b>PP&amp;P Director</b>	Deliverable: <ul style="list-style-type: none"> <li>Board executive and non-executive lead identified</li> </ul> Measure(s): <ul style="list-style-type: none"> <li>Internal Sustainability &amp; Climate Change posts filled</li> <li>Identification of Sustainability and climate change champions within PSSD</li> </ul>
7.3	Develop and agree trajectories which will deliver SG targets of a 75% reduction in Carbon Emissions by 2030 and net zero by 2040	<b>PP&amp;P Director</b>	Deliverable: <ul style="list-style-type: none"> <li>Action plan for reduction in Carbon Omissions</li> </ul> Measure: <ul style="list-style-type: none"> <li>Trajectories in place and monitored/reported on through Board Governance Structures.</li> </ul>
7.4	Develop a plan to reduce NHSL's energy and resource consumption	<b>PP&amp;P Director</b>	Deliverable: <ul style="list-style-type: none"> <li>Energy workstream established with agreed targets and objectives</li> </ul> Measure(s): <ul style="list-style-type: none"> <li>Plan agreed and in place</li> <li>Measurable trajectories for improvement identified, agreed</li> </ul>

			and monitored
7.5	Embed environment and sustainability as a key consideration in service development and re-design, and in particular as a key consideration for all capital developments.	<b>PP&amp;P Director</b>	<p>Deliverable:</p> <ul style="list-style-type: none"> <li>Mainstreaming plan developed.</li> </ul> <p>Measure:</p> <ul style="list-style-type: none"> <li>Monitor progress against project plan</li> </ul>
7.6	Develop a travel plan for the service, staff, patients and service users that promotes environmentally sustainable methods of access and service delivery	<b>PP&amp;P Director</b>	<p>Deliverable:</p> <ul style="list-style-type: none"> <li>Work stream established with workplan in place</li> </ul> <p>Measure:</p> <ul style="list-style-type: none"> <li>Travel plan agreed and signed off through internal S&amp;CC governance structures</li> </ul>
7.7	Development of a Waste Strategy for the Board that details the Board ambitions in terms of waste reduction	<b>PP&amp;P Director</b>	<p>Deliverable:</p> <ul style="list-style-type: none"> <li>Waste Strategy developed</li> </ul> <p>Measure(s):</p> <ul style="list-style-type: none"> <li>Trajectories set</li> <li>Delivery plan agreed</li> </ul>



## 8 Financial Sustainability

Provide effective financial planning that supports financial sustainability, balances budgets and provides value.

*To note – the financial parameters for NHS Scotland are uncertain and these objectives will be further refined as we move into the new financial year*

	Objective	Accountable / Responsible	Deliverables & Measurement of Progress
8.1	Operate within the Revenue Resource Limit (RRL) parameters agreed with SG	<b>Finance Director</b>	Deliverable: <ul style="list-style-type: none"> <li>• Deliver on RRL parameters agreed with SG</li> </ul> Measure: <ul style="list-style-type: none"> <li>• Monitor performance against SG trajectories</li> </ul>
8.2	Operate within the Capital Resource Limit (CRL)	<b>Finance Director</b>	Deliverable: <ul style="list-style-type: none"> <li>• Deliver on CRL parameters agreed with SG</li> </ul> Measure: <ul style="list-style-type: none"> <li>• Monitor performance against SG trajectories</li> </ul>
8.3	Achieve the Cash Requirement	<b>Finance Director</b>	Deliverable: <ul style="list-style-type: none"> <li>• Deliver on Cash Requirement parameters agreed with SG</li> </ul> Measure: <ul style="list-style-type: none"> <li>• Monitor performance against SG trajectories</li> </ul>