# NHS Lanarkshire Board Meeting 25 October 2023



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## SUBJECT: OPERATION FLOW 2 Update and Progress

#### 1. PURPOSE

The purpose of this paper is to provide an update on the report that went to the 30 August Board meeting and PPRC meeting on 27 September 2023.

An update to Board the progress made in relation to:

- Our system re-focus and commitment to delivering the plan
- System preparedness for our Winter Plan launch on 1 November 2023

For approval	For Assurance	For Noting	$\boxtimes$

#### 2. ROUTE TO THE BOARD

This paper has been reported through the Corporate Management Team and through our Executive Flow Oversight Board. This paper has been prepared by Kirsty Orr, Head of Planning and Development

Prepared	Reviewed	🔀   Endorsed	
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#### 3. SUMMARY OF KEY ISSUES

#### 3.1 Operation Flow – Pause Event

A system wide Operation Flow Pause Event was held on 29 September 2023 with managerial, operational and clinical leaders from across our system. The objective of the session was to provide space and time to consider if our plan aligns with our needs, informed by our learning from our peer review visit from colleagues from NHS Tayside. We also wanted to reassess and re-confirm that the plan has the capability to deliver a better Winter for our patients and staff. We also wanted to ensure that there was complete belief in the plan and a commitment to deliver.

Through the discussions during the session we agreed as senior system leadership team that to enhance patient safety and staff well-being our 3 priority areas underpinning Operation Flow continued to be:

Managing Demand across our system

- Maintaining a positive admission and discharge balance
- Maximising Outflow

Importantly, we were assured that the key activities within our Operation Flow 2 Plan would support achievement of the 3 key areas and aligned with the learning from NHS Tayside. Importantly, whilst we await a formal feedback report the team provided some initial reflections during the visit and a high level summary is noted below:

- Extremely supportive of the Senior Clinical Decision Maker (SCDM) workforce model for FNC to maximise increase direction of patients to the right place, first time.
- Opportunities exist to maximise the use of Near Me to reduce footfall to our front doors
- Investment in our Frailty Strategy is essential to respond to current and future demand
- Reconfiguration of our off site bed estate to maximise system flow for this Winter and beyond

## 3.2 System Readiness – Operation Flow 2 Power Up

The primary objective of the task and finish groups in relation to scoping and developing proposals has now been achieved and we are transitioning to our delivery structures to support this work. Some task and finish groups will continue to operate until all our new models of care are developed. However, the majority of the work will be delivered through an Acute site and HSCP based structure to ensure that we maintain a whole system approach. We also know that there are some elements of our plan that are pan-Lanarkshire e.g. FNC development and Frailty Clinical Network which will require some flexibility in our approach to support delivery.

We remain committed to launch and implement our Operation Flow 2 Winter Plan from the 1 November 2023. Given the proximity to delivery we have refreshed the membership our Executive Flow Oversight Board and thereby released operational colleagues to have more time to support the focused improvement work required to ensure successful delivery of the plan.

Creating the right conditions for the success of our Winter plan is essential. Consequently, our preparation has included finalising our new care models and ensuring that our workforce is engaged in all elements of the plan and understand their role in its implementation. System readiness is also underpinned by the delivery and implementation of the detail of the site and HSCP level improvement plans. This focused preparation period - Power up – has ran through the month of October.

The actions that have been progressed to support Power up have included:

 Testing our REACT processes as part of our new Front Door Target Operating Model (Appendix 1) to increase streaming of patients to the right part of our system in UHH and UHW. The testing has heled to ensure that processes are tested and staff confidence is increased prior to Go Live

- Maximise the availability of SCDM in the FNC as part of our new care model to support direction of patients the right place and at the right time to ensure new care model is ready for launch on 1 November 2023
- Increase Near me consultation and Call before you Convey between Hospital @ Home and SAS to increase efficiency and capacity within the service
- Completing the bed base modelling for UHW and UHH sites to inform future planning and consideration of reconfiguration of our bed base to manage demand
- Undertaking focused improvement work within Medicine for Older Adults –
  UHW to maximise flow across the acute site and off site beds
- Fast tracking access to interim care beds at Cumbernauld Care Home to create acute capacity
- Undertaking a review of all inpatients categorised as Hospital Based Complex Clinical Care (HBCCC) to determine if appropriately coded and placed or if another care location is more appropriate to meet their needs

The actions outlined above are aligned to the Acute sites and HSCP based improvement delivery plans and the remaining actions being progressed through the task and finish group structures.

Importantly, some processes remain underway to complete the recruitment required to ensure comprehensive implementation of the new models of care for Winter 2023/24. However, the system is confident that a phased approach to full implementation will be achieved from the 1 November 2023 in relation to REACT model in UHH and UHW, Expanded Hospital @ Home Capacity and increased Senior Clinical Decision Makers within our FNC.

#### 3.4 Action and Responsibility Framework

We have developed an action and responsibility framework for Operation Flow with triggers outlined across the levels of escalation and action cards which describe roles and responsibilities for each member of the team. The action cards describe the business as usual actions required to maintain safe and effective flow across our whole system. Also incorporated is the further actions and communication required as we move through the five levels escalation as relevant to the corresponding triggers.

In addition, we are developing table top exercises to test that the action and responsibility framework makes sense to frontline, operational, clinical and managerial staff and provides clarify for roles, responsibilities and escalation.

#### 3.5 Evaluating Patient Experience and Staff Well-being

Understanding the impact of Operation Flow from a patient experience and staff welling-being perspective is key for NHS Lanarkshire's learning. Therefore, formal evaluation of Operation Flow 2 will be undertaken in collaboration with colleagues from Strathclyde University and preparation work will commence from the 1 November 2023 with qualitative research being progressed during December 2023. Our findings will be shared with the Board as soon as they are available.

#### 4. STRATEGIC CONTEXT

This paper links to the following:

Corporate objectives	XOP	Government policy	
Government directive	Statutory requirement	AHF/local policy	
Urgent operational issue	Other		

#### 5. CONTRIBUTION TO QUALITY

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

## Three Quality Ambitions:

Safe   Effective   Person Centred	Safe
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## 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

We have developed a performance framework to measure ward, site and system level metrics for the duration of Operation FLOW 2. The will also support scrutiny of the impact of secured funding.

#### 7. FINANCIAL IMPLICATIONS

At present existing resources, including staff, are being repurposed to contribute to the programme. However, resource planning in relation to proposals which will increase capacity and create capability have been approved and recruitment processes are underway.

#### 8. RISK ASSESSMENT/MANAGEMENT IMPLICATIONS

A risk management framework has been developed to underpin this work. A significant risk for successful delivery of Operation Flow 2 is successful recruitment of the workforce to ensure the delivery of the new Target Operating Models.

#### 9. FIT WITH BEST VALUE CRITERIA

This paper aligns to the following best value criteria:

Vision and leadership	Effective partnerships	Governance	and	
		accountability		

Use of resource	es	Performance management		Equality	
Sustainability		C			
10. EQUA		DIVERSITY / FA	AIRER S	COTLAND DUT	TY IMPACT
Has an E&D ,	FSD Impact	Assessment has bee	n complet	red?	
Yes X					
our population	n from an eq	ped and is cognisant uality and inequalition ed and updated thro	es perspec	-	•
11. CONS	SULTATION	N AND ENGAGE	MENT		
of the project. briefings and	A comprehenvideos in or	our system and to ornsive communication der to help achieve Operation Flow 2	ns plan ind e staff an	cluding written and d public buy in a	d face-to-face and celebrate
12. ACTIO	ONS FOR T	HE BOARD			
The Board are	asked to:				
• Note t	he work in pr	ogress for Operation	n Flow 2.		
Approve		Gain Assurance		Note	
13. FURT	HER INFO	RMATION			
For further inf	ormation abo	out any aspect of this	paper, pl	ease contact;	
Name: Designation: Telephone:	Kirsty Orr Head of Plan 0780576361	nning and Developm 5	nent		

October

**Colin Lauder**Director of planning, property and performance 17

2023

Appendix 1 – Front Door Target Operating Model

## TARGET OPERATING MODEL



