Our Vision
Over the course of the next five years, everyone is able to live longer healthier lives at home, or in a homely setting and, that we will have a healthcare system where:

- We have integrated health and social care
- There is a focus on prevention, anticipation and supported self-management
- When hospital treatment is required, and cannot be provided in a community setting, day case treatment will be the norm
- Whatever the setting, care will be provided to the highest standards of quality and safety, with the person at the centre of all decisions supported through House of Care and Realistic Healthcare approaches

There will be a focus on ensuring that people get back into their home or community environment as soon as appropriate, with minimal risk of re-admission

Our Mission
- improving the health of the population,
- improving the quality of healthcare,
- achieving value and financial sustainability and
- improving staff experience

Better health, better care, better value

Our Values
- Care and Compassion
- Dignity and Respect
- Quality
- Teamwork
- Openness, Honesty and Responsibility
Our Objectives

1. Protect and Improve the Health of Our Population
2. Improve Quality, Safety and Patient Experience
3. Improve Access to Care and Treatment
4. Shift the Balance of Care from Hospital to a Community Setting
5. Improve the Experience of Our Staff
6. Achieve Greater Financial Sustainability and Value
7. Develop Workforce Plans including Workforce Supply
8. Utilise Innovation and Technology to Support Transformational Change
9. Work With Regional and National Partners To support Transformational Change
# 1. Protect and Improve the Health of Our Population

**Ensure a greater focus on the social determinants of health by:**
- delivering a “health in all policies” approach in Community Planning Partnerships with a focus on prevention and tackling inequalities

**Prevent the spread of communicable and non-communicable diseases and environmental hazards through:**
- the delivery of an effective health protection function for NHS Lothian
- implementing screening and immunisation programmes to meet nationally agreed targets across the NHS Lothian area

**NHS Lothian:**
- continue to develop the Smokefree Lothian programme
- support the introduction of Smokefree prisons by November 2018
- respond to and begin to implement Scottish Government strategies for obesity, drugs, and alcohol when these are published during calendar 2018

**Contribute to service improvement within NHS Lothian and partner organisations by:**
- supporting epidemiological planning, quality improvement and health promotion work, within health and social care partnerships and hospital settings
- creating a focus on prevention activity
- supporting partnerships to engage with wider community planning functions
- publishing our equality and human rights plan in June 2018
- implementing our research and development strategy throughout the year

**Continue to improve and implement our arrangements for public protection by:**
- participating fully in Chief Officer Groups in East and Mid, Edinburgh, and West Lothian
- implementing the named person legislation as and when it is introduced during 2018/19

**Improve oral health across NHS Lothian through:**
- developing an NHSL oral health implementation plan to support the national Oral Health Strategy, by December 2018

**Work regionally to:**
- Establish an East of Scotland Diabetes Prevention Partnership to develop a major preventative approach to address the prevalence of type 2 diabetes across the region
2. Improve Quality, Safety and Patient Experience

Quality and Innovation Strategy 2018-23
The draft strategy will be submitted to NHS Lothian Board for approval in June 2018. Future Executive Directors objectives will be linked to the quality strategy, networks and pathways.

Upscale prototyped models of Quality Management
a) Clinical Quality Networks (aka ‘Networks’)
b) Clinical Quality Pathways (aka ‘Pathways’)
Create (or extend existing) Networks in our major campuses and localities in year 1; expand and develop these over the subsequent four years.

Create novel opportunities for staff to support the Quality Management System
Expand, support and facilitate the workforce to further develop our QMS through a blend of ‘traditional’ Improvement Advisors and staff from across the organisation undertaking part-time Fellowships.

Develop and expand the Training Programme
Retain the basic design elements of the current Quality Academy Programmes but expand them alongside the new broad-based leadership development programmes.

Develop and expand the Coaching Network
Grow our existing coaching network in scope, scale and faculty with special focus on supporting Networks.

Financial analytic support
Develop support for the current and future work across Pathways and Networks

Healthcare data analytic support
Continue to implement the 2016 Information Strategy

Communications support
Understand the information and ‘marketing’ needs of all key stakeholders, especially but not exclusively staff, public and patients

Learning and Evaluation Unit
Evaluating our progress, capturing, organising and sharing lessons learned.

Commercial Programme
Weaving the operations of QMS into everyday operational activity from the outset will allow Quality Directorate to focus externally and commercially over time

Patient Safety - Hospital Associated Infection (HAI)
Continue to reduce Clostridium difficile infections per 1000 occupied bed days (0.32) SAB infections per 1000 acute occupied bed days (0.24).

Patient Experience
Improving the Primary Care Patient Experience through the new GMS Contract by:
- maintaining and improving access for patients
- introducing a wider range of health professionals to support the expert medical generalist (comprehensiveness);
- enabling more time with the GP for patients when it is really needed and
- providing more information and support for patients

Continue to meet with the SPSO every 6 months and build on current performance

Implement a new service model (increasing service capacity) by September 2018 for meeting the 5 and 20 day performance targets within the model complaints procedure.

Develop a programme of learning from complaints that builds on Tell us Ten Things; Care Opinion and the Care Assurance Standards.

3. Improve Access to Care and Treatment
Confirm deployment of the 2018-19 Scottish Government allocation of £7.4m to support improved access to care and treatment to the Finance and Resources Committee by 25 July 2018

Work towards achieving the delivery of the Children and Young People’s Mental Health Service access standard to ensure that by March 2019, 70% of referrals are offered a first appointment within 18 weeks.

Outline and Deliver trajectories associated with the access standards outlined in 2018-19 Annual Operational Plan by 31 March 2019

- Outpatients
- Inpatients
- Diagnostics
- Cancer 62 and 31 days
- 4-hour Emergency Access Standard
- Psychological Therapies

Progress Regional Planning work streams to clear implementation plans covering:

- major trauma,
- laboratory medicine,
- orthopaedics,
- endoscopy and gastroenterology,
- Diagnostic Regional Models, including the development of clear implementation plans and spend plans for national allocations (e.g. regional allocation of £6.4m for major trauma)

Continue to improve the quality of our physical estate

- By the end of quarter 1, complete the Initial Agreement (IA) for the Regional short-stay Elective Centre at St John’s Hospital, with an Outline Business Case (OBC) by the end of the financial year
- By the end of the financial year, complete the OBC for the replacement of the Princess Alexandria Eye Pavilion
- By the end of quarter 1, establish the Programme Board for the South-East Scotland Cancer Centre Reprovision and complete an IA by the end of the financial year
- By the end of May 2018, bring forward the IA for phase 2 of the Royal Edinburgh Campus Redevelopment, including mental health and learning disabilities, with an OBC completed by the end of the financial year;
- By the end of the financial year, bring forward an IA for phase 3 of the Royal Edinburgh Campus Redevelopment,
including integrated rehabilitation services.
4. Shift the Balance of Care from Hospital to a Community Setting

- Conclude the clinical modelling for the integrated rehabilitation services provided currently at the Astley Ainslie Hospital and conclude the IA to support this by December 2018.

- Conclude the Outline Business Case for the Royal Edinburgh Phase 2 work (mental health and learning disabilities) by December 2018 with agreement of IJBs by the end of March 2018 and presentation to F&R Committee in May 2018.

- The four Lothian Health and Social Care Partnerships have separately submitted to the Scottish Government their plans and actionsto support delivery of the key six indicators agreed with the Ministerial Strategic Group for Health and Community Care (MSG) relating to:

1. Number of emergency admissions into acute specialties
2. Number of unscheduled hospital bed days
3. Number of A&E attendances and the percentage of patients seen within 4 hours
4. Number of delayed discharge bed days
5. Percentage of last 6 months of life spent in the community
6. Percentage of population residing in non-hospital setting for all adults and those aged over 75 years

Trajectories to support monitoring of delivery of the above indicators will be outlined by the Information Services Division utilising 2016-17 baseline activity The actions to be taken forward by the partnerships will support improved flow through NHS Lothian’s acute hospital services and assist in delivery of NHS Lothian’s elective care standards. Details of the partnerships actions to support a shift in the balance of care are included in NHS Lothian’s 2018-19 Annual Operational Plan.

Deliver the four Lothian Integration Joint Board 2018-19 Directions to support transformational change.
5. Improve the Experience of Our Staff

Our shared values – embed our values into everything we do
- Design and implement a 'conversational' guide to support our leaders to embed our values and engage staff
- Review and refresh our approach to values based recruitment to deliver values based selection and messaging throughout the recruitment pathway for all staff by 2020
- Over the next 2 years develop and launch a campaign promoting a culture where sincere, honest and constructive feedback is welcomed

What matters to you?
- Ensure all staff are supported, enabled and encouraged to participate in the imatter staff experience survey and action planning processes to identify what matters to them at work, celebrate success and continuously improve staff experience.
- Launch our Staff Engagement and Experience Plan in 2018 and implement over the next 2 – 3 years, continually developing to reflect feedback from our staff.
- In 2018 we will implement Turas Appraisal and continue to support our staff have a meaningful personal development plan and review conversations so that we achieve 80% compliance with recorded development reviews by 2020 and sustain this level of compliance.

Staff health and well being
- Establish Health and Well Being Groups across the organisation to enable local health and well-being activities where the focus is improving staff health and well-being and on promoting ‘self-care’
- In 2018 develop health and well-being information and resources on a single intranet site, which is easy for all staff to access.
- Throughout 2018-19 we will continue to rollout our training programme in the management of violence and aggression, with a focus on reducing the level of actual harm to staff.

Recognising and celebrating success
- Over the next 2 years build our approach so that we celebrate great work and share best practice as an organisation all year round, not just as an annual event.
Staff communications

- Communications are 2 way. Develop and promote feedback mechanisms, create an understanding of how it makes a difference and show how we are learning from it.
- Promote communications as a shared responsibility for all and develop our approach to social media and other communication channels
- Continually promote our corporate vision, mission and objectives and values to enable effective staff engagement

We are all leaders

- Develop our leaders for change through a bespoke approach so our leaders are ready to lead quality improvement and over the next 5 years work with our 3000+ leaders to embed a collaborative and compassionate leadership culture.
6. Achieve Greater Financial Sustainability and Value

- Further develop the National Financial Framework in partnership with the Boards in the East Region.
- Implement the Boards Strategic Financial Plan and set out plans to ensure the best use of available resources and return NHS Lothian to recurring balance.
- Deploy, test and embed financial tools, within Clinical Quality Programmes to demonstrate cost savings and avoidances through reduction of waste and unwarranted variation.
- Deliver recurring efficiency and productivity savings of circa 3% and maximise the availability of non-recurring cost efficiencies
- Embed the grip and control approach to financial management
- Maximise the opportunities from working collegiately with Regional Board partners to deliver a sustainable resource model
- Develop and implement an effective prescribing programme as part of a wider transformation agenda.
- Deliver the 2018/19 capital investment programme including the commissioning of the RHSC & DCN development opening in 2018, East Lothian Community Hospital, a number of primary care premises, replacement boilers at St John’s Hospital and develop the business cases for phase 2 of the Royal Edinburgh Hospital Redevelopment.
- Manage the risks for replacing the existing medical equipment assets and deliver a longer term medical equipment strategy integrated with eHealth and data management
- Work with Regional partners to develop a wider property and asset management strategy
- Develop a resource framework to support the implementation of the new GMS contract, including a prioritisation approach to property.
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<td>1.</td>
<td>Develop a 3 year eHealth Strategic Plan during 2018-19</td>
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<td>2.</td>
<td>Continue with a surplus asset disposal programme, including engaging with community interests</td>
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7. Develop Workforce Plans including Workforce Supply

We will develop initial ‘Workforce Impact Assessments’ for new national, regional and board level service redesign recommendations.

We will develop workforce scenario modelling to support the development and implementation of the Regional Health and Social Care Delivery Plan in conjunction with colleagues in other Regions.

We will develop of a detailed risk assessed workforce plan for the development and recruitment of the multidisciplinary team that will be required to support the implementation of the new GMS contract by the end of 2021.

Prepare for new legislation (2020) for safe staffing levels through implementing E-Rostering, leave planning and Safe Care to all areas in conjunction with the application of National Workload and Workforce Planning Tools.

We will progressively address the actions set out in the NHS Lothian Workforce Plan to improve workforce sustainability and widen workforce supply routes through:

- Implementing an early careers and apprenticeship delivery plan
- We will increase our youth employment rate by recruiting a minimum of 60 modern apprentices in 2018 – 2019 and sustain this as a minimum year on year.
- Promoting NHS Lothian as an employer of choice amongst all potential future employee groups selling careers not jobs (earn, learn, progress)
- Deliver an additional 61 Health Visitors by the end of 2018
- Maintain nursing vacancies at 5% during the year
- Enhancing our collaborative relationships in cross boundary partnerships to ensure workforce planning aligns to education provision and that career progression pathways and articulation routes are accessible and achievable (for example regional/national educational programme for Operating Department Practitioners and return to nursing practice programmes during 2018)
- Expanding advanced practice roles within the non-medical workforce, particularly in primary care
- Development and roll out of career frameworks within the non-medical workforce to encourage and support the development of our workforce and to attract new staff.
- Implementing changes in medical training pathways as part of reshaping the medical workforce whilst working regionally
to address any impact on service provision.

We will recognise the positive impact of employment and education on health inequalities and will improve social mobility in our workforce through a range of employability partnerships and career frameworks.

We will implement a digital workforce strategy with the ambition measurably increasing the digital capability of staff at all levels

Achieve and sustain 80% compliance with mandatory training.

Establish a regional staff bank initially for critical care and theatre nursing and Medical staff during 2018.
8. Maximise the Potential for Innovation and Technology to Deliver Transformational Change

Creating an enhanced culture across the whole of NHS Lothian that will enable the development and then implementation of innovative transformational solutions, that will reduce the gap between demand and capacity as aligned to strategic direction and operational pressures as identified by staff and citizens.

- Deliver the strategic aims for 2018/19 as set out in the national Digital Health and Social Care Strategy 2017-22.
- In line with the implementation of the NHS Lothian Innovation Programme Mission Plan 2018-2023 set up an Innovation Unit.
- The Innovation Unit will lead on the provision of training and support for staff in the application of the Creative Problem Solving methodology creating local Innovation Champions across the organisation.
- The Innovation Unit will develop the reporting framework to measure the impacts achieved from the NHS Lothian Innovation Programme Application, which will include the means to confirm the return on investment that is being delivered.
- The Innovation Unit will lead on forming at least one each of the following collaboration (crowds) that will best deliver solutions to the Strategic and Operational Challenge Statements set by NHS Lothian:
  - **Open Innovation collaborations** – bringing together internal and external problem solvers to co-design and implement innovation solutions. (Delivering new products).
  - **User Innovation collaborations** – supporting and empowering staff and citizens (patients) to co-design together radical solutions that will add value to staff and patients and will deliver efficiencies. (Supporting and encouraging Entrepreneurs/Intrapreneurs).
  - **Frugal Innovation collaborations** – enabling the recombination of existing knowledge and technologies to deliver innovative solutions that extract more value, without the need for significant R&D time or considerable additional investment. (Maximising existing resources.)
  - **Citizen innovation collaborations** – working with local communities to deliver innovative solutions to social challenges that impact on their health and social wellbeing. (Delivering societal change)
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<th>9. Work With Regional and National Partners To support Transformational Change</th>
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| *This section pulls together objectives presented in other sections to show the NHSL commitment to the regional and national transformation approaches*

We will work throughout the year with our partners in NHS Fife, NHS Borders, the Scottish Ambulance Service and NHS24, IJBs in Borders, East Lothian, Edinburgh, Fife, Midlothian, and West Lothian, as well as NHS Boards and organisations across the country to;

- Establish an East of Scotland Diabetes Prevention Partnership to develop a major preventative approach to address the prevalence of type 2 diabetes across the region.

- Take forward the Primary, Community, and Social Care work streams of the East of Scotland Delivery Programme Board, including realistic care and realistic medicine, specialist commissioning, diabetes, mental health, and others.

- Take forward the Acute Hospitals Work Streams, including major trauma, endoscopy and gastroenterology, radiology, orthopaedics, ophthalmology, laboratory medicine, and elective centres.

- Work with partner boards to align support functions wherever possible, with greater alignment of financial plans including capital plans, where possible, and the national financial framework.

- Work with our partner boards in the South-East of Scotland on workforce planning and on supporting functions, and establish regional nurse and medical staff banks through the year.

- Take forward revised national planning arrangements in conjunction with other regions, and with National Services Division.