

REPORT

Return to Transformation

Edinburgh Integration Joint Board

21 July 2020

Executive Summary

1. In February 2019 the Edinburgh Integration Joint Board (EIJB) approved the proposal to ringfence £2M to support transformation over the period of the 3-year strategic planning cycle 2019-22.
2. In August 2019 the EIJB approved the publication of the Strategic Plan 2019-22 which incorporated the transformation programme design.
3. Significant progress was made during Phase One (out to 31 March 2020) of the Strategic Plan 2019-22 to prepare and launch the transformation programme.
4. The impact of the COVID-19 pandemic in March 2020, and the resulting resource and capacity pressures have created delays, leading to an adaptation of the transformation programme informed by a comprehensive lesson learned process. This work is closely aligned with the Scottish Government framework of re-mobilise, recover and re-design and the national route map through and out of the COVID-19 pandemic.
5. An interactive session on Return to Transformation (R2T) was conducted with the EIJB on 24 June 2020.
6. This report is designed to further update the EIJB on our planning for R2T and seek approval for adapting the programme into a two-phased approach.

Recommendations

It is recommended that the EIJB approves the two-phase approach to the delivery of transformation as set out in this report.

Directions

Direction to City of Edinburgh Council, NHS Lothian or both organisations	No direction required	✓
	Issue a direction to City of Edinburgh Council	
	Issue a direction to NHS Lothian	
	Issue a direction to City of Edinburgh Council and NHS Lothian	

Main Report

Background

1. In February 2019, the EIJB approved a report by the Chief Officer regarding plans to establish a transformation programme to deliver significant and sustainable change and improvement to health and social care services. The Board approval included ring-fencing £2 million of non-recurring funding from reserves to support delivery of the programme.
2. The Strategic Plan 2019-22, approved by the EIJB in August 2019, set out the scope of the transformation programme and the planned approach for initiation and delivery. The programme is structured around the Three Conversations model, with three main programmes of work aligned to the three conversation stages and a further programme of work delivering cross-cutting, enabling change.
3. Phase One of the Strategic Plan, which ran from August 2019 to the end of March 2020, involved significant development and refinement of the programme and the identification of key workstreams aligned to strategic priorities. Some key projects were initiated within this period, including the initial roll-out of the Three Conversations model, the commencement of Home First, the review of the hospital at home service and initial understanding and development of the bed-based transformation.
4. A new governance framework was established for the programme, with four programme boards each led by a member of the executive team, feeding into an overall portfolio board, chaired by the Chief Officer. The portfolio board considers outputs from the programme ahead of onward reporting to the EIJB.

5. During this period the transformation team was recruited in sufficient numbers to make rapid progress in the majority of projects. This integrated team of project and programme management professionals are working closely with staff and partners to drive and deliver the transformation programme.
6. The transformation programme is scheduled to run for approximately 24 months during Phase Two of the Strategic Plan (Continuation and Implementation) which concludes 31 March 2022.

Impacts of COVID-19 and lessons identified

7. Development and delivery of the transformation programme has been adversely impacted by the COVID-19 pandemic. Programme boards, due to meet for the first time in March/April 2020, were suspended at the outset of lockdown to allow a focus on operational priorities. Members of the extended senior management team who had been identified to act as Senior Responsible Owners (SROs) have had limited capacity to drive forward transformation projects alongside the significant operational pressures, and around 50% of the transformation team has been redeployed to directly support the operational response.
8. Despite the delay in progressing the transformation programme, work has continued where possible. There are some clear examples during the COVID-19 period where it has acted as a catalyst for the acceleration of transformational change. The Home First model has expanded, and we have seen considerable success in dealing with delayed discharge and improved flow across the system. A wide variety of teams have embraced digital opportunities, with the use of 'Near Me' systems in primary care being particularly successful. Staff have also reported that the Three Conversations approach has provided an excellent foundation for how they are supporting people through the crisis.
9. A comprehensive lesson capture exercise was launched in early April and to date has captured over 450 responses and rising. Our existing transformation programme framework is a strong foundation for the kind of strategic change we want to see. However, the changing landscape due to the COVID-19 pandemic has necessitated a review of the programme, both to ensure that it remains strategically aligned and reflective of the EIJB's key priorities and to ensure timelines are realistic and achievable.

Scottish Government Coronavirus Framework and Route Map

10. In May 2020, a project steering group was established, chaired by the Head of Strategic Planning, to oversee planning and coordination to meet the requirements of the Scottish Government's route map for relaxing lockdown. This project provides a clear framework to manage the activity needed in each

of the four stages of the route map, to ensure that health and social care services can successfully re-mobilise, recover and re-design.

11. There are strong synergies between this immediate work and the transformation programme. One of the key principles in both is that there will be no presumption of a return to previous ways of working or the old 'business as usual'. In all cases we will seek to accelerate change and innovation, retaining and building on the positive changes and adaptations implemented through COVID-19.

Revised programme scope and timelines

12. Proposals have been developed to adapt and re-set the transformation programme informed by lessons learned, and to re-scope, plan, and prioritise key transformation opportunities. The proposed changes to prioritisation and phasing will optimise available capacity and exploit opportunities identified during COVID-19. The revised approach will focus staff effort on an agreed set of immediate strategic priorities; this work to begin in August 2020. The remaining project workstreams will be placed into a planned, follow on phase, due to commence from January 2021. There will continue to be a focus on planned 'quick wins' to build momentum and confidence, whilst simultaneously developing overarching plans and business cases for longer-term change, recognising that transformation provides the best opportunity for delivery of both financial sustainability and high quality and modern delivery of services.
13. Appendix 1 sets out the proposed new scope and phasing for the transformation programme. The changes to the programme architecture and scope have been minimal. The programme framework will continue to align with the Three Conversations model, with three main programmes of work and a further programme of enabling change. The review of the programme scope confirms that the vast majority of identified projects remain well aligned with the EIJB strategic vision. Only one identified workstream, a review of Adult Support and Protection processes within programme 2, has been removed from the programme. It is now proposed that this is dealt with as a priority within normal routine business, due to the limited opportunity for true transformation within an area largely governed by statute.
14. The immediate priorities to be considered are:
 - Three Conversations
 - Digital and Technology Enabled Care
 - Home First
 - Bed Based Review
 - Home Based Care
 - The Edinburgh Pact
 - Workforce and Cultural Development



15. A development session with EIJB members on 24 June 2020 explored some of these strategic priorities and the learning from that session is being built into projects as scoping is refined. Discussions focused on some of the main elements of the programme, including: community engagement and the Edinburgh Pact; whole-system changes to embed our Home First model; the roll-out of the Three Conversations approach and digital transformation opportunities.
16. Good progress has been made to date with the development of the Edinburgh Pact. A comprehensive research and engagement workstream has recently started to gain insights to inform the content of the Pact. This involves qualitative and quantitative research through individual interviews with key stakeholders, a series of focus groups and an online survey with partners, service users and citizens. The Pact will build on lessons learned throughout COVID-19, with a focus on supporting communities and optimising recent advances in community involvement and resilience. An initial framework draft of the Edinburgh Pact is scheduled for presentation to the Strategic Planning Group in September 2020 as part of the strategy review.
17. The Home First approach has seen considerable success throughout recent months and is a clear example of an area where planned transformational change has been accelerated. A focus on discharge to assess and access to additional 'Safe haven' beds resulted in historically low levels of delayed discharges in the City. Home First remains a key priority in our adapted transformation programme and it is vital we maintain and building on recent success to embed a sustainable operating model.
18. Development and roll-out of the Three Conversations model has continued throughout the COVID-19 crisis. Most existing innovation sites have continued to engage with individuals and their families using the principles of the approach, often utilising digital technology to remain connected. Governance meetings, suspended at the beginning of the pandemic, have recently been re-established. Further roll-out of the approach is already underway and the expansion of two existing innovations sites will go live in July 2020. A detailed plan has been developed for the next stage of the roll out and is due to be considered by the Executive Management Team in July 2020. This includes a business case setting out how additional resource could assist with the faster scaling up and embedding of Three Conversations. The evaluation report for the first phase of the project has been finalised and shows early indications of positive improvements, for example, waiting times for first contact in innovation sites average 3.8 days in comparison to the previous average wait of 40 days. The evaluation report will be submitted to the Performance and Delivery Committee at the next opportunity.
19. One of the most visible changes over recent months is the rapid upscaling in the use of digital technology, both to facilitate home-working for many of our staff, but also to ensure continuity in the provision of services to some of the

most vulnerable. The transformation programme will seek to capitalise on these changes, using technology and digital tools to facilitate different ways of working and offer choice and flexibility where possible and appropriate. The first phase of the project will focus on digital provision of services, considering opportunities to use both digital tools and technology enabled care aids and adaptations to support people to remain independent at home or in a homely setting for as long as possible.

20. Governance arrangements for the transformation programme are being reinstated from August 2020. The four programme boards will meet monthly to drive progress in each project against a series of planning milestones. The progress and outputs from these programme boards will then be presented to an overarching portfolio board chaired by the Chief Officer. Resources within the transformation team have been re-aligned to ensure project management support is in place for all phase one projects.
21. Appendix 2 sets out the programme dashboards demonstrating the status of all phase one projects and the progress made as at the end of June 2020. Programme progress will be reported to the Strategic Planning Group (SPG) and core EIJB on a regular basis.
22. More detailed timings linked to milestones will be developed in the early stages of project development from August 2020.

Implications for EIJB

Financial

23. The EIJB has invested £2 million in unallocated reserves over a two-year period to support the delivery of transformation.
24. The transformation programme will play a significant part in ensuring that health and social care services are financially sustainable. As the programme progresses, details will be provided to the EIJB in relation to progress with the delivery of financial benefits against agreed targets.

Legal / risk implications

25. There are no legal implications arising from this report.
26. There is a risk that any loss of momentum in delivering transformation and service redesign may adversely affect confidence and will slow down the pace of necessary change. This will be mitigated by the re-establishment of appropriate governance boards and the phased approach to delivery set out in this report.

27. There are no new implications for Directions. As work is produced through the transformation programme, associated Directions can be expected.

Equality and integrated impact assessment

28. The transformation programme aims to ensure good outcomes for the population of Edinburgh and across Lothian where applicable. Including those groups with protected characteristics who are often experience poor outcomes.
29. Full equality and integrated impact assessments will be completed for all transformation projects as they develop to ensure the impacts of any changes are fully understood and managed.

Environment and sustainability impacts

30. There are no environment and sustainability impacts arising as a direct result of this report. However, it is recognised that all future models of care and delivery must take due cognisance of the impacts on the environment and in respect of climate change targets, including those associated with the Edinburgh 2030 programme.

Quality of Care

31. The improvement and recovery programme seeks to improve the quality of care and people's experience and access to care in Lothian.

Consultation

32. The transformation programme will reach out to a wide stakeholder group to encourage participation in project teams and programme boards.
33. Engagement and consultation plans will be created for individual projects as appropriate.

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Background Reports

1. [Transformation and Change - EIJB report February 2019](#)
2. [Strategic Plan 2019-22 – EIJB report August 2019](#)

Appendices (on powerpoint slides)

Appendix 1	Transformation Programme Scope and Phasing
Appendix 2	Transformation Programme – Phase One Dashboards, June 2020

RETURN TO TRANSFORMATION

Report Appendices – 21st July 2020

Edinburgh **Health and**
Social Care Partnership



Appendix 1

Programme Scope and Phasing

PHASE 1
JUNE 2020 – DEC 2020

**Conversation 1:
Listen and Connect**
SRO: Tom Cowan
PM: Rachael Docking

**Conversation 2:
Work intensively with people in crisis**
SRO: Jacqui MacRae
PM: Hazel Stewart

**Conversation 3:
Build a Good Life**
SRO: Tony Duncan
PM: Hazel Stewart

Conversation 4: Cross-cutting enablers
SRO: Moira Pringle;
PM: Rachael Docking

Three Conversations
SRO: Nikki Conway

Home First
SRO: Fiona Wilson

Home Based Care and One Edinburgh
SRO: Alana Nabulsi

Workforce and Cultural Development
SRO: Neil Wilson

**Technology/Digital Enabled Care/
Community Equipment**
SRO: Hannah Cairns

Bed Based Care
SRO: Mark Grierson

The Edinburgh Pact
SRO: Linda Irvine-Fitzpatrick

PHASE 2
JAN 2021 ONWARDS

Community Frailty Service
SRO: Katie McWilliam

Medical Day Hospitals
SRO: Katie McWilliam

Market Facilitation
SRO: Alana Nabulsi

Digital Strategy for Business
SRO: Sheena Muir

Front Door Access
SRO: David White

Transitions
SRO: Mark Grierson

Future Focused Infrastructure
SRO: Mark Grierson

Community Investment
SRO: Angela Lindsay

Appendix 2

Phase 1 Portfolio/Project Dashboards – June 2020

Edinburgh Health and Social Care Transformation: Phase 1 Portfolio Dashboard – June 2020

PROGRAMME/PROJECT RAG STATUS – JUNE 2020			
PROGRAMME / PROJECT NAME	May 2020	June 2020	Trend
Conversation 1: Listen and Connect			
Digital/Technology Enabled Care/Community Equipment	Yellow	Yellow	→
Three Conversations	Yellow	Green	↑
Conversation 2: Work Intensively with People in Crisis			
Home First	Yellow	Yellow	→
Conversation 3: Build a Good Life			
Home Based Care	Yellow	Yellow	→
Bed Based Care	Red	Yellow	→
Edinburgh Pact	Yellow	Green	↑
Programme 4: Cross-cutting Enablers			
Workforce & Cultural Development	Red	Red	→

KEY PORTFOLIO RISKS – JUNE 2020			
ID	Risk Name	Risk Description	Mitigating Actions
1	Staff resourcing	Due to delays caused by Covid-19, there is a risk that funding for the Transformation team will end without all programme activities being completed.	EMT is prioritising and phasing projects to manage current resource. Some projects/workstreams are proposed to be moved to 2nd phase (2021). Detailed resource planning and options appraisal to be completed in 2021.
2	Delay to financial benefits	There is a risk that Covid-19 related delays to delivery of the programme could have knock on implications for the delivery of financial saving.	Project risks will be reviewed and assessed once the programme amendments are agreed and in place. Early focus on defining financial benefits and agreeing delivery plans.
3	Wider internal capacity	There is a risk that there will be limited capacity within management and frontline teams to provide subject matter expertise and support transformation projects, leading to delays.	The proposed two-phase approach to delivery will reduce demands on teams and managers. The management team is prioritising and phasing project work to support some anticipated capacity issues.
4	Project resourcing	There is a risk that the additional impacts and challenges of Covid-19 could mean that funding/investment in specific projects will no longer be available due to changing landscape and different priorities.	All project funding requirements will need reviewed when the programme scope is agreed. Any funding requirement for projects within scope will be identified and agreed at the project planning stage.

C1. Digital/TEC/Equipment

MAY
2020

JUNE
2020

To increase and improve our use of digital solutions to delivery of services, technology, and equipment in a more coherent, joined up, and personalised way, to support people to remain at home for longer



SUMMARY OF CURRENT STATUS

This updated project in R2T combines elements of 3 projects from the previous Transformation Programme (Digital Strategy for Business; Technology Enabled Care; Community Equipment), with a focus on technical or digital solutions to delivering our services. Workstreams will be created to recognise the key elements. A new SRO has been identified to lead the combined project, due to her expertise and knowledge in this area and PM resource has been confirmed. Initial meetings with SRO and programme team are scheduled and key focus is now to agree project scope and timescales. During Covid, we have seen an incredible response across our services in how quickly digital advances were put in place, and how flexible and adaptable staff were. We have been reviewing digital lessons learned from Covid-19 to identify opportunities, and discussing these in detail with service managers. Stakeholder engagement with ATEC24 and partnership leads for Community Equipment in East and Midlothian has taken place this month to inform priorities and opportunities.

COMPLETED ACTIONS THIS MONTH



- Review of the Lessons Learned related to Digital
- Virtual meetings with colleagues across EHSCP to understand digital changes during C19
- Engagement meetings with ATEC24 staff to understand current issues and recent changes in service
- Facilitated workshop held with ATEC24 to develop a vision and carry out SWOT analysis
- Meetings held to understand budget position and financial challenges
- Engagement with locality OTs/PTs to understand needs of service

PLANNED ACTIONS NEXT MONTH



- Induction for new SRO and agreement of project scope and workstreams
- Update Project brief & establish project board
- Draft first version of a report about digital opportunities and challenges during Covid-19 (and agree those that are Transformation V BAU)
- Follow up CE benchmarking exercise with leads/ further examples
- Work on options appraisal for Comm Equipment (including workshop and data analysis)

KEY MILESTONE PLAN



MILESTONE	Jul	Aug	Sep	Oct
Initial meeting with new SRO (6 th July)	■			
Agree project scope	■			
Report on digital opportunities	■			
Establish project board		■		
Work on options appraisal CEM (including workshop and data analysis)			■	

KEY RISKS AND MITIGATIONS



Risk of a second wave of Covid-19 stalling activity, in particular stakeholder engagement opportunities	Detailed resource planning within transformation team to ensure continuity for vital projects
Risk that due to work to date we rush to a solution before identifying vision and how we get there	Ensure adequate scoping to understand work to date and let it inform thinking, while also being clear what the problem actually is, what people really need, and we might get there
Risk that project scope is too broad	Ensure clarity of scope and where appropriate phased approach to delivery of workstreams. Assess PM resource and adjust if needed.

C1. 3 Conversations

MAY
2020

JUNE
2020

To incorporate the 3C approach across the EHSCP

SUMMARY OF CURRENT STATUS

As the Partnership begins to establish a 'new normal', the 3C project is transforming to meet the new situation. Good progress has continued to be made over recent months. Discussions are underway to expand two of the existing sites (Longstone and South West), with the first of these anticipated to go live in early July. Making It Happen meetings resumed on 19 June for operational staff and the Project Board. A paper setting out the recommended strategic direction and resourcing of the project will be discussed by EMT in July, with options for faster scaling up of the model. The Year 1 evaluation report has been circulated to EMT for approval and highlights some key improvements in waiting times and some early indications of potential financial benefits. The project was discussed at the IJB Development session on 24 June and strong support and interest in rolling out quickly was expressed.

COMPLETED ACTIONS THIS MONTH



- MIH resumed on 19 June with reps from all sites
- IJB Development session 24 June
- Swift development work nearing completion
- Integrated Impact Assessment completed
- Longstone North site proposal approved by Project Board
- South West expansion initiated
- Strategy paper first draft discussed by Project Board
- Social Work Scotland interest in 3C approach explored



PLANNED ACTIONS NEXT MONTH



- Strategy paper (inc resource plan) to go to EMT
- Evaluation report to be approved and circulated
- Swift approval meeting to be arranged
- Discuss potential cost avoidance savings with Finance. 3C is the mechanism for delivery of purchasing savings, as set out in the Savings Governance workstream
- Longstone North innovation site go-live
- Develop South West expansion proposal
- Restart strategic MIH meetings

KEY MILESTONE PLAN



MILESTONE	July	Aug	Sep	Oct
Strategy paper and resource plan approval /implementation	[Progress bar]			
Longstone North site go live and 13 weeks	[Progress bar]			
South West proposal development	[Progress bar]			
South West go live and 13 weeks		[Progress bar]		

KEY RISKS AND MITIGATIONS



Coronavirus – risk that reduced community resources will limit the effectiveness of the 3C approach

As lockdown lifts, day service/respite/other resources are beginning to reopen. Edinburgh Pact project will pick up aspects of community activity and resource during Covid-19

Risk that available resources for roll-out will limit the project's ability to capitalise on the IJB's support

Business case developed for increasing 3C support by creating a dedicated post to support implementation.

C2. Home First

MAY
2020

JUNE
2020

The Home First project will look to transform pathways between acute and community settings. It will include the transformation of services to better support people to remain at home or in a homely setting, preventing admission to hospital where it is safe to do so.

SUMMARY OF CURRENT STATUS

The COVID-19 pandemic has presented an opportunity to accelerate the roll out of Home First across the city. Initially, this focused on discharge to assess and the use of safe haven beds to get those who do not need acute care back home or to a homely setting. Delayed discharges are at historically low levels however, with services scaling up and routine hospital procedures being reintroduced it is possible that these could start to rise again. To maximise on the learning and progress gained throughout this period we need to build on the momentum and scale up our Home First service offering. This will include consideration of a sustainable staffing structure for the service.

COMPLETED ACTIONS THIS MONTH



- Data capture exercise underway to understand demand and capacity
- Increased use of Hospital @ Home
- Home First resource requirements to sustain BAU identified
- Links to Bed Based review project established

PLANNED ACTIONS NEXT MONTH



- Analysis of Lessons Learned to inform project scope
- Analysis of data capture to understand demand and capacity
- Review of referral process
- Plan to scale up existing Home First service
- Link to other Lothian Partnerships to try and have a consistent approach

KEY MILESTONE PLAN



MILESTONE	July	August	Sept	Oct
COVID-19 response	[Progress bar]			
Project brief and scope agreed	[Progress bar]			
Options appraisal		[Progress bar]		
IIA		[Progress bar]		
Home first model developed		[Progress bar]		

KEY RISKS AND MITIGATIONS



There is a risk that the project progresses throughout the COVID-19 pandemic due to necessity without the relevant controls in place	Project will be restructured to incorporate the work that has taken place throughout the pandemic
There is a risk that demand is too high for the existing team to manage resulting in reputational damage to the service	Roll out of the service to be staggered to ensure the resources are available across the city to manage demand
Due to the accelerated nature of the roll out of Home First, further work will be required to embed the process into BAU.	Comms and engagement strategy to be developed to ensure all staff are aware of Home First and the service it offers. Home First Edinburgh definition to be developed to provide clarity

C3. Home Based Care

MAY
2020

JUNE
2020

The Home-Based Care project will look to transform the approach to supporting people in their own homes. It will consider both internally provided and externally commissioned home care services, along with other specialist support provided within the home. The project will look at capacity and redesigning services to improve outcomes and increase efficiency. It will consider both day time and night time supports.

SUMMARY OF CURRENT STATUS

The project has progressed well during the COVID pandemic. It remains vital that timelines do not slip as a number of contracts are up for renewal in October 2021. Funding was recently secured by the Contracts Manager to use Price Waterhouse Cooper (PWC) to undertake the discovery phase for a “One Edinburgh” approach to the provision of care at home. PWC joined the Partnership for a 3 week piece of work which focused on gathering information from a select number of providers plus our internal care at home service. They used this to develop a reporting dashboard ,the structure of a command centre and a comms and engagement plan which proves the concept that we could change our service delivery model and achieve efficiencies. The focus of the project will now shift to the implementation of a new model, including consideration of the shape in internal home care services.

COMPLETED ACTIONS THIS MONTH



- One Edinburgh discovery phase (PWC)
- One Edinburgh outputs delivered
- Identified gaps in internal data
- Presentation of outputs to EMT

PLANNED ACTIONS NEXT MONTH



- Presentation to Scottish Government
- Bid for additional funding / resource to progress One Edinburgh workstream at pace
- Care at Home delivery model to be agreed
- Provider engagement to be planned

KEY MILESTONE PLAN



MILESTONE	July	August	Sept	Oct
COVID-19 response	█			
One Edinburgh progression	█			
Project brief and scope agreed		█		
Options appraisal		█		
IIA			█	

KEY RISKS AND MITIGATIONS



There is a risk that further funding is not available impacting on the pace at which the One Edinburgh workstream can progress

The outcome of these discussions will inform the project scope, if funding is not available, an options appraisal would be needed to agree how best to progress and incorporate the work completed to date

There is a risk that the Home First project increases the demand for Home Based Care services resulting in capacity challenges especially in light of the current situation with Covid-19

Consider the impact of the Home First project when modelling the future service volumes to ensure the provision that is tendered is adequate to support future requirements. Over 65+ external provision inter-dependency on decisions about internal provision and levels

C3. Bed Based Care

MAY
2020

JUNE
2020

The projects objectives are to transform and redesign a broad range of bed-based services across the Partnership, taking into consideration demand and capacity and, will design and implement the optimum model for the provision of sustainable bed-based care services.

SUMMARY OF CURRENT STATUS

Elements of work have been completed in the past relating to bed based services but a defined scope for the Bed Based project has yet to be agreed. The intention was to use a Bed Base Workshop (scheduled by the Chief Officer's office) on 17th March 2020 to bring together the various service leads to define the scope but due to lockdown measures this was postponed. Through work that was initiated as a direct response to the COVID pandemic, elements of the BBC project have progressed. A high level discussion paper was presented to the EMT on 18th June and an options appraisal on the move of services from Liberton Hospital to the Jardine Clinic at the REH will be presented on the 2nd July.

COMPLETED ACTIONS THIS MONTH



- Discussion paper and recommendations developed on wide range of Bed Based service areas
- Agreement from EMT to review options around move from Liberton to the Jardine Clinic
- Options paper drafted for presentation at the EMT on 2nd July

PLANNED ACTIONS NEXT MONTH



- Establish project team to progress work on preferred option for Liberton Hospital
- Integrated impact assessment of preferred option
- Rearrange bed based workshop from March
- System wide demand and capacity review

KEY MILESTONE PLAN



MILESTONE	June	July	August	Sept	Oct
Recommendations paper	█				
Options appraisal (Liberton)	█				
Integrated Impact assessment (Preferred option)		█			
Bed Base Workshop		█			
Bed Base strategy		█	█	█	█

KEY RISKS AND MITIGATIONS



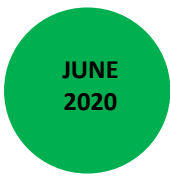
There is a risk that stakeholders may feel disengaged with project activity due to the timeframe for delivery of key documents

Ensure key stakeholders are aware and involved in discussions relating to their service areas as early as possible to alleviate any concerns

There is a risk that work on a number of workstreams within this project needs to progress at pace to capitalise on the unique opportunity COVID-19 has presented - via capacity in care homes, capacity in care @ home etc

Project activities to proceed at pace to maximise opportunities presented by Covid-19. Priority workstreams will be planned and dependencies incorporated into the overall plan

C3. Edinburgh Pact



Re-address the relationship between the citizens of Edinburgh and the Health and Social Care Partnership

SUMMARY OF CURRENT STATUS

The impact of coronavirus (COVID-19) has meant the approach of the Edinburgh Pact has had to be adapted, to account for the likely continuation of physical distancing for some time. An approach has been devised which turns many of the recent challenges into opportunities, to start a dialogue and learn from some of the ways the Partnership and citizens have adapted during the pandemic. Research work has commenced with “Thought Leaders” across a wide range of partners and stakeholders. The Edinburgh Pact will be a collaborative piece which will fold in many different workstreams. To ensure we do not lose opportunities to capitalise on community and third sector activity prompted by Covid-19, while the wider work to establish a ‘Community Investment Strategy’ is proposed to be delayed, we will pick up aspects of community resilience and activity within the Edinburgh Pact. This project will be iterative to ensure it remains relevant. It is anticipated the first iteration will be contextualised by the pandemic.

COMPLETED ACTIONS THIS MONTH

- Revised project approach devised
- Project brief completed
- Thought Leaders research interviews conducted

KEY MILESTONE PLAN

MILESTONE	Jul	Aug	Sep	Oct
Thought Leaders Research	█			
Lessons learned	█			
Mobilisation plans	█			
Citizen survey	█			
Photo Voice		█		
Focus groups		█		
Edinburgh Pact dialogue and report			█	

PLANNED ACTIONS NEXT MONTH

- EMT sign off revised project approach
- Complete Thought Leaders research and begin analysis
- Develop and launch public survey (with promotion on digital channels)
- Launch PhotoVoice (tool for gathering community views)
- Preparation for focus groups
- Build in aspects of community and third sector activity into project scope

KEY RISKS AND MITIGATIONS

Significant operational effort is needed across the project team in BAU activities. There is a risk that capacity will not be available as the Scottish Government guidelines evolve.

The COVID continuity plan has been developed to plan and mitigate for additional capacity in the future. The approach has also been devised to utilise existing channels of communication to best effect, limiting duplication.

We may have an unrepresented group of citizens who engage.

Thought Leaders research encompasses views from public, private and 3rd sector agencies. Key community agencies will also be contacted to encourage engagement.

C4. Workforce and Cultural Development

MAY
2020

JUNE
2020

Develop and implement an ambitious and overarching strategy to build high quality, skilled and sustainable workforce, including staff training, development, future workforce plan, retention and recruitment

SUMMARY OF CURRENT STATUS

During the Covid-19 situation the Programme Manager has started initial scoping for the project, including reviewing Scottish Government guidelines for workforce plans that are due in March 2021, and initial development of a project brief. However this project has not moved significantly forward in the current climate and in the absence of a project manager. PM resource has now been identified from within the transformation team to maintain oversight of the project ahead of recruitment of a dedicated PM in the coming months. Initial focus of the project will be on developing a clear workforce strategy for Scottish Government and a focus on “quick wins” to support staff and improve processes in areas such as recruitment and retention.

COMPLETED ACTIONS THIS MONTH



- Meetings held to identify immediate workforce opportunities post Covid-19 and longer-term development of a workforce strategy
- Reviewed Scottish Govt workforce strategy guidelines
- Initial scoping of mental health support and wellbeing for staff across NHSL and CEC

PLANNED ACTIONS NEXT MONTH



- Agree SRO and project scope, aligned with BAU activity on workforce
- Initial meeting with project SRO
- Update Project brief & establish project board
- Detailed project planning to commence

KEY MILESTONE PLAN



MILESTONE	Jul	Aug	Sep	Oct
Initial meeting with new SRO	■			
Agree project scope		■		
Establish project board		■		

KEY RISKS AND MITIGATIONS



Due to Covid-19 this project is underdeveloped and likely to be impacted by changes to workforce guidance	PM now identified to maintain oversight of the project until recruitment to the vacant PM posts is complete.
EHSCP workforce likely to have changed post Covid-19	Data gathering needed on return to BAU to understand impacts on existing workforce
Potential impact on staff mental health and wellbeing as a result of Covid-19	Project scope will include a focus on organisational culture and immediate MH and wellbeing staff support