

Meeting	Grampian NHS Board
Meeting date:	5 August 2021
Item Number 9	
Title:	Strategy Development – A Plan for Our Future (2022 – 2028)
Responsible Executive/Non-Executive:	Adam Coldwells, Director of Strategy and Deputy Chief Executive
Report Author:	Adam Coldwells, Director of Strategy and Deputy Chief Executive

1. Recommendations

The NHS Grampian Board is recommended to:

- a. Note the progress in the development of the strategic plan and especially our ambition to develop it with a much greater focus on inclusivity and engagement (beyond consultation) and the proactive steps to ensure we hear the ‘seldom heard’.
- b. Agree that the assurance for the engagement with the public, partners and our staff will be gained through the Engagement and Participation Committee
- c. Endorse the next steps for the development of the strategic plan
- d. Note the mechanisms for engagement of Board members detailed in the schematic
- e. Agree to receive further updates at their October and December Board meetings with the final draft plan being presented at their February 2022 Board meeting.

2. Strategic context

NHS Grampian (along with the people of Grampian) is developing a strategic plan “A plan for our future (2022-2028)” to replace “The Grampian Clinical Strategy 2016-2021”. The strategic plan will set the direction for the organisation which, in turn, focuses the efforts of all within our organisation towards a common set of goals in line with Scotland’s Framework for Recovery. The strategic plan will also allow us to agree our high-level sustainable financial model for the period, ideally setting out areas for investment (and de-investment) and the three year integrated delivery plan to be submitted to the Scottish Government in March 2022.

NHS Grampian is part of NHS Scotland and so has a number of requirements set out nationally as well as requirements defined within legislation. However, the scope to determine our organisational direction of travel remains significant.

Our strategy will be ambitious for both the population of the Grampian area as well as for the staff who work within our system.

At the conclusion of the first wave of COVID-19 the Board convened a Short Life Working Group for Renewal (SLWG-R) which reported to the Board at its August 2020 meeting. There were four key areas for priority agreed (people powered health, NE collaborative leadership, reducing inequalities and maximising digital) which were further developed in the Chief Executive's priorities for renewal which were shared with the Board in March 2021. The five priorities for renewal are:

- a. Build a single system of public health across the North East
- b. Put the workforce centre stage
- c. Reshape the relationship between NHS secondary care services, health and social care partnerships and communities
- d. Utilise NHS assets to make a step change on inequalities and population health
- e. Embed and accelerate digital changes.

The development of the strategy will build from this strong foundation.

3. Key matters relevant to the recommendation

3.1 Engaging and involving stakeholders

The Board has been clear, building from the findings of its SLWG-R, that it wants to have a health system which both involves and is developed by its population. The development of this strategy provides a key opportunity to take positive steps forward in our model of working with the population, partner organisations and our staff to ensure real ownership in our direction of travel and for us to benefit from lived experience in its development.

The plan is being developed with two key phases of engagement with stakeholders. The initial phase seeks to understand the issues which are important to people and the second phase aims to agree how the issues which are important can be developed. Key to the success of this approach is to work successfully with communities and to build on the issues which they have already set out to others as being important. On this basis our approach has been to work alongside partners such as Councils, Health & Social Care Partnerships, Third Sector Interface organisations and Community Planning Partnerships ensuring a cohesive and joined up approach.

a. Development of engagement questions and approach

It is critical the Strategic Plan is developed with the public, staff, service users and partners to ensure it is fit for purpose, meets the needs of a diverse population and, importantly creates shared ownership in relation to achieving the desired outcomes. This can only be achieved through 'inclusive' engagement in

developing the plan at its various stages which then becomes an ongoing dialogue as part of how we do business. This is consistent with the Board's ambition to promote and create a 'People Powered Health' approach to designing and delivering person-centred care.

The approach to the development of the strategic plan is very much in line with both Scottish Government and COSLA "Planning with People" guidance and NHS Grampian's ambition of meaningful engagement by ensuring that engagement:

- **takes place at the right time** (before decisions are made) – this is the focus of Phase 1 of our engagement, understanding what matters to people to inform the next stages of engagement.
- **is in the right place** (going to where people are and not asking people to come to us) – ensuring we have a range of mechanisms which support this and a high level of opportunities for inclusivity, particularly for those seldom heard and hard to reach individuals and groups (population and staff). Key to this is working with our partners.
- **with the right people** reaching out to everyone with lived experience of using services and who will use them in the future, and not just the people who are forthcoming at sharing their experiences and views.

This approach has commenced at the inception of the process, by seeking input and feedback prior to Phase 1 going live. The engagement questions for Phase 1 were tested with NHS Grampian public representatives and other staff/public groups in order to refine the language to be clear and straightforward to enable all stakeholders to be able to respond.

Our approach contains two main phases for wide stakeholder engagement:

Phase 1 (June - end Aug) - ensure a clear understanding of what matters to people (public, service users, staff and partners), the impact of COVID and the need for change going forward. The output of this will inform the key themes and outcomes which will form the basis of an initial strategic framework for further development with stakeholders in Phase 2.

Phase 2 (Oct - Nov) – sense checking the key messages of what is important, along with further developing the emerging outcomes and key priorities to form the detail of the strategic plan and underpinning three-year delivery plan.

The key emphasis of engagement is on understanding:

- what matters to individuals around their health and wellbeing;
- what matters to individuals who currently access health and care now and in the future;
- what matters to staff in assisting them delivering their roles;
- challenges and opportunities presented by COVID; and
- why there is a need for change in health and healthcare going forward.

A significant amount of work and engagement has taken place with a range of groups, for example with the Engagement and Participation Committee, Grampian NHS Board, Area Clinical Forum, Grampian Area Partnership Forum, Wider System Leadership Team, Integration Joint Boards (IJBs)/Health and Social Care Partnerships (HSCPs), Community Planning and other partners to ensure we have an inclusive map of stakeholders and the existing networks and opportunities to support engagement. Diagram 1 sets out the high-level map of key groups of stakeholders. The mapping work undertaken provides a detailed breakdown within each of these groups which covers a wide range of population groups spanning age, geography and ensuring diversity in our engagement. Our stakeholder analysis ensures that when we undertake our formal equality and diversity assessment on the completed strategy, we have maximised our aspiration for equality and equity in both our approach and in our policy development. We will keep this map live as we continue to meet with various partners around maximising available engagement networks and models.

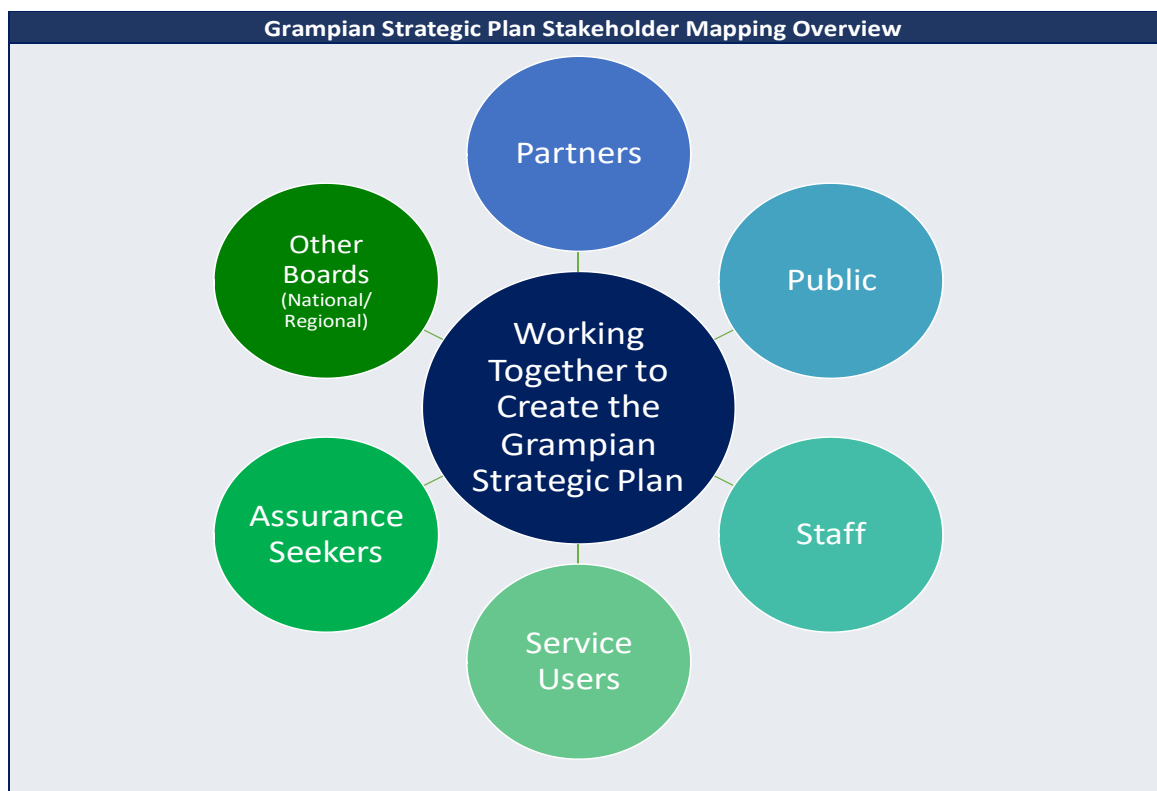


Diagram 1

The stakeholder analysis undertaken has been used to form our extensive Engagement and Participation Plan, which sets out the various engagement networks/opportunities and mechanisms for the various stakeholder groups outlined in the next two sections.

b. Involving the population

Stakeholder Group	Examples of Mechanisms to Support Engagement
People and Communities (Public)	Opinion polls/surveys via social media and bespoke networks, questions in local surveys (i.e. citizen panel, third sector), focus groups and discussions facilitated within local community groups. Targeted at different generations and maximising use of digital engagement where appropriate.
Users of Services	1:1 structured discussions/via focus groups in places where individuals access services, circulation of surveys via colleagues who regularly link with specific groups to support greater understanding of needs. In addition, we will also draw on existing intelligence gathered by Experience/Involvement Teams, IJBs, Councils and other partners.
Seldom Heard	1:1 structured discussions in places where individuals' access, via focus groups, via partner colleagues who regularly link with specific groups to support greater understanding of needs, materials and sessions with translators to allow us to hear ethnic voices whose first language is not English. In addition, we will also draw on existing intelligence gathered by NHS Experience/Involvement Teams, IJBs, Councils and other partners.
Carers	Opinion polls/surveys via social media and bespoke network, via focus groups, via partner colleagues who regularly link/support carers to support greater understanding of needs. In addition, we will also draw on existing intelligence gathered by NHS Experience/Involvement Teams, IJBs, Councils and other partners.

c. Involving staff

Stakeholder Group	Examples of Mechanisms to Support Engagement
Staff	Opinion polls in daily brief, staff focus groups, open sessions with members of the strategy development team and team discussions using the specially prepared materials which allow groups to complete this on their own, links within team/group newsletters. As members of the public/users of services, staff will also be able to access mechanisms available as outlined in other sections.

d. Involving partners

Although this will be the development of a Strategic Plan led by NHS Grampian, it requires to be developed in the context of population health and

with our partners to support a cohesive and joined-up approach required to achieve our shared aim of improving health outcomes and population health across the health and care system and within communities. This approach has been explored and supported by the North East System Transformation Group, the Board and Partners Launch Workshop in April 2021 and more recently at Community Planning Partnerships.

The overall aim is to ensure the Strategic Plan is complementary to partner strategies and Local Outcomes Improvement Plans (LOIPs) creating a high level of cohesion around those aspects where a partnership approach will garner the greatest impact for the population and longer-term sustainability for services across the health and care system.

It is important to emphasise that we do not propose to replicate the work of community planning and the HSCPs/IJBs, but wish to fully utilise their expertise, engagement networks and intelligence to inform our strategic plan and ensure this is inclusive of those stakeholders views and needs who would not normally engage – this will support a more robust plan which has a high level of consistency to ensure NHS Grampian is effectively contributing to those components which require a partnership approach, along with our role as an anchor organisation.

Given the HSCPs/IJBs are at different stages of refreshing their strategic plans, we will have a bespoke approach to ensure that engagement is not duplicated, but existing engagement is fully utilised and built upon. The bespoke approach will also be reflected in the various engagement mechanisms/tools for different stakeholder groups to ensure a high level of inclusiveness across the diverse range of stakeholders.

We are also working with a wide range of partners to ensure that we have a good understanding of, and fully utilise, the engagement and learning already undertaken by partners (locally, regionally and nationally) with various stakeholder groups. We have already commenced work with partners to map this out, along with discussions on how we can build on this intelligence to support further engagement work which also informs the NHS Grampian Strategic Plan.

3.2 Timeline for delivery

The development of the strategy commenced in April 2020 with a session with NHS Grampian Board members and other key partners (Local Authority (x3), Police Scotland, Fire & Rescue, Scottish Ambulance Service, Universities (x2), College, Third sector Interface (x3)). The aim of this session was to 'open our NHS arms' to all of our partners to help shape our strategy and to seek their commitment to help us to develop the plan drawing on their expertise and knowledge.

The plan will be presented to the February 2022 NHS Grampian Board for formal sign off. The plan will have been developed following two phases of engagement with stakeholders. The high-level timeline is shown in Appendix 1.

3.3 NHS Grampian Board leadership

Leadership by the NHS Grampian Board is critical to the success of both the development phase and then delivery of the strategy over the coming years. The key areas of leadership from the Board are shown in Appendix 2 which include setting direction, contributing to the development and, at all stages, their governance role in seeking assurance on what we are developing and how we are achieving that.

3.4 Assurance through the Engagement & Participation Committee

A key aspect for the Board to gain assurance on the engagement for the development of the strategy is being undertaken by its Engagement and Participation Committee (EPC). An initial paper was considered at the June meeting of the EPC which set out the approach to engagement for developing the strategy. The EPC confirmed it was assured on the approach. Regular reports will be submitted to the EPC throughout the development process to provide assurance and seek expertise.

3.5 Update on the initial phases of engagement

The engagement pack was shared with staff, partners and the public at the end of June; the following section gives a very brief outline of the work completed so far:

- Phase 1 of engagement formally launched on 28/06/21, session completed with circa 100 staff (via SLT) and survey live for completion. As at 28/07/2021 720 completed survey responses had been received.
- Significant support and provision of expertise from partners - some partners currently refreshing their strategic plans and we will be ensuring alignment with those who have recently refreshed.
- 'Live' stakeholder engagement plan in place which includes bespoke mechanisms for specific stakeholder groups. Arrangements in place to track delivery and reach.
- Mapping of engagement work already undertaken by NHS Grampian and other partners continues to be updated – this will be used to inform phase 1 and phase 2 engagement.
- Working Group meets weekly - terms of reference in place. HSCP/IJB Strategic Planning and Communication Leads participate in the development on a monthly basis.
- Additional capacity to support the project team has now been put in place to ensure this process is inclusive and robust.

3.6 Next steps in the development of the strategic plan

The plan for the development of the strategy is set out in this paper and summarised in the timeline in Appendix 1.

3.7 Risks and challenges

Key Risks	Mitigations
Unable to engage with seldom heard groups within the population	Identify current partners already supporting these groups and look to work with them to seek input to inform and shape strategy/priorities
Workload and pressures on staff may impact on their ability to meaningfully engage	Various mechanisms and tools are being put in place to reduce this risk - views on these are being sought/tested
Confusion by staff and the public due to duplication of engagement already undertaken by HSCPs/IJBs and other partners	A joined-up approach is being undertaken between the project team and HSCP/IJB Leads. Key stages of the Strategic Plan process is engaged upon and informed by the cross-system Communications Cell on a fortnightly basis to reduce the risk.
Resurgence in COVID will reduce the organisation's ability to undertake this work meaningfully	The temporary pausing of this work will be determined by the civil contingency responses based on the level of response required.
Capacity to deliver a robust strategic plan and to the agreed timescale	Additional capacity has been put in place to ensure the project team has the right capacity in place to support the bespoke model required
Risk of being overwhelmed by evaluation data	Ensure process for the collection and analysis of data is in place and plan agreed for evaluation

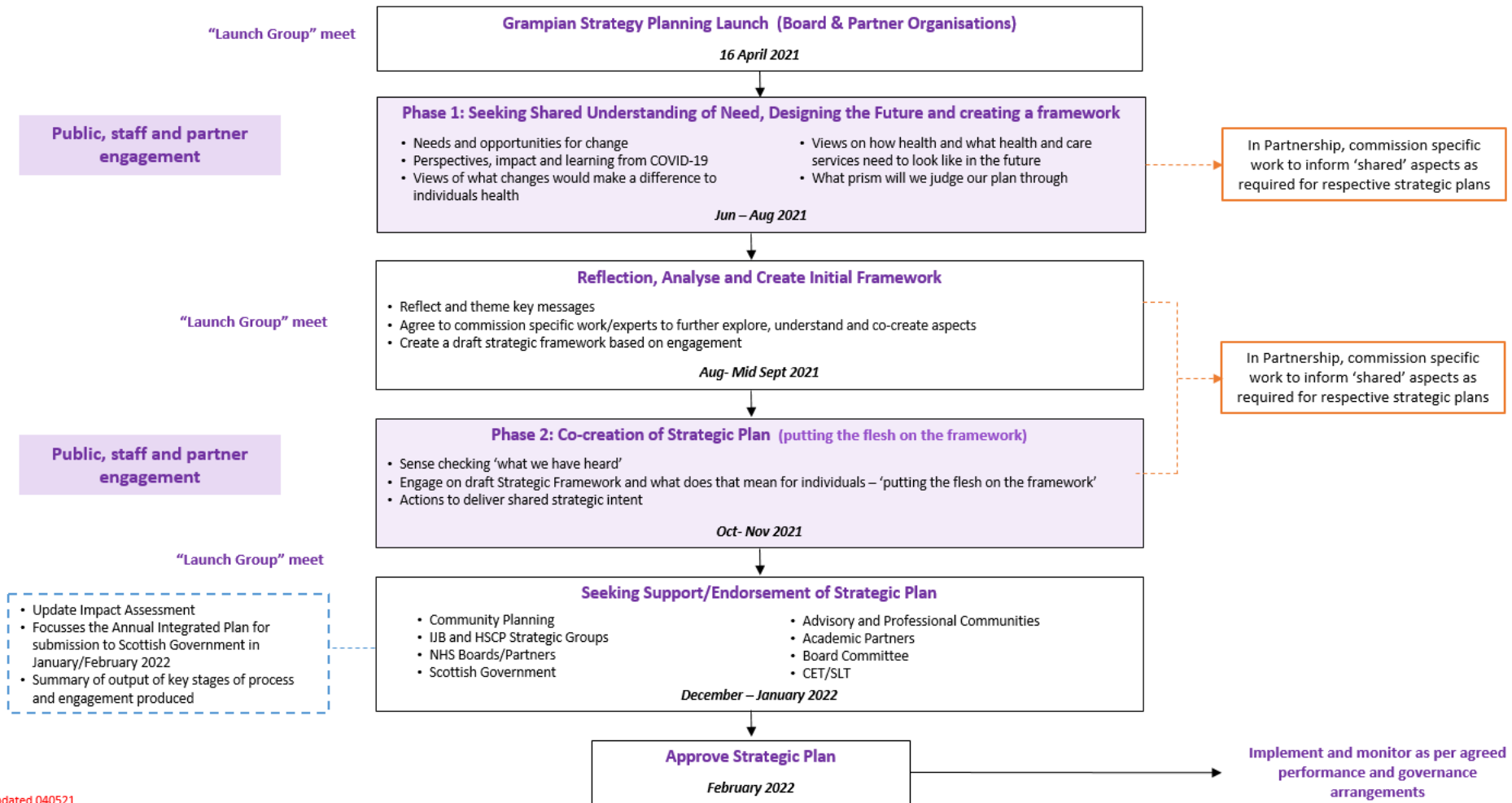
4. Responsible Director and contact for further information

If you require any further information in advance of the board meeting please contact:

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Appendix 1 – Timeline for strategy development

High Level Process for Development of Strategic Plan (Staff, Public & Partners)



Updated 040521

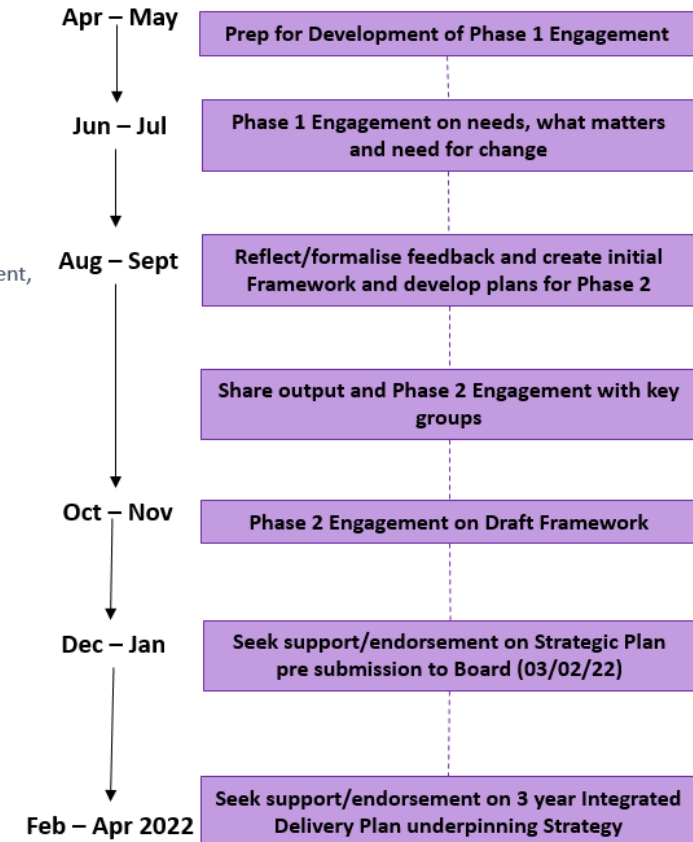
Appendix 2 – Timeline for engagement with Grampian NHS Board

High Level Outline of the Involvement & Engagement of the NHS Grampian Board in the Development of the Strategic Plan (DRAFT V3)

Engagement with NHS Grampian Board

- ✓ **16th Apr Launch with Partners** - Engagement on proposed approach & process
- ✓ **6th May Seminar** - Seek views on engagement mechanism & questions for Phase 1
- ✓ **9th Jun (EPC)** - Report to EPC providing assurance on approach, progress & next steps
- ✓ **3rd Jun Board Meeting** – Updates linked to RMP paper and ACF report
- **Jul/Aug (Virtual)** – Raise awareness of Phase 1 consultation & participation in activities
- **19th Jul (Informal Session)** – Board Phase 1 engagement
- **5th Aug Board Meeting** – Assurance on progress, emergent key themes, steps to support increasing levels of engagement, key risks & next steps.
- **2nd Sep Board Seminar** – Share key themes from Phase 1 analysis, seek views on emerging outcomes & framework to inform focus of Phase 2 Engagement
- **Date TBC Launch with Partners (late Sept)** – Engagement on proposed approach, shared outcomes & key messages for engagement as part of Phase 2 prior to launch
- **7th Oct Board Meeting** – Formal update & assurance on process to date, output from Phase 1 & process for Phase 2
- **Oct/Nov (Virtual)** – Raise awareness of Phase 2 consultation & participation in activities
- **10th Nov (EPC)** - Report to EPC providing assurance on approach, progress & next steps
- **TBC late Nov/Early Dec (informal Session)** - Co-creation of final Strategic Plan
- **2nd December Board Meeting** – Assurance on progress/approach, key themes & priorities from Phase 2 engagement.
- **Date TBC Launch with Partners (mid Dec)** – Seek support on proposed Strategic Plan
- **13th Jan Board Seminar** - Overview of final draft of Strategic Plan & communication plan
- **3rd Feb Board Meeting** – Seek approval of Strategic Plan & communication plan
- **9th Feb (EPC)** - Report to EPC providing assurance on approach, progress & next steps
- **7th Apr Board Meeting** – Seek approval of Integrated Delivery Plan

Strategic Plan Stages



✓ Green – Activity undertaken ➤ Dark Blue – Formal Board Meeting ➤ Light Blue – Board seminar/Informal Board/with Partners ➤ Orange - EPC