

# Supporting better quality health and social care for everyone in Scotland

Our work 2019-2020

The following tables provide detailed information on our work for 2019–2020 and describes:

- the outcomes we wish to achieve
- the objectives of this work
- our stakeholders
- how this works maps to the Cabinet Secretary's priorities, and
- how this work is delivered and supported cross organisationally by teams across Healthcare Improvement Scotland (HIS).

All of our work supports our five strategic priorities as set out in our strategy, Making Care Better setting out the contribution that Healthcare Improvement Scotland can make through its component parts. These strategic priorities underpin all of our work and provide the basis for developing and delivering our work through a quality management system.

- Enabling people to make informed decisions about their care and treatment.
- Helping health and social care organisations to redesign and continuously improve services.
- Provide evidence and share knowledge that enables people to get the best out of the services they use and helps services improve.
- Provide quality assurance that gives people confidence in the services and supports providers to improve.
- Making the best use of resources, we aim to ensure every pound invested in our work adds value to the care people receive.



People who use health and social care are safe from harm.

Primary care workforce is expanded, more integrated and better co-ordinated with community and secondary care, to make primary care more sustainable.

People who work in health and social services feel engaged with the work they do.

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
Primary care improvement portfolio  SPSP in Primary Care GP cluster improvement support New models of care SPSP Dentistry SPSP Medicines	To deliver targeted improvement support to optimise care and service redesign across primary care in Scotland.	<ul> <li>NHS boards</li> <li>Other national organisations</li> <li>Health and Social Care Partnerships</li> <li>Citizens, patients, carers, families and communities</li> <li>Scottish Government</li> </ul>	<ul><li>Integration</li><li>Access</li></ul>	<ul> <li>Primary Care Improvement Team</li> <li>Public Involvement Unit</li> <li>Living Well in Communities</li> <li>Nursing Midwifery and Allied Health Professions (NMAHP)</li> <li>Medicines Team</li> <li>Data Measurement and Business Intelligence (DMBI) Team</li> <li>Evidence</li> <li>Quality of Care, Assurance and Significant Adverse Event teams</li> <li>Transformational Redesign Unit</li> <li>Evidence and Evaluation Support (EEVIT)</li> </ul>

People with dementia and carers will report improved experience and outcomes following a diagnosis of dementia through a focus on improvements in:

- post-diagnostic support
- reduction in stress and distress in hospital settings, and
- care co-ordination in community.

Staff will have improved knowledge, understanding and confidence in supporting people with dementia and carers and have increased access to information on good practice in dementia care.



What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
Focus on dementia portfolio  Acute Care Programme  Care Co-ordination  Specialist Dementia Units  Post-diagnostic Support  International Consortium of Outcome Measures  Scottish Intercollegiate Guidelines Network (SIGN) Dementia Guideline	Work in partnership with national organisations, health and social care practitioners, people with dementia and carers to improve the quality and experience of dementia care and support.	<ul> <li>People with dementia and their carers</li> <li>Scottish Government</li> <li>Alzheimer Scotland</li> <li>NES</li> <li>Scottish Social Services Council (SSSC)</li> <li>Care Inspectorate</li> <li>Scottish Care</li> </ul>	<ul><li>Integration</li><li>Access</li></ul>	<ul> <li>EEVIT</li> <li>NMAHP</li> <li>Quality Assurance</li> <li>SIGN</li> <li>Acute Care Portfolio</li> <li>Primary Care Improvement Team</li> <li>Public Involvement</li> <li>Knowledge Management Team</li> <li>Living Well in Communities</li> <li>People Led Care Portfolio</li> </ul>



People have the evidence and knowledge to enable them to get the best out of the services that they use and help improve services.

Better care of and outcomes for patients.

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
SIGN guidelines  Urinary tract infection  Asthma  Dementia  Chronic pain  Diabetes type 2	To develop evidence- based guidelines for healthcare professionals and associated patient and carer versions and develop ways in which guidance can be more rapidly disseminated and implemented.	<ul> <li>NHS boards</li> <li>Other national organisations</li> <li>Health and Social Care Partnerships</li> <li>Citizens, patients, carers, families and communities</li> <li>Scottish Government</li> </ul>	<ul><li>Integration</li><li>Governance</li></ul>	<ul> <li>SIGN</li> <li>Health Economists</li> <li>Mental Health Access Improvement Support Team (MHAIST)</li> <li>Public Involvement Unit</li> <li>Knowledge Management Team</li> <li>Focus on Dementia Team</li> </ul>



## Improve the quality of care provided to prevent and to minimise the impact of pressure ulcers.

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
Pressure ulcer best practice statement	To revise the existing NHS Quality Improvement Scotland best practice statement to reflect current practice.	<ul> <li>NHS boards</li> <li>Other national organisations</li> <li>Health and Social Care Partnerships</li> <li>Citizens, patients, carers, families and communities</li> <li>Scottish Government</li> </ul>	<ul><li>Integration</li><li>Access</li></ul>	<ul> <li>Standards and Indicators Team</li> <li>Knowledge Management Team</li> <li>Communications Quality Assurance</li> <li>Acute Care Portfolio</li> <li>EEVIT</li> <li>Transformational Redesign Unit</li> </ul>

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People at risk of unplanned time in hospital and their carers have a better quality of life living well at home or a homely setting in their community for longer.

Integrated community-based services are stronger.

Integrated health and social care systems alleviate pressures on unplanned hospital services. Workforce feel engaged and supported in the work they do.

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
Living well in communities portfolio  Living Well in the North (with frailty)  Living and Dying Well in Communities Collaborative  Living and Dying Well in Care Homes Collaborative  Integrated frailty system  Living Well with Long Term Conditions	To support Health and Social Care Partnerships to implement and scale up new ways of delivering services that enable more people to spend time at home or in a homely setting that would otherwise have been spent in hospital.	<ul> <li>NHS boards</li> <li>Health and Social Care Partnerships</li> <li>Citizens, patients, carers, families and communities</li> <li>Scottish Government</li> </ul>	<ul><li>Integration</li><li>Access</li></ul>	<ul> <li>Acute Care Portfolio</li> <li>Focus on Dementia</li> <li>Place, Home and Housing</li> <li>Primary Care Improvement Team</li> <li>Public Involvement Unit</li> <li>Excellence in Care Team</li> <li>DMBI Team</li> <li>Clinical Engagement Team</li> <li>NMAHP</li> <li>EEVIT</li> </ul>

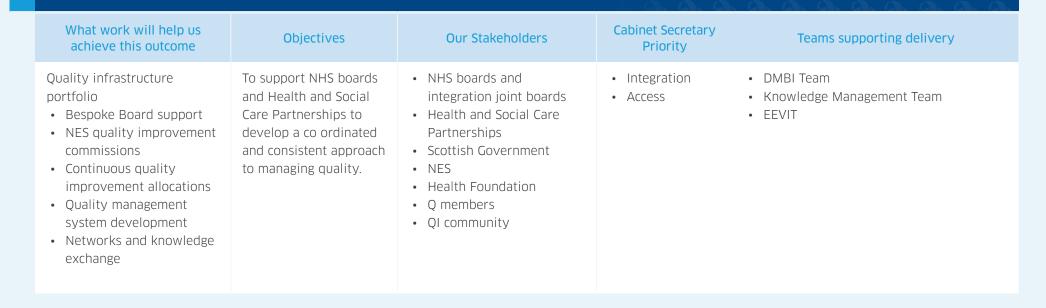
To improve the quality of care for people within acute care settings through a focus on key harms that can be reduced or prevented, improving outcomes and experience for frail people who present to unscheduled acute care services and creating the system and team conditions to enable improvement.



To improve the quality of care for children and families through a focus on key harms that can be reduced or prevented and creating the system and team conditions to enable improvement within maternity, neonatal and paediatric acute care settings.

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
Maternity and Children Quality Improvement Collaborative	Work in partnership with NHS boards to enable improvements in both the care experience and outcomes for children and families in acute care maternity, neonatal and paediatric settings.	<ul> <li>NHS boards</li> <li>People, their carers, families and support networks</li> <li>Health and Social Care Partnerships</li> <li>Scottish Government</li> <li>ISD</li> <li>Royal Colleges</li> <li>Other national organisations</li> </ul>	<ul><li>Integration</li><li>Access</li></ul>	<ul> <li>Primary Care Improvement Team</li> <li>Public Involvement Unit</li> <li>Excellence in Care Team</li> <li>DMBI Team</li> <li>Quality Assurance</li> </ul>

NHS boards and Health and Social Care Partnerships create the conditions and supporting infrastructure required to enable a quality management approach at all levels of the system to be applied.



The quality of healthcare is improved, and the national health and wellbeing outcomes are achieved through consistent quality assurance applied by healthcare providers and organisational reviews.



What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
Review and Inspection (Operational)  • 4 NHS board organisational reviews  • 6 Joint inspections of children's services  • 4 Strategic inspections of adult services  *NOTE: inspection numbers are subject to change and will be confirmed in due course	Deliver a programme of strategic reviews based on the Quality Framework and the Health and Social Care Standards focusing on outcomes, impact and quality of leadership.	<ul> <li>Operational and strategic staff from across education, social work sectors</li> <li>Citizens, patients, carers, families and communities, including children, young people and their families</li> <li>NHS boards, integration joint boards (IJBs), Health and Social Care Partnerships</li> <li>Third sector, housing and independent sector</li> <li>Care providers and support staff in health and social care</li> <li>Independent care providers</li> <li>Care Inspectorate</li> <li>Scottish Government</li> <li>Police Scotland</li> <li>Scottish Children's Reporter Administration (SCRA)</li> <li>Third sector organisations</li> </ul>	• Integration	<ul> <li>Quality Assurance Regulation and Assurance Team</li> <li>NMAHP</li> <li>Communications</li> <li>ihub Improvement Advisors</li> <li>DMBI Team</li> </ul>

CAMHS and PT services are providing access within nationally agreed timescales while maintaining or improving other measures of quality used to monitor the services provided.

NHS boards and Health and Social Care Partnerships can demonstrate improved outcomes for people with mental illness defined by a reduction in harm, improved physical health outcomes.

Support implementation of revised guidance on improving observation practice for suicidal, violent or vulnerable patients.



What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
Mental health portfolio  • SPSP mental health  • SPSP observations  • Mental health access for children and adolescents	Work in partnership with national organisations, health and social care practitioners, service users and carers to improve access to mental health services, improve safety and, improve the quality of care.	<ul> <li>People with mental health care needs, their carers, families and support networks</li> <li>Health and social care organisations (including third sector) involved in providing mental health care</li> <li>Education providers involved with mental health care for children and adolescents</li> <li>Police Scotland</li> <li>Royal College of Psychiatrists</li> <li>Scottish Government</li> <li>Third sector national organisations</li> <li>Other national organisations</li> </ul>	<ul><li>Mental Health</li><li>Access</li></ul>	<ul> <li>MHAIST</li> <li>DMBI Team</li> <li>Knowledge Management Team</li> <li>SIGN</li> <li>Transformational Redesign Unit</li> </ul>



People have the evidence and knowledge to enable them to get the best out of the services that they use and help improve services.

Better care and outcomes for patients.

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
SIGN guideline  • Eating disorders	To develop evidence- based guidelines for healthcare professionals and develop ways in which guidance can be more rapidly disseminated and implemented.	<ul> <li>NHS boards</li> <li>Other national organisations</li> <li>Health and Social Care Partnerships</li> <li>Citizens, patients, carers, families and communities</li> <li>Scottish Government</li> </ul>	Mental Health	<ul> <li>SIGN</li> <li>Health Economists</li> <li>MHAIST</li> <li>Knowledge Management Team</li> <li>Public Involvement Unit</li> </ul>

Support the deployment of quality improvement (QI) expertise against the challenge of delivering sustainable improvements in waiting times whilst maintaining or improving the quality of care.

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
Access QI	<ul> <li>Strengthening the use of QI within existing access improvement programmes.</li> <li>Supporting leaders to create the conditions for QI to be successful applied to waiting time challenges.</li> <li>Supporting the accelerated implementation of locally redesigned pathways of care.</li> <li>Increasing QI capacity and capability.</li> </ul>	<ul> <li>NHS boards, regional and national planning and delivery groups</li> <li>Health and social care practitioners</li> <li>Health and Social Care Partnerships, Integration Joint Boards</li> <li>Scottish Government</li> </ul>	• Access	<ul> <li>MHAIST</li> <li>Primary Care Improvement Team</li> <li>Public Involvement Unit</li> <li>Excellence in Care Team</li> <li>DMBI Team</li> <li>EEVIT</li> <li>Living Well in Communities Team</li> </ul>

Health and social care organisations understand population-level need, and plan and deliver services for people in new ways which ensure better outcomes.

Health and social care strategic plans are developed in line with national guidelines and best practice.

Resources are used effectively and efficiently in the provision of health and social care services.

Good practice in design, based on the principles of the Scottish Approach to Service Design, is shared and embedded.



What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
Strategic Planning Portfolio  • Strategic planning  • Approaches to transformational redesign	Through the provision of strategic planning advice, guidance and coaching, support health and social care systems to understand their high impact opportunities for redesign, develop robust implementation plans and evaluate the impact of new pathways and models of care.  To develop the internal and external capacity and capability to apply service design approaches to support the exploration, prototyping and implementation of new pathways and models of care, with a rigorous commitment to user research and engagement throughout.	<ul> <li>NHS boards, regional and national planning and delivery groups</li> <li>Health and social care practitioners</li> <li>Health and Social Care Partnerships, Integration Joint Boards</li> <li>Scottish Government</li> </ul>	• Integration	<ul> <li>Transformation Redesign Unit</li> <li>Scottish Health Council local office network</li> <li>Community engagement improvement support</li> <li>DMBI Team</li> <li>Participation Network</li> </ul>

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NHSScotland delivers value in medicines provision for the people of Scotland and people have access to new medicines, most notably in the end of life, orphan and ultra orphan categories.

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
Scottish Medicines Consortium (SMC) Programme	Provide advice on the clinical and cost effectiveness of all new medicines for NHSScotland.	NHS boards, patients and patient groups, clinicians, pharmaceutical companies	<ul><li>Governance</li><li>Legislative</li></ul>	<ul><li>SMC</li><li>Public Involvement Unit</li><li>Communications</li><li>Medicines Team</li></ul>
	Ensure the smooth introduction of the new ultra-orphan pathway.			

People have access to effective non medicines interventions and health and social care organisations deliver better value services for people in Scotland.

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
<ul> <li>Scottish Health Technologies Group Programme</li> <li>Arteriovenous (AV) fistula</li> <li>Left atrial appendage occlusion</li> <li>MitraClip® transcatheter mitral valve repair system</li> <li>MRI Simulator / MRI Linac / Proton Beam Therapy</li> <li>Synovasure alpha defensin lab test for the diagnosis of periprosthetic joint infection</li> <li>Normothermic regional perfusion for liver transplant</li> <li>Hernia mesh repair</li> <li>Stem cell transplant for multiple sclerosis</li> <li>Closed system drug transfer devices for cytotoxic drugs</li> <li>Cochlear implants</li> </ul>	Provides evidence support and advice to NHSScotland on the use of new and existing health and care non-medicines technologies that are likely to have significant implications for people's care in Scotland.	<ul> <li>NHS boards, regional and national planning and delivery groups</li> <li>Health and social care practitioners</li> <li>National Procurement</li> <li>Professional bodies</li> <li>Manufacturers and technology developers</li> <li>Scottish Government</li> <li>Research organisations and academic groups</li> </ul>	<ul> <li>Governance</li> <li>Legislative</li> </ul>	<ul> <li>Scottish Health Technologies Group (SHTG)</li> <li>Health Economists</li> <li>Medical Directorate</li> <li>Knowledge Management</li> <li>Public Involvement Unit</li> </ul>



What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
<ul> <li>1. Responding to concerns</li> <li>National Confidential Alert Line/Public Interest Disclosure Act</li> <li>Sharing intelligence</li> <li>Medical revalidation</li> <li>Independent healthcare complaints</li> </ul>	To ensure that where significant risks to the quality of health and care are identified there is prompt, proportionate, co ordinated, and effective collaborative working between the relevant scrutiny and improvement bodies.	<ul> <li>NHS boards</li> <li>Scottish Government</li> <li>Public, patients, carers and communities</li> <li>Staff in health and social care organisations</li> <li>NES</li> <li>Health and Safety Executive</li> <li>Hospices and independent organisations which have the Chief Medical Officer as their Responsible Officer</li> <li>General Medical Council</li> <li>NSS</li> <li>Audit Scotland</li> <li>Care Inspectorate</li> <li>Mental Welfare Commission for Scotland</li> <li>Scottish Public Services Ombudsman</li> </ul>	• Governance	<ul> <li>Quality Assurance Service Review Team</li> <li>DMBI Team</li> <li>ihub</li> <li>Sharing Intelligence for Health &amp; Care Group (SIHCG)</li> <li>Scottish Morbidity and Mortality Programme</li> </ul>

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
<ul> <li>2. Operational review and inspection</li> <li>20 hospital inspections (including HAI/HEI)</li> <li>6 joint inspection of prisoner healthcare</li> <li>15 Ionising Radiation (Medical Exposure) Regulation inspections</li> <li>Regulation of independent healthcare, including 224 inspections</li> <li>*NOTE: inspection numbers are subject to change and will be confirmed in due course</li> </ul>	Delivery of a programme of operationally focused review and inspections across a number of workstreams, including revision of the existing methodologies in our hospital inspections for both the acute and non-acute settings.	<ul> <li>Patients and their relatives, carers and communities</li> <li>HIS public partners</li> <li>NHS boards</li> <li>Scottish Government</li> <li>Scottish Parliament</li> <li>Prisoner population</li> <li>Prison healthcare staff</li> <li>Scottish Prison Service</li> <li>Scottish Government</li> <li>Her Majesty's Inspectorate of Prisons (HMIPS)</li> <li>Integration Joint Boards, Health and Social Care Partnerships</li> <li>Third sector organisations</li> <li>HIS inspection staff</li> <li>Staff members who work within the scope of Ionising Radiation (Medical Exposure) Regulation</li> <li>Independent healthcare providers</li> </ul>	<ul> <li>Governance</li> <li>Legislative</li> </ul>	<ul> <li>Hospital Inspections Team</li> <li>Prisoner Healthcare Network Team</li> <li>Medicines Team</li> <li>Clinical Engagement Team</li> </ul>

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
<ul> <li>3. Topic specific - planned and responsive</li> <li>Review of national screening programmes</li> <li>Cancer quality performance indicators review</li> <li>Adverse events - refresh of Adverse Events framework and linking with Duty of Candour</li> <li>Quality assurance in primary care</li> </ul>	Provision of planned and unplanned external assurance and support to specific health services or areas where there has been an identified need for topic specific focus through our quality of care approach.	<ul> <li>NHS boards</li> <li>Scottish Screening Committee</li> <li>Scottish Government</li> <li>Public, patients, carers and communities</li> <li>Staff in health and social care organisations</li> <li>NES</li> <li>Scottish Fatalities Investigation Units</li> <li>Scottish Public Service Ombudsman</li> <li>Health and Safety Executive</li> </ul>	Governance     Legislative	<ul> <li>Hospital Inspections Team</li> <li>Prisoner Healthcare         Network Team</li> <li>Medicines Team</li> <li>Clinical Engagement Team</li> </ul>

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
<ul> <li>4. Learning and improvement</li> <li>Management of controlled drugs</li> <li>National hub for review and learning from child deaths</li> <li>Suicide Reporting Learning System</li> </ul>	To ensure we are maximising the opportunities for scale and spread of learning and best practice from our assurance work we will establish additional support for this work in 2019–2020.	<ul> <li>NHS boards</li> <li>Independent care providers</li> <li>Scottish Government</li> <li>Other national organisations</li> </ul>	<ul> <li>Governance</li> <li>Legislative</li> </ul>	<ul> <li>Quality Assurance Service Review Team</li> <li>DMBI Team</li> <li>ihub</li> <li>SIHCG</li> <li>Scottish Morbidity and Mortality Programme</li> <li>Medicines Team</li> <li>Public Involvement Unit</li> <li>NMAHP</li> </ul>



People experience improved personal and clinical outcomes as a result of services delivering nationally consistent good quality care.

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
Standards and indicators Topic to include:  • Screening for abdominal aortic aneurysm  • Care in mortuaries  • Sexual health  • Healthcare associated infection  • Congenital heart disease  • Barnahaus	Deliver a programme of standards and indicators development and revision of existing standards in line with the Health and Social Care Standards based on commissions from stakeholders, including clinical communities and Scottish Government.	<ul> <li>Citizens, their families, carers and communities</li> <li>NHS boards</li> <li>Scottish Government</li> <li>Other national organisations</li> <li>Patient groups, clinicians</li> </ul>	<ul><li>Governance</li><li>Access</li></ul>	<ul> <li>Standards and Indicators Team</li> <li>Knowledge Services</li> <li>Communications</li> <li>Quality Assurance</li> <li>MHAIST</li> <li>SPSP MCQIC</li> <li>SIGN</li> <li>Public Involvement Unit</li> <li>Person Led Care Unit</li> </ul>



The provision of safe, effective interventions for patients.

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
Oversight group for use of vaginal mesh in Scotland	To provide oversight of the use of transvaginal mesh implants until a managed clinical network is established.	<ul> <li>Representatives from NHS boards, public bodies and patient groups</li> <li>Scottish Government</li> </ul>	Governance	<ul> <li>Standards and Indicators Team</li> <li>Public Involvement Unit</li> <li>Knowledge Services</li> <li>Communications</li> <li>Quality Assurance Directorate</li> </ul>



Better quality and more appropriate services, alongside increased support for people, resulting in improved health and wellbeing outcomes for people and communities. Health and social care staff are more confident in the planning and delivery of people-led care and support.

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
People-led care:  Community Led Support  Outcomes Based Commissioning  Unpaid Carers  Person-Centred Care  Third and Independent Sector Engagement	Enabling people-led care and support across health and social services, making sure services and supports keep people at the heart of service planning and delivery through people centred care and improved engagement of the third and independent sector in improvement work.  Support the delivery of the Adult Social Care Reform Programme through the delivery of programmes, including Community Led Support and Outcomes Based Commissioning.	<ul> <li>NHS boards</li> <li>Scottish Government</li> <li>Health and Social Care Partnerships</li> <li>Third and independent sector organisations</li> </ul>	• Integration	<ul> <li>Transformation Redesign Unit</li> <li>Scottish Health Council local office network</li> <li>Community engagement improvement support</li> </ul>

Reduction in re-offending (this will be achieved in conjunction with other legislative interventions), improved health outcomes for prisoners and reduced mortality. Contribute to reducing health inequalities in Scotland.

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
Prisoner Healthcare	To improve health outcomes and to reduce health inequalities within the prison population of Scotland with a stated aim to reducing re-offending and improving through care arrangements for offenders.	<ul> <li>NHS boards</li> <li>Scottish Government</li> <li>Prisoner population</li> <li>Prison healthcare staff</li> <li>Scottish Prison Service</li> <li>Scottish Government</li> <li>HMIPS</li> </ul>	<ul><li>Access</li><li>Governance</li></ul>	<ul> <li>Prisoner Healthcare Network Team</li> <li>Quality Assurance Inspections Team</li> </ul>



Optimal antibiotic treatment for all patients with infections across all care settings and fewer preventable adverse effects attributable to antimicrobials.

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
Scottish Antimicrobial Prescribing Group (SAPG) best practice guidance	Containing the spread of Antimicrobial Resistance (AMR) in Scotland and reducing patient harm by maintaining the national antimicrobial stewardship agenda from Healthcare Associated Infection (HAI).	<ul> <li>NHS boards;</li> <li>Other national organisations</li> <li>Health and Social Care Partnerships</li> <li>Citizens, patients, carers, families and communities</li> <li>Scottish Government</li> </ul>	• Governance	<ul> <li>SAPG</li> <li>Area Drug and Therapeutics Committees Collaborative (ADTCC) Team</li> <li>Knowledge Management</li> <li>Communications</li> </ul>



Better care of and outcomes for patients.





NHS boards can demonstrate public and service user involvement in shaping services. People and communities can see how their feedback has been used to change and develop services.

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
Community engagement improvement support	Ensure people are involved in decisions about health services by enabling local communities to participate in the planning and development of services and to support them in influencing how these services are managed and delivered.	<ul> <li>Citizens, patients, carers, families and communities</li> <li>NHS boards</li> <li>Integration Joint Boards, Health and Social Care Partnerships</li> <li>Scottish Government and other national organisations</li> </ul>	<ul><li>Governance</li><li>Integration</li><li>Access</li></ul>	<ul> <li>Scottish Health Council local office network</li> <li>Communications</li> <li>Transformational Redesign Unit</li> </ul>

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
Service change	Provide advice and support to NHS boards on involving patients and communities in service change processes, in line with Scottish Government guidance.	<ul> <li>NHS boards</li> <li>Citizens, patients, carers, families and communities</li> <li>Integration Joint Boards, Health and Social Care Partnerships</li> <li>Scottish Government</li> </ul>	<ul><li>Governance</li><li>Access</li><li>Integration</li><li>Legislative</li></ul>	<ul> <li>Service Change Team</li> <li>Communications team</li> <li>Information Governance</li> <li>Quality Assurance Directorate</li> <li>Transformational Redesign Unit</li> </ul>

Outcome 25

Volunteering contributes to Scotland's health by enhancing the patient experience and providing opportunities to improve the health and wellbeing of volunteers themselves.

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
Volunteering in Scotland	The infrastructure that supports volunteering is developed, sustainable and inclusive. Volunteering and the positive contribution it makes is widely recognised with a culture which demonstrates its value across the partners involved.	<ul> <li>NHS boards</li> <li>NHS staff, volunteers</li> <li>Third sector organisations, Health and Social Care Partnerships</li> </ul>	<ul><li>Governance</li><li>Access</li><li>Integration</li></ul>	<ul> <li>Volunteering Team</li> <li>ihub</li> <li>Public Involvement Unit</li> </ul>



People's views and experiences are routinely used to inform health and social care development and delivery

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
Participation network	Collaborate with others to build the evidence base for engaging people and communities, with a focus on demonstrating the impact of engagement. Provide directorate-wide support to staff for events, website and multimedia communication, research and information governance.	<ul> <li>Citizens, patients, carers, families and communities</li> <li>NHS boards</li> <li>Education and voluntary/ third sector organisations</li> <li>Scottish Government</li> </ul>	<ul><li>Governance</li><li>Access</li><li>Integration</li></ul>	<ul> <li>Scottish Health Council</li> <li>Knowledge Services Team</li> <li>Transformational Redesign Unit</li> </ul>



The quality and safety of healthcare are improved through better use of medicines

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
<ul> <li>Medicines and pharmacy</li> <li>Area Drug and         Therapeutics Committees         (ADTCs)</li> <li>Hospital Electronic         Prescription and         Medicines Administration         (HEPMA) implementation         support</li> <li>Off-Label cancer         medicines: evidence into         practice</li> </ul>	Improve safe, effective, and efficient use of medicines through bringing together NHS staff and professional organisations, supporting reliable spread and supported implementation of best practice, assessing the quality and safety of healthcare, and empowering people to manage their own care and shape services.	<ul> <li>Area Drug and         Therapeutics Committees,         NHS boards, Scottish         Government</li> <li>Medical, nursing and         pharmacy community,         others prescribing         medicines, patients and         the public, families and         communities, pharmacy         professionals and the         wider clinical community,         Health and Social Care         Partnerships</li> </ul>	• Governance	<ul> <li>Medicines Team</li> <li>Public Involvement Team</li> <li>Clinical Engagement Team</li> <li>Knowledge Management Team</li> </ul>



#### Improve decision making relating to access to medicines

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
National Review Panel	To establish and co-ordinate the National Review Panel as part of the revised Peer Approved Clinical System (PACS) Tier Two system for medicines.	<ul> <li>Citizens, patients, carers, families and communities, pharmacy professionals and the wider clinical community, NHS boards, Health and Social Care Partnerships, Scottish Parliament and Scottish Government</li> </ul>	Governance	<ul> <li>Medicines Team</li> <li>Quality Assurance</li> <li>Public Involvement Unit</li> </ul>

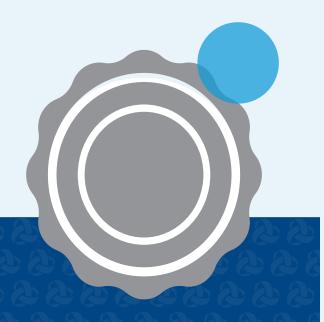
#### Improve decision making relating to establishment of disease registries in Scotland

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
Rheumatology registry	Pilot a quality registry to facilitate symptom tracking, self-management, shared decision-making during clinical interventions, and recording of outcome measures to support coproduction of care.	Citizens, patients, carers, families and communities , pharmacy professionals and the wider clinical community, NHS boards, Health and Social Care Partnerships, Scottish Government	• Governance	<ul> <li>Medicines Team</li> <li>Clinical Engagement Team</li> </ul>

# Outcome 30

#### The quality and safety of hospital care are improved through effective use of data

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
Hospital Standardised Mortality Ratio (HSMR)	Improve care through: providing advice/support to NHS boards who have a hospital with a high/increasing HSMR, and seeking assurance that such data are responded to appropriately.	<ul> <li>NHS boards - senior managers and clinicians</li> <li>Scottish Government</li> </ul>	Governance	<ul><li>DMBI Team</li><li>SPSP Acute Care</li><li>Communications</li></ul>



Improved quality and accuracy of medical certificates of cause of death, public health information and clinical governance

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
Death Certification Review Service	To ensure the effective operation of the Death Certification Review Service and key operational objectives are consistently delivered.	<ul> <li>Scottish Government; National Records of Scotland (NRS), NHS 24, NES, NSS</li> <li>NHS boards, certifying doctors, District Registrars, Funeral Directors, Foreign Commonwealth Office</li> </ul>	<ul><li>Governance</li><li>Legislative</li></ul>	<ul> <li>DCRS Review Team</li> <li>DMBI Team</li> <li>Communications</li> <li>Scottish Health Council Public Involvement Unit</li> </ul>



To improve the quality and culture of team based safety reviews through co production; where safe care, shared learning, quality improvement and a 'just culture' is at the forefront.

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
Scottish morbidity and mortality programme	To provides the degree of assurance and governance oversight that NHS boards are reviewing and learning from not only mortality or morbidity but also understanding, for example, complexity in care, nearmisses, learning from good care, feedback and complaints and it is being done in a structured teambased approach according to a national standard and closest to patient care.	<ul> <li>NHS boards</li> <li>Royal College of Surgeons of Edinburgh (RCSEd), Royal College of General Practitioners (RCGP), Royal College of Physicians and Surgeons of Glasgow (RCPSG), Scottish chapter of the AAGBI, General Medical Council, NES, Scottish Government (including Chief Medical Officer), Care Inspectorate, Scottish Clinical Leadership Fellows, Scottish Quality and Safety Fellowship, University of Aberdeen, University of Edinburgh, Royal College of Physicians (RCP)</li> </ul>	• Governance	<ul> <li>Clinical Engagement Team</li> <li>Adverse Events/Service Review Team</li> </ul>

#### To improve skills and capacity in improvement of care

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
QI Connect	To deliver a global webinar series designed to connect health and social care (and beyond) professionals around the world with international experts in the fields of innovation and integration.	The audience for QI Connect currently spans across 1,046 organisations (including 77 universities) from 62 countries	• Governance	<ul><li>QI Connect Team</li><li>Clinical Engagement Team</li><li>Communications</li></ul>

Outcome 34

The Scottish NMAHP system and community can realise the vision that nursing workforce that will be ready and able to meet people's needs by 2030

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
External NMAHP health and social care system support	Provision of reactive directed NMAHP support, advice and expertise on request from National and Territorial NHS boards, Integration Joint Boards and Health and Social Care Partnerships.	<ul> <li>NMAHP leadership community</li> <li>Special educational needs and disability (SEND)</li> <li>NHS boards</li> <li>Health and Social Care Partnerships</li> <li>Scottish Government</li> </ul>	<ul><li>Governance</li><li>Integration</li></ul>	<ul><li>NMAHP</li><li>ihub</li><li>Clinical Engagement Team</li></ul>

A Single National Formulary which will promote high quality, safe and effective prescribing, supported by a national oversight board with national clinical leadership.

Provide a condition-based approach to decision making supported by shared decision aids and clinical pathways, and maintain local NHS board governance.

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
Single National Formulary	To define the Single National Formulary, its purpose, content and structure.  Assess and agree the best approach to take in the collaborative development of Single National Formulary content ensuring NHS board engagement throughout the development.  Prioritisation of conditions for development based on national priorities.  Consider, agree and implement the governance that will be required to support the creation and ongoing management and to analyse and understand commonality and variation in NHS board formularies and prescribing practice across all NHS boards, with a view to understanding the challenges and potential benefits of developing the Single National Formulary.	<ul> <li>Area Drug and         Therapeutics         Committees, NHS         boards, Scottish         Government</li> <li>Medical, nursing and         pharmacy community,         others prescribing         medicines, patients         and the public, families         and communities,         pharmacy professionals         and the wider clinical         community, Health and         Social Care Partnerships</li> </ul>	• Governance	<ul> <li>Medicines Team</li> <li>Clinical</li></ul>

Better planning and sharing of good practice and integration of policies on the quality of care by health and social care staff in Scotland

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
<ul> <li>Quality of care in Scotland</li> <li>Develop a Quality of Care in Scotland Report</li> </ul>	To produce a report on the quality of care in community-based services and the pressures NHS boards are currently experiencing.	Citizens, patients, carers, families and communities, the clinical community, NHS boards, Health and Social Care Partnerships, Scottish Government	Governance	<ul><li>NMAHP</li><li>ihub</li><li>Quality Assurance</li><li>Scottish Health Council</li><li>Medical Directorate</li><li>Evidence</li></ul>

## Outcome 37

Robust and reliable delivery of nursing and midwifery care across NHS boards

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
Excellence in Care	The development of quality indicators for nursing and midwifery and the provision of improvement support.	<ul> <li>Nursing staff working in NHS boards</li> <li>Scottish Government</li> <li>Members of the public</li> <li>SEND</li> </ul>	<ul><li>Governance</li><li>Legislative</li></ul>	<ul><li>Excellence in Care Team</li><li>DMBI Team</li><li>Quality Assurance</li></ul>



To improve capacity and expertise in workforce planning to actively inform operational planning and service redesign

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
Nursing and Midwifery Workforce and Workload Planning Programme (NMWWPP)	Maintenance of existing and development of new workload planning tools.  To provide scrutiny and improvement support for all aspects of the Health and Care (Staffing) (Scotland) Bill.	<ul> <li>Nursing staff working in NHS boards</li> <li>Scottish Government</li> <li>Health and Social Care Partnerships, SEND, Care Inspectorate, NSS</li> <li>Trade Unions, Professional and Regulatory bodies</li> </ul>	<ul><li>Governance</li><li>Legislative</li></ul>	<ul><li>NMAHP</li><li>ihub</li><li>DMBI Team</li><li>Quality Assurance</li></ul>



Health and Social Care Partnerships recognise the importance of housing's role in shifting the balance of care and enabling people to live well and as independently as possible at home or in a safe and secure environment best suited to their needs.

What work will help us achieve this outcome	Objectives	Our Stakeholders	Cabinet Secretary Priority	Teams supporting delivery
Place, Home and Housing	Create opportunities for health and housing to be better connected, strategically and operationally through testing new ways of working, creating networks and supporting the co design of improvement activities with people who use services.	<ul> <li>Health and Social Care Partnerships</li> <li>Frontline practitioners</li> <li>Other national bodies</li> <li>Scottish Government</li> </ul>	<ul> <li>Integration</li> </ul>	<ul> <li>Place, Home and Housing</li> <li>Focus on Dementia</li> <li>Acute Care Portfolio</li> <li>Primary Care Improvement Team</li> <li>Public Involvement</li> <li>Knowledge Management Team</li> <li>Living Well in Communities Team</li> <li>EEVIT</li> </ul>



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