

A Route Map to the
2020 Vision for
Health and Social Care



INTRODUCTION

This paper sets out a new and accelerated focus on a number of priority areas for action in the form of a 'Route Map' to the 2020 Vision for Health and Social Care in Scotland. It summarises some of the excellent achievements that have been secured in recent years through a focus on improving quality in our health and care services through the implementation of the Quality Strategy, and reflects that these achievements are at least partially responsible for the high regard with which Scotland is held internationally. It is therefore important to emphasise our continued commitment to pursuing the three Quality Ambitions of safe, effective and person-centred care, as set out in the Quality Strategy.

However, over the next few years the demands for health and social care and the circumstances in which they will be delivered will be radically different. It is our job to ensure that we can continue to provide the high quality health and care services the people of Scotland expect and deserve into the future, securing the best possible outcomes for people from the care and support they receive. We must therefore collectively recognise and respond to the most immediate and significant challenges we face. These include Scotland's public health record and level of inequalities, our ageing population, the increasing expectations arising from new drugs, treatments and technologies and the specific impact of inflation on the health service.

The Route Map has been designed to retain our focus on improving quality and to make measureable progress to the 2020 Vision, with specific deliverables in 2013/14. The key features are that it:

- recognises the importance of the public service reform agenda as a framework for delivering the 2020 Vision for Health and Social Care;
- maintains the commitment to pursuing the 2020 Vision for Health and Social Care through a focus on improving quality at scale across Scotland (building on success, e.g. Family Nurse Partnerships, Scottish Patient Safety Programme etc.);
- pursues opportunities to work with other public sector and business partners to drive transformational innovation, providing growth in the Scottish economy;
- identifies particular areas for accelerated improvement and enhanced roles in unscheduled and emergency care, in primary care, and in services for people living with multimorbidities providing a whole system response to improve the patient pathway in order to reduce pressure on A&E departments;
- supports our commitment to shift the balance of power to, and builds up and on the assets of, individuals and communities through a focus on achieving social change (more people able to care, volunteer etc.), support for the self-management of long-term conditions and personal action (drinking, exercise, diet and engagement) through working in partnership in Community Planning Partnerships (CPPs) and the new Integrated Health and Social Care Partnerships; and
- develops our strategy for engaging and empowering our workforce, providing our response in Scotland to addressing many of the issues raised by the Mid-Staffordshire/Francis Inquiry, and equipping them to work in an integrated way which reflects the different needs of different people and different places across Scotland.

THE 2020 VISION FOR HEALTH AND CARE IN SCOTLAND

'Our vision is that by 2020 everyone is able to live longer healthier lives at home, or in a homely setting.'

We will have a healthcare system where we have integrated health and social care, a focus on prevention, anticipation and supported self-management. When hospital treatment is required, and cannot be provided in a community setting, day case treatment will be the norm. Whatever the setting, care will be provided to the highest standards of quality and safety, with the person at the centre of all decisions. There will be a focus on ensuring that people get back into their home or community environment as soon as appropriate, with minimal risk of re-admission.'

We must be bold enough to agree and pursue the key actions that will allow us to turn this 2020 Vision into a reality. It is only by doing this that we will secure the health and social care services in Scotland that will best meet the needs of future generations, and demonstrate our ability to deliver a world-leading high quality health and care service to the people of Scotland.

OUR RECORD OF EXCELLENCE

In Scotland we have considerable experience and success in delivering and improving high quality and sustainable healthcare services which are already recognised internationally as world-leading. In particular our record of successes include:

- legislation to ban smoking in public places;
- significantly reducing premature mortality from cancer, heart disease and stroke through a number of initiatives including most recently the high profile detect cancer early programme;
- delivering enhanced patient safety with major reductions in levels of Healthcare Associated Infections (HAI);
- massively reducing waiting times and delayed discharge from hospital; and
- effective management of a £12 billion budget.

These, and other successes, are recognised internationally as innovative and aspirational both for what they have delivered to date and for their future scope and potential for improving health and social care in Scotland.

We have achieved these successes through working in partnership across the Scottish Government, the wider public sector and with staff. Looking ahead, our model remains one of integration, collaboration, outcomes focus, values trust and innovation. We continue to categorically rule out the disruptive type of reforms and upheaval being put in place in NHS England and are committed to continuing to provide high quality health and social care to the people of Scotland. Our recognition of the importance of local ownership of decision making and service delivery complements our unified system for governance and accountability in NHSScotland.

During the current spending review we have committed to protecting health spending by giving a real terms resource increase recognising the very specific inflationary and service pressures facing the delivery of health and care services. Efficiency savings identified by territorial NHS Boards amounting to over £1 billion in the last four years have been retained by them and used to further enhance local services.

THE CHALLENGES

Over the next 10 years, the proportion of over 75s in Scotland's population – who are the highest users of health and care services – will increase by over 25 per cent. By 2033 the number of people over 75 is likely to have increased by almost 60 per cent. Over the next 20 years demography alone could increase expenditure on health and social care by over 70 per cent. These challenges will augment the specific impact of inflation on health and care services.

Despite efforts to address the challenge of health inequalities in Scotland over recent years, we have made very little progress. This remains a key priority area.

There will be a continuing shift in the pattern of disease towards long-term conditions, particularly with growing numbers of older people with multiple conditions and complex needs such as dementia. Estimates suggest that the number of people with dementia is set to rise from 71,000 to 127,000 within the next 20 years. If we do not dedicate resource to dementia there will be tremendous financial costs to the NHS and social services as well as the health and cost impact on carers. Compared with non-caregivers, carers of people with dementia are more likely to take prescribed medication, visit their GP and to report higher levels of stress and physical symptoms.

THE 2020 VISION ROUTE MAP

The accelerated pursuit of the 2020 Vision through the Route Map set out on the opposite page, building and developing on our model for integrated health and social care delivery, will demonstrate competency through our recognition as a world-leader in high quality health and care services.

Public Service Reform

It is also important to confirm that the approach makes a vital contribution to our commitment to the four pillars of public service reform set out in our response to the Christie Report – reflecting our commitment to achieving outcomes which matter to the people of Scotland while ensuring the financial sustainability of our public services.

Working in **partnership** is fundamental to achieving progress in each of the priority areas – partnership across the NHS in Scotland, with local government, with the third sector, with industry, with central government and with people. This partnership approach is particularly vital for one of our three Quality Ambitions: that all the services we develop and deliver are **person-centred**. The focus in the Route Map on developing the workforce and leadership capacity also makes an important contribution to the people pillar. The Route Map clearly identifies

prevention as a priority area of activity around population health, but it is also fundamental to the approaches we will develop to improve care for people with multi-morbidities, and in support of older people through an integrated system. Finally, we will be driving improvement across the range of priority areas using the Framework for Improvement which has measurement and **performance** as one of its key features.

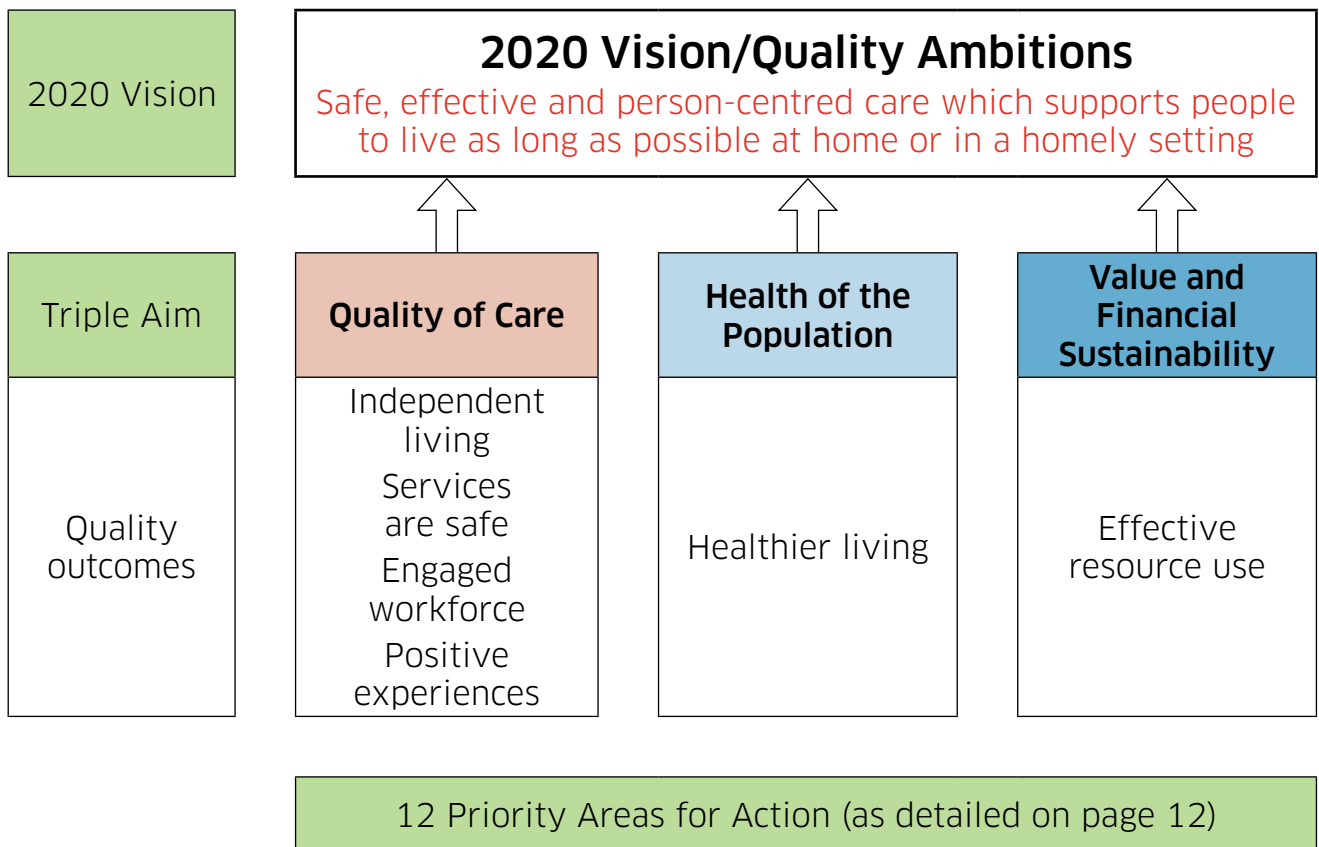
We continue to support the focus on performance across NHSScotland through the annual process of agreeing NHS Board Local Delivery Plans with improved monitoring and assessment of outcomes. Ensuring that HEAT targets evolve to reflect the key priorities set out in the 2020 Vision Route Map will make an important contribution, alongside a focus on supporting NHS Boards to strengthen their governance roles, and the commitment to work through Community Planning Partnerships (CPPs) and Integrated Health and Social Care Partnerships. This will ensure that Single Outcome Agreements properly reflect health and social care priorities and that local NHS Boards will be held to account for their effectiveness in the delivery of these priorities and for ensuring the effectiveness of CPPs generally.

The Route Map describes **12 priority areas for action** for pursuing our 2020 Vision for high quality sustainable health and social care services in Scotland in three domains:

1. Quality of care
2. Health of the population
3. Value and financial sustainability.

These domains are often referred to as the 'Triple Aim'. For each of these domains there will be a small number of

priority areas for action, often building on existing work and all requiring focused attention and acceleration. In addition to these 12 priority areas for improvement action, it is vitally important to emphasise the need for a continued focus on ensuring that the underpinning foundation of high quality health and care services are maintained as business as usual. These include: performance (e.g. HEAT), governance, planning (services, workforce, finances and estate), IT and measurement.



ROUTE MAP TO THE 2020 VISION

TRIPLE AIM

1. FURTHER IMPROVING THE QUALITY OF THE CARE WE PROVIDE WITH A PARTICULAR FOCUS ON:

- **Increasing the role of primary care** – There is now a strong consensus on the urgent need for an expanded role for primary care and general practice in particular. This is at the heart of our 2020 Vision, specifically focused on keeping people healthy in the community for as long as possible and represents a critical prerequisite to tackling health inequalities and the challenges facing unscheduled care.

Key deliverables for 2013/14:

- Implementation of the new GP contract with benefits fully explored and realised
- 2020 Vision for expanded primary care developed
- New models of ‘placed-based’ primary care developed including a model for remote primary care implemented and evaluated

- **Integrating health and social care** – Integration of adult health and social care is a key part of the Scottish Government’s commitment to public service reform in Scotland. We will continue to drive forward the widely endorsed commitment to integrating health and social care services in Scotland.

Key deliverables for 2013/14:

- Bill introduced to Parliament and gaining Royal Assent
- Preparatory work with NHS Boards, local authorities, third and independent sector partners and including development and delivery against new Single Outcome Agreements and the building of effective Integrated Health and Social Care Partnerships.

- **Accelerating our programme to improve safety in all healthcare environments** – Building on the world-leading and recognised success of the Scottish Patient Safety Programme, we will continue the ground-breaking extension of this programme into primary care, maternity services, paediatrics and mental health, and will embark on the development of a new Scottish Patient Safety Index to accelerate our progress in driving down harm in acute care settings.

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Key deliverables for 2013/14:

- Further increase safety in Scottish hospitals as measured by HSMR and HAI
- New broader measure of safety developed to increase impact of improvement (SPSI)
- Maternity, mental health and primary care components of the Scottish Patient Safety Programme implemented with measureable improvements

- **Improving the way we deliver unscheduled and emergency care** – A new Expert Group has been established to identify and agree high impact actions to transform the way that unscheduled care is delivered with a focus on reducing the number of people who present at A&E departments through action in the community, in primary care and to improve the flow of patients out of A&E. Specific work will be done to improve services at weekends and out-of-hours in both urban and remote and rural areas.

Key deliverables for 2013/14:

- Develop out of hospital care as part of the National Unscheduled Care Action Plan
- Achieve a sustainable performance on 4-hour A&E waits by the end of December 2013
- Improve patient care in hospitals by increasing flow through the system

- **People-powered health and care services** – Through the Patient Rights Act and ground-breaking work to develop more person-centred health and care services we will give the public a voice on their experiences to drive up the quality of care, promote personal responsibility for health and wellbeing, and support self-management so that people are better able to maintain their health and to manage periods of ill-health. This will include a focus on improving resources and support to people to help them navigate and understand the system, so that they become more involved and engaged in their healthcare.

Key deliverables for 2013/14:

- Person-centred Health and Care Collaborative being implemented with measureable improvements locally in experience for patients, their carers and for staff
- Support and clear accessible information will be available to enable people and their carers to manage confidently at home and during times of transition

- **Improving our approach to supporting and treating people who have multiple and chronic illnesses** – Will deliver improved outcomes for people living with multiple morbidities, including mental health conditions. We will consider the whole pathway of care with a focus on people aged under 65 in areas of deprivation and high levels of health inequalities. This work will link closely with the work to expand the role of primary care, to improve unscheduled care, to put people at the centre and to integrate health and care services. Much of this work will require strong partnership working, and will be supported by health and social care providers playing a full role in Community Planning Partnerships and the development of Single Outcome Agreements, and through the new Integrated Health and Social Care Partnerships.

Key deliverables for 2013/14:

- Key pressure points in the entire patient pathway for most commonly occurring combinations of chronic-term illnesses will be identified and actions for how we address these will be agreed
- Through more detailed analysis of existing data, people will be identified as 'at risk' and anticipatory plans will be agreed

2. IMPROVING THE HEALTH OF THE POPULATION WITH A PARTICULAR FOCUS ON:

- **Early years** – We will drive forward the Early Years Collaborative, breaking new ground in improvement methodology across the full range of public partners involved in a child's early years, building on successes such as Family Nurse Partnerships and working on the ambition to make Scotland the best place for children to grow up.

Key deliverables for 2013/14:

- The world's first national multi-agency quality improvement programme will be implemented across partner organisations to give our children the best start in life

- **Reducing health inequalities** – We will refocus our efforts on health inequalities particularly in the context of benefits cuts which will impact those most at risk of ill-health. We will do this by targeting improvement resources into primary care in the most deprived areas of Scotland including staff and equipment such as tele-health facilities, learning from and rolling out successful initiatives such as the 'Deep-end' GP practices in Glasgow.

Key deliverables for 2013/14:

- There will be a new focus on targeting resources to the most deprived areas
- The successful approach developed in the 'Deep-end' GP practices will be rolled out more widely across relevant areas of Scotland reducing the risk of admission to hospital and improving outcomes for people in Scotland's most deprived communities

- **Preventative measures on alcohol, tobacco, dental health, physical activity and early detection of cancer**

– Despite significant improvement in health outcomes in recent years, Scotland continues to have a poor record of healthy life expectancy. Alongside the commitment to refocus energy on targeting health inequalities, we will continue to pursue a preventative agenda in partnership across the public sector, concentrating on tackling Scotland's relationship with alcohol, smoking and increasing levels of physical activity. We will also continue to invest in the hugely important programme of work to increase the early detection of cancer. Once again, much of this work will require strong partnership working, and will be supported by health and social care providers playing a full role in Community Planning Partnerships and the development of Single Outcome Agreements, and through the new Integrated Health and Social Care Partnerships.

Key deliverables for 2013/14:

- There will be a measureable increase in early detection of cancer across Scotland, and particularly in deprived areas resulting in better outcomes
- Implementation of new restrictions on tobacco advertising will result in a reduced rate of smoking amongst teenagers

3. SECURING THE VALUE AND FINANCIAL SUSTAINABILITY OF THE HEALTH AND CARE SERVICES WE PROVIDE:

- **Establish a vision for the health and social care workforce for 2020, and setting out a clear plan of actions which will have an immediate effect** –

We will take forward a major programme to work in partnership with staff, professional bodies, and unions to establish and agree a vision for the health and care workforce required to realise the 2020 Vision. We will develop a detailed action plan with key deliverables which start to have a significant positive impact for staff and patients in 2013/14 and each year thereafter. One of the early actions will be a focus on workforce planning to ensure that we have the right people, in the right numbers in the right jobs.

Key deliverables for 2013/14:

- 2020 Vision for NHSScotland workforce published in June 2013 following extensive consultation
- Implementation plan to deliver 2020 Workforce Vision through modernisation, leadership and management by November 2013

- **Increase our investment in new innovations which both increase quality of care, and reduce costs and simultaneously provide growth in the Scottish economy** – The new Innovation Partnership Board which has been established to take forward the joint Statement of Intent between government, NHS and industry will additionally be asked to oversee a new Innovation Fund which will be tested through two initial pilots before role out to scale. The approach

is an ambitious one and aims to target high value fundraising through philanthropy, European funding, and assessing other models of fundraising.

Key deliverables for 2013/14:

- A new fund to provide pump-priming for innovative approaches in healthcare will result in more small/medium Scottish companies working with NHSScotland to develop and test solutions which improve the quality of care and contribute to Scottish economic growth
- A new procurement portal will be established to encourage small/medium enterprises and other partners, including third sector, to work with NHSScotland

- **Increase efficiency and productivity through more effective use of unified approaches coupled with local solutions and decision making where appropriate** – We will fully implement the Efficiency and Productivity Portfolio of action at scale, including a specific focus on implementing shared services where possible and appropriate, reducing drug costs through a single programme

management focus on prescribing savings, which better co-ordinates both the national and local work in this area and optimises the use of management information to highlight areas for improvement.

Key deliverables for 2013/14:

- A review of national services to NHSScotland will be carried out with recommendations to increase shared services and to achieve further contributions to the shift required of resources from management to front-line services, where this does not negatively impact on the quality of care.

ROUTE MAP TO THE 2020 VISION FOR HEALTH AND SOCIAL CARE

Triple Aim	Quality Ambitions	12 Priority Areas for Improvement	25 Key Deliverables for 2013/14		
Quality of Care	Person-centred	Person-centred Care	1	Person-centred Health and Care Collaborative implemented	
			2	Information and support to enable people at home and during times of transition	
	Safe	Safe Care	3	Further increase in safety in Scottish hospitals	
			4	New broader measure of safety developed (SPSI)	
			5	Maternity, mental health and primary care components of the Scottish Patient Safety Programme implemented with measureable improvements	
	Effective	Primary Care	6	Implementation of new GP contract	
			7	2020 Vision for expanded primary care	
			8	New models of 'place-based' primary care	
		Unscheduled and Emergency Care	9	Out of hospital care action plan	
			10	Sustainable performance on 4-hour A&E waits	
			11	Increase flow through the system	
		Integrated Care	12	New Bill	
			13	Preparatory work with NHS Boards, local authorities, third and independent sector and the building of effective Integrated Health and Social Care Partnerships	
				14	Key pressure points in the entire patient pathway for most common multiple illnesses will be identified and actions agreed
				15	Through more detailed analysis of existing data, people will be identified as 'at risk' and anticipatory plans will be agreed
Health of the Population	Early Years	16	The world's first national multi-agency quality improvement programme will be implemented across partner organisations		
		17	New focus on most deprived areas		
	Health Inequalities	18	'Deep-end' GP practices approach rolled out more widely across relevant areas		
		19	Early detection of cancer		
	Prevention	20	New restrictions on tobacco advertising		
Value and Sustainability	Workforce	21	2020 Vision for NHSScotland workforce		
		22	Detailed action plan agreed to deliver 2020 Workforce Vision		
	Innovation	23	A new fund to provide pump-priming for innovative approaches in healthcare		
		24	A new procurement portal will be established to encourage working with SMEs and third sector		
	Efficiency and Productivity	25	Recommendations to increase shared services		

