

Proposals for approach to Year 2 Implementation Plan

Purpose: to request feedback and agreement from the Task Force on proposed approach to reporting on and updating the Implementation Plan.

Reporting commitments set out in Implementation Plan, July 2022:

- An annual report on progress towards the strategic Aims and Actions identified in this plan will be published to allow ongoing oversight and reporting of progress.
- [The Plan] includes an initial set of priorities [and] Short Life Working Groups will be expected to identify and scope further potential Actions...to drive continued service improvement activity.
- We are also committed to monitoring and reviewing the performance of the Governance structures as they are delivered.
- This includes ensuring we are appropriately involving and engaging the views of all stakeholders through the proposed Networks, Groups and Lived Experience structures.

Overview of proposed approach

1. In order to meet the commitments on reporting and improved Governance of the Framework for Pain Management Service Delivery, a progress report on the Actions in the Plan must be published in 2023.
2. This presents an opportunity to identify if existing Actions have been completed, need to be continued or evolved (and why), or if new Actions should be introduced to the Plan.
3. There is also a requirement to review the performance of the structures which have been established in support of delivering the Plan, to evaluate their effectiveness and identify opportunities for improvement.
4. Officials in the Chronic Pain Policy Team have developed a proposal for a programme of work aligned to these objectives (**Annex A**).
5. The output of the proposed approach is a programme of stakeholder engagement and policy analysis to develop an updated Plan/report which:
 - reiterates and updates the Vision and Aims of the Framework;
 - reviews and updates the Governance and engagement approach for the Plan;
 - reviews the progress of existing Actions (22/23 Plan), highlighting key achievements and next steps (where appropriate);
 - sets out new Actions for 23/24 (where appropriate); and
 - reflects on lessons learned and next steps for implementation in 23/24.

6. This programme is intended to begin in February 2023 with a view to publishing an updated Implementation Plan in July 2023 – one year since publication of the original Plan.
7. Development of the updated Plan will be underpinned by a policy development approach. This will include assessing and sharing progress against existing Actions, reviewing alignment of the Plan to existing and emerging SG priorities, and collating feedback and lessons learned during implementation of the current Plan.
8. Outputs from this analysis will provide a foundation for stakeholder engagement (see point 9), identify implementation ‘gaps’ and support the assessment and development of potential policy actions for inclusion in an updated Plan.

Stakeholder engagement

9. Significant stakeholder engagement is envisaged, supported by an approach which leverages the relationships built across the last year of implementing the current Plan. This will include clinical Networks, pain service managers, third-sector organisations and people with lived experience, as well as Scottish Government (SG) policy teams. Policy will also identify stakeholders where engagement has been less frequent/ effective e.g. Health Board and local partner (HSCP/IJB) leadership.
10. Resources will be developed to support stakeholders to both reflect on progress to date and consider opportunities for further development and improvement of the Plan and its associated delivery structures.
11. It is expected that engagement will be via digital means in the majority of cases, given the timescales available and the range of stakeholders to be involved. Consideration will be given to ensure this approach does not limit stakeholder involvement and other engagement options offered where appropriate/ possible.

Governance and publication

12. The Task Force are invited to provide feedback on the proposed approach and would be expected to provide oversight throughout the programme of work. This includes reviewing outputs from engagement activities, advising on policy options and endorsing draft and final reports.
13. Ministerial approval will be sought for both the approach agreed by the Task Force and any final report. Regular updates will be provided to Private Office as the programme of work is delivered.
14. While individual stakeholders/ groups will not be required to ‘approve’ any proposed or finalised policy options or report, Officials will seek to ensure that where possible and appropriate, they have the opportunity to provide feedback on draft proposals. It is intended that all those consulted during the programme of work will be kept abreast of key developments and progress.
15. Ahead of publication, Officials will engage communications and press colleagues to agree an approach to launch. This is intended to highlight progress to date and any new Actions included in the Plan via case studies, supportive quotes, infographics etc.

Key considerations and risks

16. **Capacity:** Development of the current Plan required substantial input from all members of the policy team, Implementation and Clinical Leads and senior management within the Scottish Government. While structures introduced over the past year will reduce some of the challenges in producing an updated Plan, it is expected that it will represent the main focus for the chronic pain Policy team across Q4 22/23 – beginning Q2 23/24. There is a risk that unplanned or reactive work emerging during this period could impact delivery timescales (see point 19).
17. **Budget:** Costs to deliver an updated Plan will be incurred in two main areas – clinical leadership and report publication. Engagement with clinical networks and stakeholders is currently facilitated by the National Clinical Lead and Network Leads who have SLAs with the Scottish Government (total estimated cost for 23/24 = £35,000 for 6 months). Costs for publication via APS are currently unbudgeted but unlikely to be substantial (estimated £1,200). Budgets for 23/24 have not yet been confirmed and a lack of funding could impact the quality of engagement and development of the updated Plan.
18. **Lived-experience:** An updated Plan must clearly set out how it reflects the priorities of people with lived experience of chronic pain and how these stakeholders will be involved going forward (noting there is currently no expenditure planned for engagement activity in 23/24). It is expected the Plan will include a response to the findings of engagement activities delivered across the last year (Pain Panel, Healthcare Improvement Scotland (HIS) report) as well as further views set out in the public consultation on a draft of the Pain Framework in 2022. [REDACTED under Section 30(b)(i)] [REDACTED under Section 30(b)(i)]
19. **Wider NHS pressures:** Development of an updated Plan is likely to be affected by the impact of ongoing system pressures on NHS staff and services. This could limit the opportunity and quality of engagement and may also lead to a focus on policy options/ actions to address immediate or near-term challenges, rather than longer-term, more strategic issues. Ministerial priorities and Officials' capacity are also likely to be influenced by these system pressures during this period.

Recommendation

20. That the Task Force consider and provide feedback on:

- the proposed programme of work to deliver an updated Implementation Plan as detailed in Annex A;
- the proposed approach to policy evaluation and development; stakeholder engagement; Governance and publication; and
- considerations and risks that may impact successful delivery of the approach. mitigation against key risks to successful delivery.

Annex A – Overview of proposed approach and timeline

Month	Policy Development and Engagement	Governance	Publication
Jan 23	Review progress of existing Actions (Policy/ Imp Lead/ Clinical Lead) COMPLETE		Develop skeleton structure for update (Policy) COMPLETE
Feb 23	Develop engagement resources (Policy)	Task Force approval Submission to Ministers	
Mar 23	Stakeholder engagement (Policy/ Imp Lead/ Clinical Lead/ Network Leads)		
Apr 23	Stakeholder engagement (Policy/ Imp Lead/ Clinical Lead/ Network Leads)	Review progress update (Task Force)	Drafting (Policy)
May 23	Stakeholder review - draft Actions	Review draft report (Task Force)	Drafting (Policy)
Jun 23		Task Force approval of report Report submission to Ministers	Finalise report and launch comms. (Policy/ Comms)
Jul 23			Publication