



ANNUAL REVIEW 2017/18 SELF-ASSESSMENT DOCUMENT

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1. An Introduction to Our Purpose, Strategic Aims and Organisational Performance

The purpose of this report is to provide information on our strategic aims and ambitions and organisational performance during 2017/18.

Our Services

NHS 24 was established in April 2001, under the National Health Service (Scotland) Act 1978, and is responsible for the delivery of clinical assessment and triage, health advice and information through telephone and digital services to the population of Scotland 24 hours a day, 365 days a year.

A Statement from the NHS 24 Chair on Performance and Key Activities in 2017/18

Our Vision is *'Delivering a healthier Scotland together by Caring; Connecting; Collaborating'*. To support the achievement of this we routinely engage with patient and public representatives through a range of forums to monitor service performance and service development, ensuring patient and public views are reflected in all that we do. The organisation also consistently supports the NHS Scotland 2020 Workforce Vision and promotes the NHS Scotland Values in all our work.

We work in collaboration with partners, the public and our people to co-design services using technology and a digital first approach to sustainable service development and delivery.

The national 111 service is accessed using telephony, supported by underpinning technical infrastructure, which includes access to a range of personal health record information, clinical decision-making applications and screen and voice recording systems. This technology is designed to facilitate a safe and effective patient pathway and to ensure an appropriate clinical record is created for every person accessing our service.

Our digital services are multi-channel and include online, web chat, text, email and social media. Through these channels we offer access to health and care information to support self-care and self-management of health concerns and conditions.

During 2017/18, the NHS 24 Board approved a new 5-year Strategy and supporting business case to facilitate the development and improvement of services to support delivery of our ambition to increase service provision and benefit to the wider health and social care system.

The strategy aims to design and deliver multi-channel access to services which are based on public and partner needs, maximising the utilisation of the NHS 24 infrastructure and clinical capabilities, using the latest digital technologies 24/7.

In delivering any meaningful shift in the balance of care, how patients access and are subsequently supported through the health and social care system will

be of paramount importance. NHS 24 is a recognised route into unscheduled care, largely out of hours, and there is huge potential to further utilise both the expertise and the infrastructure of NHS 24 in supporting Boards and patients 24/7 to access the most appropriate level of care and connect them to the right services at the right time.

The increasing demand for services experienced nationally during 2017/18 challenged services across NHS Scotland particularly during the winter period. This was also particularly acute during the severe weather incident in February 2018. NHS 24 worked collaboratively with partners to minimise the impact across the service and continued to deliver a safe and effective service to patients across the year. Whilst demand increases, severe weather and the necessary preparations for the introduction of our new technology combined to impact the speed of access to the service at points in the year, all of our clinical KPIs were met consistently throughout.

To further develop and support the future sustainability of our services, a full review of workforce planning assumptions commenced in 2017/18 supported by a significant investment in front line staffing across both 2017/18 and 2018/19. A broader exercise also commenced to review the current shift patterns and staffing levels, this review has continued into 2018/19 and will make recommendations by the end of March 2019. Thereafter we will continue to work in partnership with Staff Side and our people to determine an appropriate implementation plan to deliver any changes agreed.

There were significant operational and financial challenges in-year arising from the revised, phased implementation of the new technology infrastructure and applications. A robust re-planning exercise was completed in partnership with our partners, our people and Staff Side and in September 2016, NHS 24 delivered the first phase of the new telephony solution to scheduled care services. In May 2017, NHS 24 progressed the implementation to deliver the full SAP solution, within a Model Office environment, with NHS Ayrshire and Arran. The final phase of the implementation was successful and completed in full in October 2017. We worked through some technical and operational issues to fully embed and further refine the system and our processes successfully during 2017/18.

Despite the challenges which were to be expected with a national implementation of this scale, patient safety and organisational delivery were maintained throughout the year. Our staff were instrumental in ensuring the successful delivery of this change. It is appropriate that this introductory statement concludes with formal recognition and appreciation of their commitment and professionalism.

Esther Robertson

2. Better Health, Better Care – Performance Across Our Services

Unscheduled Care Clinical Performance and Service Access

There are a number of key performance measures by which we can determine how accessible and effective our service is. Throughout 2017/18, we have also been reviewing how we measure the effectiveness of the services we deliver. The current measures offer a limited perspective on the experience for those accessing NHS 24, and we have been engaging with service users, public, partners, and our Board and have developed proposals for a more appropriate set of performance measures which we will introduce from April 2019.

Our performance against the current set of measures during 2017/18 is described below:

Achieve access service level of 90% of calls to be answered within 30 seconds

NHS 24 received 1,582,905 calls to its 111 service during 2017/18, an increase of 7.8% on the previous year. The performance against the trajectory set out in the 2017/18 Operational Plan is outlined in the table below.

Performance against target was impacted in Q3 and Q4 following the bedding in period required to support the implementation of the new technology system and the significant increase in system wide demand for services. Additionally the severe weather in February 2018 impacted across the whole health and care sector.

Actual vs. Target Performance 2017/18				
	Q1	Q2	Q3	Q4
Target	90%	90%	90%	90%
Actual	61.1%	64.3%	39.7%	40.1%

In Q3 we implemented the new technology platform within the 111 service. This was a significant change for the service and a reduced service access level performance was anticipated as staff became increasingly familiar with the new system and associated processes. The new system was implemented in October 2017, ahead of one of the busiest and prolonged winter periods for NHS Scotland, which further impacted performance into Q4.

There were a number of improvements and minor changes implemented over the remainder of 2017/18 which improved the functional and technical performance of the new system. Further enhancements to the system are planned as part of the continuous improvement approach delivering a rolling programme of user review and changes, along with ongoing process reviews as we strive to constantly improve patient experience.

90% of GP Priority calls responded to within 20 minutes

The performance against the trajectory is outlined in the table below:

Actual vs. Target Performance 2017/18				
	Q1	Q2	Q3	Q4
Target	90%	90%	90%	90%
Actual	99.8%	99.4%	93.5%	91.0%

90% of GP routine calls responded to within 60 minutes

The performance against the trajectory is outlined in the table below:

Actual vs. Target Performance 2017/18				
	Q1	Q2	Q3	Q4
Target	90%	90%	90%	90%
Actual	99.6%	98.9%	87.2%	84.6%

Respond to 98% of P1 calls within 60 minutes, and 90% of P2 calls within 120 minutes.

During 2017/18, NHS 24 achieved these targets, with **99.8%** of P1 calls responded to within 60 minutes, and responded to **99.7%** of P2 calls within 120 minutes.

Reducing Attendance at A&E Departments

As part of the NHS 24 commitment to support Territorial Boards to reduce A&E attendances, NHS 24 has two targets as follows:

Provide at least 30% of patients with self-care advice

During 2017/18, an average of **34.1%** of patients were provided with self-care advice.

Convert at least 75% of appropriate Category C calls transferred from the SAS to non A&E or 999 outcomes.

NHS 24 converted **83.5%** of appropriate Category C calls from Scottish Ambulance Service (SAS) to primary care or home care outcomes.

Scottish Emergency Dental Service (SEDS)

During 2017/18, this service answered an average of 6,193 calls per month. **98.3%** of calls categorised as "D1" were responded to within 45 minutes,

compared to the target of 95%. An average of **94.2%** of calls categorised as “D3” were responded to within 180 minutes, compared to the target of 90%.

Psychological Therapies

During 2017/18 NHS 24 continued to deliver the “NHS Living Life” service providing telephone based Cognitive Behavioral Therapy (CBT) and Guided Self Help (GSH) for patients experiencing low mood, mild to moderate depression or anxiety. Referrals to the service are made by an individual’s GP or the patient may self-refer.

Reduce mood / depression rate by 60% for patients completing treatment in the “Living Life” Service (annual average of at least a 60% decrease in (CBT) Patient Health Questionnaire (PHQ-9) scoring)

The performance against the trajectory is outlined in the table below.

Actual vs. Target Performance 2017/18				
	Q1	Q2	Q3	Q4
Target	60%	60%	60%	60%
Actual	75%	61%	57%	56%

Reduce anxiety / worry rates by 60% for patients completing treatment in the “Living Life” Service (annual average of at least 60% decrease in Generalised Anxiety Disorder (GAD) -7 scoring)

The performance against the trajectory is outlined in the table below.

Actual vs. Target Performance 2017/18				
	Q1	Q2	Q3	Q4
Target	60%	60%	60%	60%
Actual	76%	65%	62%	60%

During 2017/18, NHS 24 embarked on a review and redesign of its mental health services, including Living Life. This work continues into 2018/19 as part of our overall Service Transformation Programme, however, the focus for Living Life throughout 2017/18 was in successfully reducing the waiting time from initial referral to treatment and minimising referrals where Living Life would not be of benefit by introducing an improved initial assessment process.

Breathing Space Service

Breathing Space is a confidential phone and web based service for people in Scotland experiencing low mood, depression or anxiety. Breathing Space offers a listening and signposting service for people experiencing low mood, depression or anxiety about issues such as family and relationship difficulties. The service aims to give people support to help improve their present situation

and so prevent the development of more serious problems. Breathing Space also has an important role in helping the partners, friends and family members of people experiencing difficulties associated with depression.

Breathing Space call demand for 2017/18 was 92,225 and associated performance is detailed below:

Actual vs. Target Performance 2017/18				
	Q1	Q2	Q3	Q4
Target	90%	90%	90%	90%
Actual	79.2%	69.7%	67.8%	73.2%

In 2017/18, call demand for Breathing Space increased by 9% on the call demand experienced in 2016/17. The Breathing Space service was challenged by a shortfall in staffing resource when matched to continually increasing demand, this impacted on performance through the year. We are however, currently recruiting additional staff for the Breathing Space service to bring capacity back in line with the increased demand. Service performance during 2018/19 indicates that the recruitment is beginning to improve service performance.

NHS inform

Aligned to the Scottish Government's 'Once for Scotland' approach, and supporting people to manage and maintain their health and to self-manage their health conditions, NHS 24 delivers a range of services providing quality assured health and care information to the people of Scotland. This is offered through a digital first, multi-channel approach, signposting and engaging the public with services in a way that best suits their needs.

The range of digital first services delivered are designed to enable the public to access quality assured, reliable information and signpost to appropriate relevant services where their health and care requirements are not urgent by nature. At least 80% of calls to NHS inform responded to within 60 seconds.

The performance against the trajectory set out in the Local Delivery Plan 2017/18 is as follows:

Actual vs. Target Performance 2017/18				
	Q1	Q2	Q3	Q4
Target	80%	80%	80%	80%
Actual	96.3%	92.8%	89.3%	86.6%
Call Demand	7,433	9,219	9,745	9,060
Web Chat	3337	4853	5104	5398

Website visits 2017/18				
	Q1	Q2	Q3	Q4
NHS inform	521,236	1,209,997	1,812,523	4,720,163

Service levels for NHS inform remained high throughout the year falling slightly due to the added demand from NHS inform webchat. There was a very significant increase in the use of the NHS Inform website following an investment and redesign of the service in November 2017.

Quit Your Way Scotland

NHS 24 manages the national Smokeline service on behalf of Scottish Government. The performance against the trajectory is outlined in the table below.

Actual vs. Target Performance 2017/18				
	Q1	Q2	Q3	Q4
Target	80%	80%	80%	80%
Actual	85.1%	81.3%	72.2%	74.1%
Call Demand	900	742	727	795
Web Chat	40	60	74	149

Care Information Scotland

NHS 24 provides national social care information service, providing quality assured information and guidance around all aspects of social care. This service is accessible via online, telephone and web chat. The performance against the trajectory is outlined in the table below.

Actual vs. Target Performance 2017/18				
	Q1	Q2	Q3	Q4
Target	80%	80%	80%	80%
Actual	87.6%	81.0%	73.9%	68.5%
Call Demand	233	242	234	305
Web Chat	129	91	117	241

During 2017/18, there was an increase of 4.21% in call demand from 2016/17. Webchat demand also increased by 42.36% over the year. These increases, combined with a frontline resource issue, made it challenging to achieve the Target Performance which ended at 77.75% for the year.

The 'Quit your way Scotland' and Care Information Scotland services began well in quarter 1 and 2 however due to challenges with the HIA resource from around September and with added webchat demand, telephony service levels fell below the target.

Special Helplines

In 2017/18, NHS 24 successfully operated one special helpline in support a Hepatitis A patient notification exercise with NHS Lanarkshire, which ran from April to May.

Cancer Treatment Helpline

The 111 service also delivers the Cancer Treatment Helpline. Patients receiving treatment for cancer can call our service if they are experiencing symptoms which are out with the expected side effects of their treatment. This line is available to patients at all times throughout the year. It aims to recognise acute illness related to their treatment and direct patients to the best place to appropriately support their needs.

Musculoskeletal Advice and Triage Service (MATS)

The Musculoskeletal Advice and Triage Service (MATS) is now live across the majority of health boards across Scotland. During 2017/18, call demand to the service was 87,260 and we continue with plans to roll it out across Scotland. Performance in the early part of the year was extremely challenging as a result of a shortfall in staffing, however this improved significantly in the second half of the year. This highlighted the opportunity for a review of the service model, and the development of a service improvement plan, which will be taken forward over the next 24 months. Performance against this demand is detailed below.

Actual vs. Target Performance 2017/18				
	Q1	Q2	Q3	Q4
Target	70%	70%	70%	70%
Actual	25.2%	52.5%	75.1%	88.2%

Overall, 2017/18 was a particularly challenging year for this service and the staff, which saw an initial increase in demand to access to the service combined with an unexpected staffing challenge.

Following dedicated support being provided in the summer of 2017 and a sustained recruitment process, the service stabilised through Q3, with significant improvements made in performance with the service now consistently performing above 90% in part due to a full staffing compliment.

A Service Improvement initiative, which started in late 2017, delivered a process improvement that reduced call length by an average of one minute per call. A deeper review of the existing call flow design also took place and a proposal has been developed for a redesign that will provide a better experience for staff and patients, while delivering a more efficient service. This was completed in partnership with key stakeholders at national and Board level.

Public Protection

During the period April 2017 - March 2018, NHS 24 made 1,305 public protection referrals on behalf of children and 1,789 public protection referrals on behalf of adults thought to be at risk of harm or requiring further support.

NHS 24 continued to see an increase in adult referrals across the service, with a 4% increase from 2016/17. However, for the first time in several years, we have seen a reduction by 17% in the number of child referrals. Although the adult trend was consistent with partner agencies, the child referral rate was not and further analysis is being carried out to understand this change.

Scottish Patient Safety Programme (SPSP) – Leadership Walk rounds

The annual programme of Patient Safety Leadership Walk rounds ensure frontline staff are connected to senior organisation leaders including the Executive and Non-Executive Members. Themes and actions held in the Patient Safety Leadership action plan are monitored by the National Patient Safety Group.

Excellence in Care (EIC)

Excellence in Care (EIC) aims to provide assurance around the quality and safety of care to the public. The measures from Health boards will be available via a National Dashboard hosted by NHS National Services Scotland (NSS). EIC has been introduced in response to the recommendations following the Francis Report and the Vale of Leven Inquiry. The NHS 24 EIC Working Group inaugural meeting was held in January 2018 with frontline nursing staff contributing.

Patient Experience

NHS 24 carries out patient satisfaction surveys for the unscheduled care service over the financial year. These are reported monthly periods through the Clinical Governance Structures. Results from the second survey of the year from October 2017 to March 2018 indicate that 88% of respondents to the survey recorded overall satisfaction with the service, against a target of 90%.

Patient Affairs

Following the implementation of the new Complaints Handling Procedure (CHP) in April 2017, the majority of items of feedback previously managed as concerns are identified and managed as Stage 1 complaints. This provides rationale for the reduction in the number of items of feedback managed as concerns for this year.

A total of 79% of the external phone communications managed by the Patient Affairs Service, were resolved, de-escalated, or re-directed at source. Since the introduction of the new Technology Platform in October 2017, the role of the Patient Affairs Team has expanded to involve reviewing information held on 111 call records to establish the patient journey with a view to early local resolution of issues.

	2016/17	2017/18	
Feedback Type	Call Demand	Call Demand	% variance
	1,468,659	1,582,905	+8%
Stage 2 Complaints	52	72	+38%
Stage 1 Complaints	505	437	-13%
Shared Complaints	50	36	-28%
Comments	479	204	-57%
Compliments	414	322	-22%
Concerns	-	5	-
Enquiries	348	243	-30%
Total Feedback	1,848	1,319	-29%

Social Media

During 2017/18 NHS 24 consolidated its social media platforms by merging Facebook pages, maintaining the NHS 24 page. The organisation's Instagram page was set up in November 2017 and has been growing steadily. Facebook continues to attract the most consistent engagement with our audiences and this is reflected in follower numbers which increased by 9782 over the year (from 16,943 to 26,725). The channels were used to best effect during the severe weather of February 2018 when the 111 service faced the dual challenge of demand management peaking and staff being unable to travel to work.

Service Support

In 2017/18, our communications team worked alongside medical staff to improve our public facing digital content. Through proactive engagement with strategic clinical groups and meetings, we were able to expand the audience that NHS 24 is engaged with. This work prompted the creation of video content with other professionals, which had dual benefit of raising our profile with community pharmacy and how they can further help and advise the public. Our range of self help guides aim to provide the people in Scotland with accurate and relevant information to help them make informed decisions about their own health and the health of the people they care for. In 2017/18, there was an increase in the use of flu like illness guides and adults with fever, coinciding with the influenza over the festive period last year.

3. Better Health, Better Care – Our Strategy and Service Transformation Programme

NHS 24 5-Year Strategy

The NHS 24 Strategy was created to ensure our organisation contributes towards the delivery of national and local strategies across the health and social care systems. It is not a standalone programme but one, which integrates and delivers with the Health and Social Care Delivery Plan, the Integration of Health and Social Care, the National Clinical Strategy, the Transforming Urgent Care National Review, the National Mental Health Strategy and the recently published Waiting Times Improvement Plan.

We believe we have a key role to play in supporting a response to the challenges the health and social care systems face. The strategy sets out initiatives, which, through utilisation of our infrastructure and clinical triage system capability, support the provision of more in-hours services in a cost effective way.

The initiatives we propose play to our core competencies as we already provide a range of digital health and care services. As a national organisation, we have an opportunity to work more closely with primary, secondary and social care to support large scale change supporting a 'Once for Scotland' approach which will provide real sustainable benefits.

In response to the external engagement on the NHS 24 Strategy, there was recognition of the role we could play in managing and appropriately routing demand, supporting prevention and the self-management of care.

Through greater collaboration with our partner organisations and specifically with the Scottish Ambulance Service (SAS), we can offer alternative access routes to support the overall aim to reduce the current pressure across health and social care services. Specifically the development of our Advanced Clinical Support model will enable the opportunity to work more closely with SAS to ensure the appropriate, safe and seamless flow of patients from one service to the other.

The overarching aim of the programme is to create capacity and capability within NHS 24 to support the health and social care system in managing the ever increasing demands for services by offering a number of additional routes to access services. This offer from NHS 24 will broaden the choices and channels for service access for the public and patients in a cost effective way. The programme consists of 6 key areas of work linked to strategic initiatives across the health and social care system.

- **Service Delivery – Better Work, Better Care:** We have created a protected test and learn environment within the Service Delivery operation. This environment creates the right conditions, building on the organisational values, to test new working arrangements, patient pathway processes and integration enhancements with our partners to support improvements for service users and the wider health and social care system.

- **GP Triage:** the aim of this test of change is to provide a co-ordinated and scalable solution to support GP triage during the in-hours period. This offer is made to support the currently heavily pressurised system through freeing up GP time to allow them to focus on the more complex care cases with NHS 24 responding to those of a less complex nature.
- **Advanced Clinical Support Models:** this development has introduced Advanced Nurse Practitioners (ANPs) and Allied Health Professionals as part of the NHS 24 frontline clinical workforce to reduce the volume of patients requiring further support from primary and secondary care. This will improve the quality of patient experience by delivering a first point of contact resolution for an agreed cohort of people accessing the service.
- **Mental Health Service Redesign:** this service redesign will increase the provision of mental health specialists available in NHS 24 with the aim of reducing the number of mental health calls currently resulting in further support from health partners as well as supporting the delivery of the national mental health strategy. It also aims to increase opportunities for people with mental health needs to access digital support services.
- **Waiting Times Improvement Plan:** this development will focus on working collaboratively with NHS Board regional planning groups and the Scottish Government to determine how NHS 24 can support novel pathways to deliver care specifically in relation to return outpatient appointments. This will include exploring the role of technology using telephone consultation and other appropriate digital interventions, tele-consultations and the development of virtual clinics.
- **Digital Services Development:** will take place through tests of change, and the implementation of a digital roadmap for the organisation based on services co-designed with partners, patients and the public.

4. Better Health, Better Care – Our Service Transformation Programme Performance

Key achievements during 2017/18 are described in this section.

Service Delivery – Better Work, Better Care

In October 2017, we completed the national roll-out of the core telephony and records management system (SAP). This required a national scale effort, which applied a test and learn approach to improve system functionality and the patient journey. Staff across NHS 24 and our partners were actively involved in this work throughout.

This was a significant undertaking for NHS 24, requiring 1,100 frontline staff to be trained and migrated to the new system, whilst maintaining the highest level of care through the 111 service.

Following an anticipated bedding in period, the SAP application is operating effectively, with a reduction in application support and technical issues since go-live. Staff are actively involved in the development and ongoing improvement of the system.

In Hours GP Triage (GPT)

A new in-hours team was established at the South Queensferry centre and, with strong clinical leadership, processes and systems put in place to support a first iteration of the GP Triage (GPT) service model. NHS 24 partnered with two practices, in NHS Lothian and NHS Lanarkshire, to start test of change projects in November 2017.

The NHS Lothian practice merged in January 2018 with another practice and joined with East Lothian Health and Social Care Partnership (HSCP) in February 2018 to create a new multi-disciplinary primary care offering designed to better manage the demand for same day GP appointments. NHS 24 triage a number of patients on behalf of the GP practice to match their need with the right resource based in the GP practice's multi-disciplinary team; the total impact was to reduce the requirement for same day GP appointments to around 10% of demand and increase referral to other skilled practitioners, such as advanced nurse practitioners – a very significant outcome for the primary care transformation agenda across Scotland.

Discussion has started with other potential partners for adoption of the GPT service model and the service is expected to expand in 2018-19. Evaluation activity included involvement of practice staff, Board representatives and patients.

Advanced Clinical Support

NHS 24 introduced a new role to the organisation, Trainee Advanced Nurse Practitioners (TANPs). The first three TANPs were appointed in July 2017. The role is designed to improve patient care and offers nurses in NHS 24 an additional career pathway. These posts are also being developed collaboratively with other NHS Boards to support the wider system. The recruitment process for the second cohort of Trainee Advanced Nurse

Practitioners commenced in March 2018 with posts advertised in the North, East and West of Scotland.

Mental Health Services Redesign

Around 4,000 calls per month to the 111 service are identified as mental health related, in addition to those accessing Breathing Space. 111 receives 1.5 million calls per annum and it is understood that a currently unquantifiable number of these calls will also be mental health related but not recorded as such.

There are a small number of dedicated mental health nurse practitioners working in 111, handling around 20% of the mental health calls received. There is clearly scope to increase the level of specialist resource to deal with this demand and improve the routing of these calls to specialist staff, however, there is also a requirement to ensure that all frontline staff in the 111 service are better equipped to respond to those in distress and be able to more effectively triage complex calls and support those accessing 111 to a more appropriate service, either provided by NHS 24 or by our partners in the wider system. Over the next 12 months, we will as a strategic priority increase our specialist mental health capability.

In 2017/18, we had significant engagement with a range of stakeholders to shape the redesign of our Mental Health Services. We completed the first phase internal review of our mental health service provision and current capacity and are now embarking on a whole system review with an emphasis being placed on a digital first response to delivery.

Building on existing collaborative working practices, we are progressing a test of change in 2018/19 to further strengthen referral pathways with Police Scotland and the Scottish Ambulance Service ensuring the most appropriate service response is deployed.

During 2018/19, we will review and extend our range of self-management tools and information, increasing access to quality assured self-management information, services and tools through the use of NHS inform. This work, through the alignment with the current development of a National Service Directory, will support Integration Joint Boards to further develop locality based simple signposting services.

By extending the number of channels we currently offer, we will improve access to our mental health services. This will be done through co-design with equality and diversity groups to inform the development of services. The extension of digital services, including digital imagery, web chat, instant messaging, and online forums will expand the range of access opportunities across all groups.

The inclusion of information in British Sign Language will support NHS 24 meet its commitments, as set out in the Scottish Government's British Sign Language (BSL) National Plan 2017 – 2013. Further improvements to NHS 24's language translation function will improve access for people whose first or preferred language is not English.

Waiting Times Improvement Plan

During 2017/18, we partnered with NHS Lothian to test a telephony based waiting list management service for the Gastroenterology speciality. Clinicians and managers from both organisations collaborated to develop the service model, which operated from January to March 2018. An evaluation of the test of change concluded that this was a proactive, safe and effective approach to waiting list management. During 2018/19, we will take the evaluation and learning from this test of change forward as part of our discussions on the national and regional board plans to determine appropriate opportunities to implement this in support of the national Waiting Times Improvement Plan.

During 2017/18, we continued to provide management resource to the Technology Enabled Care (TEC) Video Conferencing Workstream. This has focused on increasing the uptake of the Attend Anywhere video consulting platform. Use of the platform continues to grow, with around 700 video consultations being undertaken per quarter. A wide range of clinical services are being provided by video consultation in NHS Highland (NHS Near Me service), NHS Grampian (Inflammatory Bowel Disease (IBD) clinics) and NHS Western Isles (Hand surgery clinics). During 2018/19, we will take the evaluation and learning from this test of change forward as part of our discussions on the national and regional board plans to determine appropriate opportunities to implement this in support of the national Waiting Times Improvement Plan.

Additional tests of change in 2017/18 focussed on; the initial development of web chat to Breathing Space and clinical services including 111. We will evaluate and progress these initiatives during 2018/19.

Stakeholder Engagement and Communications

In 2017/18, we engaged with stakeholders across all service transformation projects. This included engagement internally with our staff as well as externally across all relevant partner organisations, partner assurance and collaborative project groups and our public. This stakeholder engagement model is being embedded within the new Service Development Directorate and will include a new User Research function which will enable the organisation to learn about users requirements and create services that meet their needs.

Patient and Public Involvement

NHS 24 has maintained its commitment to involving patients, carers, and the public in the design, development, and evaluation of NHS 24 services through the Public Partnership Forum (PPF) and other public involvement activities. The PPF is chaired jointly by a public member of the Forum and the NHS 24 Director of Service Development.

The membership of the PPF includes representations from people living within remote and rural locations across Scotland and those in diverse communities. During 2017/18, we also established greater involvement and engagement with the young people of Scotland through the establishment of a Youth Forum.

We also worked with the NHS Lothian Minority Ethnic Inclusion Service to improve access to NHS 24 services for minority ethnic communities, refugees and asylum seekers.

One specific example of effective engagement and co-design to highlight in this report was the joint work with the PPF in developing, testing and implementing improvements to the Intelligent Voice Recording (IVR) system prior to the full implementation of the new technology. This was particularly helpful in ensuring service user and public validation.

5. Better Value – Our Workforce

Supporting our People

We have developed a range of support materials to empower managers in terms of both their capability and accountability in the crucial role they play as managers. A number of toolkits for managers have been developed and are available for managers to access, these toolkits are used in conjunction with our policies and support the Leading and Managing Successful Teams programme. This had 8 modules which were attended by 230 managers in 2017/18.

The Healthy Working Lives online eLearning attendance management tool was made available on the intranet for managers, and the Employee Relations Team offer out of hours clinics to managers and staff within the majority of the centres and a Saturday Employee Relations service is also available when required by managers.

For 2017/18, NHS 24's attendance figure was reported as 92.69% against an agreed target of 95%. We continue to work in partnership with staff, managers and staff side colleagues to support maximum attendance at work. Areas of focus include:

- Supporting staff with mental health issues at work which is (as is prevalent in the Scottish population) a primary cause for sickness absence.
- Continued promotion of health and wellbeing, in 2017/18 we maintained our gold award for Healthy Working Lives.
- Wellbeing groups have now been set up within each of our centres, these groups proactively work within their centres to promote health and wellbeing,

Staff Development

In 2017/18, staff development opportunities offered range of face-to-face workshops including 'Building Personal Resilience'. These development sessions have been facilitated in response to needs identified in the organisation. In 2017/18, 30 delegates attended the Fish! Philosophy sessions, and 18 delegates attended the Resilience and Courageous Conversations sessions.

Staff Experience: iMatter

NHS 24 achieved an overall response rate of 67%, which exceeds the NHSScotland average of 63%. The Employee Engagement Index (EEI) achieved by NHS 24 is 'Strive and Celebrate'. The organisational focus on engaging and supporting our staff through the implementation of the new telephony and technology platform contributed to our results on this survey. NHS 24 also created an iMatter Awareness eLearning module for all staff and this has been made available to all NHS Scotland Boards.

Staff Experience: Dignity at Work Survey 2017 Results

Within the Dignity at Work survey section of the [2017 Health and Social Care Staff Experience Report](#), NHS 24's response rate of 46% is the sixth highest response rate within NHS Scotland and exceeds the NHS Scotland average response rate of 36%.

Our Leadership programme in 2018/19 will focus on development of collaborative and compassionate leadership skills within the leadership team, with the aim of improving the work experience of our staff.

Youth Employment

During the Review period, NHS 24 achieved the Scottish Government target of four Modern Apprenticeships. We were also involved in engagement with primary school and university students in this regard.

Leadership and Management Development

NHS 24 has been involved extensively in national groups using a collaborative approach to develop approaches with other Boards – specifically, the Management Matters project will deliver a standard delivery model and suite of resources for line manager development by, and for, the 8 National boards. Work has begun to develop an education pathway for all our staff.

The key areas of staff development are set out below:

- **Implementation of our new Technology and Systems**

In 2017/18, we developed a suite of system simulations, used for staff training pre-implementation. To support the coordination and scheduling of this training Learning and Development Advisors were seconded to the implementation team.

- **Mandatory Training**

NHS 24 has developed an approach to measure the delivery of mandatory/ essential learning for staff. Improvements include moving to an improved eLearning platform.

- **Personal Development Planning and Review**

In 2017/18, NHS 24 focussed on preparation for an effective migration of data from e-KSF to the new Turas Appraisal platform. The Personal Development Planning and Review (PDPR) policy was updated to reflect

Partnership Information Network (PIN) Policy, and a new approach to PDPR was developed in line with the system change.

- **Knowledge Curation**

A [Point of Care resource Tool](#) was developed and embedded in the SAP. This will enable evidence-based searches to support clinical and managerial decision-making.

In 2017/18, we revised the Mental Health and Dental Health pages of NHS 24's Knowledge Lab page. During 2018/19, we will continue to develop social media presence for the learning and professional education function, which is now beginning to grow, with Twitter used regularly to post pertinent updates relating to knowledge, information and education resources.

6. Better Value – Our Financial Performance

Best Value and Sustainability

We are committed to adding value to the health and care systems across Scotland and delivering services as efficiently and effectively as possible. Our out-of-hours model of care is well established and adds value to those who use our services but there is always room for improvement. We are reviewing the way we deliver our services in conjunction with our public and partners, to further strengthen our effectiveness and service model.

Through more efficient utilisation of our capability during the day, we are seeking to further expand our offer to support the health and care system to ease pressure and reduce demand on local systems. We also ensure that evidence and data underpins everything that we do.

Statutory Financial Target Performance

NHS 24 successfully operated within our statutory financial limits during 2017/18. Our performance against the targets was as follows:

	Limit as set by SGH&SCD	Actual outturn	Variance (over)/under	
	£'000	£'000	£'000	%
Revenue Resource Limit (RRL)	72,434	72,404	30	0.04
Of which:				
Core Revenue Resource Limit	71,707	71,677	30	0.04
Non-Core Revenue Resource Limit	727	727	0	0.00
Capital Resource Limit (CRL)	384	383	1	0.26
Cash Requirement	72,680	72,680	0	0

Efficiency Savings

For 2017/18, NHS 24 was required to identify efficiency savings in order to achieve breakeven totalling £2.4 million (3.7%). Against this target, savings of £1.7 million were achieved on a recurrent basis with the remaining £0.7 million delivered non-recurrently in-year.

In addition, the National Health Boards worked collaboratively to identify ways to collectively standardise and share services with a target to reduce the

operating costs by £15 million in 2017/18. NHS 24 contributed £0.9 million to this target.

Brokerage Repayment

£1.074 million of brokerage was repaid in the 2017/18 financial year, this was followed by a repayment of £5 million in 2018/19. The remaining brokerage to repay is £13.3 million.

Environmental and sustainability reporting

The Scottish Government states that sustainable development is integral to its overall purpose and identifies sustainability as one of the high-level targets relating to the Government's purpose. The transformation to a low carbon economy is central to delivering sustainable development in Scotland.

The NHS 24 Sustainable Development Action Plan (SDAP) sets out a clear roadmap for NHS 24's contribution towards the Government's sustainability targets.

In relation to Carbon Reduction, the replacement of the Air Conditioning plant in Norseman House is estimated to provide a reduction of 26% in energy consumption (kWh) and CO2 emissions for Norseman House. The annual electricity usage for 2017/18 (kWh) has reduced by 9.84% resulting in a 23% CO2 emissions reduction from 2016/17 and costs have reduced by 16.38%. The gains from this project plus the NHS 24 sites' waste recycling activity means we have achieved our energy consumption (3%) and carbon reduction (1%) targets for 2017/18. There has been a significant drop in travel by car over the last 3 years leading to a reduction in CO2 emissions of 15% since 2014/15. The SDAP target to reduce car mileage in 2017/18 to 310,000 miles has been achieved.

NHS 24 continues to maintain compliance with relevant environmental legislation through the management of properties in accordance with the NHS Scotland environmental management system, Corporate Green code.

Annex 1: Progress Against the 2016/17 Annual Review Actions

The NHS 24 Annual Review for 2016/17 resulted in the following action points for the organisation to address. The NHS 24 update in relation to each of the action points are detailed in the table below:

	ACTION POINT - The Board will:	NHS 24 UPDATE 2017/18:
1	Develop a revised performance framework and associated outcomes that are patient focused and aligned to Sir Harry Burns review of target and indicators	<p>During 2017/18, a proposal which included a revised performance management framework was approved by the NHS 24 Board. This framework had previously been shared with Scottish Government who supported the direction of travel the proposal described.</p> <p>For 2018/19, NHS 24 committed to expanding the range of Key Performance Indicators (KPIs) we monitor while maintaining the access target at the same level as previous years. This approach will allow us to build the evidence base to support any specific recommendation to make any change to the access target. The key aims for our revised performance framework include being able to measure the effectiveness of NHS 24s response and the experience of our callers including our ability to link patients with local services in support of system integration and the development of patient pathways. The introduction of an additional number of meaningful KPIs will improve the validity and insight of our measures and inform where service improvements should be made.</p>
2	Maintain focus on reducing absence levels across the organisation, working towards the LDP standard of 4%	<p>For 2017/18, NHS 24's attendance figure was reported as 92.69% against an agreed target of 95%. NHS 24 acknowledges that the national standard is 96%, and we continue to work in partnership with staff, managers and staff side colleagues to support maximum attendance at work.</p> <p>From the data provided around attendance management, the focus has centred on the main reasons for sickness absence. The main issue currently relates to mental health. A plan of support to both managers and staff in recognising and supporting mental health issues continues to progress and a range of initiatives have been undertaken including; wellbeing initiatives, links with the Learning and Professional Education Team to promote their work on Resilience, Crucial Accountability and an emphasis on the many proactive support mechanisms we have in place, e.g. Employee Assistance Programme, Physiotherapy Service, Occupational Health Service and the use of the many internal services which NHS 24 provides including Breathing Space and Living Lives.</p>

	ACTION POINT - The Board will:	NHS 24 UPDATE 2017/18:
3	<p>In the context of the collaborative proposition developed by the National Health Boards as part of Regional Planning Process, work together with the Scottish Ambulance Service to present a more formal integration of your respective programmes as part of that wider proposition</p>	<p>As a key partner within the National Boards Health & Social Care Delivery Programme, we will continue to promote areas of development which deliver our contribution to the transformation of health and social care delivery. Additionally, through this programme and our existing partnership networks, we will further develop our role collaborating with our regional, territorial, Integrated Joint Boards (IJBs) and third sector colleagues to ensure we support and deliver meaningful service change and improvement. Joint working arrangements are now in place at an operational and a strategic level with Scottish Ambulance Service (SAS), linked into the Service Transformation and Demand Management component of the National Boards Collaborative plan.</p> <p>In addition to sharing an Associate Director of Performance & Governance with SAS, we have invested in our planning capability through the appointment to two Planning Managers positions, which will increase our capacity.</p>
4	<p>Work with other partners, including Scottish Ambulance Service and Integration Authorities, to develop a plan to contribute to the delivery of the actions set out in the Mental Health Strategy</p>	<p>NHS 24 is working closely in a structured project with a range of partners, including SAS and Police Scotland to improve the service provided to people who present in a mental health crisis, through 999, 111 or 101. Key elements currently being developed towards testing include:</p> <ul style="list-style-type: none"> • The introduction of a mental health hub within the 111 unscheduled care service. This hub will more effectively triage mental health calls, delivered by a range of specialist skilled staff, and linked in through local health and social care partnerships and key partners such as primary care out of hours, Police Scotland and the Scottish Ambulance Service to access the right level of support. • The development of a consistent process, utilised by NHS 24, Police Scotland & SAS, to identify and triage people who present in mental health crisis to develop better pathways reducing attendance at emergency departments. <p>We recognise the need for the work of this project to include access to community based mental health and social care services following contact by people through 999, 111 or 101 and this aspect of the project involves engagement across partners and will be developed working with IJBs and Health and Social Care Partnerships (HSCPs) as they develop their plans.</p>

	ACTION POINT - The Board will:	NHS 24 UPDATE 2017/18:
5	Continue to achieve in-year and recurring financial balance, and keep the Health Directorates informed of progress in implementing the organisations local efficiency savings programme	<p>In relation to financial performance, NHS 24 met its statutory targets for the 2017/18 financial year by operating within the Revenue and Capital Resource Limits set by Scottish Government.</p> <p>For 2017/18, NHS 24 was required to identify efficiency savings in order to achieve breakeven totalling £2.4 million. A total of £1.7 million was achieved recurrently and £0.7 million was achieved on a non-recurring basis, allowing NHS 24 to achieve financial balance for the year.</p>
6	Continue to promote the use of NHS Inform and the national services directory to public partners	<p>Through 2017/18 we undertook a range of activities to promote the use of NHS inform, National Service Directory and our Self Help Guides, through engagement with partners and marketing activity. There was a specific marketing campaign across April & May 2017, which highlighted NHS inform through digital marketing and on buses. During this time there was a significant increase in traffic to the Inform site from 115k visits in April 2017 rising to 231k visits in June 2017. There was also continued engagement work with new and existing partner organisations, through primary care, further education bodies and HSCPs to ensure these resources can support patient/public groups within their organisation.</p>