

NHS 24 BOARD		8 DECEMBER 2022 ITEM NO 10.1 FOR ASSURANCE	
CORPORATE PERFORMANCE REPORT OCTOBER 2022			
Executive Sponsor:		Director of Transformation Strategy, Planning & Performance	
Lead Officer/Author:		Head of Corporate Performance	
Action Required		This paper is presented to the Board to provide assurance on the quality and performance of services provided for period ended 31 October 2022 and to set the context for more detailed discussion by the Board on current performance.	
Key Points for Board to consider		The key points in relation to October 2022 performance: <ul style="list-style-type: none"> • Demand to 111 service increased by 4% in October with Unwell pathway receiving the highest volume since October 2021 (93,600 calls) • Mental Health Hub continued to have strong access performance despite a 9% increase in volume to service. Breathing Space also had one of its busiest ever months (12,800 calls) • A rise in seasonal illness is being experienced across service – Keyword use in calls, increased digital activity and absence among staff. • Discussions in respect of NHS 24's Key Performance Indicator (KPI) framework have restarted with sponsor team at Scottish Government with a view to concluding approval process with Cabinet Secretary this financial year. • 	
Governance process		This paper is presented to EMT 29 November, PPC 28 th November and Board 8 th December 2022.	
Strategic alignment and link to overarching NHS Scotland priorities and strategies		Effective performance across NHS 24 supports delivery across the wider health and social care system.	
Key Risks		Resourcing Capacity Limitations and management of staff absence related to COVID-19 are considerations for this paper that are on risk register.	
Financial Implications		All financial and workforce implications arising from current and projected performance levels are reflected in the routine functional reports.	
Equality and Diversity		All equality and diversity issues arising from maintaining and continuously improving performance management are integrated with service planning.	

1. RECOMMENDATION

- 1.1 The Board is asked to note quality and performance of services provided for period ended 31 October 2022.

2. TIMING

- 2.1 This report covers the period October 2022.

3. BACKGROUND

3.1 Overview

- 3.1.1 Demand on 111 service increased in October to just over 162,000 calls. The main increase in volume originated from Unwell pathway, which has been reflected in a rise in seasonal keywords such as Fever, Throat Pain and Temp. Unwell pathway volume is at its highest level since October 2021 with over 93,600 calls.
- 3.1.2 There was an increased sickness absence figure in October (8.2%) compared to September (7.3%). Frontline skillsets Call Handler and Nurse Practitioner both experienced minor increases on previous month (1 percentage point) with the largest increase in absence type being attributed to seasonal illness (Cough, Cold, Flu). There is a continued focus on ensuring all staff are vaccinated with Flu/Covid Clinics available across all centres.
- 3.1.3 Access performance in October was consistent with previous month at 23.9%. Abandoned after threshold improved by 1.5 percentage points to 14.6% overall for month. There was also a general improvement in call answering standards with both Median and 90th Percentile Time to Answer improving on previous month, meaning patients were accessing the service in a quicker time.
- 3.1.4 Demand for Mental Health services increased in October. Mental Health Hub in 111 experienced a 9% increase in calls to just under 12,000 calls. Breathing Space also experienced an increase in calls to over 12,800 calls in October, which is the 3rd highest volume experienced for service. Despite increase in calls, Mental Health Hub maintained good access performance stats; when compared to October 2021 there was a 24-percentage point improvement in % answered within 5 minutes to 54%. This reflects the increased staffing within the MHH, where PWP numbers have now reached 88fte, the highest level to date.
- 3.1.5 NHS 24 continues to actively engage in winter preparation. This includes business as usual planning for additional capacity across the peak festive weeks, but also a focus on recruitment of additional call handlers and call operators. Particular focus has been placed on Volume Management over peak 3 week festive period, with workshops underway which are focussed on reintroducing protocols which require a lighter clinical supervision touch. This is aimed at streamlining call handling process and maximising clinical and call handler capacity.

- 3.1.6 A suite of high impact changes as part of the overall unscheduled care programme has been submitted to Scottish Government. This plan sets out the prioritised actions to end March 2023 to support improvements in access to the service and covers a range of commitments from continued recruitment of frontline staff up to funded establishment through to additional coaching for clinical supervisors to reduce average handling time and generate greater consistency across the service. These measures are aligned to the national integrated urgent and unscheduled care programme and build on performance improvement work already in train.

3.2 **Key Performance Framework**

NHS 24's KPI framework still requires ratification and approval by Cabinet Secretary although NHS 24 and sponsor team at Scottish Government have been monitoring performance against the revised suite of KPIs throughout. Discussions with Scottish Government are now underway again, with the opportunity for further review to reflect the developed role that NHS 24 now delivers within the wider system, and the need to better represent outcomes and the value add that NHS 24 is offering. This work will be aligned with the development of NHS 24 strategy with a view to concluding the approval process in Q4 ahead of implementation from 2023/24.

4. **ENGAGEMENT**

- 4.1 Paper will be shared with EMT, Planning & Performance Committee and NHS 24 Board

5. **FINANCIAL IMPLICATIONS**

- 5.1 There are no financial implications from the report