

**NHS 24 BOARD  
PLANNING AND PERFORMANCE COMMITTEE  
Approved Minute of the meeting held Monday 08 November 2021 from 10.00 am to  
12 noon  
via Teams**

**PRESENT:**

Mr Mike McCormick (Chair); Ms Anne Gibson; Ms Carol Gillie; Mr John Glennie;  
Mr Alan Webb.

**APOLOGIES:**

Dr Laura Ryan (Medical Director)

**IN ATTENDANCE:**

Dr Martin Cheyne (Chair of NHS 24); Mr Jim Miller (Chief Executive - attending until 11.30 am); Mr John Gebbie (Director of Finance); Mr Damien Snedden (Deputy Director of Finance); Ms Paula Speirs (Director of Strategy, Planning & Performance); Ms Ann-Marie Gallacher (Chief Information Officer); Mr K McMahon (Head of Risk & Resilience); Ms Steph Phillips (Director, Service Delivery – attending until 11.30 am), Ms Jacqui Hepburn (Director of Workforce), Mr Kenneth Woods (Employee Director), Mr Joseph Markey (Staff Side Representative), Dr Ron Cook (Associate Medical Director – representing Dr Laura Ryan); Mr Paul McLaughlin (Senior Performance Analyst); Ms Tracy McMillan (EPA/Strategic Planning Officer) (Clerk)

**1. Welcome, Introductions & Apologies**

The Chair welcomed all Committee members to the meeting. Apologies were noted from Dr Laura Ryan, noting that Ron Cook was attending in her place. **Noted.**

**2. Declarations of Interest**

Dr Cheyne declared a potential interest in that the owner of “Space Solutions”, the company undertaking some of the refit work at the Centres, was a personal friend.

**3. Minute of the meeting held Friday 7 May 2021**

The following amendments were noted:

Page 1, “Present”, Line 1 – replace “Gebbie” with “Glennie”.

The minute was then **accepted** as a correct record of the meeting.

**4. Performance****4.1 Corporate Performance Report**

The Committee's appreciation was noted for the comprehensive report they had received containing very useful information.

Ms Speirs introduced Mr Paul McLaughlin and advised he would provide an overview of the report to the Committee.

The Committee noted the continued impact of exceptional call volumes and impact of absence, COVID-19 absence and recruiting shortfalls on call answering performance and also the ongoing work to address this by staff, whose continued commitment was praised.

The Committee also supported the continued focus on delivering care at first point of contact, having noted the risk and complexity that would flow from a move to transfer staff capacity to reduce answering times from the focus on dealing with callers without requiring a call back - given the extended patient journey this creates and clinical risk of dangerously worsening conditions whilst awaiting a call back. Such a change in approach would also increase second and subsequent calls by patients and difficulties for NHS 24 staff in re-contacting callers.

The Committee noted and welcomed the move to focus on the agreed updated range of performance measures and targets as well as the quality of information in the performance report and the operational grip it demonstrated.

Thereafter, the Corporate Performance Update was **noted for assurance**.

#### **4.2 Estates and Facilities Report**

Mr Snedden discussed the report with members and it was noted a clear plan was in place for the various changes being undertaken at the different NHS 24 contact centres. With regard to Dundee, noted it is on course for the centre to be operational by 17 December 2021.

The Committee welcomed and congratulated staff on the significant progress being made across the NHS 24 sites.

Thereafter the Estates and Facilities Report was **noted for assurance**.

#### **4.3 Financial Performance Report**

Mr Gebbie presented the report. The underspend within the Service Development Directorate was highlighted, noting that some of this was due to delays due to organisational restructure and subsequent delays in recruitment. Mr Gebbie confirmed that with these plans Scottish Government would not request the funding to be returned.

With regard to savings, Mr Gebbie advised continuous work is being undertaken with EMT to review where savings could be made. It had been agreed at EMT that until savings are achieved, SPRA posts would not be filled. The main cost pressure at present is that related to call charges which amounts to £300k.

The Committee, whilst welcoming the insightful reports which demonstrated how the predicted recurring positive balance anticipated following the repayment of brokerage had been eroded through exceptional pressures such as Golden Jubilee egress,

national pay settlements and ICT requirements alongside requirements for recurring savings, welcomed the significant growth within NHS 24 and noted the need to deliver recurring savings going forward in order to fund future service developments and budget pressures.

The committee were pleased with the work on-going to assist savings and supported the approach being undertaken.

Thereafter the update to the Finance Plan was **noted** for **assurance**.

## **5. Strategy**

### **5.1 2021/22 Remobilisation Plan (RMP) Quarterly Update**

Ms Speirs advised the NHS 24 Board had approved RMP 4. She referred to the Appendix circulated and it was noted this would be used as the Delivery Plan and that quarterly updates would be provided to Scottish Government.

In response to a question on the Coaching and Mentoring Framework, Ms Hepburn stated that 12 members of staff across the organisation were undertaking professional coaching. The Coaching Framework will be reviewed at the Staff Governance meeting. Noted that mentoring is not currently being undertaken, but training for this will be implemented in the future. The Committee were pleased to see NHS 24 investing in this.

Members also questioned how, within RUC, an improved GP support mechanism could be developed. Ms Speirs advised that the role NHS 24 might have in further supporting primary care services will form part of the next phase of work in developing the new NHS 24 Strategy.

It was agreed that there would be a more detailed discussion at the next Committee meeting on "Horizon Scanning" to discuss the work that had been undertaken on this previously for the Strategy. **Action – February Agenda**

The Committee noted and welcomed the plan and the progress made, and following discussion agreed that it would be appropriate to consider longer term plans and ambitions for NHS 24 taking into account RUC progress and previous GP triage plans at a future Board Workshop Session. **Action – future Board Workshop discussion.**

Thereafter the Remobilisation Plan update was **noted** for **assurance**.

### **5.2 Change Portfolio Board (CPB) Update**

It was noted that the focus of the CPB is Estates and Connect Programmes, which is ongoing and subject to a fuller paper. The summary paper was tabled to provide the Committee with visibility of the wider portfolio.

Thereafter, the Change Portfolio Board Update was **noted** for **assurance**.

### **5.3 Connect (Phase One) Healthcheck Report**

Mr Gebbie summarised the latest position on Connect, noting the outcome of the audit of the programme, The Committee welcomed the progress made to address the recommendations in particular ICT capability and capacity and the ongoing work to address gaps in PMO capacity.

On the technical side, Ms Gallacher advised the Committee that there had been issues with recruiting a project manager however a full complement with the technical capacity required was now in place.

Ms Gallacher confirmed that the outage that took place on 21 October 2021 was being reviewed and a lessons learnt report being produced.

Thereafter the Connect (Phase One) Business Continuity Healthcheck Report was **noted**.

#### **5.4 Communication Delivery Plan Update**

As Ms Aspley was not in attendance for the meeting, Ms Speirs advised she would be content to take comments/queries the group may have back to Ms Aspley.

The question was asked what was being undertaken by NHS 24 nationally around communications, to ensure messages are getting “out there” around such things as RUC.

It was noted that NHS 24 had linkages with the national agenda and that there had been significant work undertaken to develop this. Ms Speirs advised that Ms Aspley was comfortable NHS 24 had a good understanding of this and will attend the forthcoming Staff Governance meeting to provide an update.

The Committee welcomed the range and depth of progress made and asked that some extra information be shared at the Staff Governance Committee regarding national RUC related work and internal projects.

Thereafter, the Communication Delivery Plan Update was **noted** for **assurance**.

#### **5.5 Strategy Development Update**

Ms Speirs provided a verbal update on the above. Work is continuing on the Strategy, and the revised timelines have been helpful providing more time to understand what is being undertaken outwith NHS 24.

At a future session a further, more detailed update, will be provided. **Action – Future Agenda**

The Strategy will also be discussed at the forthcoming Integrated Governance Committee.

Thereafter, the Strategy Development Update was **noted** for **assurance**.

## **6 Risk Management**

### **6.1 Planning and Performance Risk Register**

Mr McMahon referred to the risk register and noted that discussion on many of the risks had already taken place in earlier agenda items.

It was noted however that with regard to O365 there is a risk on implementation timelines due to the pressures on service delivery. Ms Gallacher and Mr Gebbie are currently in discussions with regard to what will be undertaken by NSS centrally and what NHS 24 will undertake locally.

Thereafter, the Committee **noted** the Planning & Performance risk register for **assurance**.

## **7 Information Governance and Security**

### **7.1 Information Governance & Security Report**

Ms Gallacher introduced the report, highlighting that there had been a significant increase in requests for “Freedom of Information” (FOI’s) which is having an impact on all departments and staff as the work involved in producing the information is significant. She advised this was also occurring for Data Subject Access Requests. Going forward, Ms Gallacher advised work was being undertaken to increase resources for FOI’s and refining current process in relation to information gathering.

Referring to item 4.10 Reportable Incidents in the paper provided, Ms Gallacher advised the incident had been analysed, reviewed and measures put in place to ensure this does not happen again.

Thereafter, the Information Governance & Security Report was **noted** for **assurance**.

## **8 Committee Workplan, Action Log, Terms of Reference and Committee Highlights**

### **8.1 Proposed Committee Highlights to Board**

The Chair summarised the key highlights from the meeting.

### **8.2 Planning & Performance Committee Workplan**

Members of the Committee **noted** the workplan for **assurance**.

### **8.3 Review of Committee Action Log**

It was noted that the actions identified during previous meetings were considered to be complete.

#### **8.4 Any Other Business**

Nil.

#### **9.0 Date and Time of Next Meeting**

Monday 14 February 2022 at 10.00 am via Teams.