

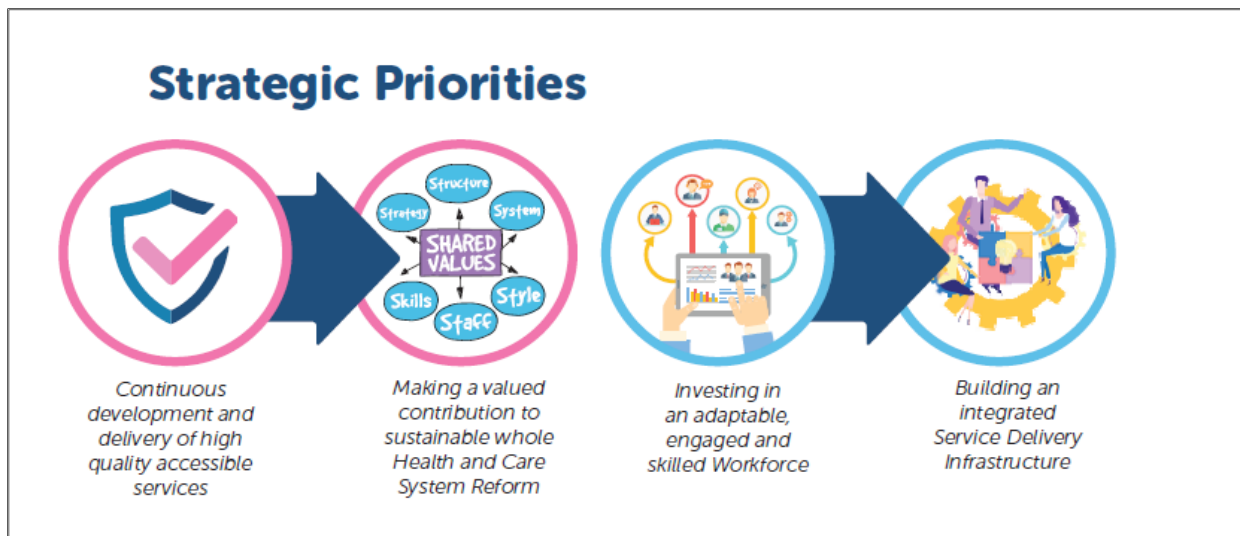
**NHS 24
BOARD MEETING**

**18 JUNE 2020
FOR ASSURANCE
ITEM 7**

EXECUTIVE REPORT TO THE BOARD

This paper provides an overview of progress on the high-level issues associated with the delivery of the NHS 24 Corporate Strategy since the last Board meeting.

Executive Sponsor: Executive Team



1. INTRODUCTION

1.1 The format of this report positions updates against the four strategic priorities identified within the NHS 24 draft Operating Plan 2020/21-23.

2. CONTINUOUS DEVELOPMENT AND DELIVERY OF HIGH QUALITY ACCESSIBLE SERVICES

2.1 Partnership Working for Covid-19 Pathways

Medical and Nursing & Care Directorates have developed new governance arrangements for validating and investigating adverse events that recognises the staffing pressures during NHS 24's response to COVID-19. The agreement streamlines future investigations and expedites the conclusion of the investigations in process. This has released resource for operational service delivery.

2.2 Deployment of Senior Nurse for Mental Health and Learning Disabilities from NHS Education for Scotland initially until July 2020. This resource is currently

supporting the strategic and professional agendas of Mental Health and Learning Disabilities Nursing during expansion of Mental Health Hub

2.3 Development and expansion of our digital channels

During Covid-19 we have embraced the opportunity to expand access to our services primarily through the use and re-purposing our quality assured content available on NHS inform through a number of routes. NHS inform has been the central resource for the whole NHS system providing access to the most up-to-date content in accordance with WHO, SG and PHS guidance. Our webchat functionality has been deployed to the Covid Helpline (Ascensos) and we have used sms messaging to issue messages of self-care to previous callers. We have developed chat bot functionality to direct users to Covid related content, as well as signpost and direct people to relevant other services such as 111. This has enabled us to demonstrate our ability to offer omni-channel services. Our Self Help Guides have also been enhanced to ensure citizens have access to right information at the right time according to their need. NHS 24 was instrumental in developing and producing the NHS 24 app at the request of SG.

The Medical Directorate has lead the governance of clinical content relating to Covid-19 across digital, operational, and communication services, through liaison with HPS and SG. This has also included establishing new governance relationships with SG units including Maternal & Infant health, and the Covid response unit. The new arrangements for reviewing content were developed through cross directorate working and agreeing processes for out of hours support and approval.

2.4 Communications and Engagement Response for Covid-19

NHS 24's social media channels were designated primary public facing information channels at the start of the outbreak in partnership with Scottish Government. We have produced highly engaging content, as well as sharing SG content. We have gained almost 20k new followers across our channels over the period, which is more than 140% increase. We have produced 50 graphics, 47 videos and 10 animations during the period. We have also managed increased numbers of media requests over the last three months and ensured a positive news flow about NHS 24's key role in the response to the pandemic. We have led a number of significant pieces of stakeholder engagement work including working with Scottish Government on the development of a suite of mental health content, as well as with Primary Care Policy Leads on the development of a toolkit for GP practices across Scotland. We also worked closely with Scottish Care to provide support and information for their networks.

2.5 Mental Health Call Review

The Mental Health Call Review document has been updated to reflect mental health and wellbeing interventions, whilst providing clinical governance, assurance of safe, effective and person centred care. This document has been reviewed and approved by the Clinical Education Governance Group.

2.6 Duty of Candour

The annual report for Scottish Government is complete and has been submitted to the National Clinical Governance Group and the Clinical Governance Committee. In total there were 11 instances where Duty of Candour was invoked in the 2019-2020 period and in all cases the procedure was followed and completed. This meant NHS 24 informed the people affected, apologised to them, and offered to meet with them.

3. MAKING A VALUED CONTRIBUTION TO SUSTAINABLE WHOLE HEALTH AND CARE SYSTEM REFORM

3.1 Respond, Recover, Renew (RRR) Programme

NHS 24 has developed a programme which will support the Evaluation, Assessment and Review (EAR) of our Response to Covid-19 across a range of new models of care, digital and ICT developments, and ways of working. Colleagues across the organisation are supporting this work. An early report and findings will be expected during July.

In alignment with the Scottish Government's Recovery and Renewal Programme our Remobilisation Plan/Continuation Plan to the end of July outlines NHS 24's key activities and areas of work to be progressed in this period. A weekly SG reporting template will capture progress. In addition, NHS 24 has produced for the National Recovery response a number of themes which will inform our own Recovery and Renewal Programme.

3.2 NHS 24's Change Portfolio

EMT is currently reviewing the paused activities across our Change Portfolio. Decisions are being taken with regard to their continued value add as we learn and discover more about our new norm and landscape, aligned to the work outlined in 3.1. Emergent activity in relation to the redesign of Unscheduled Care pathways 24/7, Estates and Connect Programmes will be central to NHS 24's change activity. Change Portfolio activity for 2020-21 will be agreed and approved in June 2020.

3.3 Extending Remote Prescribing to other Professions in NHS 24

Head of Pharmacy (HoP) worked with NHS 24 Dental Clinical Lead to introduce dental tele-prescribing capability into the Scottish Emergency Dental Service, ensuring incoming dentists were operating in line with NHS 24 processes, remote prescribing guidance and legislative requirements for prescribing.

3.4 Public Protection

Covid-19: Updates on Public Protection matters are being circulated via, Team Talks, Safety Huddles and Hot Topics. All managers are being encouraged to have Public Protection within any priority action plans.

The Scottish Nursing Leadership for Child Protection (SNLCP) recognises that the information is likely to change as the Covid-19 pandemic continues. SNLCP members continue to teleconference weekly to identify any emerging

issues and share good practice. Any new emerging legislation or guidance will be incorporated when circulating to NHS 24 staff

3.5 Dentistry

All routine dentistry ceased on 23 March, 2020. The Scottish Emergency Dental Service (SEDS) quickly realised that this new situation put pressure on the OOH dental service. It was decided that redeploying volunteer dentists into the SEDS service would support the service, and the population of Scotland, during this time. Fifteen dentists have been redeployed, in a staggered fashion, from 10 April 2020. Evaluation of this process is ongoing.

3.6 Corporate Parenting

A Corporate Parenting three year progress report and 2020-2023 plan is underway and will be submitted to both the National Clinical Governance Group and Clinical Governance Committee at future meeting.

3.7 Mental Health and Wellbeing Assessment Framework

NHS 24 are collaborating with NHS Ayrshire and Arran to develop an unscheduled care assessment framework which brings external validation to both organisations, provides training opportunities for staff, and improves clinical and operational risk management. The modified Framework preserves the strengths, evidence base and flexibility of the MH Aide Memoir, while improving risk assessment and its documentation

3.8 Distress Brief Intervention

The First Minister announced on 14 April 2020, the expansion and development of the Distress Brief Intervention (DBI)¹ programme into a nationwide response for people presenting in distress during the Covid-19 pandemic period. The expansion offers NHS 24 Mental Health Hub staff the additional DBI pathway to person centred support, for those who contact them in distress, who don't require a clinical response. NHS 24 will continue to use the current clinical pathways for those who require a clinical response. This enables more people across Scotland to benefit from the connected compassionate support DBI has created. All staff in the Mental Health Hub are now Level 1 referrers.

3.9 EU Exit & Preparedness

NHS 24 continue to monitor the EU Exit transition period and remain ready to support staff. It is not expected that EU Exit will have a significant impact on NHS 24 workforce. An agreement was reached with Scottish Government on the potential use of NHS 24 telephony and online capability for health information. This will only be used if a specific issue is identified and the appropriate information content is provided and approved by SG colleagues.

The previous risks identified regarding supply chain disruption have managed throughout the COVID-19 response. Whilst this is currently deemed low risk to NHS 24 in the short term for NHS 24, we will re-engage with Scottish Government in the preparedness for EU Exit to determine revised post COVID-19 planning assumptions.

4. INVESTING IN AN ADAPTABLE, ENGAGED AND SKILLED WORKFORCE

4.1 Supporting Staff during COVID

The Workforce Directorate continue to support the COVID 19 work by supporting the testing process, providing wellbeing support and initiatives to staff, issuing of up to date information and guidance to staff and managers. Supporting recruitment of staff during COVID. The Workforce Directorate has fully developed the Health and Wellbeing Strategy which has been developed in partnership and is continuing to guide and evolve support to staff.

4.2 Home-working

As a direct impact of Covid-19 NHS 24 immediately responded to the requirement for support staff to have the ability to work from home through the assessment and identification of requirements such as access to remote working tokens, laptops and mobile phones where these were not available. Our staff have over this period quickly learned to adapt to home-working and developed extremely positive ways of working through the introduction of MS Teams. A short-life working group to end July has been established through the leadership of our HR Director which is assessing the medium term requirements now including a review of our home-working policies, DSE assessments to improve the office environment within the home, and Mental and Physical health to ensure we continue to support those home-based workers.

4.3 Personal Development Planning and Review

The Staff Governance Committee endorsed a new commitment to personal development and planning and review, noting a clear and structured approach to the process was required. Further discussions will be taking place shortly with the EMT and staff side to refine and clarify performance targets and to endorse a comprehensive action plan to support achieving agreed targets and outcomes.

4.4 Attendance Management

The Staff Governance Committee has endorsed a revised attendance Management Improvement Plan. As this is a key corporate priority and area of risk, the work is being taken forward across the organisation and is being jointly chaired by a member of the Executive Team and a Staff Side representative.

4.5 Workforce Data

A programme of work is underway to streamline, improve and enhance the availability of an integrated suite of workforce data to support the effective management of our HR framework and plans. This work involves the development and use of cloud based technologies and also looks to maximise the potential of Office 365 and we are working with the CIO to take this forward.

4.6 Recruitment to Support Covid-19 Clinical Supervision Model

NHS 24 has linked with the NES returners scheme to recruit doctors back in to the NHS from retirement, to support the national COVID-19 response. The doctors identified through the national portal and through direct approach to NHS 24 are being recruited to support clinical supervision for the 111 service.

4.7 Improving Interface with Academic Institutions

Head of Pharmacy (HoP) has continued NHS 24's involvement in Experiential Learning Programme for student pharmacists under the Pharmacy Additional Costs of Teaching (ACTp) initiative led by NHS Education for Scotland. This involved students attending the Cardonald Contact Centre (8 students from University of Strathclyde, February 2020) and the Norseman House Contact Centre (7 students from Robert Gordon University, March 2020). Initial feedback on the programme from the students was very positive.

4.8 Internal Communications and Engagement

The communications team have delivered responsive and agile communications and engagement support to staff across NHS 24 throughout the pandemic. This has included ongoing communications to support the rapid changes in working practices and additional pressures faced by staff, supporting recruitment activity, ensuring positive feedback is regularly shared with staff in posters and digital content, weekly editions of Team Talk and weekly videos with our CEO to ensure continued leadership visibility. Staff wellbeing has been at the heart of all activity and we have managed several organisation wide initiatives to distribute donated materials to staff over the period, including to those working at home. We are also continuing to support the Estates Programme as that progresses.

4.9 Expansion of Mental Health Services

Recruitment is ongoing of Senior Charge Nurses, Mental Health Nurses and Psychological Wellbeing Practitioners. Significant investment from The Scottish Government to support 24/7 and some posts are fixed term for one year initially. Mental Health Senior Charge Nurse supporting Core Induction – initially for 6 months.

4.10 ICT Review

Our ICT structure has been predominantly static since the inception of the organisation, and for historical reasons has a strong focus on maintenance and BAU activities. The introduction of our Service Development function places additional demands on the team to support significant transformation and change activity which has a reliance on ICT and digital technologies as an enabler to service change. An external review of our ICT structure has been commissioned, and has reported early findings with the final report expected during June 2020.

5. BUILDING AN INTEGRATED SERVICE DELIVERY INFRASTRUCTURE

5.1 Connect Programme

Our Connect Programme will present to this Board meeting an Outline

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Business Case for approval of the preferred option. A robust engagement process with our internal stakeholders and our Technical Assurance Group (TAG) has validated the options contained within the Strategic OBC. The development of the draft OBC has been presented to both the Planning & Performance Committee and the Audit & Risk Committee.

6. CONCLUSION

- 6.1** Members of the Executive Management Team will be happy to provide further detail or answer questions in relation to any of the content of this paper.