

NHS 24 BOARD MEETING		24 FEBRUARY 2021 ITEM NO 9.1 FOR ASSURANCE	
RMP4 – QUARTER 3 REVIEW			
Executive Sponsor:		Director Service Delivery, Steph Phillips	
Lead Officer/Authors:		Service Development Manager, Annie Robertson Service Development Manager, John Barber	
Action Required		The NHS 24 Board is asked to note the updated RMP4 Delivery Plan capturing progress against key deliverables until the end of Quarter 3 for assurance.	
Key Points for the Planning and Performance Committee to consider		<ul style="list-style-type: none"> • This is the first quarterly review of Remobilisation Plans requested since their introduction. • Scottish Government guidance requested that the update was limited to the Delivery Plan only, with this reporting template previously introduced at the September mid-point review. The update should be brief and focus on highlighting any changes from the September submission and in particular those deliverables that are RED/AMBER/Complete. Updates have been approved by NHS 24 Executive Leads. • Scottish Government guidance acknowledged the impact of Omicron, and that the position at end December 2021 might not reflect the extant position. In this regard, the retrospective update and the format as submitted, does not capture subsequent change or actions and provides limited insight or ability to influence current decision making. 	
Timescale		This update covers 2021/22 RMP to the end of Q3 (December 2021). The update was circulated virtually to EMT on 08.02.22 and submitted Scottish Government on 09 February 2022 as required.	
Financial Implications		The 2021/22 Continuation and Remobilisation Plan includes key financial commitments that were detailed and included in the financial plan as part of the initial submission. These are monitored as part of the wider financial performance.	
Strategic alignment and link to overarching NHS Scotland priorities and strategies		NHS Boards are required to develop Remobilisation Plans. Scottish Government requested that Boards develop an updated plan to cover the period until March 2022 advising that they will act as the annual operating plan. Remobilisation Plans will be used to review progress against deliverables and considered as part of performance monitoring for 2020/21.	
Equality and		The individual priorities of the Continuation and Remobilisation	





Diversity	Plan 2021/22 are assessed for impact in relation to equality and diversity.
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1 BACKGROUND

- 1.1. Since May 2020, NHS Boards have been required to develop Remobilisation Plans. These are to be submitted in place of Annual Operating Plans in recognition of the exceptional circumstance created by the pandemic and the complexity of planning further ahead. The 2021/22 Remobilisation Plan was a continuation of the 2020/21 plan and was to act as a point of reference for summarising key work and reporting progress to Scottish Government.
- 1.2. As part of the mid-point review in September, the Scottish Government requested that updates were submitted using a delivery planning template focussing on status, risks and mitigating actions with minimal supporting narrative, data and metrics. The feedback letter for this submission also indicated that a quarterly review would be required, where these had not been requested prior to this.
- 1.3. The instructions and guidance issued for the Quarter 3 review asked for a brief update on progress against deliverables to the end December 2021, with the submission limited to the delivery plan and highlighting changes since September; in particular focussing on those with a status of amber/red/complete. The requested date for submission was by **09 February 2022**.

2. KEY UPDATES

- 2.1. The guidance for completion acknowledged the potential impact of Omicron and that the mid-January (and extant position when this update is submitted) might not be reflective of that as at the end of December. Therefore, as submitted, it is mainly retrospective and does not lend itself effectively to forward-planning
- 2.2. Each deliverable and associated update has been reviewed and approved by the nominated NHS 24 Executive Lead.
- 2.3. There are 23 actions/deliverables linked to the RMP4 with the current and change from previous status summarised in the table below

Status					Total
Sept 21	1(complete)	17	5	0	23
Dec 21	1(complete)	17	5	0	23
Change	↔	↔	↔	↔	23

- 2.4. The amber actions/deliverables and the rationale for the reported status are summarised in the table below. The full details of progress, risks and mitigating actions are included in the attached Delivery Plan.

No.	Deliverable	Impact
2.1	Continue to deliver COVID-19 pathway, with expanded levels of resource and resilience	Shortfall in planned level of Call Operators recruited, however, given the rapid reduction in COVID calls as we have moved through January, the current levels are able to manage current demand. Clarity is required on the medium to long-term status of the COVID-19 pathway through 111.
3.1	Recruit resource required to meet the continuing demand (all services).	Shortfall in planned levels of resource recruited; Dundee centre now operational with staffing expected to increase to end March as a result, although attrition continues to offset gains in specific skillsets
3.4	Development of a multi-professional plan for Advanced Clinical Support.	Advanced Nurse Practitioner capacity reduced / shortfall. Introduction of new roles such as dentists has been successful and proposal to continue this model.
6.1	Develop an NHS 24 Public Health Framework	Service pressures restricting progress; however, work has been progressing to develop a framework for wider review and discussion in the context of strategy development through Feb / Mar.
8.1	Continue to progress and deliver Phases 1 and 2 of Connect Programme	Significant programme of work with ICT capacity challenge and need to focus on other areas e.g., estates. Number of critical steps completed in January / February.

3. SUMMARY

- 3.1. NHS 24 has developed an update on progress against RMP4 deliverables as per Scottish Government guidance; this was submitted to Scottish Government on 09 February 2022. There is recognition that the overall RMP format does not easily reflect and capture the full extent of business and operational activity across the organisation and that future planning – either RMP or AOP – should seek to reconcile BAU, Continuation and Remobilisation inclusive of improvement and transformation activity.
- 3.2. There is a need to review and consider internal planning, routine reporting and monitoring of these, where they should support internal active governance, tactical and strategic decision making and communication, and provide the basis for external performance reporting. This work will be taken forward by the Planning and Performance Team and reflective of the development of NHS 24's strategy.

4. RECOMMENDATION

- 4.1. The NHS 24 Board is asked to note the updated RMP4 Delivery Plan capturing progress against key deliverables until the end of Quarter 3 for assurance.