

**NHS 24
BOARD MEETING**

**25 APRIL 2024
ITEM 7
FOR ASSURANCE**

EXECUTIVE REPORT TO THE BOARD

This paper provides an overview of progress on the high-level activity associated with the delivery of the NHS 24 2024/25 Strategic Priorities and NHS 24 corporate strategy.

Executive Sponsor: Chief Executive



1. INTRODUCTION

- 1.1. The format of this report provides updates against the agreed strategic priorities from our Corporate Strategy. This report will provide an update on progress against that strategy to the Board.

2. DELIVERING SUSTAINABLE, HIGH-QUALITY SERVICES

2.1 Supporting the Delivery of Urgent and Unscheduled Care

2.1.1 Centre for Sustainable Delivery - Flow Navigation Centre Speciality Delivery Group

Our Associate Medical Director (Acute Care) has recently taken up the role of Chair of the newly established Pathways Group at the Centre for Sustainable Delivery. The aim is to ensure delivery of earlier scoping work related to enabling extended use of Flow Navigation Centre referral and therefore decreased referral direct to Emergency Departments. This role will ensure NHS 24 influences the development of pathways and will ensure our priorities are progressed through the workstream.

2.1.2 SAS/NHS24 Collaboration – Right Care/Right Place

Work is underway with Scottish Ambulance Service (SAS) colleagues on the development of SMS/Webropol surveys to collect feedback on patient satisfaction with the care they receive from each organisation. The feedback will provide patient satisfaction data for those who go through the enhanced triage process between NHS 24, SAS, and GP Out Of Hours, therefore is relevant to both organisations and will be accompanied by other clinical governance/joint case review results to provide initial evaluation and ongoing monitoring of the pathway. There has been engagement with Scottish Care to agree priorities and they will be invited to attend a national forum to progress the work.

Additionally, a pilot is being established for a joint clinical governance approach to co-ordinate Adverse Event Reviews, to take forward any recommendations that result from these.

2.1.3 NHS Scotland Value Based Health & Care Implementation Group

The Associate Clinical Director recently attended a meeting as the NHS 24 representative and joint lead for delivery of Action 10 of the Values Based Healthcare (VBHC) Action Plan along with colleagues from NHS Education for Scotland (NES), Healthcare Improvement Scotland (HIS), Public Health Scotland (PHS) and the Centre for Sustainable Delivery (CfSD).

Action 10 is focussed on continuing to ensure access to high quality, evidence-based knowledge and information that supports delivery of the Realistic Medicine goals, which empower people to make informed choices about their care through shared decisions.

NHS 24's role will be to continue to develop NHS Inform as a resource to support people in making informed choices about their treatment options, and therefore there is a need to align the current Scottish Government review of NHS Inform with the deliverables within the VBHC Implementation Plan.

NHS 24 also recently launched the latest phase of the 'It's Ok to Ask' national marketing campaign which is delivered on behalf of the Scottish Government and Realistic Medicine.

2.1.4 Easter Review

An initial Easter debrief has taken place to review the four-day public holiday.

Call forecast was 6% over prediction with a total of over 37,000 calls presented to the service, including ring back requests which totalled to over 4,200, with an average patient journey time of 44 minutes.

Over the four-day period, an additional clinical advice line was operationalised to support call handing staff with queries pertaining to specific outcomes. In total approximately 4,500 calls were answered. Data from this has been captured and will inform any future development from a process and clinical development perspective.

Clinical colleagues from other directorates supported frontline staff over the Easter period, providing clinical supervision and subject matter expertise as did our service support teams.

Early indications are that staff experience was extremely positive over the four days and this will be an agenda item at staff experience groups to allow for feedback.

Dental performance was excellent across the four-day Easter weekend. The Dental Team is measured on performance of calls to patients which have been categorised by acuity as either D1 or D3 cases. Performance of both D1 and D3 category calls were 100%.

Mental Health Hub delivered a strong performance over all four days of Easter answering over 90% of the demand with an average answer time that was just over one minute. Demand this year was up 17% and we managed to speak to 22% more people than last year, totalling 1832 callers.

2.1.5 Patient Safety Leadership Sessions

Patient Safety Leadership Sessions commenced for 2024-25 from the 2 April. Two sessions have now been held – one in Lumina and another in Aurora House. Each session will be led by an Executive Director and a Non-Executive Director of the NHS 24 Board, supported by members of the Communications and Nursing and Care Teams. Non-Executive Directors play a valuable role in staff engagement by participating in leadership sessions and fostering open communication with staff. Actions arising from staff feedback will feed into the Staff Engagement Steering Group with plans to provide monthly feedback to staff via Team Talk and the new intranet page.

2.1.6 Forest Grove House

NHS 24 successfully relocated from the Emergency Care Centre to Forest Grove House during the 5 and 6 March 2024.

The new Aberdeen site went live at 16:00hrs on the 6 March with the first calls taken shortly after. Initial feedback from staff is positive with good relations already formed with NHS National Education Scotland (NES) staff.

2.2 Delivering Enhanced ICT & Digital Capability

2.2.1 NHS 24 and NHS Public Health Scotland Data Collaboration

Our Associate Medical Director (Primary Care) is leading work with PHS to improve access to national unscheduled care data to further develop evidence-based decision making for service improvements.

The Medical Director has been invited to attend the National Discovery Oversight Board, providing an opportunity to evaluate further benefits for NHS 24 in accessing and linking with other datasets.

An NHS 24 cross-directorate data working group has been created with an agreed Terms of Reference in place and will look to develop a draft organisational data strategy going forward.

2.2.2 Improved Mental Health Sign Posting and Triage Integrating with Value-based Health Care

The Associate Medical Director (Mental Health) is currently collaborating with Limbic AI to produce a vision of digital mental health triage pathways. An outline of the pathways work and thinking to date was presented at the recent NHS 24 Service Transformation Summit and work will be taken forward to incorporate ideas into the NHS 24 Mental Health Service review vision.

2.2.3 Update on SMS E-Survey Programme

The SMS E-survey rollout has been progressing well with the survey now implemented within Dental, Flow Navigation Centre, Mental Health, and Unwell outcomes. The implementation has been closely monitored to ensure it aligns with predefined evaluation criteria and governance procedures.

The Programme Team is currently focussing on developing a reporting suite to share results, response rates and inform action plans across NHS 24. Several lessons learned have been captured during this test of change and recommendations will be made to develop the process further in the future to include automation where possible. A more detailed report will be available in the next few weeks to share test findings, recommendations and agree next steps.

2.2.4 SMS Text Reminder

An SMS text reminder message was sent to 5,500 recipients who had previously contacted NHS 111 with a medication enquiry. This reminder was sent to support effective management of repeat medications and how to be prepared ahead of Easter. Of the 5,500 cohort sent an SMS reminder, only 28 contacted the 111 service regarding medication.

The Pharmacy entries in the Scotland’s Service Directory were also updated with the same reminder ahead of the Easter period to support the core message regarding repeat or required medications.

2.2.4 NHS 24 Online App

The pre-Easter update delivered new clinical content updates to the Self Help Guides (SHGs) and real time wait times for calling 111.

Statistics relating to the usage of the mobile app:

Total Downloads: 61,081
 Total Active Users: 44,808
 Total Chatbot Sessions: 98,004

Top 5 most accessed Self Help Guides (SHG):

SHG	Access
Flu Symptoms	4276
Urinary Infections	3901
Lower Back Pain	3185
Accessing Medication	3179
Sore Throat	2872

Mental Health SHG access since launch Nov 23:

SHG	Access
Mental Health	711
Periods & Mental Wellbeing	193
Menopause & Mental Wellbeing	35

2.2.5 NHS Inform Mental Health Signposting Tool

The third iteration of the NHS Inform Mental Health Signposting Tool was delivered. This guides people to evidence-based mental health tools for sleep, anxiety, and stress. The launch of the updated tool was accompanied by a new digital marketing campaign promoting the sign up to the tools.

During the campaign, the NHS 24 pathway resulted in more sign ups to the tools than all territorial Boards combined, with a large impact seen in NHS Greater Glasgow and Clyde, suggesting this approach can reduce regional inequality.

2.2.6 NHS Inform Governance

A refreshed process for the governance of digital work requests for the NHS Inform website has been established. An enhanced governance partnership approach with clearly defined roles and responsibilities has been created to provide assurance and mitigation against key risks.

3. PROVIDING A WORKPLACE IN WHICH OUR PEOPLE CAN THRIVE

3.1 Developing & Empowering Our Workforce

3.1.1 Recruitment

At the end of March 2024, we celebrated for the first time in NHS 24 history reaching Call Handler targets with 587.09 WTE (whole time equivalent) being employed. Headcount is also at an all-time high with the organisation now employing 2125 staff, 1497 of which are part time. We are continuing to see a steady increase in clinical supervision staffing levels with us now employing 144.39 WTE (240 heads). Scenario planning for all key skillsets is underway to determine recruitment forecasting for the next 12 months.

We also successfully ran the end-to-end campaign for a new Director of Service Delivery in-house, with a preferred candidate identified. Previously for Director level recruitment we have recruited via an agency.

We have established a baseline for workforce data to inform the Anchor Strategy and Plan which moving forward we will be required to report on annually to Scottish Government. This is aligned to our Workforce Strategy in terms of recruitment, employability programmes and progression schemes and collaborating with partners such as Local Employability Programmes, colleges, and universities.

3.1.2 Retention

Attrition continues to decline and is now sitting at 19.23% from 19.63% in the last quarter. The top reason for leaving continues to be new employment elsewhere in NHS Scotland.

3.1.3 Workforce Data and Digital Transformation Workplan

The Digital and Data Team have established a Three-year Workforce Digital and Data Transformation Plan. The plan looks at digitalisation and data from across the full employee lifecycle. Work has commenced on several digital projects including a meeting bookings system pilot with the Employee Relations Team, a Flexible Working process, and a Case Management System. The Workforce Directorate have also been actively engaged in the development of the SharePoint site which will replace the new intranet.

3.1.4 Appraisal

Following the Appraisal reset to a phased approach in April 2023, 56.9% of the organisation set objectives and personal development plans (PDP). This was a significant improvement on the previous year where only 11% of the organisation completed a full appraisal.

From 1 April, the phased Appraisal cycle for the year ahead has begun again. This year, every member of staff will receive an end of year discussion (to gauge progress against their 2023 objectives and PDP's) and at the same time be required to set new objectives and personal development plans for the year ahead.

Workforce Directorate are working closely with Service Delivery Directorate (where the highest volume of NHS 24 staff work) to ensure sufficient planning is in place to afford every member of staff the time to meet with their line manager and have a meaningful discussion.

A significant package of support has also been created to support staff and managers through the full Appraisal process, namely 'My Appraisal Hub.' Progress against our target of 90% of staff having an appraisal will be reported through the Quarterly Workforce Report.

3.1.5 Essential Learning

Essential Learning compliance rate is 88.1%. NHS 24 Training Quality Assurance Group completed the annual review of Essential Learning in December 2023, and several recommendations were approved by the Executive Management Team (EMT) in January 2024 including minor amendments to Training Category definitions and development of more clearly defined Target Audience Categories.

A comprehensive benchmarking exercise is also currently underway in relation to Essential Learning volume and content. Findings and recommendations will be submitted to EMT in May and Staff Governance Committee thereafter.

As part of the pay settlement for Agenda for Change staff in 2023-24, a Protected Learning Time Policy will be introduced, the provisions of which were detailed in NHS Circular: PCS(AFC)2024/1. The provisions are being considered through a cross-directorate working group and any changes which will be required as a result will be reported through Staff Governance Committee.

3.1.6 Leadership Development Programme

The Leadership Development Programme ('Leading for Impact' and 'Leading with Courage') is now in its 12th week of delivery. 108 of the 213 eligible leaders have commenced their respective programme and feedback to date

has been overwhelmingly positive, with all respondents indicating that the workshops have either met or surpassed their expectations. When asked in their level one evaluation about what aspects of the programme they particularly valued, example responses included:

- *“Building confidence and being able to speak to peers in group settings. Learning about ways to lead effectively and empower my team and develop a truly open culture of shared learning.”*
- *“Exploring psychological safety and how it balances with accountability. Was great to discuss this with colleagues and presenter to help me develop my understanding.”*
- *“Having protected time with colleagues out with my own directorate and discussing similar scenarios. Very positive input from all.”*

Leadership Development Programme progress will be reported via the Quarterly Workforce Report and update papers will be submitted to EMT and Staff Governance Committee at key stages in the overall programme.

3.1.7 Mentor24

Mentor24 launched on 28 March 2024. It is a programme available to all staff who feel they would benefit from a mentor or who would like to support their colleagues by volunteering to mentor. A comprehensive training package for both mentors and mentees has been developed as well as access to further support through our new ‘Mentor24 Hub’. Mentor24 will be promoted also to those undertaking their Leadership Development Programme and function as an additional wraparound support tool. Programme updates will be reported through EMT and Staff Governance Committee.

3.1.8 Directorate Culture and Wellbeing Action Plans

All directorates have commenced work on their Culture and Wellbeing Action Plans which went live on 1 April 2024. These action plans contain both collective actions, applicable to all, and tailored local actions specific to the Directorate. The identification of these local actions has included (and will continue to include) directorate staff feedback, driving ownership and engagement with the actions.

Progress on the action plans will be monitored through the existing Staff Experience Governance Group route. This enables oversight of actions and the identification of both best practice that can be shared, or wider themes that would benefit from specific interventions.

3.1.9 Culture and Wellbeing Dashboard

The draft Culture and Wellbeing Dashboard, established to track progress of the Culture and Wellbeing programmes of work, has been refined to include a

high-level directorate score card. This allows oversight of both the collective picture and the ability to filter down to a directorate level, supporting and tracking progress of the Directorate Action Plans.

3.1.10 Confidential Contacts Support

To build the confidence and skills of our new cohort of NHS 24 Confidential Contacts, further resources have been developed to compliment the Confidential Contacts training workshop. This is a planned monthly approach for an initial six months with short videos containing guidance, advice, and support from various relevant stakeholders, building familiarity and engagement. The Confidential Contact interactions will be tracked and included in the Culture and Wellbeing Dashboard to monitor cases of whistleblowing and other emerging themes.

3.1.11 Health and Wellbeing

Mental Health related absence continues to be one of our top three absence reasons. During this quarter, 'Able Futures,' who deliver the Access to Work Mental Health Support Service, have run two virtual bookable appointment sessions for staff. These allowed staff to discuss the support on offer prior to signing up for nine months free mental health support. Since the introduction of 'Able Futures' in August 2023, 27 staff members have had their application approved and have commenced the 9-month free programme. Further virtual bookable sessions will be available in May 2024 and will be shared through Team Talk and our new Health and Wellbeing section on the intranet.

3.1.12 Attendance Management

Attendance continues to be a focus for all NHS 24 cohorts of staff. Absence has reduced from 9.71% last quarter to 8.68% at the end of March 2024. Clinical Supervision absence continues to be high and is being monitored.

People Services continue to support managers in applying the Once for Scotland Attendance Policy and implementing reasonable adjustments to support staff in their endeavour to return to work. Management training sessions have been delivered in this quarter on absence related topics including when and how to make an Occupational Health referral. People Services have also been working closely with Service Delivery Directorate management leads to determine the requirement of the Wellbeing Team Manager role with a view to passing back responsibilities to line managers.

As part of our lessons learned approach, People Services conducted a recent audit of Formal Stage Three attendance cases. The exercise offered reassurance that cases are being managed appropriately in line with policy and process. There were some areas of improvement identified and these are being taken forward, particularly regarding delays to cases that could be reduced or avoided.

3.1.13 HR Advisory Model (3 Tier Model)

The ticketing system (People First) continues to embed as business as usual for Workforce related enquiries. Key performance indicators (KPIs) of response timescales and satisfaction ratings amongst users continue to be exceeded.

Formal consultation process to align the team structure that supports delivery of the HR Advisory Model has completed with consultation 1-2-1s having concluded. Structure implementation will take place post-evaluation.

3.1.14 Case Management

People Services continue to support complex Case Management and mediation services from Early Resolution up to and including ACAS early conciliation and Employment Tribunal level, ensuring effect resolution and positive outcomes. Central Legal Office colleagues delivered a session on Employment Tribunal requirements to ensure the team have current knowledge in this area.

3.1.15 Working in Partnership

Workforce colleagues worked with Trade Union colleagues to participate in the consultation exercise for the new suite of Once for Scotland policies in February 2024. Regular meetings are also in place with Partnership colleagues including case levelling sessions aimed to ensure best practice and foster improved working relationships. As part of the Area Partnership Forum (APF) workplan, APF delegates participated in a development session on Culture and Values.

A Short Life Working Group (SLWG) has been established to take forward all elements of the 2023/24 pay deal. This will include the reduction to the working week, protected learning time and the review of band 5 nursing roles. Initial communications and frequently asked questions have been sent to staff. These will be updated on an ongoing basis.

3.1.16 United Nations Convention on the Rights of the Child (Incorporation) (Scotland) Act 2024

The UNCRC Act received Royal Assent on the 16 January 2024. The United Nations Convention on the Rights of the Child (Incorporation)(Scotland) Act 2024 will become law in Scotland in July 2024 and most of its provisions will come into force at this time . The Act places legal duties on public authorities not to act incompatibly with the UNCRC requirements as defined in the Act. It also intends to improve the culture of Childrens Rights in Scotland. The Act is a vital step to ensuring children and young people have their rights recognised and protected. By placing childrens rights at the centre we can enhance health services, address inequalities and improve overall health outcomes for children and young people.

The UN Conventions on the Rights of the Child (UNCRC) has 54 articles that cover a range of civil, political, economic, social and cultural rights that all children are entitled to. It also explains how adults and governments must work together to make sure all children can enjoy their rights. All services within NHS 24 must act in compliance with the UNCRC requirements. The UNCRC (Incorporation) Act Provisions:-

- make it unlawful to act in a way that which is incompatible with UNCRC requirements
- gives children, young people and their representatives the power to go to court to enforce their rights
- gives the Childrens Commissioner power to take legal action
- requires public authorities to report on their compliance every three years.

As an organisation it therefore means that:-

- we need to ensure that children and young people have a voice in decisions that affect them
- need to ensure that we have a child friendly complaints process in place
- publish information in child friendly formats
- undertake assessment on how well we are protecting children and monitoring progress
- raise awareness of the Act across the organisation

A 7-minute briefing has been compiled to be shared across the organisation, briefing sessions and webinars developed by NES have also been circulated throughout the organisation via the Communications Team. A “Getting Ready for UNCRC Incorporation Framework” is being utilised and progressed via the Children and Young Peoples Health and Wellbeing Steering Group. This framework is developed to help public bodies think through actions they need to take to prepare for when the UNCRC becomes part of Scots law and an action plan will be developed from these findings. We have been invited to respond to the consultation on the draft statutory guidance on parts 2 and 3 and section 18 of the Act. A survey has been developed and shared for this to allow a collective organisational response.

4. BEING A COLLABORATIVE FORWARD-THINKING PARTNER

4.1 Continuing to Strengthen NHS 24’s Organisational Effectiveness

4.1.1 Design HOPES Project (University of Strathclyde/University of Dundee)

Design HOPES is a nationally funded multi-stream research programme evaluating sustainability in NHS care. The project aims to exploit the potential

of design-led thinking, making, and acting to tackle multifaceted health delivery and net zero challenges efficiently.

The Medical Director attended the planned launch event and NHS 24 are actively involved and influencing the unscheduled care work stream within the project.

Discussions have also taken place about other potential collaborations with sustainability projects involving fuel poverty, air quality, sustainable work and home, and staff home growing/land use.

The two-year project will also foster green enterprises and businesses to advance the transition to a more equitable and sustainable future.

4.1.2 Corporate Escalation Level

NHS 24 currently operates at Normal Level within our Corporate Escalation Framework, whilst noting potential capacity challenges to meet demand during peak periods, including the four-day Easter period.

NHS 24 hold daily huddle reviews which look at the previous 24-hour period focusing on the performance over the previous 24 hours. During these sessions, the team identify and review any areas of concern, before escalating appropriately through the operational management structure.

5. RECOMMENDATION

- 5.1 The Board is asked to note progress against NHS 24's agreed strategic priorities. 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.