

**NHS 24
BOARD MEETING
20 JUNE 2024
ITEM NO 9.3
FOR ASSURANCE**

SAS & NHS 24 JOINT COLLABORATION BOARD UPDATE

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Action Required: The Board is asked to note for discussion, the progress made in the first year of the SAS / NHS 24 Collaboration Board.

Key Points for this Committee to consider

Both SAS and NHS 24 are committed to collaborating together and with others to transform urgent & unscheduled care across Scotland, underpinned by sustainable workforce models and digital solutions to deliver seamless and person-centred services.

The overall objective of the SAS & NHS 24 Joint Collaboration Board is to improve patient care, experience, and outcomes, fostering collaboration across both organisations and the wider national health and social care system and to improve sustainability and support the further reform of urgent and unscheduled care.

The SAS & NHS 24 Joint Collaboration Board is in place to oversee the delivery of a jointly agreed programme of work commissioned by Scottish Government.

Governance process

The JCB monitors the progress being made against its joint programme of work and is committed to provide an annual update to the respective Boards and routine updates to the Scottish Government Sponsor Director.

Strategic alignment and link to overarching NHS Scotland priorities and strategies

The work of the JCB is aligned to the respective Corporate Strategies and anchored within the Delivery Plans.

The NHS 24 Corporate Strategy and corporate delivery plans are fully cognisant of circumstance, ongoing recovery and renewal and national planning and policy priorities for health and care across NHSScotland.

Strategic alignment and link to Corporate Delivery Plan activity

Corporate Deliverable 5: Ongoing collaboration with Health Board partners and Scottish Government to deliver a more preventative, and integrated approach to delivering sustainable services.

Activity 5.1: Deliver a programme of activity and scope further development opportunities across agreed strategic themes through the SAS/NHS 24 Collaboration Board

Key Risks

The JCB has developed an overarching risk register for the collaboration work. Each workstream operates within their own risk management framework and Board policy. The overarching risk register recognises the wider strategic risks for the collaborative programme.

Financial Implications

There were costs of almost £50k incurred as part of the digital delivery workstream. Funding cover was agreed between the Directors of Finance of NHS 24 and SAS.

Equality and Diversity

The contributions across the workstreams and the deliverables under the digital workstream have been developed with full consideration to equality and diversity guiding principles.

1. RECOMMENDATION

- 1.1 The Board is asked to note the progress made in the first year of the SAS / NHS 24 Collaboration Board.

2. TIMING

- 2.1 The JCB held on the 29 April 2024 committed to provide an update the respective Boards. SAS have provided an update to their respective Board.
- 2.2 A timeline of the JCB, since its inception, is described within the background section.

3. BACKGROUND

- 3.1 Following the joint SAS/NHS 24 collaborative Board workshop at the end of March, it was agreed that a joint Collaboration Board would be established to take forward a suite of strategic work on a collaborative basis.
- 3.2 This update sets out the progress made since June last year when the SAS / NHS 24 Collaboration Board was established. The Collaboration Board was set up to ensure progress and identify collaborative opportunities for SAS and NHS 24. It was not intended to duplicate existing strategic and operational delivery, rather to enhance that with an overview of joint working ensuring progress was maintained.

3.3 Recognising that both SAS and NHS 24 were in the process of developing and launching respective strategies and associated plans as the Collaboration Board was being established, a number of workstreams emerged from our initial joint Board session as key areas of collaborative opportunity that would benefit from a distinct Collaboration Board, specifically:

- **Patient pathways / system interface** – to support wider reform work aiming for consistent access for NHS 24 and SAS to local services, to co-lead the ongoing redesign of urgent care, and explore opportunities across our services for streamlining pathways, such as mental health.
- **Preventative and proactive care** – to develop a shared approach as anchor institutions, strengthen links with PHS and develop data and intelligence that proactively evidences service development and supports self-managed care.
- **Technology / digital interface** – to accelerate and optimise data interface work, maximise opportunities for shared data and systems, develop digital access to services, and work collaboratively to develop shared capacity and capability.
- **Workforce** – to work collaboratively to develop roles, skills, and capacity, notably within an increasingly digital content, and to explore opportunities for collaborative approaches to recruitment, training, wellbeing, and development.
- **Sustainability** – to identify opportunities for a shared approach to sustainability and efficiency.

Further scoping work identified a number of collaborative commitments that both SAS and NHS 24 included in our respective Annual Delivery and Medium-Term Plans. The table below sets out those commitments in more detail.

Year 1 – 2023/24

Patient pathways / system interface:

- Collaborate with partners to deliver improved Out of Hours / Community Urgent Care services, building on the recommendations within the Sir Lewis Ritchie Review.
- Collaborative system leadership to transform the way in which people can access urgent and unscheduled care, enabling patients to receive the right care at the right time in the right place by optimising Flow Navigation Centres, learning from experience in first-stage implementation.
- Continue to work collaboratively with key partners including Police Scotland to deliver an enhanced pathway for those in mental health distress, streamlining the flow of calls between partners to improve patient journey.

Proactive & preventative care

- Development of combined data set and scoping strategic partnership with PHS
- Development of NHS inform and NHS 24 online app to support wider preventative and proactive care programme.
- Develop shared approach as anchor institutions to tackling inequalities

Technology & Digital

- Complete system interface to enable automated data transfer for calls reducing call handler time.
- Joint development of voice analytics capability
- Exploit collaborative opportunities through NHS 24 digital transformation programme, including use of new technologies, streamlining pathways, digital access to services, system interoperability, and shared approaches to infrastructure and capacity building, such as frontline ICT support.

Workforce

- Identify and progress opportunities for joint working to develop common roles and career pathways, inclusive of rotational roles.
- Identify and progress opportunities for shared approach to training and development, notably in respect of common roles, digital maturity, and leadership development

Sustainability

- Work in collaboration with a range of national organisations and partners to combine the right skills and capabilities across Scotland to reduce the barriers to national innovation adoption.
- Continue to work to maximise estate utilisation across shared sites and in partnership with other Boards

This evolved into three distinct workstreams – **digital; right care, right time;** and **workforce** with sustainability an underlying principle in our collaborative approach.

The Collaboration Board was established to ensure oversight where delivery was managed through existing programme / project management and joint working mechanisms so was not intended to operate as a delivery board. The Collaboration Board also offered an opportunity to jointly identify opportunities for further collaboration that emerge in year, notably in terms of wider system reform or innovation as both Boards progressed strategy delivery.

4. UPDATE

Progress has been made across all workstreams, with key achievements and updates set out below:

- Development and initial proof of concept testing of pathway for referral to GP out of hours services where SAS GP has undertaken initial assessment. Collaborative working with SAS clinical hub and NHS 24 advisors to test pathway and progressing DPIA / information governance requirements to be able to share patient identifiable information and get patients to the right care, with potential to use Aadastra system now in place within SAS hub.
- Ongoing review of calls triaged from NHS 24 requiring ambulance response working with SAS clinical hub, working to develop shared risk assessment approach and again, support callers to access the right care.
- Implementation of warm transfer capability from SAS to NHS 24 mental health hub as part of the delivery of the enhanced pathway collaborative work with SAS, NHS 24, and Police Scotland. Call review and joint review of outcomes underway with further evaluation planned.
- Collaborative working with PHS to exploit shared data across SAS, NHS 24, and the unscheduled care datamart.
- Close working in the development and alignment of Board Corporate Delivery Plans, including shared learning in the development of Board Anchor Strategic Plans and collaboration across shared estate and shared procurement.
- Identifying improvement opportunities in respect of palliative care pathways, improving information sharing and communication between SAS and NHS 24 to ensure patient care needs are met.

- Focus on care homes and opportunity to develop shared approach to frailty and collapsed patients, working collaboratively with Scottish Care.
- Digital patient handover from NHS 24 for ambulance requests, with joint work to ensure common location data provided and sharing of clinical information for ambulance dispatch. Work also progressed to look at digital transfer of calls from SAS to NHS 24, however, this is aligned to NHS 24's wider digital transformation programme and replacement of CC/CRM system in 2025; SAS are members of NHS 24 Digital Transformation Programme and ongoing dialogue to look at opportunities for digital and technology collaboration.
- Expansion of collaborative agreement developed with NES and SAS to include NHS 24 to share learning and identify opportunities to develop shared approaches across a range of workforce issues, including learning and development, harnessing technology, workforce planning, diversity and inclusion, and data sharing.

5. ENGAGEMENT

- 5.1 Both SAS and NHS 24 have organisational strategic portfolio arrangements in place, and it is acknowledged that some of the detailed work is in train within existing tactical and operational joint working arrangements. As such, the JCB would not seek to replicate this work, rather to ensure progress across an agreed set of strategic work streams.
- 5.2 As the basis for the strategic portfolios, there was extensive engagement to develop the 2023-28 Corporate Strategy and the Annual Delivery Plan, with assurance and approval sought through the relevant committees and ultimately the Board.

6. FINANCIAL IMPLICATIONS

- 6.1 There were costs of almost £50k incurred by NHS 24 as part of the digital delivery workstream. It was agreed between the Directors of Finance that NHS 24 would fund these from a windfall credit that arose in-year.
- 6.2 One element of the digital workstream was deferred due to the cost of implementation and will be delivered as part of the NHS 24 Digital Transformation Programme. This proposal was presented and approved at the JCB held on 4th April 2024.

7. MEASURABLE BENEFITS

- 7.1 High-level benefits have been mapped across the three workstreams however yet to be measured or realised. The delivery of some of these successes remain in their infancy.

8. NEXT STEPS

- 8.1 There is further work to take forward to continue to improve much of the development in year 1 and build on learning and testing to date. This includes the ongoing clinical pathway development, the digital transformation work aligned to national digital health and care strategic development, and the expanded workforce agenda with NES.

- 8.2 In each of the three workstreams, workshops and discussions have taken place to identify priorities for the coming year, and these have been set out in the workstream updates. There will however be a need for us to come together in the form of a joint workshop in the next couple of months to assess the proposed priorities, particularly in light of the scale of the financial challenges and wider need for redesign and reform across Health overall.
- 8.3 Collaboration will also continue to expand beyond SAS and NHS 24, for instance in the work described with NES, PHS and Police Scotland. The focus on NHS reform, including primary care reform and the ongoing development of urgent and unscheduled care pathways, where SAS and NHS 24 collaboration can add value across the whole system will be a key area of focus.
- 8.4 Further scoping of our collaborative potential in supporting preventative and proactive care is an area we can build on, further strengthening data sharing, being clear on collaboration to help tackle inequalities, and through clinical pathway work and digital transformation, continue to strengthen our approach to supporting self-care and community-based solutions. This will be the focus of the work being taken forward in year 2.
- 8.5 As both SAS and NHS 24 have developed 3-year Corporate Delivery Plans from 24/25, these have reflected the collaborative work this Board will oversee.