

**NHS 24
BOARD MEETING**

**29 AUGUST 2024
ITEM NO 12.4
FOR ASSURANCE**

**KEY POINTS OF THE PLANNING AND PERFORMANCE COMMITTEE HELD ON
8 AUGUST 2024**

Executive Sponsor: Mr David Howe, Chair of Planning & Performance Committee

Lead Officer/Author: Tracy McMillan, Committee Secretariat

Action Required: The Board is asked to note the key points for assurance from the Planning and Performance Committee meeting held on 08 August 2024.

1. Purpose

The purpose of this report is to provide the NHS 24 Board with an update on key issues discussed at the Planning & Performance Committee (PPC) meeting held 08 August 2024. Members of the NHS 24 Board will be invited to **note** the contents of the report.

2. Procurement Strategy

It was noted that the NHS 24 procurement leadership and provision is provided via an SLA with Scottish Ambulance Service (SAS) Procurement Team and Mr Brian Laughland was in attendance to discuss the paper and seek approval to submit to Board.

The following points were noted:

- The Procurement Strategy presented to the Committee was an annual refresh.
- Sustainability and Carbon are key to the public agenda, therefore within the refresh they are the largest areas to be strengthened.
- The Procurement & Commercial Improvement Programme is due to recommence across NHS Scotland in September 2024 following the pandemic.
- Section 6 of the annual report sets out how procurement will be undertaken.
- The 2023-25 Procurement Strategy should be read alongside the Annual Report.
- Exhibitions are held twice a year in Scotland to attract new suppliers and they are advised electronically of any opportunities arising in their areas.

Thanks were expressed to Mr Laughland for attending the Committee meeting and presenting the Procurement Strategy. Committee granted approval for the document to be submitted to NHS 24 Board.

3. NHS inform Strategic Review

Noted that the intention of the paper was to provide an overview of progress regarding the NHS inform Strategic Review. Ms Phillips discussed the paper with members and highlighted the following:

- NHS inform is an NHS Scotland and wider Health and Social Care asset.
- In undertaking the review a user centred approach had been utilised.
- The engagement and insights gathering work that had been undertaken had been significant and provided useful information and data from the Strategic Transformation Programme and Digital Transformation Programme.
- The paper provided a summary of the problem statements that had emerged.
- At present work is being undertaken to pull together a product for submission to Scottish Government.
- There is a need for further consideration as to where NHS inform should sit in the wider health and care landscape as an asset for NHS Scotland.
- Key stakeholders, e.g., Young Scot have been heavily involved in the work to date.

Members found the report to be extremely informative and recognised the confidence Scottish Government had placed on NHS 24 to undertake the review.

4. Stakeholder Engagement Framework

Members reviewed the framework and agreed it was the right time for the review to be undertaken. The draft framework is part of a programme within NHS 24 for strengthening governance and it aligns to the actions within the strategy and corporate delivery plan.

Following submission to the NHS 24 Board for approval it is anticipated the framework will be published in the Autumn.

The Committee commended the draft Stakeholder Engagement Framework. It was noted to be a strong and positive piece of work to advance the important aspect of stakeholder engagement with connections into how it influences decision making.

5. Virtual Queue (VQ)

Ms Edwards discussed the paper with the Committee and the following highlights were noted.

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- The VQ is now considered to be “business as usual”.
- Processes are in place to switch the VQ on/off, currently set at 10 minutes of a caller waiting.
- Positive staff and patient feedback had been received regarding the VQ.
- There is a governance group in place to ensure there are no clinical incidents.

Comments were put forward with regard to the way the data was recorded and presented. Ms Edwards will consider this and develop a more comprehensive way of recording the data.

The Committee were assured that there was a low risk assessment of implementation, recognised the positive patient feedback and supported further expansion of threshold under ongoing observation.

6. Planning and Performance Committee Self-Assessment Results

Ms Mathew discussed the above results with members, noting there had been no responses in the “disagree” or “slightly disagree” options. The “slightly agree” option had been selected with regard to briefings and training provided. A 100% response rate had been reached.

The action plan will now be developed and based on the survey results and will be brought back to the next meeting of the Committee.