

NHS 24

Approved Minutes of the Meeting of the NHS 24 Planning and Performance Committee held on 12 May 2025 at 10.00am via Teams

PRESENT

Mr David Howe (in the Chair)

Mrs Anne Gibson

Mr Alan Webb

Ms Carol Gillie

IN ATTENDANCE

Dr Ron Cook

Ms Geraldine Mathew

Mr Paul McLaughlin

Ms Ann-Marie Gallacher

Ms Steph Phillips

Mr Jim Miller

Mr John Gebbie

Ms Joanne Edwards

Dr Jacqui Hepburn

Ms Linda Robertson

Ms Suzy Aspley

Ms Tracy McMillan (Minute) (T)

Mr Bob Benson (NHS Tayside)

1.0 WELCOME, APOLOGIES, AND INTRODUCTIONS

The Chair welcomed members to the 12 May 2025 meeting of the NHS 24 Planning and Performance Committee. Apologies were noted from Dr Martin Cheyne.

The Chair welcomed Mr Bob Benson from NHS Tayside and extended a warm welcome to Ms Carol Gillie attending her first meeting of the PPC. It was noted that Ms Amina Khan had transitioned to the Staff Governance Committee. The Committee expressed sincere thanks for her valuable contributions and wished her every success in her new role.

The Chair asked members if the meeting could be recorded via Teams. Members were in agreement to the request.

NOTED

2.0 DECLARATIONS OF INTEREST

The Chair invited members to declare any interests regarding the items being discussed. There were no declarations made.

NOTED

3.0 MINUTE OF PREVIOUS MEETING: 11 NOVEMBER 2024

The Committee considered the minute of the previous meeting held on 10 February 2025 [Paper No. Item 3.0]. The minute was accepted and approved as a correct record.

APPROVED

4.0 MATTERS ARISING

Nil.

4.B ACTION LOG

It was agreed to defer the timescale for the relevant action of No 400 until the DTP is in place. The revised timeline will be reviewed at the November or February meeting of the PPC.

The Committee confirmed it was content to approve the remaining actions as outlined.

The restructured agenda was noted and accepted for future meetings.

APPROVED

5.0 ITEMS FOR APPROVAL

5.1 COMMUNICATIONS DELIVERY PLAN

Noted that Item 5.1 [Paper No Item 5.1] should have been added to the items for assurance section of the agenda – not the approval section.

Ms Aspley provided an update on the recent public health campaign. Although television advertising was not utilised, the campaign had had significant impact via other channels. Further data and analysis will be presented at the next meeting.

Ms Gillie commented that the report was interesting and inquired if specific targets had been set with regard to the campaign's impact. She asked whether there had been an increase in social media activity when compared with the previous year. Ms Aspley confirmed that the campaign's digital reach had expanded and now included Snapchat. She went on to say that Video on Demand is being explored by the Team as a possible future avenue. It was noted that Twitter/X is no longer actively used, however Facebook and YouTube continue to be useful platforms. Ms Aspley advised a presence on Blue Sky had been established and that Instagram was showing promise for being useful.

With regard to measurement of the outcomes from purchased media, Ms Aspley offered to discuss this further with Ms Gillie out with the meeting.

Concerning areas for improvement, Ms Aspley acknowledged the challenges in assessing the impact of communications, noting that measurement is inherently difficult. However, the Team is committed to continuous improvement and actively exploring new metrics and evaluation methods.

Mr Howe provided the Committee with positive feedback from the staff in Aberdeen following a recent visit he had undertaken there. It was noted they had appreciated the clarity and effectiveness of information within Team Talk around the DTP.

Action: SA & CG

ASSURED

5.2 ESTATES OPTIONS APPRAISAL

Mr Gebbie referred members to the above paper [Paper No Item 5.2] and advised that the closure of Lumina ground floor would result in a recurring savings of £500k, effective from June 2026.

It was noted that NHS 24 would retain two floors at Arora House. Regarding Cardonald, it was noted plans are in place to repurpose space previously occupied by NHS Greater Glasgow and Clyde, which would include the development of a Board/Meeting Room(s). Shared space at Cardonald will be maintained. A section on Board Room and corporate space at Cardonald will be added to the paper for the Board.

Mr Gebbie went on to say approval was sought from PPC to proceed to Board requesting its approval to serve notice to the landlord at Lumina to cease using the ground floor, resulting in the closure of the Lumina site in its entirety. Noted that although closure is effective from June 2026, the landlord required to be informed by June 2025 as per the lease agreement.

Mr Gebbie advised that the lease at the Dundee site will require review, and it was noted that a lease-break option would be available in September 2026. It was noted that the landlord at Dundee had approached the Council to reclassify the entire building to student accommodation. Therefore, discussions with NHS 24 and NHS Tayside had commenced with regard to the possibility of collaboration for a future site.

The Committee discussed the need for an updated Estates Strategy which would provide a longer-term view of estate planning. Mr Gebbie advised the current estate had been “future proofed” as much as possible and that developments would be monitored in line with the DTP. Ms Kane referenced the upcoming System Planning Paper, due in January 2026, which would replace the PAMS and provide a longer-term strategic framework.

It was noted that during the relocation/transition of staff, emphasis had been placed on staff engagement and wellbeing throughout the process. One to one appointment for all frontline staff had been implemented and any initial concerns raised had been addressed effectively.

The Committee was content to approve the paper and submit it to the Board for consideration.

APPROVED

5.3 BUSINESS CONTINUITY AND ESSENTIAL INVESTMENT INFRASTRUCTURE PLAN

Mr Gebbie referred members to the above paper [Paper No Item 5.3] and advised that all Boards had been requested to submit draft plans. Final versions of the plans require to be completed by January 2026. NHS 24 has developed plans for both Dundee and Norseman.

The Norseman plan is primarily focussed on the transition to net zero, with particular emphasis on resilience, financial accountability, and collaborative working.

Ms Kane provided assurance that extensive engagement had taken place with Scottish Government who had expressed support for the direction taken and had confirmed that the content provided was considered sufficient.

The Committee confirmed they were content to approve the current draft plans.

APPROVED

5.4 PLANNING AND PERFORMANCE COMMITTEE ANNUAL REPORT

Mr Howe referred members to the above report [Paper No Item 5.4] and asked if they were content to approve it.

It was noted that Ms Gillie did not join the Committee until 01 May 2025. This detail will be amended accordingly within the report.

With the above amendment, members were content to approve the report.

Action: TMcM

APPROVED

6.0 ITEMS FOR ASSURANCE

6.1 CORPORATE DELIVERY PLAN 2025/26 UPDATE (including The Anchors Strategic Plan)

Ms Phillips referred members to the above update [Paper No Item 6.1] and advised that formal approval from the Scottish Government (SG) was still pending. With regard to the Anchors document, it was noted this had been circulated outlining examples from existing plans. Ms Phillips stated that SG had indicated they were content with the submission.

It was noted that the next six months would be particularly intensive for NHS 24 as the DTP project approaches completion. Despite the complexity, it was noted that robust systems and processes had been implemented to manage delivery effectively.

Dr Hepburn provided the Committee with a detailed walkthrough of each component of the DTP. From this, it was noted that phase 1 with Ayrshire & Arran had been agreed with Service Delivery. Training for Ayrshire and Arran staff is due to commence on 13 May 2025. Work is currently ongoing with system integration testing. Decision support integration is scheduled for completion. Work on the Data Warehouse is progressing despite capability challenges. It was noted the WAN and LAN had been approved by the Board and finally, with regard to data migration, members were advised options for this were currently under review with a decision to follow in the near future.

Dr Hepburn acknowledged to the Committee that there are ongoing challenges. A risk had been raised regarding the potential organisational impact relating to this. However, it was noted that risk is actively managed through established workstreams and articulated within the DTP framework. Dr Hepburn expressed appreciation for the Team's efforts and requested this be noted and conveyed to them.

Concerns were raised around assurance for the Committee in the event of project failure and it was queried if additional measures could be put in place to increase confidence. However, Ms Phillips confirmed that rollback plans are included in the phase 1 approach paper and that no further Committee action would be required at this time.

It was noted that regarding risks – they are identified and managed at every stage of the project. Members confirmed satisfaction with the current risk management approach.

Ms Phillips made the Committee aware of the three assurance groups are all in place to support the programme delivery – Organisational Assurance Group (OAG), Technical Assurance Group (TAG) and Partner Assurance Group (PAG). All have convened in the last week and are satisfied with the current progress being made.

It was highlighted that plans are in place for DTP, STP and Workforce which are monitored via a monthly reporting process involving all workstream leads and the Strategic Delivery Group (SDG). She acknowledged concerns regarding resource and capacity risks and training confidence however, confirming that these are under continuous review and that detailed plans are in place with any gaps being addressed through regular updates from workstream leads and programme governance.

The Committee confirmed it was assured that all aspects of the transition from DTP to STP are being actively managed and reviewed. The Committee expressed gratitude for the updates and acknowledged the hard work of all involved.

ASSURED

6.3 CLIMATE EMERGENCY AND SUSTAINABILITY UPDATE

Dr Cook referred members to the above update [Paper No Item 6.3] and highlighted a new structure and style had been adopted for the report with the aim of enhancing clarity and focus on key metrics.

Dr Cook provided members with some key highlights from the report which included a rise in gas consumption at Cardonald. A similar trend had been observed in water usage at Cardonald also. Further investigation is being undertaken to determine the underlying causes. It was noted that electricity consumption was expected to decrease. With regard to travel-related targets for the 2024/25 period it was noted that these had been met. The "home-growing" project is set to expand further this year, continuing its positive impact. A poster submitted to the

Faculty of Public Health Conference had won the overall competition, receiving recommendation for its quality and impact.

The Committee confirmed they were content with the new format of the paper and thanked Dr Cook for a comprehensive and helpful report.

Dr Cook agreed to present a revised workplan and strategy for the Sustainability and Values group at a future meeting.

The Committee expressed appreciation for the update and the assurance it provided regarding ongoing sustainability efforts.

Action: RC

ASSURED

6.4 PLANNING AND PERFORMANCE RISK MANAGEMENT UPDATE

Mr Gebbie referred members to the above update [Paper No Item 6.4] and highlighted key points. It was noted that there were 33 risks in total, 17 new risks and 9 closures. Fourteen risks are currently scoring 10 or above. Of the eight risks with target dates in the last quarter, seven have been closed, with the remaining risk having a reduced score of four. This risk will remain on the register for continued monitoring.

Of the 17 new risks, the majority related to the CDP and Finance Plan. These risks will be monitored closely and closed off when it is appropriate to do so. There are two new cyber-security risks.

Discussion ensued and it was noted that with regard to the business/technology risks which were currently showing as zero, work is underway to better define and sharpen these risks to include identifying which parts of the business are impacted.

Mr Gebbie confirmed that with regard to efficiency plans, strong savings are in place with only £300k lacking a robust plan. Main concerns sit with DTP and Estates, but key milestones in the coming weeks are expected to reduce these risks. Ms Robertson confirmed that defining technology risks is part of ongoing work, with the aim of a more targeted and business impact focussed approach. Ms Gallacher outlined efforts that had been undertaken to address overarching service security risks – these were noted for information.

The Committee noted the update for assurance.

ASSURED

6.5A ORGANISATIONAL RESILIENCE

Ms Phillips referred members to the above paper [Paper No Item 6.5A]. She advised that she had now assumed responsibilities for resilience within the organisation and that John Barber had taken on the functions of the previous Head of Resilience. It was noted that recruitment is underway for a dedicated Resilience Lead to support this function.

It was noted that there is a Resilience Planning Group in place which has strong representation and a defined programme of work. Consideration is being given to how this group's outputs can be integrated into broader organisational planning in a meaningful and practical way. Discussions are ongoing with regard to the appropriate level and format of reporting from this group to PPC to ensure effective oversight. It is expected this will evolve over time. Ms Phillips will reflect on these discussions out with the meeting to ensure appropriate mechanisms are developed.

Action: SP

ASSURED

6.5B ORGANISATIONAL RESILIENCE FRAMEWORK

Ms Phillips referred members to the above document [Paper No Item 6.5B] and advised it outlined the operational framework across the organisation, clearly defining roles and responsibilities. Whilst it was noted that implementation of the framework was not a requirement, NHS 24 was choosing to proceed proactively and adopt best practice.

The Framework has been reviewed by the Executive Management Team (EMT) and approved by the Resilience Group. Ms Phillips advised it was being presented to PPC for assurance.

Mr Howe stated it was encouraging to see how success will be measured against the Framework. As mentioned in 6.5A above, Ms Phillips will consider how reporting from the Resilience Group can be integrated into the Planning and Performance Committee.

Action: SP

ASSURED

6.6 CORPORATE PERFORMANCE REPORT

Ms Phillips referred to the above report [Paper No Item 6.6] and advised it detailed the performance for April 2026. She highlighted that it had been a positive start to the year with an upward trend being observed over recent months. Strong performance had been recorded during Easter and throughout April.

It was noted that the additional clinical resources introduced in January 2025 were now yielding measurable benefits which in turn was contributing to the improved performance metrics. A positive trend in staff attendance had also supported performance improvements. With regard to NHS inform, it was noted that there had been a decline in its usage, particularly concerning search functionality. Further work is being undertaken to enhance this aspect of the system.

Ms Phillips went on to advise that a temporary hiatus in KPI reporting availability is anticipated during the implementation of the DTP. This will affect three KPI's as data will not be available until the new data warehouse is operational.

The Committee emphasised the importance of continuing to monitor available data during the DTP transition to ensure oversight of performance is maintained.

Regarding staff absence levels, it was noted that the current absence rate was sitting at 7.71% - which reflected significant progress due to recent interventions. Dr Hepburn made the point that NHS 24 had a robust absence reporting system in place which has made data highly reliable and comparable with contact centres out with the health sector.

Finally, it was noted that attendance related matters are addressed via the Staff Governance Committee – therefore, the PPC agreed it should maintain its focus on the impact of attendance on performance.

ASSURED

6.7 FINANCIAL PERFORMANCE REPORT

Mr Gebbie provided an update on the draft financial position for month 12, noting a £31,000 underspend for the year and confirmed that all planned savings targets had been achieved. The report is currently under review by the auditors.

Mr Gebbie went on to say it had been a challenging financial year and expressed satisfaction at having successfully brought the year-end position over the line.

Committee members commended the outcome and extended thanks to the team for their efforts.

ASSURED

6.7.1 DTP FINANCE UPDATE

Mr Gebbie referred members to the above update [Paper No Item 6.7.1] and it was noted that all elements of the programme remain on track. He went on to highlight that the Service Desk transition to an in-house model is progressing as planned. He referred members to a summary table within the update paper which highlighted the key components which had contributed to savings of circa £300k.

It was noted that in areas where there is less certainty, particularly across elements of the infrastructure, provisions had been put in place.

A key risk was noted which concerned the potential impact of savings should there be any delays in programme delivery towards the end of the financial year. However, Dr Hepburn confirmed the DTP financials are currently on track.

The Team was commended by the Committee for their continued efforts in maintaining financial discipline and ensuring the DTP remains within budget.

ASSURED

6.8 ESTATES AND FACILITIES REPORT AND ANNUAL REPORT

Mr Gebbie referred members to the above reports [Paper No Item 6.8] and advised they provided a comprehensive update on Estates activities over the past year. Key highlights included that staff had successfully relocated to the Aberdeen site one year ago. Within Cardonald, it was noted that preparations are underway to accommodate staff relocating from Lumina. Feedback from staff to date had been positive. It was noted a former storage area had been successfully converted into a staff wellbeing space, which had been well received. Estates will continue to maintain progress on breakout/wellbeing space. It was noted that from the consolidation of space on the first and second floors at Lumina, a 27% reduction in estate spend had been achieved. Ms Kane advised that although there is no asbestos within the NHS 24 estate, a formal policy is being developed to ensure compliance.

There had been concerns with staff at Dundee over parking facilities and staff safety. However, following an approach to Police Scotland it was confirmed the police had no safety concerns regarding the particular car park, and that an open car park was situated a two-minute walk from the NHS 24 office. The Estates team will continue to monitor the situation.

The point was made that staff in Aberdeen had highlighted concerns regarding insufficient desk availability. Although this was considered to only be an issue during evening shift handovers, it was agreed that Ms Kane would follow this up with local managers.

The Committee thanked Mr Gebbie and Ms Kane for the reports and confirmed assurance.

ASSURED

6.9 INFORMATION AND GOVERNANCE SECURITY REPORT AND ANNUAL REPORT

The Committee considered the Paper papers [Paper No Item 6.9] presented by Ms Gallacher. She went on to say that within the annual report there were three areas she wanted to highlight:

Freedom of Information Requests – a review of the FOI process was undertaken towards the end of Q3 which had resulted in significant improvements in the number of FOIs received. The steps taken included enhanced signposting and streamlined procedures. Ms Gallacher referenced the graph on page 11 of the report which highlighted the reduction in FOI volumes clearly.

Cyber Security Initiatives – there had been an increase in cyber security activities over the last year. This included a dedicated workshop and exercise involving Non-Executive Directors. The initiative had been well received with positive feedback highlighting its value and impact.

NISR Assessment and Cyber Essentials Accreditation – it was noted that NHS 24 has shown marked improvement in its NISR Assessment. Notably, NHS 24 is the only Board in Scotland to have achieved Cyber Essentials accreditation, underlining its commitment to robust cyber security standards.

The reports were accepted for assurance and thanks expressed to all involved in their development.

ASSURED

6.10 COMMITTEE SELF EFFECTIVENESS ACTION PLAN UPDATE

Ms Phillips referred members to the above update [Paper No Item 6.10]. She advised she was pleased to report continued positive momentum with notable progress made on the Deep Dive sessions.

Thanks were extended to Ms Phillips and the team for their efforts in compiling the Deep Dives as they had been instrumental in enhancing the understanding of the various processes that contribute to the PPC. The overall clarity and depth of the session had been greatly appreciated.

The Committee confirmed assurance regarding the action plan progress.

ASSURED

7.0 ITEMS FOR AWARENESS

7.1 CORPORATE STRATEGY REVIEW PROCESS

Ms Phillips referenced the above document [Paper No Item 7.1] and it was noted that as NHS 24 enters the third year of its five-year strategy, a comprehensive review process is being initiated. A discussion paper had been developed to outline the proposed approach this review, ensuring that each component of the strategy is reflected upon meaningfully.

It was noted that a number of key national policy and strategy documents are anticipated before the summer that marked a transition towards a longer-term perspective, requiring NHS 24 to reaffirm the strategy's continued alignment with these overarching strategic landscape developments. A key element of this process is collaboration evidencing how NHS 24 engages with the wider system and the value added via these partnerships. Consideration is also being given to how best engage with key stakeholders, including the PPF and the Youth Forum.

An NHS 24 Board workshop is scheduled for the end of September 2025 and will serve as a critical milestone in the process.

Committee member expressed support for the proposed approach and endorsed moving forward with the review.

AWARE

8.0 ITEMS FOR NOTING

8.1 THREE YEAR FINANCE PLAN

Mr Gebbie referred members to the above plan [Paper No Item 8.1] and it was noted that the item had initially been presented to PPC in February 2025. Subsequently it had been approved by the NHS 24 Board in April.

Members were now in receipt of a final copy of the report. Noted that implantation is now complete and the project operational.

NOTED

8.2 DTP IN-FLIGHT REVIEW

Dr Hepburn referenced the paper regarding the above which had been circulated to members [Paper No Item 8.2] and provided assurance to the Committee on the progress being made with the Digital Transformation Programme. She explained how the levels of governance had been applied and how challenges were being managed effectively

within the programme. Regular communications updates had been provided to staff and effective stakeholder engagement had taken place.

NOTED

9.0 COMMITTEE BUSINESS

9.1 COMMITTEE WORKPLAN

The Committee consider the paper "Planning and Performance Committee Workplan [Paper No Item 9.1] and confirmed its assurance.

ASSURED

9.2 COMMITTEE HIGHLIGHTS FOR THE BOARD

Mr Howe advised he would summarise the main points from the meeting today and produce the above report for the Board meeting on 19 June 2025.

Action: DH

AGREED

9.3 ANY OTHER BUSINESS

Service Transformation Programme

Committee agreed it would be beneficial to receive an update on the above Programme at the next meeting on 04.08.25. Ms McMillan will ensure this is an agenda item.

Action: TMcM

AGREED

Collaboration Activities

The Committee considered how NHS 24 could extend its collaboration activities with, for example, SAS. It was agreed this discussion would be taken offline. Dr Hepburn confirmed that SAS are scheduled to take a paper regarding this to the Board in June to provide assurance the work is progressing.

Action: SP/DH

ACTION

The next meeting of the Planning and Performance Committee will take place on 12 May 2025 at 10.00 am to 12 noon via Teams.

10 DATE AND TIME OF NEXT MEETING

Monday 04 August 2025 at 10.00 am to 12 noon in the Board Room, Lumina Building. (Facilities for Teams will be available for those who cannot make it in person).