

NHS 24

Minutes of the Meeting of the NHS 24 Planning and Performance Committee held on 10 November 2025 at 10.00am via Teams

PRESENT

Mr David Howe (in the Chair)

Dr Martin Cheyne
Ms Carol Gillie

IN ATTENDANCE

Ms Steph Phillips
Ms Anne-Marie Gallacher
Mr Jim Miller
Mr Joseph Markey (from 1015)
Dr Ron Cook
Dr Jacqui Hepburn
Ms Suzy Aspley
Ms Lynne Kane (for Item 6.10)
Ms Linda Robertson
Ms Jo Edwards
Mr John Gebbie (until 1030)
Ms Geraldine Mathew
Mr John Barber
Ms Marnie Westwood (observer)
Ms Anne Leitch (observer)
Ms Tracy McMillan (Minute)

1.0 WELCOME, APOLOGIES, AND INTRODUCTIONS

The Chair welcomed members to the 10 November 2025 meeting of the NHS 24 Planning and Performance Committee (PPC). There were no apologies to note. A welcome was extended to Ms Westwood and Ms Leitch who were in attendance to observe the proceedings.

It was noted that Ms Anne Gibson and Mr Allan Webb were no longer members of the Planning and Performance Committee. The Committees thanked both for their contributions during their terms of office on the Committee.

Due to Mr Gebbie having to leave Committee at approximately 10.30 am, it was agreed the Finance items would be moved to the start of the agenda.

Noted that classifications on some papers had changed. If a paper is presented to PPC before going to Board for approval it will be classed as "For Endorsement" at PPC, rather than "For Approval."

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 04 August 2025 [Paper No. Item 3.0]. The minute was accepted and approved as a correct record.

APPROVED

4.0 MATTERS ARISING

Nil.

4.1 ACTION LOG

Members considered the action log, and the following points were noted:

No 408 – the timelines for the presentation of a revised workplan and strategy for the Sustainability and Values group was questioned given that it will be presented to Board in December but has not yet been seen by PPC.

Dr Cook advised that the Sustainability and Values Group had not met and therefore the above documentation was not in a position to be shared. It was agreed the workplan and strategy would be circulated to PPC via email prior to the December Board meeting.

No 409 – the proposed completion date for this item will be revised to 09 February 2026 so PPC can be updated on this and see what additional KPI's have been added.

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

**Action: (RC) to share the Sustainability and Values workplan and strategy would be shared via email with PPC members.
(JG) to update PPC with additional KPIs recorded for the Procurement Strategy.
(TMcM) will update the action log as per above.**

APPROVED

5.0 ITEMS FOR ENDORSEMENT

5.1 CLIMATE EMERGENCY AND SUSTAINABILITY ANNUAL REPORT

Dr Cook presented the NHS 24 Annual Climate Emergency and Sustainability Report [Paper No Item 5.1], highlighting the improved format, detailed progress, and plans for the coming year. He noted an apparent deterioration in performance metrics, specifically increased emissions, and energy use, but clarified this was due to enhanced monitoring and identification of issues, such as gas usage at Cardonald and a water leak, both of which have since been addressed. Early data for the current year shows significant reductions in gas and electricity use, demonstrating positive impact from recent actions.

The report also covered waste management, noting a one-off increase due to the move from Lumina and improved food waste segregation at Cardonald. Despite these increases, the overall energy use across the estate has decreased, and ongoing initiatives such as the SCReaM network, active travel reduction, and the establishment of a formal Environmental Management System were highlighted.

Mr Howe raised questions regarding the report's presentational design format, discrepancies in emissions figures between sections three and five, the reporting of 0% renewable energy, and the need for a clear plan to achieve 100% renewables by 2038, especially given reliance on landlords for energy supply. Dr Cook and Mr Gebbie agreed to clarify these points, particularly clarifying in relation to the data discrepancies by adding additional narrative and renewable energy reporting, and to consider using DEFRA grid figures for renewables which Mr Howe offered to assist with.

Ms Gillie supported the need for clearer narrative in the report to better reflect the positive actions taken and suggested that the longer-term infrastructure plan should proactively address capital investment needs for sustainability targets, rather than waiting for the delayed government deadline.

It was agreed that the report would be updated to clarify data discrepancies, improve narrative on positive actions taken, and confirm the board approval date and submission process before final submission to the Scottish Government. Ms Aspley will work with Dr Cook to get the CESP design enhanced before presenting to Board.

**Action: (RC and JG) to update the report taking into account the above comments from the Committee.
(RC and SA) will work on the report to enhance the design prior to Board submission.**

ENDORSED

6.0 ITEMS FOR ASSURANCE

6.1 COMMUNICATIONS DELIVERY PLAN UPDATE

Ms Aspley provided an update on the Communications Delivery Plan [Paper No Item 6.1], noting a busy quarter with significant support for the Digital Transformation Programme (DTP) go-live. This had included internal and external communications, staff feedback collection, and on-call cover. Collaborative projects with Police Scotland and Scottish Government were highlighted, as well as preparations for winter planning and the Powered by People campaign.

Ms Aspley informed the Committee of the successful delivery of the first fully online Annual Review, with lessons learned for future events. She also reported an increase in FOI requests, anticipating further growth ahead of the election, and described close working with the information governance team to manage reputational risks.

It was noted that the winter campaign is due to launch at the end of November involving the Cabinet Secretary and a visit from the First Minister is also being planned. It is anticipated this will help maximise public awareness heading into winter with a patient story included to illustrate service benefits.

Mr Howe commended those involved for the effective management of the online Annual Review and impactful patient story videos, encouraging further public dissemination.

The Committee discussed the recent system outage and the importance of proactive communications, with Ms Aspley confirming that social media was used to inform the public and manage expectations, and internal communications processes were reviewed for future incidents.

Ms Gillie welcomed the improvements that had been made in the paper in relation to evaluation targets and suggested further development of challenging targets in future iterations.

The committee noted the update and thanked Ms Aspley for a useful, informative report.

ASSURED

6.2 CORPORATE DELIVERY PLAN 2025/26 UPDATE

Ms Phillips presented the Corporate Delivery Plan update [Paper No Item 6.2], noting that minor changes had been made following the six-month review, including the separation of the "Held in Mind" action as a distinct Programme for Government commitment. She advised that, while a new annual delivery plan (ADP) is not currently required by Scottish Government, the organisation is proceeding with preparations for a draft three-year Corporate Delivery Plan as previously agreed by the Board.

Ms Gillie queried the impact of changes to specific actions (notably 3.1A and 2.1B), expressing concern that some wording changes (e.g., from "fully evaluate" to "scope and catalogue," and from "create a pipeline" to "develop a roadmap") might indicate less progress than anticipated.

Ms Phillips clarified that these changes reflect the transition from Digital Transformation Programme (DTP) to Service Transformation Programme (STP), with ongoing preparatory work and workshops informing the development of a more defined programme of work. She anticipated an increase in pace now that DTP

implementation is nearing completion but emphasised the need for a thoughtful and structured approach to service transformation.

Mr Barber added that the corporate planning process is intended to be dynamic, with changes reflecting evolving internal and external circumstances, and that further detail would be provided in the upcoming Deep Dive session and Service Transformation Programme Update. (Item 6.5).

At this point Mr Markey asked about the digital solution for raising cards, noting his understanding that a spreadsheet had been designed but was withdrawn due to a problem. He also questioned what specific problem the solution was intended to address. Ms Edwards responded that the issue related to wait times and that workshops have been held to develop a solution. Ms Edwards and Mr Markey agreed to discuss the details of this matter separately.

The Committee agreed to revisit assurance on service transformation progress during the relevant agenda item and noted the ongoing work to align resources and planning for future delivery.

Action: (JE and JM) will arrange to discuss the digital solution for raising cards out with the meeting.

ASSURED

6.3 WINTER PLANNING UPDATE

Ms Edwards provided an update on winter planning [Paper No Item 6.3], confirming that the draft plan had been submitted to Scottish Government and had been acknowledged as helpful, with no further feedback received to date. She outlined the approach to forecasting and scheduling for the festive period, highlighting the challenge of four-day GP closures and the publication of staff rotas for Christmas and New Year.

It was noted that the plan includes patient flow improvement initiatives, direct support from medical, nursing, estates, HR, and ICT teams, and the introduction of additional hybrid working for clinicians. Collaboration with the Scottish Ambulance Service and Flow Navigation Centres was noted, as well as the implementation of a festive freeze on annual leave and the completion of an internal winter resilience tabletop exercise.

Mr Howe raised questions regarding the potential impact of the reduced working week on winter planning, assurance from suppliers during the critical festive period, and opportunities for non-executive directors to visit sites to show support. Ms Edwards responded that modelling is in place to assess headcount and performance impacts, supplier escalation and assurance processes are being reinforced, and non-executive visits can be arranged on less busy days such as Christmas and New Years Day.

Dr Hepburn and Ms Gallacher confirmed that strategic meetings with suppliers are scheduled to ensure heightened awareness and responsiveness during the festive period, with established protocols for ICT and Service Delivery.

Ms Gillie requested more detail on anticipated performance levels, key risks, and mitigating actions. Ms Edwards agreed to enhance future reporting with this information and to share performance projections with the Executive Team once available.

The Committee noted the comprehensive planning and ongoing work to ensure resilience and performance during the winter period.

Action: (JE) will provide more detail in future reporting with regard to anticipated performance levels, key risks, and mitigating actions.

ASSURED

6.4 DIGITAL TRANSFORMATION PROGRAMME UPDATE

Dr Hepburn presented the Digital Transformation Programme (DTP) update [Paper No Item 6.4], noting that the paper had previously been discussed at Board Reserved. She reported that Phase 3 of the programme is now underway, and that the closure workstream has commenced, as outlined in the annex of the paper. Project management resources are now being released from DTP to support Service Transformation.

The recent P1 system outage was addressed, with Dr Hepburn and Ms Gallacher providing assurance that the root cause has been identified and remedial actions are being taken to strengthen supplier responsiveness and service continuity. The underlying system stability was confirmed, and processes are being reviewed to prevent recurrence.

Mr Markey offered support from staff-side colleagues to help communicate mitigation efforts and maintain staff confidence in the system. Dr Hepburn welcomed this offer and agreed to share any future staff communications with trade union colleagues.

Ms Gillie queried the reporting of closure activities to PPC and sought assurance on when the committee would receive confirmation that the DTP has delivered all expected outcomes. Dr Hepburn clarified that closure reporting will transition to the Corporate Delivery Plan report, with a traceability matrix in place to reconcile completion of all deliverables at the end of implementation.

The Committee noted the progress of the DTP, the transition of resources to Service Transformation, and the ongoing work to ensure robust closure and assurance processes.

Action: (JMa) will provide support to JH from staff side colleagues to help communicate any issues/ mitigation efforts to staff regarding the new technology

ASSURED

6.5 SERVICE TRANSFORMATION PROGRAMME UPDATE

Dr Cook provided a verbal update on the Service Transformation Programme (STP), clarifying that while focus had been on Digital Transformation, Service Transformation activities have continued, with increased resources now being allocated to STP as DTP winds down. Dr Cook took the Committee through a presentation to update on current and planned activity.

It was noted that the initial priority is the development and expansion of protocol-led pathways, aiming for a cultural shift to reduce the presumption that all calls require clinical supervision. A recent workshop was held to identify barriers and opportunities, with further collaborative workshop sessions planned to align clinical design with new technology capabilities.

Dr Cook highlighted that the new system enhances the ability to analyse and identify calls suitable for protocol-led management, supporting more efficient service delivery.

The Committee discussed the need for a clear, structured plan and visual representation of how Service Transformation activities connect and progress, to provide assurance on objectives, resource alignment, and delivery. Dr Cook agreed this is a priority as project management resources transition from DTP.

Mr Markey contributed operational insights on the challenges and opportunities of protocol-led pathways, offering to support future workstreams. Dr Cook welcomed this input, noting this aligned with workshop findings.

Dr Cheyne emphasised the importance of maintaining flexibility in the programme to take advantage of new opportunities presented by the technology, and Dr Cook confirmed this approach will be reflected in upcoming workshops and planning.

The Committee noted the ongoing work, the shift in resources, and the commitment to structured planning and reporting for the next phase of the STP.

ASSURED

6.6 PLANNING AND PERFORMANCE RISK MANAGEMENT UPDATE

Ms Robertson presented the updated PPC risk register [Paper No Item 6.6], noting changes in reporting format, including the addition of a “for information” text box to capture interim updates and committee discussions between reporting cycles. This aims to provide the most current risk position to the Committee.

She advised that recent risk reviews had led to reductions in the risk scores related to sustaining a safe and effective response and service performance over DTP, with these changes noted in the new reporting format.

New risks were highlighted, including those associated with the reduction in the working week and the Dundee lease break opportunity. The Committee discussed the process for assigning primary and secondary committee oversight for the new equalities risk, agreeing it would sit primarily with Clinical Governance and secondarily with PPC.

Dr Cheyne raised a query regarding data retention and destruction for legacy information systems. Ms Gallacher confirmed that all data systems have assigned information asset owners, with policies and retention periods in place, and offered to circulate the relevant data destruction policy to the Committee.

Mr Howe questioned whether the risk associated with the reduced working week was a risk or a certainty. Mr Gebbie clarified that the risk is contingent on government funding and workforce planning, with ongoing engagement to secure necessary resources and mitigate performance impacts.

The Committee noted the updates and thanked Ms Robertson for an informative report.

Action: (AMG) will circulate the relevant data destruction policy to the Committee.

ASSURED

6.7 ORGANISATIONAL RESILIENCE

Ms Phillips presented the organisational resilience update [Paper No Item 6.7], noting the report covered activities up to the end of October 2025. She highlighted that recent significant IT incidents, including P1 outages, were not of NHS 24's making but underscored the need to review and update ICT malfunction processes to align with the new environment.

Ms Gillie queried the adequacy of the report in providing assurance against the PPC's terms of reference, specifically regarding evidence of robust business continuity and emergency planning. She requested more detail on how assessments are conducted and how assurance is provided beyond statements.

Ms Phillips explained that assurance is based on a programme of testing, such as recent tabletop exercises for winter preparedness and cyber resilience. The Resilience Planning Group monitors incidents and training plans. It was noted that a previous deep dive into organisational resilience had been held, prior to Ms Gillie joining the Committee. Therefore, Ms Phillips offered to discuss separately with Ms Gillie how reporting could be improved to better meet assurance requirements without delving into operational detail. Ms Gillie agreed to follow up with Ms Phillips.

The Committee acknowledged the ongoing work to strengthen resilience processes and reporting.

Action: (SP & CG) will meet out with the meeting to discuss how reporting could be improved to better meet assurance requirements.

ASSURED

6.8 CORPORATE PERFORMANCE REPORT

Ms Edwards presented the Corporate Performance Report [Paper No Item 6.8], covering the period up to the end of September 2025, and noted that October figures had just been received but not yet reviewed. She reported continued improvement in performance, with no dip observed following the NHS Ayrshire and Arran "go-live" in July and negligible impact from the October DTP phase two implementation.

Ms Edwards highlighted an increase in 999 referrals to the Scottish Ambulance Service (SAS), which prompted the establishment of a task force with NHS 24 and SAS and site visits to the Integrated Care Hub. An action plan is in place to address and reduce these referrals, particularly in preparation for the winter period.

Mr Howe commended the improved average time to answer, noting it had dropped to four minutes, a significant improvement compared to previous periods.

The Committee noted the positive trajectory in performance and acknowledged the ongoing work to address operational challenges, including attendance and 999 referrals.

ASSURED

6.9 FINANCIAL PERFORMANCE REPORT

Mr Gebbie presented the month six finance report [Paper No Item 6.9], noting a £108,000 underspend at the six-month mark, which is contingent on receiving £8 million in allocations, primarily for redesign of urgent care. He confirmed that £6.4 million of the requested £6.7 million for urgent care had been approved by the Sponsor Lead, with ongoing discussions to address the £300,000 shortfall, referencing the communications advertising budget as one option.

The funding will be recurring and included in baseline budgets, reducing annual negotiation risks with government over inflationary uplifts. The allocation is expected by the end of November 2025, pending final government approval.

It was noted that pay budgets are aligned, non-pay is underspending, and all savings targets are on track. A risk of £300,000 in savings due to a national insurance funding shortfall has been mitigated through additional plans reviewed by EMT, with full achievement expected in the coming weeks.

Mr Gebbie advised the Executive Team has begun initial planning for next year's finance plan, including pressures, investments, and savings, with further updates to be provided after the next board workshop.

The Committee noted the report and commended the consistently strong financial performance. No further questions were raised.

ASSURED

6.10 ESTATES AND FACILITIES REPORT

Mr Gebbie introduced the Estates and Facilities Report [Paper No Item 6.10], with Ms Lynne Kane providing key updates. It was noted that the exit from the 2nd and 3rd floors at Lumina was completed, with a network issue on the ground floor resolved and business as usual restored. Negotiations on dilapidations are ongoing, with the first settlement offer received from the landlord and under review with advisors. The outcome may influence future negotiations for the ground floor, with discussions planned for January.

The water cooler feed pipe replacement at Cardonald was completed, with negative resampling results, and a new procedure established for future similar issues.

Mr Gebbie reported that the Estates Group is conducting an options appraisal for the Dundee site, comparing public sector and NHS sites against the current location, due to a lease break opportunity. Decisions must be made by March 2026 to notify the landlord and allow for necessary works. The group may seek Committee and Board approval via virtual paper if required, and discussions with government regarding capital funding are ongoing.

Mr Gillie raised concerns about delays in Cardonald phase two reconfiguration linked to Greater Glasgow and Clyde (GGC) and queried the status of infrastructure and maintenance plan submissions to Scottish Government. Ms Kane confirmed ongoing engagement with GGC was taking place with alternative options under consideration. She clarified that the strategic investment plan deadline has been moved by two years, but maintenance requests for next year are still to be submitted.

Dr Cheyne asked about dilapidations provision and risk. Mr Gebbie confirmed a provision is in place, though the landlord's initial figure is higher than expected; property advisors are confident of negotiating it down. The risk is recorded and will be adjusted as negotiations progress.

The Committee noted the comprehensive report, ongoing negotiations, and proactive risk management.

ASSURED

6.11 INFORMATION GOVERNANCE AND SECURITY REPORT

Ms Gallacher provided the Information Governance and Security Update for Q2 [Paper No Item 6.11], noting a significant and ongoing increase in Freedom of Information (FOI) requests - up 60% compared to the previous year. She reported that mitigation measures have been implemented, including a plan to publish all FOI responses on the NHS 24 website by the end of Q3, starting with the current financial year and working backwards.

It was clarified that while the report's training compliance figures were as of September 2025, current completion rates are now significantly higher, with all core training modules above 90%.

Ms Aspley welcomed the move to publish FOI responses, highlighting the benefit of providing balanced information to the public and countering selective reporting by external parties.

In response to a query from Ms Gillie regarding the 9% compromise rate in phishing tests, Ms Gallacher explained that this rate is comparatively low within the sector, though ongoing contextual benchmarking will be undertaken. Mr Howe and Ms Gallacher both emphasised the importance of continued training to further reduce this rate.

The Committee noted the ongoing work to manage FOI demand, improve staff training, and maintain robust information governance and security practices.

ASSURED

7.0 ITEMS FOR AWARENESS

7.1 PMO: DIGITAL TRANSFORMATION PROGRAMME INTERNAL AUDIT

Mr Gebbie presented the internal audit report for the Digital Transformation Programme (DTP) [Paper No Item 7.1], highlighting an excellent outcome with all items rated green and auditors noting the processes as best practice. The work of Dr Hepburn and Ms Gallacher was specifically commended for their contributions to the programme's success.

The report had previously been reviewed by the Audit and Risk Committee, which recommended its submission to the PPC.

The Committee acknowledged the strong audit result and confirmed that, with overlapping membership between Audit and Risk and PPC, assurance requirements have been met.

AWARE

8.0 COMMITTEE BUSINESS

8.1 PLANNING AND PERFORMANCE COMMITTEE MEETING DATES 2026/27

The Committee considered the paper "Planning and Performance Committee Meeting Dates 2026/27" [Paper No Item 8.1] and confirmed its endorsement of the proposed dates.

ENDORSED

8.2 PLANNING AND PERFORMANCE COMMITTEE WORKPLAN 2025/26

The Committee considered the paper "Planning and Performance Committee Workplan [Paper No Item 8.2] and confirmed assurance.

ASSURED

8.3 PLANNING AND PERFORMANCE COMMITTEE DRAFT WORKPLAN 2026/27

The Committee considered the above paper [Paper No Item 8.3] and confirmed its endorsement of the proposed workplan.

ENDORSED

8.4 ANNUAL COMMITTEE SELF ASSESSMENT OF EFFECTIVENESS SURVEY RESULTS

Ms Mathew presented the results of the PPC Annual Committee Self-Assessment of Effectiveness survey, completed in October 2025 [Paper No Item 8.4]. The survey comprised of 36 questions, with the majority of responses falling within the “agree” category. There were two responses in the “neither agree nor disagree” category and one response in the “disagree” category.

It was noted the “disagree” response related to clarity about Committee members’ roles and how their participation contributes to overall effectiveness. The “neither agree nor disagree” responses concerned the Committee’s fulfilment of its remit over the past year and the appropriateness of the current remit, constitution, and terms of reference.

Ms Mathew went on to say that an updated action plan will be developed based on the survey results and presented to the Committee in February 2026.

Mr Howe suggested that the Committee hold a follow-up session after the next meeting to discuss the survey results in more detail and consider further actions to address areas of uncertainty or improvement, particularly regarding training and understanding of committee processes.

Action: (GM) will arrange for the updated action plan will be presented to the February 2026 Committee. (SP and TMcM) to schedule a deep dive session following the February meeting to consider the action plan in more detail.

ASSURED

8.5 INTEGRATED GOVERNANCE (KEY POINTS ARISING)

Mr Howe invited members to identify any points for escalation based on the committee’s discussions. No specific issues were raised for submission to Integrated Governance.

ASSURED

8.6 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 18 December 2025.

Action: DH to produce the Highlight Report for the December 2025 Board.

APPROVED

9 ANY OTHER BUSINESS

No further items were raised under Any Other Business.

DATE AND TIME OF NEXT MEETING - Monday 09 February 2026 at 10.00 am to 12 noon in the Board Room, Lumina.