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| Board Meeting: | 31 March 2022 |  |
| Subject: | Remobilisation Plan 4 Delivery Planning Quarter 3 Update |
| Recommendation: | Board Members are asked to:  |  |  | | --- | --- | | Discuss and Note |  | | Discuss and Approve |  | | Note for Information only |  | | |
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## Background

Scottish Government commissioned NHS Boards to produce a fourth Remobilisation Plan (RMP4) in autumn 2021 covering the period October 2021 to March 2022. NHS Golden Jubilee (NHS GJ) submitted its RMP4 and accompanying delivery plans on 30 September, receiving governmental sign-off on 13 December. The sign-off letter from Scottish Government was shared with the Finance and Performance Committee in February.

A key component of the Board’s RMP4 is a suite of Delivery Planning Templates. The templates follow a prescribed format, covering key clinical and operational delivery within the Board. The templates do not seek, nor are they required, to cover all aspects of the Board’s activities.

The Delivery Planning Templates for NHS GJ cover:

* Heart, Lung and Diagnostic Division
* National Elective Services
* Digital
* Estates
* Finance
* Golden Jubilee Conference Hotel
* Inequalities
* NHS Scotland Academy
* Workforce
* Centre for Sustainable Delivery (new template developed for Q3 submission)

Scottish Government has requested that Boards review Delivery Plans, reporting quarterly on progress against key deliverables, updated RAG status for each deliverable, and any changes to identified risks / controls, or milestones. Updates are required to follow an exception reporting approach – Government has not requested detailed updates on each deliverable.

Government is not seeking an update on the narrative front-end RMP4 report, nor the detailed activity schedules and finance plans that accompany RMP4. Updates are not required at this time for the CfSD Heat Map that also formed part of the RMP4 submission.

This paper presents to the Board the first quarterly review of NHS Golden Jubilee’s RMP4 Delivery Planning Templates, covering the period September to December 2021. The deadline for submission of first quarterly update to Government was 9 February. To meet Government deadlines, the update was signed-off by Executive Directors.

A further update for the quarter January to March 2022 is due to Government by the end of April. Any substantive issues or amendments highlighted by the Board within the Quarter 3 return will be incorporated into the Quarter 4 update, due to be submitted at the end of April. We anticipate Government will establish a similar approach to quarterly reporting for Board Annual Delivery Plans (ADPs).

Quarterly Delivery Plan reporting will sit alongside existing performance reporting and scrutiny arrangements, such as the Executive Directors’ Performance Update Meeting, Performance Review Groups and the Integrated Performance Report. As the national approach to deliver plan performance reporting evolves, we will continue to consider options to balance appropriate governance oversight (internal and external) with the logistical demands any additional processes create for teams.

**2. Quarter 3 Review**

The highlight report at appendix 1 provides an exception- based update on the delivery of NHS Golden Jubilee’s RMP4 Delivery Planning Templates. The updated Delivery Planning Templates that formed the basis of the Board’s quarterly return to Scottish Government are included at appendices 2-11 for information.

Senior organisational leads have reviewed and where applicable updated the templates for their service. Progress updates as at the end of Quarter 3 (December 2021) have been provided, as have updated RAG statuses for each deliverable. Any changes to risks, mitigations or any other aspects of the template have been included in bold text within the templates themselves.

Notable highlights drawn from individual highlight reports / templates include:

* Continued challenges in meeting 12 week TTG, notably Cardiac Surgery, Cardiology (elective / urgent), Cardiology (TAVI) and Cardiology (EP). 12 week TTG was met in Thoracic Surgery
* Ahead of target numbers for cardiac transplant
* Radiology SLA targets exceed (CT) or are close to (MRI) target
* Achieving 110% of pre-Covid activity within orthopaedics remains challenging. Performance is however ahead of the revised RMP4 plan (Oct to March)
* 4 Joints per Orthopaedic list performance is close to pre-Covid level
* Theatre productivity is stable or in some instances increasing
* Endoscopy and general surgery activity is ahead of year to date (YTD) target but assessed as amber due to the risks identified
* Ophthalmology remains RED due to in-year activity vs target position, and ongoing workforce challenges, however Ophthalmology activity is currently in line with the revised RMP 4 plan
* Ongoing development of Digital Learning Pathway within NHS Academy
* eHealth are working closely with Expansion Team and contractors to ensure digital elements of expansion are delivered
* All RMP finance deadlines are being achieved in line with Scottish Government Guidance. No significant movements have been identified within the Board’s revised RMP4 funding allocation
* Progress has been made to reduce the Board’s in-year efficiency savings gap. This has reduced to £1.3m vs £1.5m in September. In-year this will be supported by recovery / Covid funding. This remains an area of risk, as funding is non-recurring.
* Hotel played a successful role in supporting COP26
* Due to strong results, the Hotel expects to meet agreed 2021/22 recovery financial plan despite additional pressure due to Omicron related cancellations and restrictions.
* Progress is being made with the Conference Hotel estate – works are to be completed by financial year end
* New Hotel Strategy deferred by a year due to ongoing uncertainty, with interim strategy to continue during 2022
* Hotel team provided additional support to facilitate NHSSA programmes (Perioperative, and Military leavers) in Dec 2021
* Progress in delivering significant elements of Diversity and Inclusion Strategy
* Pilot of WelcomeMe app in Elective Services has concluded and is now subject to evaluation
* Work is underway to develop pay gap reporting to include ethnicity
* The NHSSA Senior Leadership Team is now complete
* Chair of National Endoscopy Programme and National Clinical Leads in place
* 226 training places for National Clinical Skills for Pharmacists Programme delivered by end of December
* First cohort of National Treatment Centres Workforce Programme learners commenced programme in October. Second cohort identified and start February 2022
* Anaesthetic Assistant and Surgical First Work streams (NTC Workforce Programme) commenced Nov / Dec respectively
* Covid vaccination and booster, and seasonal flu programmes delivered
* Project group formed for international recruitment programme. Outline business case is being developed
* Progress within all Centre for Sustainable Delivery led programmes, including:
  + Agreement to proceed with Accelerated National Innovation Adoption (ANIA) operating framework
  + OPERA Heart failure diagnostic programme identified as priority project at Scottish Government Innovation Summit
  + Three Early Cancer Diagnostic Centres established. Scotland's first national optimal cancer pathway is being developed for lung
  + SCOTCAP, Cytosponge, Remote Health Pathways now live

**3. NHS Golden Jubilee Winter Plan**

Although not requested by Scottish Government, as good practice we also reviewed the Board’s Winter Plan.

Winter preparedness planning plays a key role in ensuring NHS Golden Jubilee is ready to meet the known and additional challenges over the winter months. In the autumn of 2021, significant pressures were already being experienced throughout the NHS on an unprecedented scale; territorial boards were experiencing high levels of admissions and attendances, which in turn affected patient pathways and access to NHS Golden Jubilee services, and our ability to safely repatriate patients to their ‘home’ Board. There were increased staffing pressures due to isolation and illness as well as heightened infection control requirements due to the continuation of the pandemic.

The winter period to date has continued to be challenging with the rise of a new, highly transmissible, variant of Covid, which has led to staffing challenges in key areas due to isolation and illness. In response to the new variant in mid-December home working was encouraged for all staff who could perform their roles remotely to help reduce transmission within the organisation as well as at community level.

NHS Golden Jubilee maintained its ‘Green’, Covid-light, status to minimise the risk to patients undergoing complex surgery. Work has continued with other Health Boards to respond to the continuing challenges of the pandemic and winter more generally. This includes an agreement for the non-repatriation of cardiology STEMI patients, which will continue until at least the end of March 2022 and will help relieve pressure on territorial boards and the Scottish Ambulance Service.

A vaccination programme to roll out Covid-19 boosters at the same time as flu vaccinations began in October 2020 with additional clinics continuing into December 2021 to ensure booster availability in line with recommended timescales of receipt of second doses.

**4. Recommendation**

The Board is asked to approve the content of the quarterly Delivery Planning Template review, and discuss any issues or other matters it wishes to raise. These will be reflected within the Quarter 4 Delivery Planning update.

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| **Gareth Adkins**  **Director of Quality, Innovation and People**  **22 March 2022** | **Colin Neil**  **Director of Finance** |

**Appendix 1 – Delivery Plan Highlight Reporting**

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| **Delivery Planning Highlight Report – Heart, Lung and Diagnostic** | | |
| **Deliverables Status**   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  | **Previous Quarter** | **Oct to Dec 2021 (this report)** | **Change vs previous quarter** | |  | *Complete / target met* | 0 | 1 | +1 | |  | *On track* | 8 | 6 | -2 | |  | *At risk - requires action* | 4 | 5 | +1 | |  | *Unlikely to complete on time/meet target* | 0 | 0 | No change | |  | Proposal - *New Proposal/no funding yet agreed* | 2 | 2 | No change | |  | **Total** | **14** | **14** | **No change** | | | |
| **Summary of status changes** | **Highlights during quarter** | **Upcoming / future deliverables** |
| One change from Green to Complete – Flexible use of NHS GJ imagining resource for Boards  One change from Green to Amber - Cardiology (TAVI) downgraded to Amber, reflecting growing waiting list against 12 week TTG compared to previous quarter | Continued challenges in meeting 12 week TTG, notably Cardiac Surgery, Cardiology (elective / urgent), Cardiology (Tavi) and Cardiology (EP). 12 week TTG met in Thoracic Surgery  Ahead of target for cardiac transplant  Radiology SLA targets exceed (CT) or close to (MRI) target | Activity plans for 2022/2023 under development and will be finalised / agreed during Q4.  Work ongoing to convert SLA diagnostic waiting times activity to regional cardiac activity for CT / MRI. Options appraisal to be considered by NHS GJ senior leadership in January 2022 |
| **Matters to draw to Committee’s attention** | | |
| Continued workforce risks, including challenges in theatre staffing. | | |

**Please see Appendix 2: HLD Delivery Planning Template**

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| **Delivery Planning Highlight Report – National Elective Services** | | |
| **Deliverables Status**   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  | **Previous Quarter** | **Oct to Dec 2021 (this report)** | **Change vs previous quarter** | |  | *Complete / target met* | 3 | 3 | No change | |  | *On track* | 2 | 2 | No change | |  | *At risk - requires action* | 7 | 7 | No change | |  | *Unlikely to complete on time/meet target* | 2 | 2 | No change | |  | Proposal - *New Proposal/no funding yet agreed* | 1 | 1 | No change | |  | **Total** | **15** | **15** | **No change** | | | |
| **Summary of status changes** | **Highlights during quarter** | **Upcoming / future deliverables** |
| No changes to delivery status | Achieving 110% of pre-Covid activity within Orthopaedics remains challenging. Performance is ahead of the revised RMP4 plan (Oct to March)  4 Joint day performance is close to pre-Covid level  Theatre productivity stable or in some cases increasing  Endoscopy and general surgery activity is ahead of YTD target but assessed amber due to risks identified  Ophthalmology remains RED due to in-year activity vs target position, and ongoing workforce challenges | Activity plans for 2022/2023 under development and will be finalised / agreed during Q4.  Recruitment, and accelerated training to continue at pace to mitigate ongoing workforce challenges across all services |
| **Matters to draw to Committee’s attention** | | |
| Ongoing challenges in meeting activity targets in core clinical specialities. Continued workforce risks, including challenges in theatre staffing.  Risks associated with endoscopy and general surgery may affect delivery in Q4. | | |

**Please see Appendix 3: NES Delivery Planning Template**

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| **Delivery Planning Highlight Report – Digital** | | |
| **Deliverables Status**   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  | **Previous Quarter** | **Oct to Dec 2021 (this report)** | **Change vs previous quarter** | |  | *Complete / target met* | 1 | 1 | No change | |  | *On track* | 3 | 3 | No change | |  | *At risk - requires action* | 0 | 0 | No change | |  | *Unlikely to complete on time/meet target* | 0 | 0 | No change | |  | Proposal - *New Proposal/no funding yet agreed* | 1 | 1 | No change | |  | **Total** | **4** | **4** | **No change** | | | |
| **Summary of status changes** | **Highlights during quarter** | **Upcoming / future deliverables** |
| No changes to delivery status | Ongoing development of Digital Learning Pathway within NHS Academy  eHealth working closely with Expansion Team and contractors to ensure digital elements of expansion are delivered | Focus moves from 0365 email migration to broader M365 data management and PowerApps for clinical solutions such as MDTs  Development of business case for scalable NHS GJ data management infrastructure  Development of benefits realisation plan for NGS NearMe (NSS lead) |
| **Matters to draw to Committee’s attention** | | |
| Further digital expansion and development requires appropriate staffing resource, staff and patient ‘digital literacy’, and underlying infrastructure / bandwidth. | | |

**Please see Appendix 4: Digital Delivery Planning Template**

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| **Delivery Planning Highlight Report – Estates** | | |
| **Deliverables Status**   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  | **Previous Quarter** | **Oct to Dec 2021 (this report)** | **Change vs previous quarter** | |  | *Complete / target met* | 0 | 0 | No change | |  | *On track* | 3 | 3 | No change | |  | *At risk - requires action* | 0 | 0 | No change | |  | *Unlikely to complete on time/meet target* | 0 | 0 | No change | |  | Proposal - *New Proposal/no funding yet agreed* | 0 | 0 | No change | |  | **Total** | **3** | **3** | **No change** | | | |
| **Summary of status changes** | **Highlights during quarter** | **Upcoming / future deliverables** |
| No changes to delivery status | Phase 2 expansion progress is in line with programme plan. Includes groundworks and drainage, superstructure and brick façade / cladding and partitions.  Internal team moves and refurbishment work continues as part of site utilisation project.  Estates continues to support proposals for the effective utilisation of the NHS GJ estate. This includes ongoing scoping work and commissioning of external architects, to identify options for clinical skills space within the curtilage of the National Hospital | Departments displaced from Level 1 (eHealth, Recruitment, Orthopaedic Consultants) will be relocated to level 5 East in March.  Additional options for the NHSSA learning environment are under consideration but NHS GJ Executive Team within the context of broader estates review and planning. This will be progressed During Q4 |
| **Matters to draw to Committee’s attention** | | |
| Note update on delivery plan progress to end December 2021 | | |

**Please see Appendix 5: Estates Delivery Planning Template**

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| **Delivery Planning Highlight Report – Finance** | | |
| **Deliverables Status**   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  | **Previous Quarter** | **Oct to Dec 2021 (this report)** | **Change vs previous quarter** | |  | *Complete / target met* | 1 | 1 | No change | |  | *On track* | 3 | 4 | +1 | |  | *At risk - requires action* | 2 | 1 | -1 | |  | *Unlikely to complete on time/meet target* | 0 | 0 | No change | |  | Proposal - *New Proposal/no funding yet agreed* | 0 | 0 | No change | |  | **Total** | **6** | **6** | **No change** | | | |
| **Summary of status changes** | **Highlights during quarter** | **Upcoming / future deliverables** |
| One change from Amber to Green - Monitor Costs against Weekend Cataract activity. Robust process in place, including dialogue with Scottish Government. | All RMP finance deadlines are being achieved in line with Scottish Government Guidance  No significant movements have been identified within the Board’s revised RMP4 funding allocation  Progress made to reduce the Board’s in-year efficiency savings gap. Reduced to £1.3m vs £1.5m in September. In-year this will be supported by recovery / Covid funding. This remains an area of risk, as funding is non-recurring. | No significant deliverables within template to highlight. Routine monitoring will continue as we move towards financial year-end.  Work will continue on Financial Plan for 2022/2023, aligned with Workforce and overall Board Delivery Plans |
| **Matters to draw to Committee’s attention** | | |
| Ongoing risk that the Board does not achieve its required recurring efficiency savings | | |

**Please see Appendix 6: Finance Delivery Planning Template**

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| **Delivery Planning Highlight Report – Golden Jubilee Conference Hotel** | | |
| **Deliverables Status**   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  | **Previous Quarter** | **Oct to Dec 2021 (this report)** | **Change vs previous quarter** | |  | *Complete / target met* | 3 | 4 | +1 | |  | *On track* | 3 | 3 | No change | |  | *At risk - requires action* | 1 | 1 | No change | |  | *Unlikely to complete on time/meet target* | 0 | 0 | No change | |  | Proposal - *New Proposal/no funding yet agreed* | 1 | 0 | -1 | |  | **Total** | **8** | **8** | **No change** | | | |
| **Summary of status changes** | **Highlights during quarter** | **Upcoming / future deliverables** |
| One change from Green to Complete- COP26  One change from Amber to Green – Conference Hotel financial position  One change from Green to Amber – development of new Hotel Strategy | Successful role in supporting COP26  Due to strong results, Hotel expects to meet 21/22 recovery financial plan despite additional pressure due to Omicron related cancellations and restrictions.  Progress being made with Hotel estate works  New Hotel Strategy deferred by a year due to ongoing uncertainty. interim strategy to continue during 2022  Team helped facilitate NHSSA programmes (Perioperative, and Military leavers) in Dec 2021 | Completion of estate refurbishment works by end of financial year  Ongoing provision of clinical learning environment support to continue, with specific needs identified through to the end of March 2022 |
| **Matters to draw to Committee’s attention** | | |
| Note update on delivery plan progress to end December 2021 | | |

**Please see Appendix 7: Golden Jubilee Conference Hotel Delivery Planning Template**

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| **Delivery Planning Highlight Report – Inequalities** | | |
| **Deliverables Status**   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  | **Previous Quarter** | **Oct to Dec 2021 (this report)** | **Change vs previous quarter** | |  | *Complete / target met* | 5 | 6 | +1 | |  | *On track* | 7 | 5 | -2 | |  | *At risk - requires action* | 0 | 1 | +1 | |  | *Unlikely to complete on time/meet target* | 0 | 0 | No change | |  | Proposal - *New Proposal/no funding yet agreed* | 0 | 0 | No change | |  | **Total** | **12** | **12** | **No change** | | | |
| **Summary of status changes** | **Highlights during quarter** | **Upcoming / future deliverables** |
| One change from Green to Complete – leadership and organisational development  One change from Green to Amber – relaunch of EQIA has been delayed | Progress in delivering significant elements of the Diversity and Inclusion Strategy  Pilot of WelcomeMe app in Elective Services has concluded and now subject to evaluation  Work underway to develop pay gap reporting to include ethnicity | Delayed EQIA relaunch to take place  SACCS service improvement project continues. Sessions with patients and other stakeholders take place January 2022  Broader reducing inequalities activity to be considered for future templates, notably ADP |
| **Matters to draw to Committee’s attention** | | |
| Note update on delivery plan progress to end December 2021 | | |

**Please see Appendix 8: Inequalities Delivery Planning Template**

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| **Delivery Planning Highlight Report – NHS Scotland Academy** | | |
| **Deliverables Status**   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  | **Previous Quarter** | **Oct to Dec 2021 (this report)** | **Change vs previous quarter** | |  | *Complete / target met* | 2 | 2 | No change | |  | *On track* | 4 | 4 | No change | |  | *At risk - requires action* | 1 | 1 | No change | |  | *Unlikely to complete on time/meet target* | 0 | 0 | No change | |  | Proposal - *New Proposal/no funding yet agreed* | 0 | 0 | No change | |  | **Total** | **7** | **7** | **No change** | | | |
| **Summary of status changes** | **Highlights during quarter** | **Upcoming / future deliverables** |
| No changes to delivery status | NHSSA Senior Leadership Team is now in place. Chair of National Endoscopy Programme and National Clinical Lead roles in place  226 training places for National Clinical Skills for Pharmacists Programme delivered by end December. First cohort of National Treatment Centres Workforce Programme learners commenced programme in October. Second cohort start in February 2022.  Anaesthetic Assistant and Surgical First Work streams (NTC Workforce Programme) commenced Nov / Dec. | Additional options for the NHSSA learning environment are under consideration but NHS GJ Executive Team within the context of broader estates review and planning. This will be progressed During Q4  Further 11 training days will be delivered during Q4 within the National Clinical Skills for Pharmacists Programme |
| **Matters to draw to Committee’s attention** | | |
| Assistant Practitioner Programme (Endoscopy) development is underway; delays possible due to educational governance requirements and timescales. Demand for places within NTC Workforce Programme risks exceeding available capacity. An options appraisal is underway to consider options to expand programme. | | |

**Please see Appendix 9: NHSSA Delivery Planning Template**

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| **Delivery Planning Highlight Report – Workforce** | | |
| **Deliverables Status**   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  | **Previous Quarter** | **Oct to Dec 2021 (this report)** | **Change vs previous quarter** | |  | *Complete / target met* | 0 | 1 | +1 | |  | *On track* | 8 | 6 | -2 | |  | *At risk - requires action* | 0 | 1 | +1 | |  | *Unlikely to complete on time/meet target* | 0 | 0 | No change | |  | Proposal - *New Proposal/no funding yet agreed* | 0 | 0 | No change | |  | **Total** | **8** | **8** | **No change** | | | |
| **Summary of status changes** | **Highlights during quarter** | **Upcoming / future deliverables** |
| One change from Green to Complete – delivery of Interim Workforce Plan  One change from Green to Amber – recruitment to key roles | Covid vaccination and booster, and seasonal Flu programmes delivered successfully  Project group formed for international recruitment programme. Outline business case being developed. | Presentation of Outline Business Case for international recruitment programme  Team stories being gathered as part of next stage of iMatter |
| **Matters to draw to Committee’s attention** | | |
| Note extension of timescales for development of next Board Workforce Plan.  Workforce recruitment remains significant organisational challenge. | | |

**Please see Appendix 10: Workforce Delivery Planning Template**

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| **Delivery Planning Highlight Report – Centre for Sustainable Delivery** | | |
| **Deliverables Status**   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  | **Previous Quarter** | **Oct to Dec 2021 (this report)** | **Change vs previous quarter** | |  | *Complete / target met* | n/a | 0 | New template | |  | *On track* | n/a | 14 | New template | |  | *At risk - requires action* | n/a | 0 | New template | |  | *Unlikely to complete on time/meet target* | n/a | 0 | New template | |  | Proposal - *New Proposal/no funding yet agreed* | n/a | 0 | New template | |  | **Total** |  | **14** |  | | | |
| **Summary of status changes** | **Highlights during quarter** | **Upcoming / future deliverables** |
| No status changes – Delivery Planning Template developed for Q3 reporting. All deliverables assessed as ‘on track’. | Progress within all programmes, including:   * Agreement to proceed with Accelerated National Innovation Adoption (ANIA) operating framework * OPERA Heart failure diagnostic programme identified as priority project at Scottish Government Innovation Summit * Three Early Cancer Diagnostic Centres established. Scotland's first national optimal cancer pathway being developed for lung. * SCOTCAP, Cytosponge, Remote Health Pathways now live | Multiple delivery milestones of March 2022 within Innovation work stream / programme. See Milestones / Target column within Delivery Planning Template |
| **Matters to draw to Committee’s attention** | | |
| Whilst some recruitment has been undertaken, full allocation of funding for CfSD team is not yet agreed. This may mean there constraints in the breadth of work that could be adopted quickly. Capacity from clinicians to engage with work due to pressures driven by COVID-19 is currently affecting the early planning stages and the pace of roll out. Assessment of future resource requirements is being undertaken. Continued engagement with key clinical stakeholders and work flexibly to minimise clinical impact. | | |

**Please see Appendix 11: Centre for Sustainable Delivery, Delivery Planning Template**