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**NHS Golden Jubilee**

**Delivery Plan 2024/25 – Quarter 1 Review**

NHS Golden Jubilee’s 2024/25 Annual Delivery Plan (ADP) and corresponding Delivery Plan Review Note sets out the Board’s priorities for the year in line with the prescribed planning guidance from Scottish Government. Boards are required to share their internal Delivery Plan progress or performance reports to inform on progress with the intent of ensuring receipt of clear and consistent information whilst reducing workload and duplication of reporting. As a result, the Planning team are reviewing the approach to Delivery Planning. Working with organisational leads, a new simplified Delivery Planning Template is under development and will form the basis of reporting on 2024/25 ADP delivery from Quarter 2 (Q2) onwards. The template will be submitted with a review note including a summary of actions at the quarter end position.

The Quarter 1 (Q1) update provides a one-off progress update against priority actions at the end of June 2024. The priority actions have been identified in line with Scottish Government Planning Guidance which is structured around the ten national NHS recovery drivers:

* Primary and Community Care
* Urgent and Unscheduled Care
* Mental Health
* Planned Care
* Cancer Care
* Health Inequalities and Population Health
* Women and Children’s Health
* Workforce
* Digital Services and Innovation Adoption
* Climate

The upcoming submission is due to Scottish Government on 11 September.

Progress of priority actions for NHS Scotland Academy (NHSSA) and the Centre for Sustainable Delivery (CfSD) have been excluded from this review note. Following discussion with NHS Education for Scotland (NES), NHSSA will continue to complete the ADP2 template. CfSD will continue to submit bi-monthly programme reports to the Strategic Portfolio Governance Committee (SPGC). The ADP2 template and SPGC report will be submitted to Scottish Government as appendices to the review note.

**Planned Care**

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| **NHS GJ Deliverable Reference** | **SG Guidance Focus Areas** |
| 4.5b | Extending the scope of day surgery and 23-hour surgery to increase activity and maximise single procedure lists |

Regular reporting is in place for action 4.5b through Confirm and Challenge (C&C) meetings. Quarter 1 data is provided below with narrative from the August meeting.

**Q1 Update** – *Action 4.5b*

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| KPI |  | Baseline | Apr-24 | May-24 | June-24 |
| KNEE Arthroplasty - Percentage same day procedures | Plan | 1.4% | 1.5% | 1.7% | 1.8% |
| Actual | 0.6% (1/171) | 1.9% (3/158) | 1.4% (2/145) |
| HIP Arthroplasty - Percentage same day procedures | Plan | 0.8% | 1.2% | 1.5% | 1.9% |
| Actual | 4.1% (6/147) | 2.7% (4/150) | 5.4% (8/149) |

Table : Hip and Knee Arthroplasty Data

Lower actual percentages are due partly to the nature of referrals received, of which, a large number are not suitable for same day procedures.

A “day zero” tick box is now available on unicompartmental knee forms which has seen an increase in listing in the orthopaedic clinic. It is predicted these numbers will proceed to surgery in the coming months.

Small volumes of patients are currently discharged on day of procedure but are showing an increase on 2023/24 numbers for hips in particular.

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| **NHS GJ Deliverable Reference** | **SG Guidance Focus Areas** |
| 4.9b | Optimise theatre utilisation and implement digital solutions |

Access to reporting data for action 4.9b is available to the Performance team via the Discovery system. Quarter 1 theatre utilisation data is provided below.

**Q1 Update** *– Action 4.9b*

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|  | Cancelled Sessions | | Utilisation | | Under Runs | | Over Runs | | Late Starts | |
| Scotland | GJ | Scotland | GJ | Scotland | GJ | Scotland | GJ | Scotland | GJ |
| **Trauma & Orthopaedic Surgery** | 12.6% | 8.2% | 91.0% | 96.8% | 13.1% | 7.8% | 4.5% | 4.6% | 2.8% | 1.2% |
| Net cancelled session hours | 3717 | 254 | 22641 | 2705 | 3261 | 219 | 1118 | 127 | 705 | 35 |
| Allocated planned hours | 29618 | 3103 | 24869 | 2794 | 24869 | 2794 | 24869 | 2794 | 24869 | 2794 |
| **Ophthalmology** | 11.7% | 0.0% | 86.1% | 78.1% | 13.3% | 18.2% | 1.9% | 0.7% | 3.6% | 0.8% |
| Net cancelled session hours | 1397 | 0 | 8817 | 1263 | 1358 | 294 | 192 | 12 | 372 | 13 |
| Allocated planned hours | 11916 | 1647 | 10241 | 1616 | 10240 | 1616 | 10240 | 1616 | 10240 | 1616 |
| **Gastroenterology** | 3.6% | 2.1% | 92.6% | 93.7% | 10.7% | 10.9% | 7.3% | 8.3% | 5.3% | 5.3% |
| Net cancelled session hours | 96 | 35 | 2081 | 1532 | 241 | 177 | 165 | 136 | 119 | 87 |
| Allocated planned hours | 2672 | 1697 | 2247 | 1634 | 2247 | 1634 | 2247 | 1634 | 2247 | 1634 |
| **Cardiac Surgery** | 4.2% | 0.0% | 86.5% | 85.5% | 22.1% | 27.1% | 5.0% | 7.0% | 6.1% | 8.5% |
| **Net cancelled session hours** | 176 | 0 | 3108 | 1736 | 793 | 551 | 179 | 142 | 218 | 172 |
| Allocated planned hours | 4171 | 2362 | 3592 | 2029 | 3592 | 2029 | 3592 | 2029 | 3592 | 2029 |

Table : National Theatre Efficiency Indicator Scorecard, Source: Discovery

NHS GJ compares favourably, at specialty level when considering the positions reported on the Discovery National Theatre Efficiency Indicator Scorecard. This includes KPIs on Cancelled sessions, Utilisation, Under/Over runs & Late Starts.

**Cancer Care**

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| **NHS GJ Deliverable Reference** | **SG Guidance Focus Areas** |
| 5.2a | Increasing diagnostic capacity including endoscopy and its new alternatives, alongside assurances of the Board’s plan to establish a Rapid Cancer Diagnostic Service |

Regular reporting is in place for action 5.2a through C&C meetings. Quarter 1 data is provided below with narrative from the August meeting.

**Q1 Update** – *Action 5.2a*

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| Specialty | Sub Specialty |  | Apr-24 | May-24 | Jun-24 | YTD | YTD Diff | YTD Diff % |
| Diagnostic | Endoscopy | Plan | 575 | 599 | 571 | 1745 |  |  |
| Endoscopy |  | Actual | 762 | 781 | 750 | 2293 | 548 | 31% |

Table : Number of Diagnostic Endoscopy Examinations

Endoscopy has been performing consistently above profile in 2024/25. The service is utilising additional mobile capacity in preparation for the opening of Expansion Phase 2 which will increase core capacity.

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| **NHS GJ Deliverable Reference** | **SG Guidance Focus Areas** |
| 5.3a | Embedding optimal cancer diagnostic pathways and clinical management pathways |

Regular reporting is in place for action 5.3a through C&C meetings. Quarter 1 data is provided below with narrative from the August meeting.

**Q1 Update** – *Action 5.3a*

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| **Cancer Type** | **GJ** | **Scotland** |
| Lung | 99.2% | 98.7% |

Table : % of Patients treated within 31 day standard: Adjusted wait

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| --- | --- | --- | --- | --- | --- |
|  | Apr-24 | May-24 | Jun-24 | YTD | YTD % |
| Profile | 100% | | |  |  |
| Performance | 100% | 100% | 98% |  |  |
| Numerator | 43 | 30 | 44 | 117 |  |
| Denominator | 43 | 30 | 45 | 118 | 99.2% |

Table : Performance against Lung Cancer 31 Day Standard

Performance this year is 99.2% with a single breach. The patient was identified as a potential breach prior to surgery date, however the decision was made by the lead clinician not to bring surgery forward.

**Health Inequalities and Population Health**

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| **NHS GJ Deliverable Reference** | **SG Guidance Focus Areas** |
| 6.1 | Tackling local health inequalities (including racialised health inequalities) and reflecting population needs and local joint Strategic Needs Assessment |

Action 6.1 is monitored through the Equality Diversity and Inclusion Group on an 8 weekly basis. An update on Quarter 1 is provided below from the June highlight report.

**Q1 Update** – *Action 6.1*

The Workforce Directorate has a focused and mature Equalities & Inclusions plan, with the following achieved in Q1:

* Draft construction of our Equality outcomes for FY 25 - 29, with a commitment to ensure all protected characteristics are equally represented
* A Board - wide survey of all People of NHS GJ (staff and volunteers) is complete, the rich learning from which is shaping those Equality outcomes
* In line with the National ask to ensure Anti-Racism is a key focus for FY 24 -25, our NHS GJ Executive Leadership Team have agreed a specific Anti-Racism objective in Q1, with the commitment that all Board and Executive Leadership Team members complete the Cultural Humility eLearning programme
* New Diversity & Inclusion external facing webpage has launched
* Embedding of WelcoME app for disabled service users to provide advanced information of an individual’s disability and accessibility requirements prior to arriving on site allowing NHS GJ to provide an enhanced level of person-centred care
* A new process was developed for managers to ensure diversification of interview panels
* Recruitment packs were updated to include new guidance for candidates around reasonable adjustment policies and procedures
* Review of exit interview procedures to obtain data and undertake trend analysis with a focus on Race and Disability
* National day for staff networks event
* Installation and opening of Changing Places toilet
* Autism in the workplace training sessions
* Review of NHS GJ Sensory Service
* Ethnic minority networking lunch

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| **NHS GJ Deliverable Reference** | **SG Guidance Focus Areas** |
| 6.2 | How they will redirect wealth back into their local community to help address the wider determinants of health inequalities, through actions set out in their “Anchors Strategic Plan”. |

Regular reporting is in place for action 6.2 through the Strategic Programme Board (SPB). An update on Quarter 1 is provided below following review of the August highlight report.

**Q1 Update –** *Action 6.2*

Ongoing progress is being made via the Anchor Programme being delivered via specific workstreams being identified through partnership working internally and externally.

* Progress is being monitored on plans developed by Estates, Workforce and Procurement teams.
* The child poverty priority workstream led by West Dunbartonshire Council has seen NHS GJ being invited to join as a key member of the newly formed ‘Family Prosperity Network’ which will deliver actions in collaboration with partners to address key drivers of poverty including: maximise income from employment; maximise benefit uptake; reduce the cost of living.
* An exploration of options is being undertaken into how NHS GJ can support future careers and retain people within West Dunbartonshire. A model is being determined to explore how the NHS can utilise people assets to support and nurture school and college pupils from across local communities
* The programme is also facilitating discussions between Skills Development Scotland and NHS GJ’s Digital team to establish a Digital Academy via offering a range of apprenticeships. The objective here is to offer high quality opportunities to local communities and hence develop career pathways.

**Workforce**

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| **NHS GJ Deliverable Reference** | **SG Guidance Focus Areas** |
| 8.4 | An implementation plan for eRostering in 2024/25 with a view to implementing across all services and professions by 31st March 2026 |

Regular reporting is in place for action 8.4 through SPB. An update on Quarter 1 is provided below following review of the August highlight report.

**Q1 Update –** *Action 8.4*

To date we have on-boarded four AfC teams: ICU2; Cath Labs (see note below); Rehabilitation services and Housekeeping. In addition our rostering team are currently engaged in:

* Cath Labs – A reconfiguration has been completed, however, additional training is to be rescheduled to complete the process.
* Critical Care (extension to ICU1, HDU2, HDU3) - configuration has been completed, with ongoing changes being made, additional training potential for go live. This is required to make the ICU2 rota usefully live as the staff are shared across all four wards.
* Radiology Admin - Proposed 5th Aug for go live. Everything is in place for this
* Radiology Clinical - Proposed 2nd Sept go live due to service request to push back. Additional mop up sessions have taken place, however the service is scheduled for further training prior to go live.
* Ongoing support activities to the teams fully on boarded
* A schedule for organisational wide implementation is being developed.

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| **NHS GJ Deliverable Reference** | **SG Guidance Focus Areas** |
| 8.7 | Delivery of the overall workforce strategy |

During Quarter 3 (Q3) of 2024/25, the NHS Golden Jubilee Board Strategy will be refreshed. That strategy refresh provides the ideal opportunity to renew the Workforce Strategy and Plan for the future to ensure it fully aligns, and underpins the overall Board Strategy. Several key activities have been delivered in Q1 to prepare for that strategy renewal, as outlined below.

**Q1 Update –** *Action 8.7*

* Detailed reviews within the Workforce directorate to understand the employee experience and identify opportunities to improve it. This has been approached through a person-centred lens with an equally strong focus on the efficiency (and therefore cost effectiveness) of our processes and procedures
* Continued rigour around the use of agency, bank and locum staff, particularly in the nursing community (this is aligned with our ‘Achieving the Balance’ programme, the aim of which is to ensure we achieve financial balance by end of FY 25
* Completion of end-to-end review of our Recruitment process, so that we can better anticipate leavers, and forecast demand by role type and medical specialism
* Phase 1 of Vacancy Management process delivered with the development of our existing process to make it more person-centred and efficient
* Approval of organisational change to better build our Workforce Planning capability with a dedicated Workforce Planning role (to be recruited in Q3)
* Collaborative foundations agreed between the Workforce and Finance directorates to achieve one consistent version of ‘establishment’ reporting which will be developed throughout Q3 & Q4
* Agreement achieved to host workforce data on Power BI presenting data in an engaging way in the hands of those who can influence it best
* Business Partner model strengthened in HR
* Prioritisation of the planning of a ‘getting the basics right’ campaign that focusses on the development of all people within NHS GJ.

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| **NHS GJ Deliverable Reference** | **SG Guidance Focus Areas** |
| 8.8 | Delivery of the Health and Wellbeing priorities |

Action 8.8 is monitored through the Health and Wellbeing meeting. However, areas of reporting for 2024/25 are scheduled to be agreed at the August meeting therefore a report is not currently available. An interim Quarter 1 update has been provided below by Learning and Organisational Development.

**Q1 Update –** *Action 8.8*

In Quarter 1, the refurbishment of the new Staff Wellbeing Zone was completed, and the process of furnishing the space is currently underway, with plans to open in late autumn. Meanwhile, all other health and wellbeing workstreams are ongoing, continuing to promote staff wellbeing through various activities, services, and resources, including health promotions facilitated by Occupational Health and Staff Rehab Services.

**Digital Services Innovation Adoption**

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| **NHS GJ Deliverable Reference** | **SG Guidance Focus Areas** |
| 9.1 | Adoption and implementation of the national digital programmes |
| 9.2 | Improving cyber resilience and compliance with the Refreshed Public Sector Cyber Resilience Framework |
| 9.3 | Executive support and commitment to optimising use of digital & data technologies in the delivery of health services, and ongoing commitment to developing and maintaining digital skills across the whole workforce |

Actions 9.1, 9.2 and 9.3 are monitored within the Digital Improvement Plan. While there is no formal governance reporting on a quarterly basis, a number of activities are monitored bi-monthly through the Strategic Programme Board. An update on Quarter 1 is provided below following review of the August highlight report. Additional narrative has been provided by the Director of Digital & eHealth.

**Q1 Update –** *Action 9.1*

The delivery of the overall program is progressing well, with key milestones remaining on schedule. National systems which are currently in adoption include:

* SOLUS Endoscopy Reporting
* Sectra PACS
* Scan for Safety
* OneTrust Policy Management
* Microsoft 365
* Open Eyes ePR

The majority of projects are advancing as planned, with identified risks and issues being effectively mitigated, and stakeholders continue to be engaged. However, challenges persist in the recruitment for key roles such as project management resources. A second permanent project manager and a Contract and Vendor Manager have now been appointed which improve the situation considerably. Additionally, the project scope has expanded by 10-15% due to increased demands for improvements beyond the initial system replacement, such as the integration of additional functionalities. Scope creep has occurred in both the Dendrite Cardiology project and the Clinical Application Project with functionality being requested significantly above that of the originally scoped project. This is currently under management, however may potentially extend the current project timelines. Looking ahead to September, SOLUS Endoscopy Reporting is expected to reach completion, at which point detailed benefits realisation can be assessed.

**Q1 Update –** *Action 9.2*

The Digital Team and colleagues across the organisation continue to work through the recommendations from the most recent NIS Directive audit to achieve this year’s compliance targets. A governance structure is in place alongside an action tracker for each of the outstanding controls with an owner and expected delivery date against each item. The group reports progress to the Executive Leadership Group on a monthly basis and the Digital Information Governance Group and Audit and Risk Committee quarterly.

**Q1 Update –** *Action 9.3*

The Digital Improvement Plan aims to update or replace the legacy IT systems in use within the Board with modern, fit for purpose alternatives. Each new system implementation will include full training for end users. In addition, the development of digital training materials to improve overall digital literacy is ongoing with support from the Learning and Organisational Development function to ensure training needs in digital skills are maintained. An additional scheme in partnership with Skills Development Scotland is also being scoped to provide opportunities within Digital for local young and underprivileged students.