

**NHS Golden Jubilee**

1. **Annual Delivery Plan 2024/25 Quarter 4 Update**

NHS Golden Jubilee’s (NHS GJ) Annual Delivery Plan (ADP) and Delivery Planning Template (DPT) sets out the Board’s priorities for the year following Scottish Government planning guidance. Boards are required to submit quarterly returns to Government providing updates and assurance on delivery. The Planning team has engaged with operational leads and the Executive team to present the actual Quarter (Q) 4 end position. A final and high-level overview of overall progress of all deliverables is provided in the final section of this note.

The Q4 update provides a progress update against priority actions at the end of March 2025. The priority actions have been identified in line with Scottish Government Planning Guidance, which is structured around the national NHS recovery drivers, five of which pertain to NHS Golden Jubilee:

* Planned Care
* Cancer Care
* Health Inequalities and Population Health
* Workforce
* Digital Services and Innovation Adoption

While NHS GJ does not have a driver focusing on primary and community care responsibilities, and is not required to report on this, we will continue to work with referring Boards and other partners as they progress actions to enable earlier intervention and care in the community. NHS GJ recognises the importance of collective ‘whole system’ collaboration in order for NHS Scotland to recover core services, continue to improve levels of productivity and achieve sustainable improved outcomes for patients throughout Scotland.

This Q4 Delivery Planning Template is due for submission to the Scottish Government once approved by the NHS GJ Board**.**

Progress of priority actions for the 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 which is submitted to the NHSSA Executive Programme Group (EPG). CfSD have adopted a similar approach by producing an update report for the Strategic Portfolio Governance Committee (SPGC). The ADP2 template and CfSD report will be submitted to Scottish Government as appendices to the review note.

1. **Quarter 4 End Position**

**Table 1** shows the overall RAG status of the Board’s 12 deliverables at quarter end: 8 Green RAG status indicators, 4 Amber, and 0 Red:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **RAG Status** | | **Q1 Position** | **Q2 Position** | **Q3 Position** | **Q4 Position** |
|  | Unlikely to complete on time / meet target | N/A | - | - | - |
|  | At risk - requires action | N/A | 1 | 5 | 4 |
|  | On track | N/A | 11 | 7 | 8 |
|  | Complete | N/A | - | - | - |
|  | **Total** | **N/A** | **12** | **12** | **12** |

**Table 1: Q4 End Position**

The total number of deliverables has remained unchanged from Q1.

Due to issues highlighted in **Table 2** below, the following four deliverables have been assigned Amber RAG status at Q4 end. Please note, the Q3 and Q4 position has been included for deliverable 5.3a, due to new data becoming available as of 29/04/25. This data was not available at the time of the Q3 submission; therefore it has been incorporated into this quarter's update.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Recovery Driver** | **NHS GJ Deliverable Reference** | **Deliverable** | **Q4 RAG** | **Progress Note** |
| **4. Planned Care** | **4.9b** | To maximise theatre utilisation using Discovery data as a benchmark and make improvements in line with the findings from this. |  | Governance structure now strengthening theatre efficiency work. Theatre management group reporting into newly formed Theatre Senior Leadership Team which will report to Senior Leadership Team. |
| **5. Cancer Care** | **5.2a** | To achieve the 24/25 ADP target for Endoscopy |  | Finished 3% behind year end plan due to delayed opening of the EDU. |
| **5. Cancer Care** | **5.3a** | Engagement with WoS Boards to identify how GJUNH can support the lung biopsy service model.  Maintain delivery of the 31-day cancer target for lung services. |  | **Q3 Update**: 31-day data for Q3 not released at time of writing report - no breaches expected in Q3. As of 29/04/25, Performance in Q3 was 98.7% with 77 out of 78 patients treated within the standard.  Awaiting outcome of 5/7 proposal to SG to provide additional capacity including diagnostic imaging for Cancer.  **Q4 Update:** Two 31-day cancer breaches in Q4. Both relating to consultant capacity to undertake procedure. Still anticipated to meet 95% overall.  We have now received confirmation of funding of our 5/7 proposal in diagnostic imaging, and installation of a 3rd CT scanner is on track to provide additional imaging capacity for 25/26 and beyond.  No further progress on lung biopsy paper. |
| **9. Digital Services Innovation Adoption** | **9.1** | Implementation of Theatre Scheduling across 2 specialties  Endoscopy Reporting Deployed  Continued rollout of Scan for Safety  Rollout of the OpenEyes Ophthalmology EPR. |  | TrakCare go live scheduled 28th April which allows Theatre Scheduling and OpenEyes projects to progress.  ERS encountered further delay due to issues with integration on NSS side.  Scan For Safety rollout in CathLab underway with completion expected end of April. |

***Table 2: Q4 Amber Deliverables***

The remaining 8 deliverables which are on track, include one improvement from Amber in Quarter 3, detailed in Table 4. The Q4 deliverables assigned Green RAG status are set out in **Table 3** below:

|  |  |  |  |
| --- | --- | --- | --- |
| **Recovery Driver** | **NHS GJ Deliverable Reference** | **Deliverable** | **Q4 RAG** |
| **4. Planned Care** | **4.5b** | To achieve the planned care targets of day surgery and 23-hour surgery to increase activity and maximise single procedure lists. |  |
| **6. Health Inequalities and Population Health** | **6.1** | EQIA champions to be established within Circa 50% of hospital functions by 2024/25.  Development of future Board Equality Outcomes for the 2025-29 period. |  |
| **6. Health Inequalities and Population Health** | **6.2** | Continue to deliver the actions outlined in our Anchors Strategic Plan, focusing initiatives developed by Workforce, Estates and Procurement teams; and working in partnership with stakeholders on collaborative programmes. |  |
| **8. Workforce** | **8.4** | An implementation plan for eRostering in 2024/25 with a view to implementing across all services and professions by 31st March 2027. |  |
| **8. Workforce** | **8.8** | Creation of new 3 year Health & Wellbeing strategy and operationalising and bringing to life the new wellbeing zone. |  |
| **8. Workforce** | **8.9** | Under the banner of “safer staff, safer patients” we will deliver:  (1) A Listening Ear service;  (2) Weekly wellbeing activities in the Spiritual Care Centre (Mindfulness, Meditation and Breath in to the Weekend);  (3) Mindfulness Course (associated with the 5 ways of wellbeing model);  (4) Values Based Reflective Practice sessions,  (5) Collaboration with the Nursing Directorate to contribute to the caring behaviours audits and  (6) Education and training: Spiritual and Religious Care, Spiritual Care Assessment and Loss, Grief and Bereavement. |  |
| **9. Digital Services Innovation Adoption** | **9.2** | Compliance with NIS Directive  Deployment of national cyber security tooling |  |
| **9. Digital Services Innovation Adoption** | **9.3** | Delivery of Year 1 of the NHSGJ Digital Improvement Plan  Upgrade of key digital systems including TrakCare, LIMS and Clinical Portal  Development of Digital Champions Network  Rollout of M365 products |  |

***Table 3: Q4 Green Deliverables***

For completeness, the Q4 projections previously provided were reviewed to track *indicative vs actual* delivery progress. Although projected that the status of all 12 deliverables would remain unchanged at Q4 End, there has been one change as presented in **Table 4** below.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **RAG Status** | | **Q2 Position** | **Q3 Position** | **Indicative Q4 Position** | **Q4 Position** |
|  | Unlikely to complete on time / meet target | - | - | - | - |
|  | At risk - requires action | 1 | 5 | 5 | 4 |
|  | On track | 11 | 7 | 7 | 8 |
|  | Complete | - | - | - | - |
|  | **Total** | **12** | **12** | **12** | **12** |

**Table 4: Q4 Projected v Actual End Position**

Deliverable 9.3: “**Delivery of Year 1 of the GJNH Digital Improvement Plan; Upgrade of key digital systems including TrakCare, LIMS and Clinical Portal; Development of Digital Champions Network and Rollout of M365 products.”** has changed from Amber to Green RAG Status following achievement of planned milestones for the Digital Services Innovation Adoption.

1. **Overall Progress**

**Table 5** below provides a high-level overview of the overall progress for deliverables to date, including Q2 end position, Q3 projection, Q3 end position, Q4 projection and the Q4 end position:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Recovery Driver** | **NHS GJ Deliverable Reference** | **Deliverable** | **Q2 RAG** | **Indicative Q3 RAG** | **Q3 RAG** | **Indicative Q4 RAG** | **Q4 RAG** |
| 4. Planned Care | 4.5b | To achieve the planned care targets of day surgery and 23-hour surgery to increase activity and maximise single procedure lists. |  |  |  |  |  |
| 4. Planned Care | 4.9b | To maximise theatre utilisation using Discovery data as a benchmark and make improvements in line with the findings from this. |  |  |  |  |  |
| 5. Cancer Care | 5.2a | To achieve the 24/25 ADP target for Endoscopy |  |  |  |  |  |
| 5. Cancer Care | 5.3a | Engagement with WoS Boards to identify how GJUNH can support the lung biopsy service model.  Maintain delivery of the 31 day cancer target for lung services. |  |  |  |  |  |
| 6. Health Inequalities and Population Health | 6.1 | EQIA champions to be established within Circa 50% of hospital functions by 2024/25.  Development of future Board Equality Outcomes for the 2025-29 period. |  |  |  |  |  |
| 6. Health Inequalities and Population Health | 6.2 | Continue to deliver the actions outlined in our Anchors Strategic Plan, focusing initiatives developed by Workforce, Estates and Procurement teams; and working in partnership with stakeholders on collaborative programmes. |  |  |  |  |  |
| 8. Workforce | 8.4 | An implementation plan for eRostering in 2024/25 with a view to implementing across all services and professions by 31st March 2027. |  |  |  |  |  |
| 8. Workforce | 8.8 | Creation of new 3 year Health & Wellbeing strategy and operationalising and bringing to life the new wellbeing zone. |  |  |  |  |  |
| 8. Workforce | 8.9 | Under the banner of “safer staff, safer patients” we will deliver:  (1) A Listening Ear service;  (2) Weekly wellbeing activities in the Spiritual Care Centre (Mindfulness, Meditation and Breath in to the Weekend);  (3) Mindfulness Course (associated with the 5 ways of wellbeing model);  (4) Values Based Reflective Practice sessions,  (5) Collaboration with the Nursing Directorate to contribute to the caring behaviours audits and  (6) Education and training: Spiritual and Religious Care, Spiritual Care Assessment and Loss, Grief and Bereavement. |  |  |  |  |  |
| 9. Digital Services Innovation Adoption | 9.1 | Implementation of Theatre Scheduling across 2 specialties  Endoscopy Reporting Deployed  Continued rollout of Scan for Safety  Rollout of the OpenEyes Ophthalmology EPR. |  |  |  |  |  |
| 9. Digital Services Innovation Adoption | 9.2 | \* Compliance with NIS Directive  \* Deployment of national cyber security tooling. |  |  |  |  |  |
| 9. Digital Services Innovation Adoption | 9.3 | \*Delivery of Year 1 of the GJNH Digital Improvement Plan  \* Upgrade of key digital systems including TrakCare, LIMS and Clinical Portal  \* Development of Digital Champions Network  \* Rollout of M365 products. |  |  |  |  |  |

***Table 5: Overall Deliverable Progress***