

CfSD Update

Submission:	Annual Delivery Plan Q3	Report Author:	Russell Scott
Submission Date:	6 January 2026	Period Covered by Report:	Q3 2025/2026

Programme:	Modernising Patient Pathways		Total Workstreams:	7		
Objectives	Actions this Quarter	Planned Actions for Next Month	Workstreams RAG status:			
			Red	Amber	Green	Other
Driving transformational and sustainable change to improve planned care patient access and outcomes across NHS Scotland.	<ul style="list-style-type: none"> Over 144k appointments had been saved through the use of ACRT, and 58k patients have been placed on a PIR pathway. Approval of neurology factsheets for burning legs, cognitive symptoms, migraine aura and incidental MRO brain findings. Dermatology competency document endorsed by Transforming Roles Steering Group. This will enable role development and development of work based learning. Held national online Digital Dermatology training session with Health Boards. Held national pathway webinars for Dermatology and Neurology. 	<ul style="list-style-type: none"> SDGs for Critical Care, Dermatology, ENT, Gastroenterology, General Surgery, Neurology, Respiratory, Vascular. Digital Dermatology and Urology should to progress workplans. Start development of Hidradenitis and Post ICU rehabilitation national pathways. Will publish Recurrent UTI and post-menopausal bleeding pathways and neurology factsheets. Share results and outcomes of Patient Focussed Booking data capture pilot to test potential measure of PFB adoption within a speciality. Develop webpage for Dermatology nurse competency content. 			7	
			RAG notes:			
			<ul style="list-style-type: none"> All workstreams are green. 			

Programme:	National Elective Co ordination Unit		Total Workstreams:	6		
Objectives	Actions this Quarter	Planned Actions for Next Month	Workstreams RAG status:			
			Red	Amber	Green	Other
Support the development of a national elective co ordination unit, including the transition to an operational model, which will support Boards with their current planned care waiting lists.	<ul style="list-style-type: none"> National waiting list patient validation: 70k patients validated (year to date). National waiting list validation campaign finalised for 1 Board. Patient treatment capacity campaigns: 5k (year to date) patients treated across various specialities. Coordinated ongoing National Dermatology campaign across 3 Boards. Supported clinical triage for 1k dermatology patients. Worked with SG to establish permanent working arrangements for Diabetes Closed Loop team. 1.2k referrals received to date. 	<ul style="list-style-type: none"> Will undertake national waiting list validation in 2 Boards, treatment campaigns in 2 other Boards and travel campaigns in 2 Boards. Continue National Dermatology campaign in 3 more Boards. Implement Planned Care Waiting Times Framework to support 52wk patient waiting list. Engage and explore options with SG regarding priority Boards for the Dermatology campaign. Continue to work with SG to establish permanent working arrangements for Diabetes Closed Loop System. 	1		4	1
			RAG notes:			
			<ul style="list-style-type: none"> R Awaiting confirmation that DCLS Team can remain part of GJ for another 12 months, until have scoped out permanent base. O Work to develop integrated digital infrastructure currently paused due to staffing constraints. Other workstreams are green. 			

Programme:	National Unscheduled Care Improvement		Total Workstreams:		6	
Objectives	Actions this Quarter	Planned Actions for Next Month	Workstreams RAG status:			
			Red	Amber	Green	Other
Define best practice in key areas within Unscheduled Care (UC) and support Boards to improve the patient and staff experience and the timeliness and safety of patient care	<ul style="list-style-type: none"> Established weekly and monthly performance data submissions from Boards. Held individual and group meetings with Board Senior Responsible Officers for Unscheduled Care performance. Refreshed leverage points analysis measures to support automation of analysis. Community Urgent Care: collated survey results to assess and understand current pathways, highlighting alternatives to Emergency Dept admissions. Flow Navigation: scoped Future State strategy for Flow Navigation centres to improve efficiency. Front Door Medicine: scoped future work around Observational Medicine Units to enhance capacity. Optimising Flow: supported Boards with Whole System Operating Framework to standardise escalation measures. 	<ul style="list-style-type: none"> Will undertake clinical leadership visit in 1 Board. Finalise new leverage points analysis including updating current tool and refreshing the measures to support automation of the analysis. Support the development of SG 2026-27 planning guidance for unscheduled care. Community Urgent Care: develop palliative pathways project closure report. Flow Navigation: support Test of Change in 1 Board. Support 1 Board with Flow Navigation development plan. Front Door Medicine: will continue scoping around Observational Medicine Units working with Boards. Optimising Flow: will continue to provide support to Boards with implementation of Whole System Operating Framework. Test Emergency Dept benchmarking in 1 Board. 			5	1
			<ul style="list-style-type: none"> <input type="radio"/> Palliative pathways work being stepped down due to potential duplication and overlap with other whole systems working groups within SG. Other workstreams are green. 			

Programme:	Cancer Improvement and Earlier Diagnosis Programme		Total Workstreams:		8	
Objectives	Actions this Quarter	Planned Actions for Next Month	Workstreams RAG status:			
			Red	Amber	Green	Other
Reduce the proportion of later-stage cancers (stage III and IV) diagnosed over the next 10 years, with a focus on those from areas of deprivation.	<ul style="list-style-type: none"> Continued development of Cancer Action Plan 2026-2029. Continued to support Boards with backlog clearance and improvement plans. Supported Cancer Programme Delivery Board and associated improvement plans. Framework for Effective Cancer Management: self-evaluation tool launched. Supported Boards to complete evaluation. Liaised with stakeholders to scope next 2 diagnostic pathways (prostate & hepato-pancreato-biliary pathways) and engaged Scottish Cancer Network to support the work. New Scottish re-branded Gateway C education platform launched. 	<ul style="list-style-type: none"> Will continue further development of Cancer Action Plan 2026-2029. Continue supporting Boards with backlog clearance & improvement plans. Support the allocation and monitoring of SG planned-care funding slippage as required. Publish Framework for Effective Cancer Management toolkit to Right Decision Service and hold drop-in sessions to support Boards in implementing. Hold "Be the Early Bird2 public awareness roadshows targeting areas of deprivation. Launch new Detect Cancer Earlier website. Formally publish Annual Rapid Cancer Diagnosis Service annual report. 			8	
			<ul style="list-style-type: none"> All workstreams are green. 			

Programme:	National Endoscopy Programme		Total Workstreams:	4		
Objectives	Actions this Quarter	Planned Actions for Next Month	Workstreams RAG status:			
			Red	Amber	Green	Other
Supporting the ongoing delivery of the Endoscopy and Urology Diagnostic Recovery and Renewal Plan	<ul style="list-style-type: none"> Endoscopy Reporting System (ERS) deployment is paused due to ongoing system issues. Purchased product is not currently mature enough to go live. Worked with NSS and Central Legal Office to agree next steps. Monitored waiting times and provided feedback to Boards with improvement opportunities. Monitored performance against allocated funding. Supported SG with implementation of 52wk delivery plan. Refreshed qFIT guidance successfully uploaded to the Right Decision Service. Held engagement calls to encourage Boards to validate waiting lists using refreshed qFIT guidance. 	<ul style="list-style-type: none"> Continue discussions with NSS and CLO to support contract discussions with supplier of ERS. Monitor waiting times and provide feedback to Boards. Monitor performance against allocated funding. Continue to support SG with implementation of 52wk delivery plans. Collate endoscopy trajectories by Boards and prepare for submission to SG. Submit new upper endoscopy qFIT pathway to pathway sign-off group. Hold Endoscopy SDG meeting to progress workplan. Share draft national Endoscopy sustainability framework with clinical leads for consideration and feedback. 	1		3	
			<ul style="list-style-type: none"> R Boards are currently using an unsupported version of the Endoscopy Reporting System. CfSD are supporting NSS and Central Legal Office with contract discussions with supplier. Continuity plans and risks are being managed locally by Boards. Other workstreams are green. 			

Programme:	Innovation		Total Workstreams:	11		
Objectives	Actions this Quarter	Planned Actions for Next Month	Workstreams RAG status:			
			Red	Amber	Green	Other
Facilitate the rapid assessment of new technologies for potential national adoption and lead the accelerated implementation of approved technologies across NHS Scotland.	<ul style="list-style-type: none"> CYP2C19 Genotype testing: live in 2 Boards. Point-of-Care test of change live in 2 Boards. Neonatel Gentamicin point-of-care test: held go-live meeting with 1 board. Held kick-off meetings with all Phase 2 Boards. Diabetes Remission: held supplier initial meetings and commenced primary care engagement. Ambulatory ECG Patches: continued to develop procurement specification. Diabetes Prevention: SG funding letter received. Commenced recruitment for national implementation team. Chest X-Ray AI: developing national call script to use when contacting patients. Intelligent Liver Testing and Obstructive Sleep Apnoea: Strategic cases approved by Steering Group. 	<ul style="list-style-type: none"> Chest X-Ray AI: review benefits strategy with Scottish Health Technologies Group. Ensure pilot Board SOP aligns with national clinical pathway. Intelligent Liver Testing and Obstructive Sleep Apnoea: submit strategic cases to IDA to determine if projects will progress to next stage (development of value case). Submit horizon scanning report to the IDA Diabetes Prevention and Ambulatory ECG Patches: map clinical pathways and prepare for Commodity Advisory Panels. Diabetes Remission: complete design of national SCI-gateway referral protocol. CYP2C19 Genotype testing: hold pre go-live meetings with Phase 2 Boards. Neonatel Gentamicin point-of-care test: sign call-off contracts with 2 Boards. 		2	8	1
			<ul style="list-style-type: none"> A National PACS team need to focus on deployment of new PACS system and cannot fully support Chest X-Ray AI at this point. A Diabetes Remission: delays in completing information governance documentation. O Digital Dermatology workstream is now completed. Other workstreams are green. 			

Programme:	Green Healthcare Scotland		Total Workstreams:	7		
Objectives	Actions this Quarter	Planned Actions for Next Month	Workstreams RAG status:			
			Red	Amber	Green	Other
Improve and evidence environmental sustainability across NHS Scotland	<ul style="list-style-type: none"> Published reusable hover-mattresses (theatres) opportunity for change. Delivered 200 reusable surgical caps to Boards (for 200 staff across Scotland). Developed proposal for NHS Assure, CfSD and SG to undertake metering exercise to establish energy consumption and financial costs of 7-bar air and vacuum systems. Worked with NSS to develop data collection system to support expanded Programme. Held discussions with Nepal Health colleagues to explore comparator trial around laparoscopic cholecystectomy life cycle analysis. Changed messaging and branding from Green Theatres to Green Healthcare Scotland. 	<ul style="list-style-type: none"> Aim to release 4 opportunities for change to boards: incremental haemodialysis, national green endoscopy champion, dialysis canister recycling and 1:44 dialysis concentrate switch. Release Sustainability Education and Training action for adoption to Boards. Hold measurement forum with Boards and develop measurement progress report. Submit paper on Anaesthetic Gas Scavenging System (AGSS) to Computational Fluid Dynamics journal. Continue Life Cycle Analysis comparing high-income and low-income countries. Identify data to officially launch Green Healthcare Scotland. 		2	5	
			<ul style="list-style-type: none"> A Some Boards have not engaged with current cycle of measurement meetings. A Ongoing delays in progressing metering exercise. Unable to confirm start date with partner agencies. Other workstreams are green. 			

Programme:	Planned Care Programme		Total Workstreams:	19		
Objectives	Actions this Quarter	Planned Actions for Next Month	Workstreams RAG status:			
			Red	Amber	Green	Other
Enhance the delivery of planned care, by facilitating initiatives designed to improve demand and capacity, promote greater elective activity and address waiting times.	<ul style="list-style-type: none"> Waiting Times: continued support of SG's performance monitoring re: 52 week wait clearance reporting and analysis. National Treatment Centre: continued to monitor NTC capacity and performance. Allocated 26/27 capacity focussing on Boards with long waits. Supported Scan for Safety implementation with Boards. Supported implementation of National Orthopaedic Plan. Allocated additional Trauma and Orthopaedic funding to Boards. Continued roll out of Ophthalmology Electronic Patient Record (EPR) across West of Scotland. Worked with Boards to increase cataract activity via in-sourcing and waiting list initiatives supported by SG funding. 	<ul style="list-style-type: none"> Continue leading weekly meetings with Boards to focus on 52wk+ waits. Will support creation of summary report for 104-week support requests to Board Chief Executives (BCEs). Will work with Boards to ensure that SG funded initiatives are implemented & delivered. Continue to monitor and manage NTC capacity and performance. Continue implementation of National Orthopaedic Plan and development of osteoarthritis pathway. Continue to monitor implementation of Cataract Blueprint and delivery of Ophthalmology Electronic Patient Record Continue with imaging performance meetings with Boards, including monitoring National Imaging Plan progress. 		1	17	1
			<ul style="list-style-type: none"> A EPR software upgrade has required significant technical support, which has resulted in deployment being slower than planned. O Scottish Strategic Network for Diagnostics meetings have been paused pending Network review. Other workstreams are green. 			

Workstream RAG status: Definition			
Red	Amber	Green	Other
Workstreams shown as red have a significant risk to delivery that cannot be managed within existing resources. There is a likelihood that key elements of the work will not be achievable and may need to be amended.	Workstreams shown as amber have a risk to delivery, but this risk can be managed within existing CfSD resources. There is a need to take corrective action and/or agree necessary changes to the planned outcomes.	Workstreams shown as green are on track and are expected to be completed on time (or ahead of schedule) and will achieve the expected outcomes. Any issues are minor and readily correctable.	Some workstreams may have a different status. This includes workstreams which are completed, paused, or not yet started.