CfSD Assurance Statement

Meeting:	Annual Delivery Plan Q1	Executive Lead:	Katie Cuthbertson
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Part 1: Programme Team Updates

Modernising Patient Pathways

Total Workstreams: 7

Objective	Actions this Period
Develop and embed sustainable improvements by redesigning models of care and sharing best practice	• To date, over **32k** appointments had been saved through the use of ACRT, and **24k** patients have been placed on a PIR pathway. • Held **14** SDG meetings during Q1, including Dermatology, Gynaecology, Urology, Cataract, Critical Care and Neurology. • 3 new pathways (Iron Deficiency Anaemia, Hand Osteoarthritis and Hidradenitis Suppurativa) formally approved and being prepared for publication for Boards to adopt. • There is a delay to the Digital Dermatology app. upgrade, and challenges around receiving reporting data from SCI gateway. • CfSD Waiting Times and Theatre Data Dashboards have been successfully launched on the NHS Scotland Seer 2 platform. • 2 Board site visits have been carried out in support Theatre Redesign. Formal visit reports are currently being drafted.

Workstream RAG status:

Red	Amber	Green	Other
	1	6	

RAG notes:

- A **Digital Dermatology:** delays to app upgrade, and issues around provision of reporting data.
- G Other workstreams are green.

National Elective Co-ordination Unit

Total Workstreams: 6

Objective	Actions this Period
Work with Boards to match demand with capacity and maximise capacity utilisation.	• To date, have carried out admin validation for over **13k** patients. • Over **700** patients to date have been treated through bespoke cross-Board campaigns. • Have successfully completed Scottish Government National Dermatology Campaign. • Met with 5 Boards to scope potential admin and clinical validation and travel campaigns to support the Planned Care Waiting Times Framework. • Currently undertaking 2 tests of change with Boards around Endoscopy and reducing Did Not Attends (DNAs). • Over **40** patients have been onboarded to the diabetes closed loop system (CLS) programme.

Workstream RAG status:

Red	Amber	Green	Other
		6	

RAG notes:

- G All workstreams are green.

National Unscheduled Care Improvement		Total Workstreams:			5
Objective	**Actions this Period**	**Workstream RAG status:**			
Defines best practice for unscheduled care, including the timeliness and safety of patient care and improving the patient experience.	• Supported Boards to complete Unscheduled Care plans for 2026/27. 3 Boards have not yet submitted finalised plans. • Held regular monthly performance calls with Boards. • Same Day Emergency Care (SDEC) and General Internal Medicine (GIM) guiding principles have both been approved and are being prepared for publication. • Established new Emergency Department Observation Unit (EDOU) expert working group. Initial work will involve developing and agreeing operational definitions to guide future work. • Carrying out discovery and scoping work around Community Access to inform future planning. • New Flow Navigation Centre (FNC) dashboard and Unscheduled Care dashboard app. were successfully launched. Over **500** users have accessed the dashboard app.	**Red**	**Amber**	**Green**	**Other**
				5	
		RAG notes:			
		• G All workstreams are green.			

Cancer Improvement & Earlier Diagnosis		Total Workstreams:			6
Objective	**Actions this Period**	**Workstream RAG status:**			
Diagnose cancer earlier and faster, with a particular focus on reducing health inequalities.	• Developed draft prostate & hepato-pancreato-biliary (HPB) pathways. Currently carrying out engagement with third sector and other key stakeholders to seek feedback on draft pathways. • Carried out survey on Scottish Referral Guidelines for Suspected Cancer. Over half of secondary care respondents found the guidelines useful. • Ongoing work with SG and Scottish Primary Care Cancer Group to develop "Isla's Principles" to support timely referrals and effective communication between primary and secondary care. • Started to develop next phase of the "Early Bird" public awareness campaign. Carried out search engine optimisation work. • GatewayC education platform: over one-third of Scottish GPs have accessed and used the platform.	**Red**	**Amber**	**Green**	**Other**
				6	
		RAG notes:			
		• G All workstreams are green.			

National Endoscopy Programme		Total Workstreams:			5
Objective	**Actions this Period**	**Workstream RAG status:**			
Develop a Framework for Endoscopy, which will help Boards to improve services in a structured way	• Developed first draft of the Sustainable Endoscopy Services Framework. • Held Endoscopy Speciality Delivery Group meeting, which discussed the new endoscopy framework. SDG members will provide feedback and comments next period. • Held monthly calls with Boards, which discussed National Treatment Centre allocations and the non-medical endoscopy training courses. • Ongoing work to develop data dashboard to help monitor Board performance and delivery. • Public Services Delivery Scotland have contacted the endoscopy reporting system supplier to start exit contract discussions	**Red**	**Amber**	**Green**	**Other**
		1		4	
		RAG notes:			
		• R **Endoscopy Reporting System:** Boards are currently using an unsupported platform, New platform is not ready to go live. Associated risks being managed locally by Boards. • G Other workstreams are green.			

Innovation Programme		Total Workstreams:			10
Objective	**Actions this Period**	**Workstream RAG status:**			
Facilitate the rapid assessment of new technologies and lead the implementation of technologies across NHS Scotland	• **Diabetes Remission:** 9 Health Boards now live. Remaining Health Boards delayed due to local digital scheduling and outstanding IG approvals. • **Pharmacogenetics Gentamicin POCT:** Phase 2 of implementation is complete. Phase 3 is on track. Over **1400** tests have now been performed to date. • **Pharmacogentics CYP2C19:** 2 Boards have not gone live. Over **1900** patients have been tested to date. • **Diabetes Prevention:** Commodity Advisory Panel Established. Currently developing procurement specification. Original timeline is unlikely to be achieved. Have made request to the Innovation Design Authority (IDA) to revise the timelines. • **Ambulatory ECG Patches:** Currently developing procurement specification. Have held first kick-off meetings with Boards. • **Chest X-ray AI (CXR AI):** Value Case has been submitted to IDA for approval and shared with NHSGJ Executive Team	**Red**	**Amber**	**Green**	**Other**
			3	7	
		RAG notes:			
		• A **Diabetes Remission:** 5 Boards are still to go live. Escalated to relevant Board Chief Executives • A **Pharmacogentics CYP2C19:** 2 Boards are still to go live. Have escalated to relevant Board Chief Executives • A **Diabetes Prevention:** have submitted change request to IDA to revise timeline. • G Other workstreams are green.			

Green Healthcare Scotland		Total Workstreams:			6
Objective	**Actions this Period**	**Workstream RAG status:**			
Embed environmental sustainability across NHS Scotland by driving improvement and innovation initiatives.	• Have agreed **4** new carbon saving actions: alternative fluid collection, switch off of HVACs, laparoscopic ports and use of linen in renal units. Working with GJ comms team to prepare for publication. • Published paper on patient miles and 2 case studies on CfSD website. • Working with Royal College of Emergency Medicine to support Emergency Departments working towards Green ED accreditation. • Paper on Anaesthetic Gas Scavenging System now published in the Journal of Anaesthesia and Analgesia. Paper on use of 7-bar air has been approved for publication. • Working with comms team to redesign Green Healthcare Scotland website. • Held measurement meetings with most Boards. 4 Boards have not engaged with the meetings.	**Red**	**Amber**	**Green**	**Other**
			1	5	
		RAG notes:			
		• A **Board Measurement Meetings:** not all Boards are participating in the measurement meetings. There are also issues around the participation of appropriate decision-makers and other stakeholders during the meetings. • G Other workstreams are green.			

National Planned Care Programme		Total Workstreams:			18
Objective	**Actions this Period**	**Workstream RAG status:**			
Enhance the delivery of planned care, by facilitating initiatives designed to improve capacity, promote greater elective activity and address waiting times.	• Held regular meetings with Boards and NTCs to understand challenges and issues on national waiting times and patient lists. • Worked with SG to understand future sub-national requirements and arrangements. • **Orthopaedics:** Ongoing work to develop arthroplasty consensus statement, national guidance for post op care and venous thromboembolism, and osteoarthritis hip & knee pathway. • **Eyecare:** continued to onboard glaucoma patients to the electronic patient record. Working with SG and PSD Scotland to expedite Board roll-out of EPR. • **Eyecare:** developing training resources and comms to support dissemination of new referral templates. • **Radiology:** met with all Boards to review performance. NTC MRI utilisation was **107%** against target. Mobile activity funding met planned activity levels. • **Radiology:** there is a lack of identified funding for further improvement initiatives.	**Red**	**Amber**	**Green**	**Other**
		1	2	15	
		RAG notes:			
		• R **Radiology**: lack of identified funding means; overall plan to achieve March 2027 waiting times target is at risk. • A **Sub-national structure:** there are ongoing uncertainties around this work, and no formal commission from the SG has been received. • A **Ophthalmic Electronic Patient Record:** national roll-out is behind schedule. • G Other workstreams are green.			

Part 2: Key Strategic Risks and Issues

Issues			
Ref	**Description**	**Mitigation**	**Score**
I10	There is an issue in regard to not having confirmed baselined recurring (annual) funding for Core CfSD Workforce Costs by the Scottish Government (Ref (B004/22 on Corporate Register)	Holding regular engagement with SG to seek obtaining letter of comfort around budget/finances in support of CfSD commission. GJ Finance team have conducted baseline funding assessment for Core CfSD staffing. Advocate for Multi-year Funding. Demonstrate Value and Impact.	Med

Risks			
Ref	**Description**	**Management / Mitigation**	**Score**
NEW	New Commissioning Model There is a risk that due to the new commissioning route via Sub National planning structures, this will result in a lack of clarity for CfSD's remit, purpose, relationship with SG and Boards, as well as potential delays to finalising core reoccurring budget, other commissions and staff nervousness around the future of the CfSD organisation.	) Develop and issue communication to all CfSD staff outlining new commissioning model. 2) Provide Frequently Asked Questions to support CfSD staff awareness of situation as it develops. 3) Hold regular engagement and discussions with SRO (East Sub National) 4) Confirm with SG the required support for transitioning to new commissioning route	TBA