

## **NHS 24**

### **Approved Minutes of the Meeting of the NHS 24 Planning and Performance Committee held on 11 November 2024 at 10.00am via Teams**

#### **PRESENT**

Mr David Howe (in the Chair)

Mrs Anne Gibson  
Dr Martin Cheyne  
Ms Amina Khan  
Mr Alan Webb

#### **IN ATTENDANCE**

Ms Suzy Aspley  
Dr Ron Cook  
Ms Geraldine Mathew  
Mr Kevin McMahon  
Ms AM Gallacher  
Ms Steph Phillips  
Mr Jim Miller  
Mr John Gebbie  
Ms Joanne Edwards  
Dr Jacqui Hepburn  
Mr Paul McLaughlin  
Mr Joseph Markey  
Ms Tracy McMillan (Minute)

#### **1.0 WELCOME, APOLOGIES AND INTRODUCTIONS**

The Chair welcomed members to the 11 November 2024 meeting of the NHS 24 Planning and Performance Committee. There were no apologies to note.

The Chair asked members if the meeting could be recorded via Teams. Members were in agreement to the request.

#### **NOTED**

#### **2.0 DECLARATIONS OF INTEREST**

The Chair invited members to declare any interests regarding the items being discussed. There were no declarations made.

#### **NOTED**

#### **3.0 MINUTES OF PREVIOUS MEETING OF 08 AUGUST 2024**

The Committee considered the minute of the previous meeting held on 08 August 2024 [Paper No. Item 3.0]. The minute was accepted and approved as a correct record.

#### **APPROVED**

#### **4.0 MATTERS ARISING**

There were no matters arising raised.

#### **4.B ROLLING ACTIONS LOG**

Mr Howe referred members to the above document [Paper No. Item 4.0a] and asked if they were content to approve the recommendations against each action. Members confirmed approval.

Regarding Action 392, Mr McMahon advised this would be discussed at Item 6.2 on the agenda.

#### **APPROVED**

#### **5.0 STRATEGY**

##### **5.1 CORPORATE DELIVERY PLAN**

Ms Phillips introduced this item and referred members to the document [Paper No. Item 5.1]. She advised the report had been to the NHS 24 Board and was at the meeting today for assurance. It was noted that the update was an outcome of the six month review the EMT had undertaken and that Appendix 2 demonstrated the changes that had been agreed for the remainder of the year.

At this point Dr Cheyne asked if it was known why the mid-year review meetings with Scottish Government (SG) and the quarterly meetings with Chair and Chief Executives and SG no longer took place. It was noted that bi-annual engagement sessions with the Chief Operating Officer and Sponsor Team has been established. Following discussion it was agreed Mr Miller would contact Scottish Government and request the aforementioned meetings (or similar) be reinstated.

With regard to the work pertaining to anti-racism, Ms Khan offered her personal support towards this work.. Ms Khan then referenced deliverable five in the paper (joint working with SAS and NES) and asked if there was a general idea concerning timelines for the completion of the activity.

Ms Phillips and Ms Gallacher confirmed that a decision had been made at the NHS 24/SAS Joint Collaboration Board that this work would be undertaken and aligned at the time of the rollout of the new technology platform. This is also recorded as part of the delivery plan for the DTP.

Ms Khan referred to Action 5.2a concerning joint working to develop comprehensive data sets for the end-to-end patient journey and asked for further information around next steps and further activity on this.

Ms Phillips confirmed work had been taking place to explore how NHS 24 could evolve and develop data, particularly linking in with SAS and PHS. Noted that joint workshops had taken place and PHS have undertaken some in depth analysis in terms of the flow of patients and callers to NHS 24. Regarding next steps, it was noted that a Data Group has been put in place and they will use tools like the Unscheduled Care Data Mart to develop this work further. Dr Cook confirmed that this work will be included in the service transformation work.

Members thanked Ms Phillips for the useful update provided.

**Action: Mr Miller**

#### **ASSURED**

##### **5.2 WINTER CHECKLIST**

Ms Edwards introduced the above paper to members [Paper No. Item 5.2]. She explained that the checklist was an annual request from SG and is mainly targeted at territorial health boards. NHS 24 submitted its winter checklist template on 16 October 2024. Following submission, SG responded immediately advising they were satisfied with the submission.

Ms Edwards advised NHS 24 had been invited to a session taking place at the Centre for Sustainable Delivery, involving all Health Boards with regard to winter planning on 14 November 2024. NHS 24 has been invited to share its winter plan and Patrick Rafferty and Julie Ronald will attend on behalf of NHS 24. Ms Edwards will feedback any comments/observations from that discussion.

Members queried why the winter planning session noted above was taking place so late in the year and asked if NHS 24 had received any indication with regard to input expected and what the potential impact would be. Ms Edwards confirmed no intelligence regarding this had been received from Public Health Scotland. She went on to say if there was any relevant output from the session on 14 November, she would share with the Committee.

It was noted a deep dive session had been scheduled with EMT on Winter Planning for 07 November 2024 to provide EMT with assurance as regards NHS 24 plans and preparedness.

Members concerns were noted with regard to the risks NHS 24 staff were being exposed to by not being offered the COVID vaccine for another year. It was agreed this issue would be raised with SG colleagues at the forthcoming Annual Review on 27 November 2024.

Conversation ensued with regard to operational details and Ms Edwards agreed to discuss further with Mr Markey.

When asked about the flu season situation in Australia, Dr Cook confirmed numbers had increased by 50% when compared to the same period for 2023.

The Chair thanked Ms Edwards for an informative update.

**Action: Ms Edwards**

**Action: Mr Miller**

**ASSURED**

### **5.3 COMMUNICATIONS DELIVERY PLAN**

Ms Aspley referred members to the above plan [Paper No. Item 5.3] and highlighted the following points to members.

The NHS 24 Spotlight Awards 2024 had been very successful and were due to complete in Aberdeen and Dundee on 14 November 2024. There had been over 500 nominations for the Awards this year. The Comms Team are undertaking a significant amount of work relating to the Digital Transformation Programme, working across all workstreams. Regarding the annual review, it was noted that the Comms Team are working closely with staff in the TSPP Directorate to develop the programme for the day. Ms Aspley referenced the Seasonal Health Campaign and advised the Committee that this would be launched pre-festive.

Ms Aspley was asked how the impact of marketing was measured. She advised that information is shared via all communication channels, Team Talk, the internet etc and that information is shared as soon as it becomes available. She noted, however, that measuring the impact of that is difficult but work is underway and feedback from stakeholders in this area will be important. She went on to say that as this work is progressed, the Committee will be presented with more impact measurement.

The Committee expressed congratulations to the Comms Team on the Herald Award it had recently received, noting it to be a great commendation for the work that the team undertakes.

Members thanks Ms Aspley for a useful, informative update.

**ASSURED**

### **5.4 CLIMATE EMERGENCY AND SUSTAINABILITY ANNUAL REPORT**

The Committee considered the paper 'Climate Emergency and Sustainability Programme Annual Report' [Paper No.5.4] presented by Dr Ron Cook, Medical Director.

Dr Cook highlighted the main points from the paper, which included the fact that across the entire estate, in terms of gas, water and electricity waste, 30% less CO2 is omitted compared to eight years ago. There is ongoing attainment of travel mileage targets. NHS 24 is also increasing its ability to monitor financial/energy usage across the estate involving direct initiatives, e.g., by changing the method for confidential waste, financial and environmental benefits had been gained.

When asked if NHS 24 would reach net zero targets for emissions it was noted that this would likely be achieved by using renewable energy, transitioning onto the national tariffs, and utilising alternative greener energy sources, for example, solar panels.

With regard to the Climate Emergency and Sustainability Learning Modules, Dr Cook will arrange to provide the Committee with an update pertaining to staff uptake of the learning.

In summary, the Committee were content to note the Climate Emergency and Sustainability Programme (CESP) Annual Report and were assured by the information provided.

**Action: Dr Cook**

### **ASSURED**

#### **5.5 AUDIT GENERAL SCOTLAND AND ACCOUNTS COMMISSION JOINT REPORT - TACKLING DIGITAL EXCLUSION**

The Committee considered the above paper [Paper No.5.5] presented by Ms Steph Phillips, Director of Transformation, Strategy, Planning & Performance. She stated that an initial review had been undertaken within NHS 24 and referred members to Item 3.6 in the cover paper which clearly detailed the actions that had been undertaken to acknowledge work already completed and/or embedded into NHS 24's wider equality, inclusion and rights approach. It was noted that the purpose of the item was to provide the Committee with reassurance that this is being dealt with via the Digital and Service Transformation Programmes.

Dr Hepburn confirmed that there will be an organisational wide digital training plan. This will commence with the CC/CRM training and then a wider rollout will take place. This will support the Workforce requirements. It was noted an EQIA had been carried out across the CC/CRM and that accessibility had been factored into the requirements specification within the procurement process for the CC/CRM system.

Ms Phillips advised that two significant pieces of user research had been undertaken. One was in terms of people's experience in accessing 111 and how they would wish to access/use digital services and the other was in relation to the strategic review of NHS inform, which had provided excellent insights as to why and when people want to use digital channels.

It was noted that Committee stated it would be useful to receive a "map" of accessibility to the NHS 24 digital channels. This would demonstrate who was using the services and from where. Dr Hepburn advised a paper would be presented to Committee in February 2025 which would detail nine strategic benefits and therefore contain information relating to a "map" for access given that one of the benefits identified is improved patient access. However, Ms Phillips stated it would be possible to pull together a baseline for demographics of current figures, and although the information will be limited at this point in time, once the new data warehouse is in place the quality of data available will improve.

The Chair thanked Ms Phillips for the update. Members found the report to be extremely informative.

**Action: Ms Phillips/Dr Hepburn**

### **NOTED FOR AWARENESS**

#### **5.6 CC/CRM IMPLEMENTATION PLAN GOVERNANCE**

Ms Gallacher referred to the above paper [Paper No Item 5.6] and advised it was presented to the Committee for awareness, detailing how the CC/CRM implementation plan will be governed within DTP. She referred members to the Programme Governance Schedule within the cover paper which related to items that will be submitted for

approval and went on to reference the Governance Framework that will underpin the management of projects within the DTP.

Ms Gallacher directed members to Item 3.3.1 in the document which described Progression Management of activities through the programme. She described this in detail for members. She concluded by advising the Committee that the paper would give Committee information about how the governance framework will work through all activities.

Members noted the timelines to be very detailed and questioned if contingency plans were in place should said timelines not be met. Ms Gallacher confirmed that this was managed effectively with flexibility built into the schedule.

As part of the NHS 24 Culture and Engagement work Dr Hepburn advised a session has been scheduled for Coforge staff, at their request, to be introduced to NHS 24's culture and values.

Committee thanked Ms Gallacher for a useful and informative report.

**Action: Dr Hepburn**

### **NOTED FOR AWARENESS**

#### **6.0 QUALITY AND PERFORMANCE STANDING ITEMS**

##### **6.1 PLANNING AND PERFORMANCE RISK MANAGEMENT UPDATE**

The Committee considered the paper 'Risk Management Update' [Paper No.6.1] presented by Mr Kevin McMahon, Head of Risk and Resilience. Mr McMahon noted that there was 32 Planning and Performance risks in total. Six are new risks and seven had been closed. Mr McMahon highlighted the new risk that NHS 24 does not capitalise on the financial opportunities associated with the Estates Strategy. It was also noted the risk around team alignment had been discussed at the Staff Governance Committee and the Breathing Space risk had been discussed at Clinical Governance Committee. The final risk highlighted, which was a closed risk, was in terms of the risks associated with financial savings and efficiency plans, and it was noted that this would be discussed at Audit and Risk Committee in connection with the financial plan assurance.

Concerning the recent failure with the Sunderland Data Centre and the back-up generator the Committee asked if resilience plans were in place to manage such risks. Mr Gebbie explained the failure had been due to a break in the link between the generator and the emergency generator. Calls have taken place and it has been agreed additional generator capacity will be put in place. Ms Kane confirmed continuous testing was now in place.

The Chair thanked Mr McMahon for the update and the Committee were content to recommend the risks for onward presentation to the NHS 24 Board.

### **ASSURED**

#### **6.2 ORGANISATIONAL RESILIENCE**

The Committee considered the paper 'Organisational Resilience Update' [Paper No. 6.2] presented by Mr Kevin McMahon. He noted that the purpose of the paper was to assure the Committee on resilience activity that underpins the delivery and safe effective care by NHS 24.

It was noted a threat based training exercise had taken place in September 2024 to test the effectiveness of the Cyber Incident Response Plan. Key findings from the exercise, under item 3.2 in the report, will be monitored by the Resilience Planning Group.

As part of winter planning, it was noted that NHS 24 and SAS had undertaken a joint exercise to share information on development activity across both organisations. It was further noted that in April 2024 the Scottish Government ran an exercise, "Operation Safe Hands", the purpose of which was to test the Mass Casualties Plan. From this exercise NHS 24 was assured its response to a national incident was effective. The report from Scottish Government is still awaited.

The Chair thanked Mr McMahon for an informative update, and the Committee took assurance from the report.

**ASSURED**

**6.3 CORPORATE PERFORMANCE REPORT**

The Committee considered the paper 'Corporate Performance Report – September 2024' [Paper No. Item 6.3] presented by Mr Paul McLaughlin, Head of Corporate Performance. He noted the overall call demand for September, was within forecast variance and very much at pre COVID levels. Regarding the Virtual Queue it was noted this represented 15% of overall call demand. Time to access challenges remain and attendance fell to a six month low.

Regarding secondary care grouping, it was noted this level remained at its highest. 999 outcomes have increased to their highest level both as a percentage and volume. Investigations and call listening are underway to understand the increasing trend. Dr Cook confirmed that this is being jointly reviewed between NHS 24 and SAS to try and understand the rationale for the increase in numbers.

It was noted that there appeared to be a downward trend in the Patient Experience Chart (slide 5 of the CPR), Mr McLaughlin advised that there was a significantly higher number of responses to the SMS survey that the previous postal survey, however, he would monitor this and Committee will review over subsequent reports.

The Chair thanked Mr McLaughlin for the report and invited comments and questions from members.

**Action: Mr McLaughlin**

The Committee were content to note the report and were assured by the information provided regarding the quality and performance of services for the period to 30 September 2024.

**NOTED**

**6.4 FINANCIAL PERFORMANCE REPORT**

The Committee considered the paper 'Finance Performance Report – M06' [Paper No Item 6.4] presented by Mr Damien Snedden, Deputy Director of Finance. Mr Snedden noted that the NHS 24 savings plan is on target for the year. He went on to say that since the paper had been published, £5.4m recurring for Agenda for Change pay award had been received. It was noted that the year to date underspend was £30k.

With regard to the additional 20 clinical staff that NHS 24 recruited, Mr Snedden confirmed these costs had been built into the forecast and workforce remained within establishment.

The Chair thanked Mr Snedden for the report.

The Committee were content to note the Month 6 Finance Report and the financial position of NHS 24 as at September 2024.

**NOTED AND ASSURED**

**6.5 ESTATES AND FACILITIES REPORT**

The Committee considered the paper 'Estates and Facilities Report' [Paper No Item 6.5] presented by Ms Lynne Kane, Head of Estates and Facilities. Ms Kane provided an overview of the report and highlighted the following. The long standing issue with the generator at Lumina has now been resolved. Discussions had been taking place with NHS 24, NHS NES and the building landlord at Forest Grove House to agree a door entry system to satisfy all occupants – a preferred option has now been agreed. The West of Scotland Regional Planning Team had moved into Lumina...

With regard to issues at Forest Grove House at shift change periods and lack of space, it was noted that this was being handled well and alternative spaces, eg meeting rooms, were being utilised.

The Chair thanked Ms Kane for the report.

The Committee were content to note the report and were assured by the information provided that significant work continued across estates and facilities.

**NOTED AND ASSURED**

**6.6 INFORMATION GOVERNANCE AND SECURITY REPORT**

The Committee considered the paper 'Information Governance and Security Q2 Report 2024/25' [Paper No Item 6.6] presented by Ms Ann-Marie Gallacher Chief Information Officer. Ms Gallacher provided an overview of the key points within the report including an increase in the number of Data Subject Access and Freedom of Information requests. She went on to say the results of the NIS-R 2024 Review Audit were now available, and NHS 24 had performed extremely well. It was noted that due to the completion of the two cyber security exercises, two audit points had been closed off. Regarding the Safe Information Handling and Staying Safe Online learning modules, Ms Gallacher reported that NHS 24 was sitting at a 90% completion rate for both. Finally it was noted that there had been no reportable incidents for NHS 24 for the period Q2.

The Chair thanked Ms Gallacher for the update.

The Committee were content to note the report and were assured by the information provided that work continued in relation to information governance and security.

**NOTED AND ASSURED**

**6.7 ANNUAL COMMITTEE SELF EFFECTIVENESS REVIEW: ACTION PLAN**

The Committee considered the paper 'Planning & Performance Committee Annual Committee Self Effectiveness Survey: Action Plan' [Paper No Item 6.7] presented by Ms Geraldine Mathew, Board Secretary. It was noted that the Self Effectiveness Survey had taken place in July 2024 and the results had been presented to PPC in August. The purpose of the Action Plan was to highlight and focus on key areas for improvement and it had been tabled at this PPC meeting for approval.

The Committee were content to approve the Action Plan. Ms Mathew will arrange for the PPC Action Plan to be submitted to the Integrated Governance Committee.

**Action: Ms Geraldine Mathew**

**APPROVED**

**6.8 INTERNAL AUDIT – PERFORMANCE MONITORING/ADP**

The Committee considered the paper 'Internal Audit – Performance Monitoring/ADP' [Paper No Item 6.8] presented by Ms Steph Phillips, Director, Transformation, Strategy, Planning and Performance. She advised it had been brought to PPC for noting and went on to say that it had been a very positive report and all actions had been progressed. Noted that the report had previously been submitted to Audit and Risk Committee.

The Committee thanked Ms Phillips for the update.

**NOTED**

**7.0 COMMITTEE WORKPLAN, ACTION LOG, TERMS OF REFERENCE & COMMITTEE HIGHLIGHTS**

**7.1 COMMITTEE WORKPLAN**

**7.2 COMMITTEE MEETING DATES**

The above items were taken jointly and Committee were asked if they were content to approve the Committee Workplan and the Committee meeting dates for 2025/26.

Members approved both items.

**APPROVED**

**7.3 COMMITTEE HIGHLIGHTS FOR THE BOARD**

Mr Howe advised he would summarise the main points from the meeting today and produce the above report for the Board meeting on 19 December 2024.

**NOTED AND APPROVED**

**7.4 DATE AND TIME OF NEXT MEETING**

The next meeting of the Planning and Performance Committee will take place on 10 February 2025 at 10.00 am to 12 noon in the Board Room, Lumina Building.

**PRIVATE SECTION (not recorded)**

**9.1 ESTATES SUSTAINABILITY PLAN**

Mr Gebbie introduced the above paper [Paper No Item 9.1] and requested that the paper be kept confidential. It was noted that the Estates Strategy had last been updated in 2020. He discussed the paper with members and advised notice would be served to relevant landlord in December 2024. Staff would be made aware of this decision on 13<sup>th</sup> November. Communications would be circulated regularly to staff as the relocation progresses.

Mr Gebbie assured Committee that staff would be involved in estates changes at Cardonald. It was highlighted that staff health and wellbeing would remain a key factor throughout the process.

With regard to the Dundee estate, it was noted that due to concern over the change of use of building that options were being scoped in advance of the lease break. NHS 24 had contacted Dundee Council to review potential alternative accommodation.

Dr Hepburn noted the work of the Digital Transformation Programme (DTP) which aimed to increase hybrid working, which could reduce the overall estate requirements of the organisation.

Members considered the paper provided all relevant detail and gave assurance that options were being fully considered.

In summary, the Committee was content to note the Estates Sustainability Plan Update and was assured.

**ASSURED**