

**NHS 24
BOARD MEETING
24 APRIL 2025
ITEM NO. 7
FOR ASSURANCE**

EXECUTIVE REPORT TO THE NHS 24 BOARD

Executive Sponsor:

Mr Jim Miller, Chief Executive Officer

Purpose:

This paper provides an overview of progress on the high-level activity associated with the delivery of the NHS 24 2025/26 Strategic Priorities and the NHS 24 2023-2028 Corporate Strategy.

1. INTRODUCTION

1.1 This report provides updates against the agreed strategic priorities from our 2023-2028 Strategy.

2. DELIVERING SUSTAINABLE, HIGH-QUALITY SERVICES

2.1 Supporting the Delivery of Urgent and Unscheduled Care

2.1.1 The Advanced Nurse Practitioner (ANP) Video Consultation Test of Change (ToC)

The Video Consultation ToC with Advanced Nurse Practitioners conducting video assessments for children, aged between 2-12 years, presenting with winter illnesses, has now concluded. Initial feedback from Call Handlers and ANPs has been positive, and early results indicate a significant reduction in 999 referrals for young children. A review paper including Phase 2 recommendations will be submitted to the Medical Director, Director of Service Delivery and Director of Nursing and Care by the end of April, this alongside analysis of the results of the initial trial will guide the next stage with potential extension of patient groups, clinical conditions and staff involved. A poster presentation describing the project has been submitted to the 2025 NHS Scotland event.

2.1.2 NHS Lanarkshire FNC + Collaboration

Prof-to-Prof access to the NHS Lanarkshire Flow Navigation Centre (FNC), for referrals of patients being advised to attend A&E directly, commenced in early March. This mirrors existing arrangements with NHS Tayside and planned access to the SAS Integrated Clinical Hub for certain 999 referrals. As a first stage, this has been operating on weekdays from 0800 to 2000. Initial data analysis is planned for

after the first month of operations and the collaboration with NHS Lanarkshire has been submitted for a joint parallel session at the forthcoming NHS Scotland event.

2.2 Delivering Enhanced ICT & Digital Capability

2.2.1 Testing Shared Decision-Making Measures in the NHS 24 Patient Experience Survey

As part of NHS 24's commitment to delivering person-centred care in line with Realistic Medicine, we will be testing a set of validated survey questions focused on shared decision-making (SDM) using the collaboRATE tool. The questions will be incorporated into the 111 Patient Experience Survey within the Flow Navigation Centre (FNC) pathway and are designed to assess whether callers feel listened to, understood, and involved in decisions about their care. This test will help determine the feasibility and value of routinely measuring Shared Decision-making (SDM) across our services, SDM in healthcare is a collaborative process where patients and healthcare professionals work together to choose the best course of treatment or care. It involves a discussion of the available options, their potential benefits and risks, and the patient's individual preferences, values, and goals.

2.2.2 Review of System Keywords and Endpoints

The Decision Support Endpoints and Outcomes Workstream has continued to undertake staff engagement to inform further refinement of questions. Baby risk assessment revisions have been reviewed and approved at the Clinical Change Governance Group and liaison with SAS to ensure alignment with 999 endpoints. The changes will be evaluated to assess impact. Learning has been applied and replicated across the risk assessments for children and adults in April 2025.

The Baby Risk Assessment itself is complete, the next steps to agree alignment and clinical sign-off with SAS took place week commencing 14 April 2025. In parallel the Child and Adult risk assessments have been completed, and engagement is underway with SAS and partner boards. Once agreed Arezzo can make necessary changes. A time scale of end of May 2025 had been suggested as there is a dependency on external partners, clinical development team and Arezzo updates. An additional six keywords were added to Advise & Refer protocols in April 2025 following approval by the Clinical Change Governance Group.

Additionally, following the success of the revised Chest Pain pathway, a review of the top ten key words that have interim endpoints and do not reflect the current operating model will be assessed and recommended endpoints identified to assist clinical decision making and identify potential endpoints for Call Handlers which couldn't require Clinical Supervision. Aim for end of June.

2.2.3 Consistent, Efficient and Effective Triage

The Consistent, Efficient and Effective Triage workstream is supporting the next cohort of staff which includes new starts and those identified with high average handling times. There is a focused effort to improve performance within the in-hours period with a time-in motion study during this period planned to further

assess the reasons for calls. Accompanying this work is the development of standards for specific call types and endpoints, this will enable progress towards organisational standards for calls to support the improvement in the quality of clinical triage and support a better patient journey time and experience.

What has been achieved?

- Right Care Right Place training rollout is complete to SCNs and evaluated.
- Dashboards created and rolled out for call outcomes, endpoints & wrap, to help support focused coaching. SCNs are utilising the dashboard.
- Cohort 1 Coaching October to December - A comparison of KPIs for the staff included within Cohort 1 showed a 1 minute 1 second improvement in average talk time, a 6 second improvement in wrap and 1 minute 7 second improvement in AHT. Clinical Supervisors have feedback, "The levelling and coaching sessions I received helped improve my confidence in triage" 9.2 out of 10.
- Cohort 2 January to March – A comparison of KPIs for the staff included within Cohort 2 delivered mixed results, Average talk time, AHT and Wrap improved for 23% of staff included within the Cohort and a further 27% of staff saw improvements in some of these metrics. The remainder stayed static and further support is described in next steps.

Next Steps

- Review and realign their core priorities including side by side levelling with Cohort 2 and new clinical supervisors by the end of April.
 - This will support:
 - Effective call structure and documentation.
 - Increased discussion and confidence building amongst newer Clinical Supervisors.
 - Alignment with the new role readiness guidelines currently being rolled out.
- Regular SCN buddy levelling sessions, including monthly CS call reviews by the end of May.
- Routine SCN levelling sessions to identify themes and feedback from call reviews, to share insights and learning across the wider team by the end of May.

2.2.4 Dental Service Optimisation

The Dental Service is undertaking several optimisation initiatives to improve the efficiency and effectiveness of the dental service. This includes maximising and utilising resource and capacity within the booking hub and engagement is being undertaken with stakeholders to inform this. A review of the Board's emergency pathway is being undertaken to streamline referrals and signpost patients to the right care at right place.

2.2.5 Transforming Roles

Plans are continuing to progress with the introduction of Band 5 Nurse roles to support a career framework within the organisation. Recruitment timelines have

been revised to ensure resource and capacity of staff to support induction and alignment with training for the new CC/CRM system. Recruitment is planned for May 2025. Work continues to ensure development of the training and induction programme, as well as the operational model which will define the approach to supervision, quality assurance, coaching and the ongoing continuing development programme for the post holders.

A short life working group had been established to scope the development of the career framework with the aim of clearly outlining current career pathways and considering where potential future roles could be support.

2.2.6 Visit from the Ministry of Health for Healthcare Transformation in Singapore to NHS 24

On Monday 24 March, NHS 24 had the honour of hosting a delegation from the Ministry of Health Office for Healthcare Transformation (MOHT) from Singapore. MOHT is an agile unit that takes an experimental and evidence-based approach to redesigning healthcare. Their focus lies on longer-term areas with the potential to contribute to fundamental changes in the way health is promoted, and care is delivered.

During the visit, the Singapore team expressed a keen interest in understanding various aspects of NHS 24's operations. The areas of focus for their learning included:

- NHS 24 operational model
- Triage protocols
- Digital integration
- Integration with other urgent care pathways
- Regulatory standards and requirements
- Publicity efforts of NHS 24

The visit was organised with contributions from multiple directorates within NHS 24, including representatives from Service Delivery, Nursing & Care, Medical, and Communications. A comprehensive series of presentations were provided throughout the morning, covering all areas of interest to the Singapore delegation.

The Singapore delegation appreciated the detailed insights and learned extensively about NHS 24's operations. The visit fostered a productive exchange of knowledge and expertise, and the Singapore delegation welcomed the opportunity to connect and learn from NHS 24.

The collaboration with MOHT signifies a step towards enhancing global healthcare systems through shared knowledge and innovative approaches.

2.2.7 Innovation for Health, Estonia Visit

On Tuesday 1 April, NHS 24 welcomed a delegation from the Innovation team of the North Estonia Medical Centre, Tallinn, to learn from Scotland's experience in developing, procuring, and implementing innovation in healthcare. The delegation gained insight into our operational model, and discussions on referral into hospitals,

both in-hours and out-of-hours, as well as alternatives to hospital care such as the pharmacy first initiative. The visit also covered topics such as digital transformation, procurement, and communications and engagement.

This visit to NHS 24 forms part of a wider schedule for the Estonian team which included a visit to the Digital Health & Care Innovation Centre and the Queen Elizabeth University Hospital.

2.2.8 Contact Centre Association

NHS 24 continues to be a member of the Contact Centre Association which enables us to learn and gain insights from organisations across different sectors of the industry. As part of that we are embarking on a benchmarking collaboration with NHS Business Services Authority (NHS BSA) who manage all NHS England's non-clinical services and are embarking on a similar Digital Transformation journey. Both organisations can learn from each other in sharing best practice across a range of different areas.

NHS 24 welcomed colleagues from NHS BSA on Thursday 27 March to our Norseman Centre following an NHS 24 visit to BSA in December 2024. As part of the visit the team covered various aspects of NHS 24 operations including: NHS 24 Strategy & Corporate Planning, Digital Transformation, Service Optimisation, Staff Wellbeing, and a tour of the centre.

NHS 24 looks forward to continuing our collaborative relationship with both national and international organisations.

2.2.9 Performance Board

In March 2025, a new Operational Performance Board met for the first time with a focus on improving the Key Performance Indicators across the 111 service. This group will develop a detailed workplan that provides assurance around the impact of improvement ideas on performance. The workplan was presented to the EMT at its meeting in April. The Board is chaired by the Director of Transformation, Strategy, Planning and Performance, alongside the Director of Nursing & Care, Medical Director, and the Director for Service Delivery. The membership includes colleagues from HR and Partnership. This oversight will establish the mechanism to stop, continue or start improvement tests of change as we endeavour to improve patient experience across the range of performance indicators.

2.2.10 Digital Clinical Safety

As part of the Service Transformation Programme, a Digital Clinical Development and Implementation group has been established to support the future safe and effective utilisation of digital tools made available by the Digital Transformation Programme. The ANP video consultation project and production of a Clinical Hazard Log for NHS 24 Service Knowledge Assets (SKA) are being used as test cases for evaluation of Digital Clinical Safety. To comply with new national regulations, a Medical Device Policy is being developed through joint working between Medical and ICT Directorates.

2.2.11 PHS Data Collaboration

Engagement with Scottish Government and PHS continues and options for planned delivery will be agreed by the end of Q1 2025-26.

2.2.12 Joint Board Copilot Evaluation

NHS 24 were selected to be involved a three-month pilot between September and November 2024 to build evidence and knowledge of using Copilot, and any potential sustainability and value benefits that might be realised from a wider rollout. One hundred colleagues from NHS 24 were selected to take part, alongside two hundred colleagues from NHS Greater Glasgow & Clyde (NHSGGC) and NHS Education Scotland (NES).

The pilot has now concluded with very positive feedback from participants.

Pilot users have been able to retain their current licences until the end of April 2025. National licence negotiations are currently underway, and NHS 24 are awaiting the outcome, to support further planning. ICT will be working in collaboration with Workforce, to review NHS 24's future approach.

2.2.13 Digital Maturity Assessment

The Scottish Government and COSLA have published the results for the 2024 Digital Maturity Assessment, in which NHS 24 participated: [\(Digital Maturity Assessment 2024 Update – Summary Results – Festival of Transformation\).](#)

The assessment comprised of twenty sections, of which three sections do not apply to NHS 24. The assessment was grouped into three key themes: Readiness, Capabilities, and, Infrastructure.

NHS 24 have demonstrated an improvement from our 2023 results, across seven sections, nine remained the same and there was a new entry for asset and resource optimisation. NHS 24's outcome results place us significantly ahead of the national average for Scotland.

NHS 24 were asked to present validation evidence to COSLA and The Scottish Government on the two topics in which we excelled: Strategic Alignment and Governance.

NHS 24 were praised by COSLA and The Scottish Government and who stated that NHS 24 were an example of best practice and as a result COSLA and The Scottish Government would like NHS 24 to showcase their work in a series of shareable learning events, and feature on the Festival of Transformation portal.

The Digital Maturity Assessment results do not include staff survey outputs. Individual organisations can use their results to understand how they can better support their staff throughout their digital journey. Based on recommendations from

the Digital Maturity Support Group, the 2025 survey will include enhanced options allowing organisations to customise their staff survey, giving NHS 24 the ability to target staff groups and or projects. This will enable real-time views of staff capability and understanding, improving processes and delivery. ICT and Workforce will review NHS 24's survey results and actively look at how these can be progressed.

2.2.14 Cyber Security Position

NHS 24 has successfully achieved Cyber Essentials certification during 2024/25 Q4, demonstrating our commitment to maintaining robust cyber security measures across the organisation. This certification, issued by The IASME Consortium Ltd, validates our efforts in securing our ICT infrastructure, including laptops, desktops, and mobile devices. The achievement of Cyber Essentials is a significant milestone, contributing to our protection against common cyber threats and vulnerabilities. Many of the controls in the Cyber Essentials scheme are embedded into our required regulatory compliance with the Network and Information Systems Regulations 2018 (NIS-R), which provides a legal framework aimed at boosting the overall level of security for network and information systems.

2.2.15 Digital Transformation Programme

The Digital Transformation Programme (DTP) continues to make significant progress. The Digital Programme Board took place on 27 March, and it noted the progress made across all workstreams. Contact Centre/Customer Relationship Management (CC/CRM) has been successfully navigated through the build and configure stage. The Decision Support system has been built in the UK. Both are now being tested. The first phase of the insourcing of the service desk has been successful and has moved to phase 2. The data warehouse project has completed the discovery phase and has moved to build stage.

2.2.16 NHS24/SAS Collaboration Board

The Joint Collaboration Board was held in March and noted the reports on Urgent and Unscheduled Care, Digital and Innovation, and Clinical Workforce. Public Health Scotland was in attendance as an observer as they play a key role within this area. Further tri-partite meetings are scheduled between PHS, NHS 24 and SAS to discuss future joint working.

3. PROVIDING A WORKPLACE IN WHICH OUR PEOPLE CAN THRIVE

3.1 Developing & Empowering Our Workforce

3.1.1 QI 24: FUNdamentals – Cohort 5 Graduation and Programme Update

On Thursday 27 March 2025, NHS 24 hosted the graduation event for Cohort 5 of the QI 24: FUNdamentals programme. The event celebrated the achievements of fifteen graduates who successfully completed the 14-week quality improvement education programme, designed to build confidence and capability in applying improvement science in practice. This year's cohort included participants from across four NHS 24 Directorates and, for the first time, five colleagues from the

Scottish Ambulance Service (SAS), reflecting a growing partnership and commitment to cross-organisational learning. Four graduates presented their improvement projects at the event, showcasing a diverse range of initiatives aimed at enhancing care pathways, operational efficiency, and staff morale. The Programme continues to deliver tangible value by equipping staff with the skills to identify inefficiencies, improve service quality, and contribute meaningfully to organisational priorities.

3.1.2 Sustainability and Realistic Medicine

The Medical Directorate is currently scoping the creation of a champion/ambassador network within NHS 24 to focus on raising awareness and influencing behaviours around Climate and Sustainability and Value Based Health and Care (Realistic Medicine). This will support the embedding of key principles and support a call to action for all staff across NHS 24 during 2025. An initial communication to staff interested in being part of the network will be circulated by May 2025.

3.1.3 iMatter

The timeline for iMatter 2025 has been shared with the Executive Management Team. The timeline will see team confirmations completed by 13 June 2025 and the iMatter survey being circulated to all NHS 24 staff on 16 June 2025. The initial survey report is expected on 8 July 2025.

The communications approach for 2025 will mirror that which yielded success in 2024, through a structured communications plan via multiple channels; "You Said, We Did" in Team Talk Extra edition; iMatter Awareness sessions and troubleshooting support; and promotion of iMatter on TURAS Learn.

iMatter is reported to EMT and Staff Governance Committee at relevant points across the year.

3.1.4 Appraisal

The Service Delivery appraisal window closed on 30 November 2024, at 80%, 5% over target. To maximise the opportunity for a meaningful appraisal, the focus continued in Service Delivery, until the end of March 2025, reaching 82.1% within the directorate as of 9 March 2025.

Appraisal timelines for 2025/26 have been shared with the Executive Management Team, with Executive Director objectives being drafted and shared in April 2025, enabling the golden thread of strategic direction through each level of objective setting across the appraisal year.

The window of completion for front line staff has been extended to 31 March 2026, allowing a pragmatic approach, and supporting the delivery of service against the backdrop of transformation in 2025/26.

Appraisal compliance is reported to Staff Governance Committee through the Quarterly Workforce Report.

3.1.5 Culture and Wellbeing Action Plans

A Strategic Focus session for the Executive Management Team took place on 4 April 2025 on Culture and Wellbeing. Year 1 progress on Directorate Culture and Wellbeing Action Plans was analysed and formed a key part of the session content for collective oversight and learning.

A Year 1 update paper on action plan progress against the wider context of Culture and Wellbeing in NHS 24 was provided to the EMT in April 2025 and will be presented to the Staff Governance Committee in May 2025.

3.1.6 Equality, Diversity, and Inclusion

The NHS 24 Anti-Racism Action Plan 2025-28 was approved by EMT in January and Staff Governance Committee in February 2025, with necessary updates provided to Scottish Government on progress. Staff are provided with the opportunity to review the plan and provide feedback or suggestions, recognising the importance of staff voice, particularly those from a lived experience perspective.

The dedicated actions contained within the Anti-Racism Action Plan are now in the process of being embedded to the wider approach and Equality, Diversity, and Inclusion Action Plan, to ensure full alignment. The NHS 24 Anti-Racism Action Plan was launched in April.

Updates on progress will be provided to the Diversity and Inclusion Governance Group.

3.1.7 Working in Partnership

A recent area of collaboration has been on the NHS Scotland Once for Scotland Workforce Policies that are due to launch. NHS 24 worked in Partnership with Trade Union and Professional Bodies on the self-assessment of existing policies versus the new revised polices and have created a communication and engagement plan in anticipation of the launch date, which we await from the Scottish Government. Additionally, in partnership, NHS 24 participated in the most recent consultation exercise on the final suite of Health at Work: Once for Scotland Workforce policies and feedback was submitted.

3.1.8 Agenda for Change Pay Deal 2023/24 – Short Life Working Group (SLWG)

The Scottish Government has provided confirmation that the next reduction will take place in one phase with a full final hour reduction to be operational by 1 April 2026. The cross directorate Short-Life Working Group of the Reduced Working Week has been re-established to operationalise this. The group is a sub-group of the Area Partnership Forum (APF), and all actions and decisions will be noted at the APF.

3.1.9 Frontline Recruitment

Recruitment of Band 6 Clinical Supervisor roles continues to progress. We are forecasting that we will reach 170.07 WTE who will be employed by the end of March 2025. This includes 5.79 WTE (9 heads) due to join the organisation on 24/03/2025. However, we have a further 20.02 WTE (25 heads) joining us between April and July, with seven people (5 WTE) formally offered a starting date in April. This means that we will have met target of recruiting 175 WTE by end of March 2025. We continue to recruit with over fifty candidates still in the recruitment process and a further recruitment campaign will be advertised shortly. This means we will meet and maintain our establishment target of 185 WTE within 2025/26.

3.1.10 Real Living Wage Accreditation

NHS 24 has gained a bronze award from the Defence Employer Recognition Scheme (ERS). The award is for employers who support those who serve or have served in the Armed Forces, and their families.

3.1.11 Training and Practice Education

From 1 February to 14 March 2025, 26 Clinical Supervisors and 29 Call Handlers have been trained over nine cohort groups. A joint recruitment and training plan has been devised to provide sufficient capacity for establishment targets to be maintained (for Call Handler skillset) and meet (Clinical Supervisor skillset) by end of June 2025. Training groups and successful completion rates are reported in the Quarterly Workforce Report via Staff Governance Committee.

The Mental Health Practice Educators are currently hosting Mental Health Student Nurses on placement. The next intake of student nurses undertaking a Practice Education placement is due to commence in October 2025. Colleagues attended pre-registered (student) Nurse career events hosted by Higher Education Institutes in March. The students particularly showed high interest in understanding how they could prepare themselves for a career in digital healthcare, post registration.

4. BEING A COLLABORATIVE FORWARD-THINKING PARTNER

4.1 Continuing to Strengthen NHS 24's Organisational Effectiveness

4.1.1 Estates Sustainability

The Estates Sustainability Plan is moving forward, with preparations nearly complete for Lumina frontline staff to relocate to Cardonald on 28 April 2025. NHS 24 has also been working with co-located Boards at Cardonald to optimise shared spaces.

Phase 2 of the Estates Sustainability Project Board is currently taking place, considering future estates opportunities. The recommendations from this appraisal will be presented to the Board soon.

Workforce colleagues and Trade Union representatives have been continuing to work in close collaboration with our Trade Union and Professional Body colleagues to meticulously plan the relocation of staff and the associated organisational change exercise. This joint effort has resulted in positive engagement from staff and managers with the consultation officially ending at the beginning of March 2025 with all staff feedback addressed through continuous communication.

4.1.2 Corporate Escalation Level

NHS 24 continues to operate at Moderate level within the Corporate Escalation Framework. This reflects resource factors, which have improved with reduced sickness and increased clinical recruitment, however, the effects of this have not yet been realised given this is a recent change.

4.1.3 Student Pharmacist Experiential Learning Programme

The Student Pharmacist Experiential Learning Programme has been delivered for another year, involving Schools of Pharmacy from both the University of Strathclyde and Robert Gordon University. Student learning included information on NHS 24, how our services work and how they help patients. At the end of each week the students handled at least one live call under supervision of a Regional Pharmacy Advisor. The programme continues to be well received, and all students left the organisation with a positive view of NHS 24.

5. RECOMMENDATION

5.1 The Board is asked to note progress against NHS 24's agreed strategic priorities. Members of the Executive Management Team will be happy to provide further detail or answer questions in relation to any of the content of this paper.