



NOT PROTECTIVELY MARKED

PUBLIC BOARD MEETING

29 January 2025 Item 06

THIS PAPER IS FOR DISCUSSION

DELIVERING OUR 2030 STRATEGY UPDATE

| Lead Director Author | Michael Dickson, Chief Executive Portfolio Executive Directors Karen Brogan, Director of Strategy, Planning & Programmes | | | | |
|-------------------------|--|--------|-------|-----|-------|
| Action required | The Board is asked to note and discuss progress in relation to delivery of the 2030 Strategy portfolios. | | | | |
| Key points | Provide a high level summary of progress around delivery of the 2030 Strategy Portfolios and demonstrate the impact on delivery of our strategic aims. Provide assurance to the Board that mitigating actions are in place for projects that are not within timeline. Highlight any issues or risks that require escalation to the Board. Overall good progress continues to be made across all portfolios of work with path to green plans in place for projects in Amber or Red status. Table 1 – High Level Summary of Project Status | | | | |
| | Portfolio | Green | Amber | Red | Other |
| | Integrated Planned, Unscheduled & | 10 | | | 1 |
| | Urgent Care | | | | |
| | 11 9 | 9 | | | 1 |
| | Urgent Care | 9 7 | | | 1 3 |
| | Urgent Care Data, Digital, Innovation & Research | 7 5 | | | |
| | Urgent Care Data, Digital, Innovation & Research Communities & Place | 7 | | | |

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| | The Board are also asked to note that work has been underway to refresh the Boards Medium Term Plan and develop the Annual Delivery Plan for 2025/26. These are being presented in the Board Private session in early draft and are expected to be refined between January and March for final submission to Scottish Government on 17 th March 2025. |
|---|--|
| Timing | This paper is being presented to the January 2025 Board and is a standing item on the Board agenda. |
| Associated Corporate Risk Identification | 4636 – Health & Wellbeing of Staff 5602 – Service's defence against a Cyber Attack 4638 – Hospital Handover Delays 5062 – Failure to achieve Financial Targets 5519 – Statutory & Mandatory training |
| Link to Corporate Ambitions | We will Work collaboratively with citizens and our partners to create healthier and safer communities Innovate to continuously improve our care and enhance the resilience and sustainability of our services Improve population health and tackle the impact of inequalities Deliver our net zero climate targets Provide the people of Scotland with compassionate, safe and effective care when and where they need it Be a great place to work, focusing on staff experience, health and wellbeing |
| Link to NHS Scotland's quality ambitions | Safe Effective Person Centred |
| Benefit to Patients | Patients are provided with the right care, in the right place at the right time, enabling improved outcomes for patients. |
| Equality and Diversity | No equality and diversity points to note. EQIA will be undertaken if necessary, on commencement of the work. |

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SCOTTISH AMBULANCE SERVICE BOARD

2030 STRATEGY DELIVERY UPDATE

KAREN BROGAN, DIRECTOR OF STRATEGY PLANNING & PROGRAMMES

SECTION 1: PURPOSE

The purpose of the 2030 Strategy Portfolio Board update is to

- Provide a high-level summary of progress around delivering the 2030 Strategy Delivery Plans and demonstrate the impact on delivering our strategic aims.
- Provide assurance to the Board that mitigating actions are in place for projects not within the timeline.
- Highlight any issues or risks that require escalation to the Board.

SECTION 2: RECOMMENDATIONS

The Board is asked to note and discuss progress in relation to the delivery of the 2030 Strategy portfolios and note the work that has been underway to refresh the Boards 3 Year Medium Term Plan and develop the Annual Delivery Plan for 2025/26.

SECTION 3: BACKGROUND

The 2030 Strategy was developed and launched in September 2022. In November 2022, the Board subsequently established a supporting governance structure consisting of 5 Portfolio Boards and a 2030 Steering Group to ensure effective monitoring and delivery of the strategy. The portfolio boards are chaired by an executive lead and report directly to the 2030 Steering Group, chaired by the Chief Executive. The portfolio boards are supported by a 2030 portfolio manager and a strategy administrator to develop and ensure high-quality, standardised reporting across projects, programmes, and portfolios.

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SECTION 4: DISCUSSION

4.1 Summary of Progress

Progress continues to be positive across all work areas with no projects currently in Amber or Red status for delivery.

Table 1 – High-Level Summary of Project Status

| Portfolio | Green | Amber | Red | Other |
|---|-------|-------|-----|-------|
| Integrated Planned, Unscheduled & Urgent Care | | | | 1 |
| Data, Digital, Innovation & Research | | | | 1 |
| Communities & Place | 7 | | | 3 |
| Preventative & Proactive Care | 5 | | | |
| Workforce & Wellbeing | 7 | | | 2 |
| Totals | 38 | 0 | 0 | 7 |

4.2 Projects in Other Status

The 'other' category relates to projects in planning or scoping stages or projects that have come to an end. There are 7 Projects across the portfolios that are in the other category.

4.2.1 Preparation for National Care Service

The Scottish Ambulance Service continues to be actively engaged in supporting the development of the National Care Service (NCS).

The NCS (Scotland) Bill passed Stage 1 in February 2024, and progress is ongoing. On Monday, 24th June, the Minister for Social Care, Mental Wellbeing, and Sport, released a set of documents related to the NCS Bill. These documents included proposed draft amendments for Stage 2, offering detailed insights into the ongoing development of the NCS. They are now available on the Scottish Parliament website as the Committee seeks public input over the summer and autumn.

In addition, an early draft of the National Care Service Charter was shared with the Health, Social Care, and Sport Committee. The Scottish Ambulance participated in engagement sessions to support the development of the Charter, which outlines the rights and responsibilities of individuals accessing NCS support. It also provides a clear process for addressing complaints if their rights are not upheld.

Three co-design groups were established in August focusing on

- Governance and Representation
- Complaints and Redress (Lived Experience) and
- Complaints and Redress (Service Providers)

These groups have continued to meet to shape aspects of the National Care Service (NCS).

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On November 21st 2024, the Minister delivered a statement in Parliament regarding social care reform, highlighting the request for an extension to the Stage 2 proceedings of the NCS Bill. As a result, the Stage 2 process has been paused to consider what approach is required to secure the parliamentary and stakeholder support needed to progress.

4.2.2 Anchor Institution Strategic Plan

The Boards Anchor Institution Strategic Plan was developed and issued to Scottish Government on 27 October 2023 and subsequently approved by the Board in November. Further work was also undertaken in March 2024 to develop the supporting baseline metrics.

A project proposal was submitted to the engine room in August setting out proposed oversight and governance arrangements for monitoring the implementation of the Boards Anchor Strategic Plan in key areas such as procurement, fair work practices, and the use of our land and assets. The proposal was approved by the engine room and endorsed at the 2030 steering group in September. A kick off meeting was held in December 2024 with an expectation that progress reporting will commence in January 2025.

This structured approach will ensure that the objectives of our Anchor Strategic Plan are efficiently and effectively met, providing a clear framework for monitoring, governance and accountability, including progress updates to the Board and Scottish Government. This will also formally be reported through the Communities and Place Portfolio Board.

4.2.3 Community Planning Development

This project is about ensuring that the Scottish Ambulance Service supports the improvement of local health outcomes and equity in community services through strategic participation in Community Planning Partnerships (CPPs).

An analysis of service representation in CPPS throughout Scotland found that 23 out of the 32 CPPs have service representation (72%). Representation varies by region: East (92%), West (62%), and the North (57%).

To improve our current arrangements with CPPs, we are developing a plan to enhance local health outcomes and equity in community services by standardising our strategic participation in CPPs. These measures are expected to improve our collaboration with CPPs, ensuring that our participation is effective and beneficial to local communities.

Since the last update to the Board, it has been agreed that the Strategic Planning Team will lead on this work, working closely with local Heads of Service. Delivery milestones will be developed for implementation in 25/26. This work is also linked to the stakeholder engagement action agreed by the Board in response to the Blueprint for Governance self-assessment.

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4.2.4 Community Hubs / South Station Delivery

The Community Hub/South Station development project was established to identify options and develop and Outline Business Case (OBC) for the replacement of Glasgow South Station.

As previously highlighted to the Board, the development of the OBC has been delayed due to national pause in capital funding. Despite this, the Scottish Government has confirmed they would support the project's advancement, to ensure the Service can progress this rapidly as soon as funding becomes more certain however at this stage this is limited. Our engagement with local community members through YMSL paramedics remains ongoing as we continue to gather insights into local needs for the community hub concept.

We continue to work closely with Healthcare Improvement Scotland to meet the engagement requirements set out within the 'Planning with People – Community engagement and participation guidance' (Planning with People) which represents a national approach to engagement on appraising different locations for the station. This appraisal will consider both the current location and any newly identified alternative sites. To maintain momentum these meeting are now every six weeks.

Additionally, an analysis of population health data is underway to help inform suitable location and services for a community hub.

A new project proposal has been developed, setting out our requirements to establish a formal project board to oversee governance, planning, and delivery phases.

These phases include conducting a property or land trawl and a site identification exercise to assess the suitability of the current Glasgow South Ambulance Station location or identify alternative land/sites for redevelopment.

4.2.5 Review of EPDD Training & Education

The review of the EPDD Training & Education model will now commence in the 2025 Financial Year.

4.2.6 People Strategy

It has now been agreed that there is no requirement to develop a people strategy. Staff Governance Committee agreed these ambitions and deliverables should be set out in the workforce plan and therefore the project has been closed.

4.2.7 Air Ambulance

A new project has been established to enable implementation of the new air ambulance contract, and the planning of key milestones is underway.

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4.3 Projects that are back on track

At the November 2024 Board meeting it was highlighted that there were 3 Projects in the Amber Status for delivery. These projects have now all been re-baselined following the resolution of issues and barriers to progress.

4.3.1 Dementia Strategy & Implementation

The aim of the dementia strategy project was to develop a dementia strategy and implementation plan in line with the Scottish Government strategy to ensure we provide compassionate and supportive care for patients experiencing problems related to or directly caused by dementia.

The Board were advised in September of the ongoing delay in the Development of the Dementia Strategy & Implementation plan due to not having the necessary funding in place for a lead to take forward the work. In November the Board were advised that funding had since been secured and that the updated plan and associated timelines for delivery were in development.

Support to recruit to permanent Dementia Lead Post has now been agreed by Executive Team. The Job description has also been agreed and the recruitment process is underway with an expectation that the postoholder will be in place by April 2025. Development of the Dementia Strategy is now expected to be completed by the end of December 2025 and will be aligned with the current connecting people, connecting support framework and Scotland Dementia Strategy: Everyone's Story.

4.3.2 Mental Health

The Mental Health team continue make good progress.

Progress has been made with Forth Valley and the team are due to pilot direct access to professional to professional support within their Mental Health Assessment Unit.

Work remains ongoing with NHS24, Police Scotland and Scottish Government to enable patients to be signposted to care that meets their needs.

Performance continues to be monitored and Clinical effectiveness leads continue to work with local teams to address any variation.

The work to further increase the knowledge of our workforce is also ongoing. 17 clinicians in the team have formally completed NES skilled training.

The team are working on the evaluation of year 2 and 3 of the mental health response cars to identify if there is a preferred model of delivery.

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4.3.3 GRS Timecard

The GRS Timecard Project is the development and implementation of an electronic timesheet on the GRS system to feed the payroll system. This will reduce the requirement for manual paper claims and associated administration time for processing.

The electronic timesheet remains live in 1 station end to end. Testing was initially running in 8 other locations however this had been paused due to the impact of the reduced working week which now means that a system development is required to update the calculation for part time overtime rates to calculate at time & half after 37 hours rather than 37.5. An upgrade was also required to the system.

The GRS system was migrated onto new hardware in July and an upgrade to the software was applied to the test system on 28th August as planned.

As highlighted at the November Board meeting, a number of key issues with the upgrade were identified during user testing, relating to core GRS e-rostering functionality. These issues have since been resolved and the upgrade has since been applied to the live system on January 14th enabling implementation to now progress.

The plan has now been re-baselined on this basis, with further pilot sites planned to go into testing in March and a projected go live in May and June.

Ahead of further pilot sites going live, discussion and agreement on business decisions is required as well as agreement on end-to-end business processes (Roles and Responsibilities). Work continues to progress these actions with all key stakeholders involved.

Issues and Risks for Escalation

At this stage, no risks across any of the Portfolios require escalation to the Board. All risks are managed through respective portfolio boards or exist on the Corporate Risk Register.

4.6 Annual Delivery Plan 2025/26 and Medium Term Plan

Work on the development of the 2025/26 Annual Delivery Plan and a refresh of the rolling 3-year Medium Term has been underway. An early iteration of the plans are being shared with Scottish Government and presented at the Boards private session in January with an expectation that further engagement and refinement of the plans will take place between now and March, ahead of final submission to Scottish Government on 17th March 2025.

4.7 Next Steps on demonstrating where we are now on our journey to implementation our 2030 Strategy.

At the March 2025 Board meeting this paper will include a detailed roadmap, setting out

- What we said we do in our 2030 Strategy
- What have we delivered against all of our ambitions so far and the impact that we are making

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• What we are planning to do against our ambitions in 2025/26 and in the medium term (2025-2028)

We are also in the process of revieing the current format for Board reporting to explore opportunities for refinement and improvement for the 25/26 Financial Year.

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Service Board Portfolio Summary Pack

January 2025

Reporting as of 16 December 2024



Integrated Planned Urgent and Unscheduled Care Portfolio Report – 2030 SSG

NHS

Portfolio Lead:

Paul Bassett

Period covered:

26 Oct to 16 Dec

Portfolio RAG

Portfolio Summary

Progress continues to be made across the portfolio of work with 10 out of 10 projects/programmes on track.

The Reduced Working Week Programme continues to progress well with essential work and regular meetings across the service taking place. Approval has been given to recruit a Project Support Officer to support the programme to June 2026. The GRS eRostering system has been updated with new Annual Leave entitlements. Reconciliation work is required to be undertaken by the eRostering team. An SBAR was presented to the Oversight Group outlining roster design software options and following this there was a request for a formal quote to be obtained by procurement. Over 67,500 accrued hours have been planned for staff and entered into GRS system by 12 December 2024, with local Resource Planners continuing to process additional requests to ensure that staff hours balance to their new RWW contracted hours.

In relation to the Resource Planning Project, a review of contact information for those staff wishing to be contacted for overtime, has been completed for all regional locations. Implementation had been delayed until 13th January to go live at the end of the IT change freeze however this has further been pushed back to the end of January to avoid go live during REAP 4, when pressures are already heightened for staff.

Good progress continues to be made around all clinical work streams.

The pilot with NHS Lanarkshire and NHS Greater Glasgow and Clyde (GGC) for HCP Online Booking concluded in September and will continue. As of 16th December, 2,330 online bookings have been made. In terms of pickup target, 89% are 1 hour (urgent), 8% are two hour (planned) and the remaining 3% are 4 hour (routine). In relation to extending the roll out, the team have liaised with Inverclyde Royal Hospital and Royal Alexandra Hospital to arrange a pilot, and a revised NHS Lothian Flow Navigation Centre go-live date has been agreed.

The Digital Patient Handover Project has reduced from amber to green. The Digital transfer of NHS24 Timed Admissions went live on 3rd December. As of 16th December, 106 Timed Admissions have been digitally transferred from NHS24 to SAS and work is underway to roll out Emergency transfers in February.

The Neonatal Transport Service is now undertaking a workforce review in line with the released data modelling, following a devised options appraisal process to understand feasible options which may be available. The Assessment of the requirement of national coverage to meet service needs continues to provide resilience. A staff survey has also been developed for internal engagement.



Integrated Planned Urgent and Unscheduled Care Portfolio Report – 2030 SSG

NHS

Portfolio Lead:

Paul Bassett

Period covered:

26 Oct to 16 Dec

Portfolio RAG

| Project / Activity | Start | End | F | Project Health | | FY 2 | 4 / 25 | | | | | FY 2 | 5 / 26 | | | 25 / 2 | 6 2 | /26 |
|----------------------------|----------|----------|--------------|----------------|------|---|------------------------------------|-----------------------------------|---------------------------------|---------------------------------------|----------|------------------------------|-------------|---------------------------------|---------------------|----------------------------|---------|--------------------------|
| Project / Activity | Date | Date | RAG & | Kan Oracia | | Q3 | | Q4 | | | Q1 | | | Q2 | | 00 0 | 4 6 | |
| ~ | | Date | Trend | Key Controls | | Oct-24 Nov-24 Dec-24 | Jan-25 | Feb-25 | Mar-25 | Apr-25 | May-25 | Jun-25 | Jul-25 | Aug-25 | Sep-25 | Q3 C | 4 C | 11 Q |
| | | | | Milestones | | 01/12 - Handover from temp structure to wider RWW & PL Programme | | Planning for 3 | 4 24/25 - Dev & approve Roster | | | Q1 25/26 - | | | Q2 25/26- Roster | Q4 25/26- Rosters built | | 26- Acc aken - |
| Reduced Working | 01/08/23 | 30/09/27 | | Risks (VH&H) | 0 | NWW & FL Flogramme | v | vorking parties k | eys for 36 npw | | Wo | orking party 2 | | | voting | on GRS | 25 | |
| Week | 01/00/20 | 30/00/21 | | Issues (H) | 0 | | Q4 24/25 - | Q4 24/25 - | 23/07 - Enabl | ing | | Q1 25/26 - orking party 3 | | Q2 25/26 | - 03 25/ | 26. Q4 25/2 | 6- Q4 : | 25/26- |
| | | | | Finance | | | procured ' | | hours for 37h | • | | | Working pai | r sign New Staff f Recruited | | sters | | |
| | | | | Milestones | | | | | | | | | | | | | | |
| Air Ambulance 01/11/24 TBA | TRΔ | | Risks (VH&H) | 0 | | | | gin progress | | | \cap | | | | | | | |
| | 01/11/24 | IDA | | Issues (H) | 0 | | | Planning | in progress | | | | | | | | | |
| | | | | Finance | | | | | | | | | | | | | | |
| | | | | Milestones | | | 1.11/24 01/25 - mentation of OT | | | | | | | | | | | |
| Resource | 01/09/22 | 31/01/25 | | Risks (VH&H) | H) 0 | | aging approach | | | | | | | | | | | |
| Planning Review | 01/09/22 | 31/01/23 | | Issues (H) | | 96/24 97/24 98/24 49/24 12/24 - Resourc | | 03/25 - | | | | | | | | | | |
| | | | | Finance | N/A | Planning Structure Options paper | Project close | | | | | | | | | | | |
| | | | | Milestones | | | | 03/25 - WS 2 Recruitment | <u>03/25 -</u> WS E | | Sched | | | | | | | |
| Scheduled Care | 12/06/24 | 30/06/25 | | Risks (VH&H) | 0 | | | | Assess Taxi Us | age Care St | rategy | | | | | | | |
| Improvement | 12/00/24 | 30/00/23 | | Issues (H) | 1 | | | - | 03/25 - WS 3- ned Admissions | 09/24 04/2 | 5- WS 4- | 06/25 - | | | | | | |
| | | | | Finance | TBA | | | III | (Card 46) | Dy namic and support for Admiss | ir Timed | Project Close | | | | | | |
| | | | | Milestones | | 93/24 08/24 10/24 - Plan the Develop a measurement SCAS 2024 framework for tCPR | 12/24 Analyse Goods | SAM. | 03/25 GoodSAM par | | | | | | | | | |
| OHCA | 01/04/22 | 31/03/25 | | Risks (VH&H) | 0 | | data as per data | | engagem | ent | | | | | | | | |
| OHCA | 01/04/22 | 31/03/25 | _ | Issues (H) | 1 | 12/2 | 12/24 Th | | | 03/25 matic analysis of 12 | | | | | | | | |
| | | | | Finance | N/A | Timelines for "survival zones & responders /("cardiac responder expansion Reviews | Child Death GoodSAM stakeholder | onths data on a of resus attem | | | | | | | | | | |



Integrated Planned Urgent and Unscheduled Care Portfolio Report – 2030 SSG

NHS

Portfolio Lead:

Paul Bassett

Period covered:

26 Oct to 16 Dec

Portfolio RAG

Portfolio Timeline (Continued)

| Project / Activity | Start | End | F | Project Health | | FY 24 / 25 | | | | | | FY 25 / 26 | | | | | | 26 | 26/2 |
|---------------------------|----------|----------|----------------|----------------|-----|---|-----------------|---|---|--------------------------------|---|-----------------------------|--------|--------|-------------------------------------|---------|------|------|------|
| Project / Activity | Date | Date | RAG & Trend | " 0 1 | | Q | 3 | | Q4 | | Q1 | | | Q2 | | | | | |
| ₹ | Date | Date | | Key Contr | ols | Oct-24 Nov | /-24 Dec-24 | Jan-25 | Feb-25 | Mar-25 | Apr-25 | May-25 | Jun-25 | Jul-25 | Aug-25 | Sep-25 | Q3 (| Q4 (| Q1 (|
| | | | | Milestones | | | | | 03/25 - 2 | 03/25 - 1. CC Work with | 61/10 04/24 03/ dev elop patier | nt outcome/ | | | | | | | |
| Maiou Tuorres | 04/04/00 | 04/00/05 | | Risks (VH&H) | 1 | | • | | STN an | d STAG | feedback pro ambulance | | | | | | | | |
| Major Trauma | 01/04/22 | 31/03/25 | | Issues (H) | 0 | 31/10 02/24 07/24 - 4 | . Develop | 07/24 11/ | /24 - 5. Review | and 03/25 - 7 | | -8. Plan for | | | | | | | |
| | | | | Finance | | major trauma measur linked patient outco | | update m hspit | ulti agency MT al CG structure | pre- with SAS g | meen tier servio | e/ pre hosp & rauma care | | | | | | | |
| Stroke & Thrombectomy | | | | Milestones | | | | 02/25 | 91/2 Stroke Enh Sc | 4 03/24 03/25 ene diagnosis | Фn- of | | | | | | | | |
| | 04/04/00 | 04/00/05 | | Risks (VH&H) | 1 | | | Video | Triage Ph3 | Stroke | | | | | | | | | |
| | 01/04/22 | 31/08/25 | | Issues (H) | 0 | | In partnership, | work with TAG to | • | , (| | | | 00/5 | 5 East Scotland | Charles | | | |
| | | | | Finance | N/A | | progress thron | bectomy deliver | У | | | | | 1mp | proviement Project Dir Commissio | t (Reg | | | |
| Urgent Care | | | | Milestones | | 06/23 10/23 09/24 - Measurement | | | 02/24 09/24 0 | | | | | | | | | | |
| | 04/04/00 | 04/00/05 | | Risks (VH&H) | 0 | Framework | | | s all health boar ss senior decis | | | | | | | | | | |
| | 01/04/22 | 31/03/25 | → | Issues (H) | 0 | 06/23 11/23 02/24 | | | 05/22 40/ | 23 09/24 03/25 | | | | | | | | | |
| | | | | Finance | | 09/24 - Digital Workstream | | | FNC/P | athways Joint nce Framework | | | | | | | | | |
| | | | | Milestones | | | | | 27/02 23/04 07 10/24 12/24 01 | /24 03 /25 on | /25 - Measure going HCP call | | | | | | | | |
| HCP Online | 04/00/00 | 00/04/05 | | Risks (VH&H) | 3 | | | F | irst Board - Go | Live <u>hand</u> | ler requirement | <u>s</u> | | | | | | | |
| Booking | 01/08/22 | 30/04/25 | | Issues (H) | 0 | | | 10/06 14/08 00/24 12/24 | 4 12/24 | | • | | | | | | | | |
| | | | | Finance | | | | | TBC - Last Boa Live | ird- Go | | | | | | | | | |
| | | | | Milestones | | | | 01/24 02/24 06 08/24 09/24 0 | | 11/24 03/25 | TBC - | | | | | | | | |
| Digital Patient | 04/05/00 | 20/04/05 | 7 | Risks (VH&H) | 0 | | | Ambulance Req A&E | Go Live - | requireme | nt | | | | | | | | |
| Handover | 01/05/23 | 30/04/25 | | Issues (H) | 0 | | | 3 01/24 03/24 05 | 124 06/24 | • | 11/24 April TE | C - Project | | | | | | | |
| | | | | Finance | | | 97/2 | 12/24 - Ambula Live - Timed adm | ulance Req | | Clos (Ambulance | e | | | | | | | |
| | | | | Milestones | | | 30/1: | 1 31/12 01/25 3 sess Team 0 | 0/09 31/10 31/ 0/03 - Busines | 1 <u>2</u> | | | | | | | | Ī | |
| Best Start - | 04/05/04 | 04/00/07 | | Risks (VH&H) | 0 | | | | Case dev elope | d | | | | | | | | | |
| Maternity & Neonatal Care | 01/05/24 | 31/03/25 | \rightarrow | Issues (H) | 0 | | 04/25 | Select 91/9 | 9 30/09 31/12 | • | <u>03/25</u> - | | | | | | | | |
| | | | | Finance | ТВА | | | suitable 01/02 | Final service odel chosen | F | roject close | | | | | | | | |



Communities and Place Portfolio Report – 2030 SSG

Portfolio Lead:

Dr Jim Ward

Period covered:

26 Oct to 16 Dec

Portfolio RAG



Portfolio Summary

The Volunteer Enhancement Project has seen Wildcat Cardiac Responders in NE Scotland successfully integrated into the existing SAS volunteer community and recruitment for the Cardiac Responder development lead is now complete. Several small-scale test of change pilots have been completed. The Community Resilience Team continue to support and engage with our existing cohort of CFR volunteers. During the last 3 months (Sept 24 – Nov 24), CFRs attended 1643 calls, an increase of 20% on the previous 3 months and 11% greater than the same period in 2023.

The Mental Health team continue to progress their aims. Progress has been made with Forth Valley and the team are due to pilot a direct professional to professional support with their Mental Health Assessment Unit. Communications continue with NHS24, Police Scotland and Scottish Government. Call demand attendance and conveyance of calls continue to be monitored, and clinical effectiveness leads continue to work with local teams to address any variation. Education continues, 17 clinicians in the team have formally completed NES skilled training. The team are also working on the evaluation of year 2 and 3 of the mental health response cars to identify if there is a preferred model of delivery.

The Dementia Team have had Scottish Government funding secured for a Dementia Lead Post. Support is in place to recruit to a permanent Dementia Lead Post agreed by Exec Team in November 2024. Job description has been agreed and VAF completed, progressing to advert.

To maintain momentum with Community Hubs and South Station Delivery, a new project proposal (NPP) is being developed with the aim of presenting it to the engine room in January. This proposal will help establish a formal project board to oversee governance, planning, and delivery phases.

The development of our role in community planning will now be taken forward by the Strategic Planning Team, working closely with local Heads of Service to ensure planning is done in a collaborative way and aligned with the new approach to planning DL. Delivery Milestones to be agreed for 25/26 Annual Delivery Plan.

The Young Minds Saves Lives (YMSL) Project Team have seen a considerable amount of work ongoing within this reporting period. The team have completed delivery of YMSL to Holyrood and Shawlands new S3 cohorts as well as engagement and onboarding of additional schools which included the start of the co-design event planning. The YMSL strategy was presented and received feedback from the Endowment Committee, Executive Directors and Trustees. YMSL achievements and ambitions were presented to NHS Charities Together (NHSCT) and an application for NHSCT community resilience funding was submitted.

For the National Care Service, on November 21st, the Minister delivered a statement in Parliament regarding social care reform and explained the request for an extension in the Stage 2 proceedings of the NCS Bill. As a result, the Stage 2 process has been paused to consider what approach will secure the parliamentary and stakeholder support needed to progress.

High Intensity Use (HIU) have increased their Caseload management and continues to engage with partners to support this. Data has been reported to North, East and Ambulance Control Centre Patient Safety Quality Group (ACC PSQG), with information still awaiting West. Paediatric U18 HIU Job Description has been rewritten/Drafted (for review) as well as Adult HIU Job Description rewritten (for review).

SAS UNCRC E-module launched on TURAS flatform by E-Leaning and Development Technologist colleagues. Identified proposed place for BAU governance for all Children's Rights Work within Equalities Group. Discussions underway with this chair to enable handover. National UNCRC Health Lead will support and attend SAS engagement session.



Communities and Place Portfolio Report – 2030 SSG

AG SCOTLAND

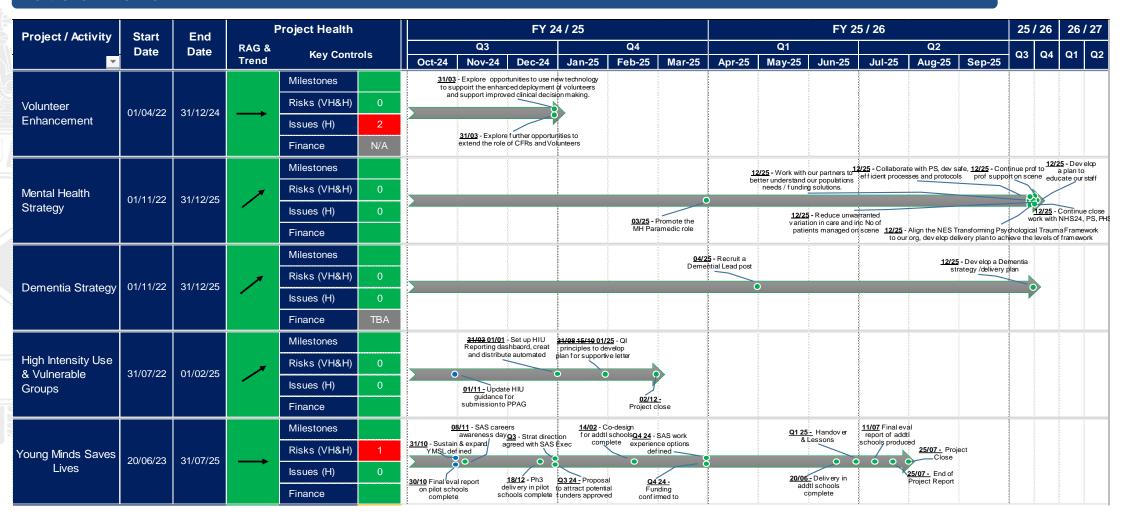
Portfolio Lead:

Dr Jim Ward

Period covered:

26 Oct to 16 Dec

Portfolio RAG





Communities and Place Portfolio Report – 2030 SSG

NHS

Portfolio Lead:

Dr Jim Ward

Period covered:

26 Oct to 16 Dec

Portfolio RAG

Portfolio Timeline (continued)

| Project / Activity | Start | End | F | Project Health | | | | FY 2 | 4 / 25 | | | | | FY 2 | 5 / 26 | | | 25 | 26 | 26 / | 27 |
|----------------------------|----------|----------|-------------|----------------|--------|------------------|---|---|--------------------------------------|-------------------------------------|---------|--------|--------|--------|--------|--------|----|-------|----|------|----|
| 1 Toject/ Activity | Date | Date | RAG & | Key Controls | | Q3 | | | Q4 | | Q1 | | | Q2 | | | 02 | Q4 | 01 | 02 | |
| _ | Date | Date | Trend | Key Contro | Oct-24 | Nov-24 | Dec-24 | Jan-25 | Feb-25 | Mar-25 | Apr-25 | May-25 | Jun-25 | Jul-25 | Aug-25 | Sep-25 | ų3 | 43 47 | | Q2 | |
| | | | | Milestones | | | | | | 03/25 - Deliver Sustainability a | ind Net | | | | | | | | | | |
| Sustainability | | 31/03/25 | | Risks (VH&H) | 0 | | | | Zero action plan | | | | | | | | | | | | |
| | | 31/03/23 | | Issues (H) | 0 | | | | | | | | | | | | | | | | |
| | | | | Finance | N/A | | | | | | | | | | | | | | | | |
| Anchor Institution TB/ | | | | Milestones | ТВА | | | | | | | | | | | | | | | | |
| | TDA | TBA | Planning | Risks (VH&H) | ТВА | | N. D. S. | | | | | | | | | | | | | | |
| | IDA | IDA | | Issues (H) | ТВА | | | | anning unde | erway. | | | | | | | | | | | |
| | | | | Finance | ТВА | | | Highlighti | Reportexped | cted in Jan 2 | 25 | | | | | | | | | | |
| | | | | Milestones | ТВА | | | | | | | | | | | | | | | | |
| Community Hubs | ТВА | TBA | Pre-Project | Risks (VH&H) | ТВА | | | | | | | | | | | | | | | | |
| and South Station Delivery | IDA | IDA | | Issues (H) | ТВА | | New Project Pro | | oposal for South Station in progress | | | | | | | | | | | | |
| | | | | Finance | ТВА | | | | | | | | | | | | | | | | |
| | | | | Milestones | | | 31/12 - Publ templa | ish toolkit and re ite for Exec Tear | eporting m | | | | | | | | | | | | |
| LINCDO | 30/12/23 | 31/12/24 | | Risks (VH&H) | 0 | | 31/12 - Project Close 931/12 - Dev toolkit & | | | | | | | | | | | | | | |
| UNCRC | 30/12/23 | 31/12/24 | | Issues (H) | 0 | 31/10 | | | | | | | | | | | | | | | |
| | | | | Finance | N/A | prod | 31/12 - Dev toolk cess fore repartin reco | g 31/12 - Publish mmendations fo | BAU | | | | | | | | | | | | |



Digital Data Innovation and Research Portfolio Report – 2030 SSG

NHS

SCOTLAND

Portfolio Lead:

Julie Carter

Period covered:

26 Oct to 16 Dec

Portfolio RAG



Overall good progress continues to be made across all projects within the portfolio.

The first SAS Digital Maturity Assessment action plan has been drafted and will now be progressed. The Digital Strategy Delivery Plan workstreams are generally progressing in line with agreed milestones. To support the 2024/25 Digital Delivery Plan, and in line with the Board Assurance Framework, the digital deliverables have been mapped to the SAS Digital & Data Strategy, SAS Annual Delivery Plans, the SAS Medium-term Plan, and the Scottish Government Digital Delivery Plan. Work also continues to ensure colleagues from business intelligence and research & innovation have appropriate input to the delivery plan.

There has been progress on the GRS Timecard System Project to resolve the outstanding issues that were identified during upgrade testing. Full testing of the upgrade has been completed and the upgrade has since been applied to live system on January 14th. The Plan has now been re-baselined with further pilot sites planned to go into testing in March with a projected go live in May and June. Ahead of further pilot sites going live, discussion and agreement on business decisions is required as well as agreement on end-to-end business processes(Roles and Responsibilities). Work continues to progress these actions with all key stakeholders involve.

The Digital Workplace Project was formally closed by the Project Board at the end of December, the End of Project Report will be presented for approval by the Project Board at the end of January 2025. The current ICT staff seconded to the DWP Project will remain in place until the end of March 2025 to support M365 and the ongoing pilot projects, there will also be part-time Project Manager support until the end of March. Job descriptions for the approved M365 in-life team have been submitted for job evaluation with the outcome expected by the end of January 2025.

Research and Innovation is going well. In terms of research, the stroke video feasibility study began recruitment and is near 50% of the target, the Peace3 Violence and Aggression study has had final sign off before submission, and the CRASH4 TXA drug trial has been approved by R&D and Medicines Management Group (MMG) but still to be approved by Clinical Assurance Group (CAG). From an innovation perspective, the team attended the introductory EU Horizon Grant event in Romania and held a SAS Innovation Hub Meeting as well as other key work.

Wi-Fi Refresh project closure is nearly complete, the End of Project Report is being finalised for approval by the Project Board. The roll-out was completed ahead of schedule.

The InPhase project is progressing well. The final configuration review with our 3rd party consultants is taking place during the first half of January 2025. The team are now looking to confirm the final go-live date, it is likely to be the first or second week in February.

The DPIA for the 'AI in the Ambulance Control Centres Project' was re-submitted to the ICO and a final meeting has taken place. The final draft now requires to be approved by SAS. Target dates will now be updated. The 'go-live' data transfer date has been delayed until after the current festive change freeze. It now looks like it will take place in February at the earliest.



Digital Data Innovation and Research Portfolio Report – 2030 SSG

NHS

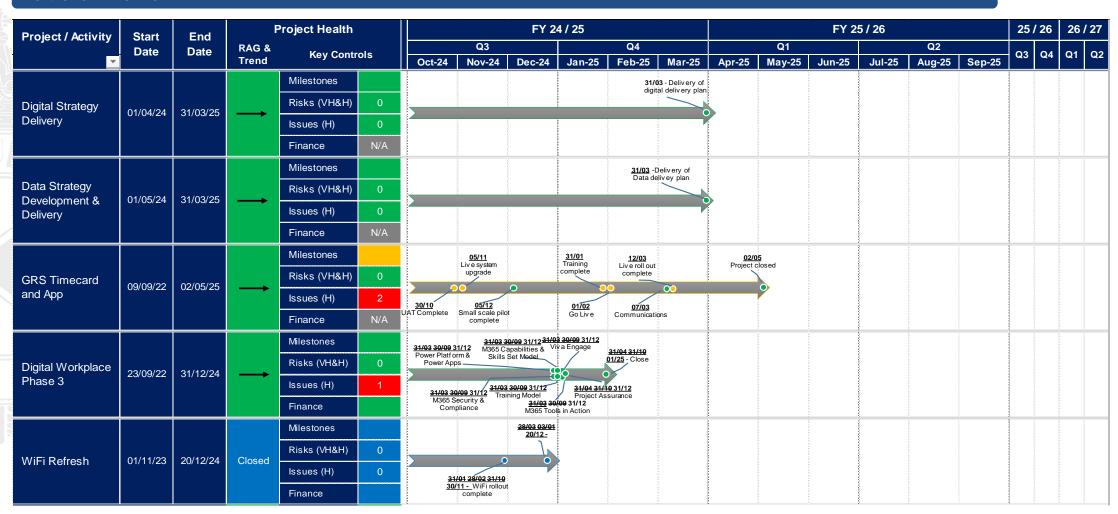
Portfolio Lead:

Julie Carter

Period covered:

26 Oct to 16 Dec

Portfolio RAG





Digital Data Innovation and Research Portfolio Report – 2030 SSG

NHS

Portfolio Lead:

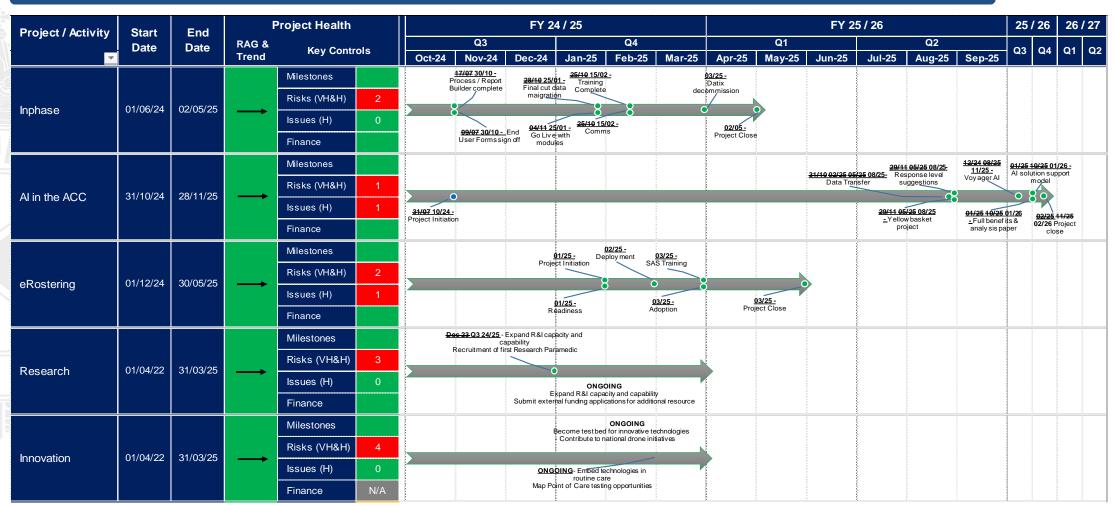
Julie Carter

Period covered:

26 Oct to 16 Dec

Portfolio RAG

Portfolio Timeline (continued)





Preventative and Proactive Care Portfolio Report – 2030 SSG

NHS

Portfolio Lead:

Dr Jim Ward

Period covered:

26 Oct to 16 Dec

Portfolio RAG

Portfolio Summary

Progress continues across each of the clinical workstreams within this Portfolio with extensive engagement with both internal and external stakeholders being a key feature of this work. The Pathways, End of Life Care and Drug Harm Reduction teams have developed excellent relationships with operational and regional management to support successful delivery of these workstreams in particular.

The Drug Harm Reduction team have submitted 12 drug intel reports to PHS RADAR team and are also working closely together to create drug warning/alerts for increased levels of drug harm in Lothian area. Further funding has been received from Scottish Government which means essential kits can be purchased for inclusion in harm reduction bag roll outs. Work also continues with prisons across Scotland as well as engagement with schools in Fife to promote the TRUST campaign.

The impact of the Pathways work continues to be evidenced both through the regional teams and the Pathways Hub. The hub continues with staff engagement across all regions. Great feedback has been received from staff and the team delivered the first virtual pathways conference, with approximately 300 attendees across the week, delivering a range of CPD for staff on urgent care and realistic medicine.

The End of Life Care team have been working on a Business Case proposal for permanency of the team which will be completed and submitted to SAS Executive Board by the next reporting period. Collaboration continues with internal and external stakeholders with reports, teaching, training and education provided.

Our work in partnership with NHS24 and GP OOH services continues to progress, with a GP OOH SOP developed. SLWG's established between SAS/ NHS24 and GPOOH's. SAS Dashboard implementation is providing direct access to patient contact details based on chief complaint call codes and survey's have been circulated to code 33 patients, allowing real-time feedback.

Population Health workstream continues to be built through improved connection with existing workstreams such as well as exploring new and emerging opportunities. SAS has continued contribution to the national Population Health Framework consultation.



Preventative and Proactive Care Portfolio Report – 2030 SSG

NHS

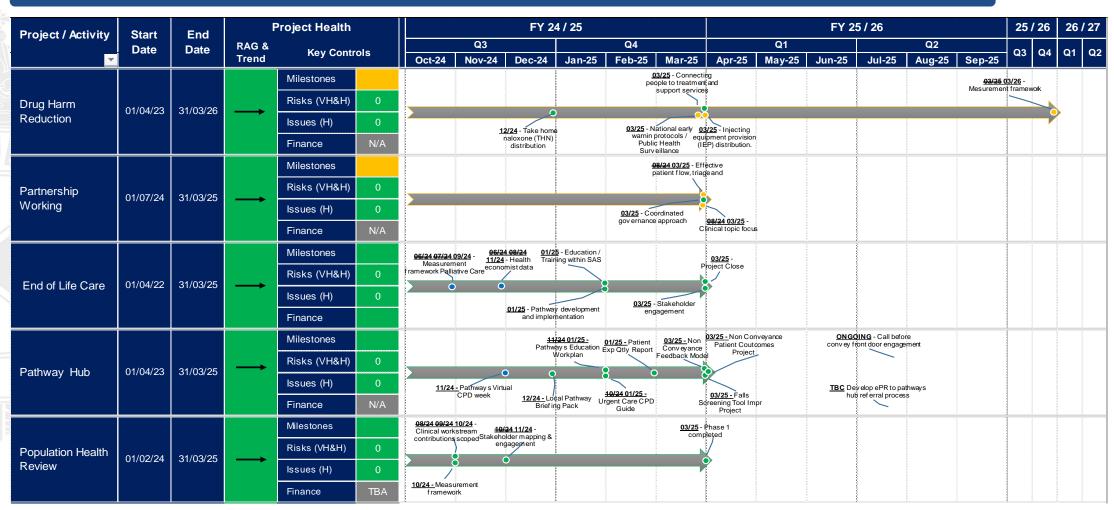
Portfolio Lead:

Dr Jim Ward

Period covered:

26 Oct to 16 Dec

Portfolio RAG





Workforce and Wellbeing Portfolio Report – 2030 SSG

Portfolio Lead:

Graeme Ferguson

Period covered:

26 Oct to 16 Dec

Portfolio RAG



Portfolio Summary

The overall direction of the Portfolio Board remains on target and considerable progress is being made across all the individual projects.

Extensive work has been ongoing for the Health and Wellbeing implementation. A Paper was presented to the Executive Team meeting on 5th November to discuss alternative, and more innovative, ways to deliver our Wellbeing Strategy in the current financial climate. A number of actions were agreed, including developing a bid for Endowment funds to support health & wellbeing activity and re-purposing an admin post within the OD Team to recruit to a part time Wellbeing Lead post. Analysis of data from TRiM survey responses is complete which will inform future service improvement and provision. Joint sexual safety sessions have been delivered to internal and external partners.

The leadership and management training and development is progressing well, the Leadership Training Programmes have not experienced any delays in this reporting period. Due to feedback received from participants highlights that there is the need to balance the flexibility of the programme, with effective learning.

For TURAS Learn, Phase Two, final approval of a paper to commit to provision and funding of Manual Handling and Violence Prevention and Reduction face to face training courses has been achieved. Delivery of these courses, with booking and reporting functionality, are planned to begin April 2025. Discussions with Clinical Leads have advanced with a learning matrix of content for all clinical staff agreed and approved by Project Board. Next steps will be to identify specific content and owners and prioritise any edits or creation of online content. Similar discussions with other departments including PMO, NRRD, ScotStar have continued also. The Project Board have agreed on extending milestones to finalise role specific statutory and mandatory content as well as prioritising the work as shown in the project milestones.

All work planned to improve rest break compliance has been completed. Prior to the hectic festive period, there was a sustained reduction in the number of staff not getting a recorded rest break. A further meeting of the Programme Board is scheduled for early February to review the impact of the winter pressures on rest break compliance. It has been agreed to extend the work of the group to March 2025 to assess if there are any further opportunities to deliver changes. The objective and timelines have been updated to reflect this.

Work is ongoing in all areas of BAU Equality Diversity and Inclusion work. An Equality update was provided to the SGC in December. Planning for Mainstreaming, Equality Outcomes, Gender Pay Gap reports and Equal Pay Statement are underway for 2025 reporting.

Closure reports have been provided for both Agile Working and People Plan. Agile Working has now moved into BAU and is no longer a specified project and following extensive consultation and discussion with the Staff Governance Committee and SAS Board, the development of the People Plan has now been indefinitely paused.

Work to fully adopt the provisions of The Health & Care Staffing Act have resumed following a period of absence with the first formal Board report on course for submission in April 2025.

Workforce planning has been raised as a risk for the organisation and we are in the process of developing the next iteration of the Service's 3 year workforce plan for the period 2025-28. We are at the same time reviewing our workforce planning timelines and processes to implement robust and effective workforce planning arrangements across SAS. A workshop is being planned with key internal stakeholders to define the key deliverables and milestones for delivery.

Finally, the deliverables and milestones for improving NQP recruitment are being captured as part of a separate workstream and which will feature in next year's ADP. A rapid improvement event has been arranged by the Acting Director of Workforce and meets on 27 January 2025 in NHQ. This event has participants from all key internal SAS stakeholders as well as East Region Recruitment Service with a follow recting with our 5 University providers on 12 February 2025.



Workforce and Wellbeing Portfolio Report – 2030 SSG

Portfolio Lead: Graeme Ferguson

Period covered:

26 Oct to 16 Dec

Portfolio RAG



| Project / Activity | Start | End | F | roject Health | | | | FY 2 | 4 / 25 | | | | | FY 2 | 5 / 26 | | | 25 / 2 | 6 20 | 6 / 27 |
|------------------------------|-----------|-------------|---------------|---------------|-----|---------------------------------------|------------------------------------|--|---|---------------------------|---|--|--------------------------|---|--|---|--------------------|------------------------|------|--------|
| Project/ Activity | Date | ⊏nα Date | RAG & | Kee Oesta | | | Q3 | | | Q4 | | | Q1 | | | Q2 | | 00 0 | 4 0 | 00 |
| <u>*</u> | Date | Date | Trend | Key Contr | ois | Oct-24 | Nov-24 | Dec-24 | Jan-25 | Feb-25 | Mar-25 | Apr-25 | May-25 | Jun-25 | Jul-25 | Aug-25 | Sep-25 | Q3 Q | 4 Q1 | 1 Q2 |
| | | | | Milestones | | | | | | | | | | | | | | | | |
| 0.40 D | 24/00/04 | 24/04/05 | Classid | Risks (VH&H) | | | | | | | | | that this wo | | | | | | | |
| SAS People Plan | 31/08/24 | 31/01/25 | Closed | Issues (H) | | | | | lliciade | | | nal Workforce Plan for 2 itted in June 2025 | | 025-28, due | | | | | | |
| | | | Finance | | | | | | | | | | | | | | | | | |
| Health & Wellbeing 01/04/2 | | | | Milestones | | <u>98/24 10/24</u> - H/W Culture F | | | | | 12/24 03/25 - Ex further mental h | cplore | | 03/25 - Deliver El | I "time to leam" | & "civility saves | lives" | | | |
| | 04/04/04 | 04/00/05 | | Risks (VH&H) | 1 | Surv ey | | | | | ruriner mentan | lealth | | In conjunct Benchman | G increase TUR/ tion with partner k physical health | orgs, del best pi n initiatives withir | actice info camp | aigns. | | |
| | 01/04/21 | 31/03/25 | \rightarrow | Issues (H) | 0 | | | 09/24 10/24 - Conduct TRIM survey - co-ord, | | | | | | - Intro a "W | arterly "culture c ellbeing Check" i gular "Action Lea | to assist manage | ers in wellbeing o | onversations. pers. | | |
| | | | | Finance | N/A | 97/24 10/24 - D v irt H&W ideas | (CV | | | | addit | 24 03/25 - Recr ional 30 TRiM issessors | uit | - Provide a | cess to staff led velop wellbeing | "Health Passpor | rts" | | | |
| | | | | Milestones | | <u>16/10</u> - A Cohort 2 | 4-1 | | | 0 | 6/03 - FLMP Cohort 24-1 | 01/04 - Project | | | | | | | | |
| Organisational | 04/04/00 | 04/00/05 | | Risks (VH&H) | 0 | Finishe | | | | | | mov es to BAU | | | | | | | | |
| Leadership Development | 01/04/22 | 31/03/25 | \rightarrow | Issues (H) | 0 | 16/10- | | | | | • | | | | | | | | | |
| · | | | | Finance | N/A | ILMP 24-1 finishes | 20/11 - ALDP Cohort Commence | 24-2 es | | | | | | | | | | | | |
| - | | | 1 | Milestones | | | | 01 Priori | <u>/25</u> - <u>02/25</u> tisation content | · Digital complete | 21/03 Re | | E/04 Phone 2 | | | | | | | |
| Turas Learn & Statutory / | 04/07/04 | 00/04/05 | | Risks (VH&H) | 0 | | con | | mplete | Somples | / | | 25/04 - Phase 2 complete | | | | | | | |
| Mandatory Training | 01/07/24 | 30/04/25 | | Issues (H) | 0 | | | | | 02/25 - | 24/02 | | | | | | | | | |
| (Phase 2) | (Phase 2) | | | Finance | | | | | complete | Classroom ent complete | | Comms plete | | | | | | | | |
| | | | | Milestones | | | | | | 03/03 - Inv esti | gate | | | | | | | | | |
| B /B / | 00/00/00 | 00/04/05 | | Risks (VH&H) | 0 | | | | | rest break | | | | | | | | | | |
| Rest Break | 28/09/22 | 30/04/25 | \rightarrow | Issues (H) | 0 | | | | | | 30 | 704 - Group | > | | | | | | | |
| | | | | Finance | N/A | | | | | | C | losed and dover to BAU | | | | | | | | |



Workforce and Wellbeing Portfolio Report – 2030 SSG

NHS scotland

Portfolio Lead:

Graeme Ferguson

Period covered:

26 Oct to 16 Dec

Portfolio RAG

Portfolio Timeline (Continued)

