

Scottish Ambulance Service Working in Partnership with Universities



NOT PROTECTIVELY MARKED

Public Board Meeting

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 of the 2030 Strategy portfolios.	progress	s in relatio	on to de	elivery	
Key points	 The purpose of the 2030 Strategy Portfolio Board update is to 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. Table 1 – High Level Summary of Project Status 					
	Portfolio	Green	Amber	Red	Other	
	Integrated Planned, Unscheduled & 7 4 1 Urgent Care					
	Data, Digital, Innovation & Research 9 1					
	Communities & Place 4 2 4					
	Preventative & Proactive Care 3 2					
	Workforce & Wellbeing 8 2					
	Totals 31 9 1 6					
	There are no issues or risks that require escalation to the Board. Corporate Objectives are in the process of being developed in alignment with the annual delivery and refresh of the medium-term plan.				ignment	

Doc: Delivering our 2030 Strategy updatePage 1Author: Associate Director of Strategy Planning & ProgrammesDate: 2024-03-27Version 1Review Date: May 2024

27 March 2024 Item 06

Timing	This paper is presented to the March 2024 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 Equality and Diversity	Patients are provided with the right care, in the right place at the right time, enabling improved outcomes for patients No equality and diversity points to note. EQIA will be undertaken if necessary on commencement of the work.

Doc: Delivering our 2030 Strategy update	Page 2	Author: Associate Director of Strategy Planning & Programmes
Date: 2024-03-27	Version 1	Review Date: May 2024







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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 reporting is to

- Provide a high level summary of progress around delivery of the 2030 Strategy Delivery Plans 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.

SECTION 2: RECOMMENDATIONS

The Board is asked to note and discuss progress in relation to delivery of the 2030 Strategy portfolios.

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 which is led by the Chief Executive. The Portfolio Boards are being supported by a 2030 Portfolio Manager and a Strategy Administrator to develop and ensure high quality, standardised reporting across projects, programmes and portfolios.

SECTION 4: DISCUSION

4.1 Summary of Progress

Overall good progress continues to be made across all portfolios of work and where there has been impact to delivery timelines due to operational pressures or other factors, mitigating action is in place to reduce slippage and bring those particular projects back on track. An update on the projects is described below.

Doc: Delivering our 2030 Strategy Update	Page 1	Author: Associate Director Strategy Planning & Performance
Date: 2024-03-27	Version 1	Review Date: May 2024

Table 1 – High Level Summary of Project Status

Portfolio	Green	Amber	Red	Other
Integrated Planned, Unscheduled & Urgent Care	7	4	1	
Data, Digital, Innovation & Research	9	1		
Communities & Place	4	2		4
Preventative & Proactive Care	3			2
Workforce & Wellbeing	8	2		
Totals	31	9	1	6

4.2 **Projects in Other Status**

In relation to the 'other' category, this relates to projects that are in planning or early scoping stages with 4 Projects within the Communities & Place Portfolio and 2 in Proactive & Preventative. These are listed below:

Community Hubs / South Station Delivery

The development of the Outline Business Case to replace Glasgow South Station has been progressing at a slower pace due to uncertainty regarding the availability of capital funding in the next few years. However, Scottish Government have confirmed that the project should continue to be developed and to ensure it can be resumed as soon as the funding becomes clearer. Work continues in relation to community engagement and site development.

Community Planning Development

The analysis of the Service's representation in Community Planning Partnerships (CPP) throughout Scotland was completed in Q2.

Of the 32 CPPs across Scotland, 23 have Service representation (72%). The representation varies by region with the East having the highest representation (92%), followed by the West (62%) and the North (57%).

There are opportunities to enhance our current arrangements with Community Planning Partnerships throughout Scotland. To do this, it has been proposed that this work is formalised into a project. This means that further discussions will need to be held to determine the best approach and resources required to move forward with the project. This will be taken forward as part of the planning and development process for the implementation of the 2024-25 Annual Delivery Plan (ADP).

Preparation for National Care Service

Progress has been made in the development of the National Care Service (NCS) after the release of discussions and outcomes from the NCS National Forum on January 12, 2024. On February 29, the NCS (Scotland) Bill passed Stage 1 in the Scottish Parliament, marking an essential step towards incorporating the NCS into law.

Following the initial report's emphasis on involving people with lived experience, the Scottish Government has continued to prioritise this approach by working closely with

Doc: Delivering our 2030 Strategy Update	Page 2	Author: Associate Director Strategy Planning & Performance
Date: 2024-03-27	Version 1	Review Date: May 2024

individuals directly affected by the social care system. As the Bill progresses into Stage 2, where amendments will be considered, the Health, Social Care, and Sport Committee will play a vital role in shaping the final legislation.

Ahead of the Stage 1 Parliamentary Vote, the Minister for Social Care, Mental Wellbeing, and Sport announced the establishment of an Expert Legislative Advisory Group. This group is expected to complement ongoing stakeholder engagement efforts, ensuring that the voices of those with lived experience continue to guide the NCS's development.

Anchor Institution Strategic Plan

Whilst it is recognised that NHS Boards are already operating as Anchor Institutions and that many, including the Service, have already built this into their strategic ambitions, Health Boards were asked by Scottish Government to develop an Anchors Strategic Plan by 27 October 2023.

The draft plan was completed and issued to Scottish Government on 27 October 2023 and subsequently approved by the Board in November 2023.

Guidance on the metrics for this work were received in November 2023 and work has been underway to develop our baseline anchor metrics. These were circulated to the Board for feedback and approved by the Executive Team ahead of presentation to the March Board for formal approval prior to submission to the Scottish Government at the end of March 2024.

Population Health Review

The Service continues to progress a number of work streams which have a focus on population health and reducing inequalities and our 2030 Strategy sets out our intentions in improving population health. The completion of a population health/reducing inequalities assessment was carried out in October 2023, using a matrix that has been designed for UK Ambulances Services to assess population health/reducing inequalities maturity levels. This has helped the Service identify a number of opportunities that will inform our reducing inequalities/population health work plans for 2024/25 and beyond.

As there is no dedicated Population Health (PH) resource in the organisation, we are taking a pragmatic approach to how we implement and evidence our work to improve the health of Scotland's population. This requires all of our workstreams to consider how their portfolio aims are affected by the nature of the populations we serve.

Over the coming weeks there are a number of opportunities to share our developing thinking include a Health Inequalities Implementation Webinar and we have also successfully secured a space at the national Realistic Medicine conference in April 2024 to describe the Service's approach to health inequalities.

There are also a range of engagement opportunities where we can test the use of local and national data sets linking with projects such as Young Minds Save Lives, our work with University of Glasgow around 'Deep End' practices and our engagement with Public Health Scotland (PHS) around injury prevention.

Doc: Delivering our 2030 Strategy Update	Page 3	Author: Associate Director Strategy Planning & Performance
Date: 2024-03-27	Version 1	Review Date: May 2024

A position paper will be presented to the Executive team in April 2024 supported by a workshop around health inequalities in the first quarter of 2024-25.

NHS 24 Partnership Working

This project relates specifically to working with NHS 24 and to enable patients to receive the right care in the right place first time. The aim is to improve the patient experience, fostering collaboration across both organisations and the wider national health and social care system, improving sustainability, whilst supporting the reform of urgent and unscheduled care.

The project is in early stages of collaborative working, however, we already recognise that the effective delivery of both our services will benefit from greater collaboration across all sectors, as we are fully committed to successful delivery to enhance patient care.

Work to date has focused on:

- Effective patient flow, triage and assessment with a specific focus on people who are triaged by NHS 24 as requiring an ambulance response.
- Coordinated governance approach including joint organisational training, education, and learning from events. This also include data sharing to evidence improvements in collaboration.

4.3 Projects in Red Status for Delivery

The development of the Scheduled Care Strategy has been postponed to focus on improving the efficiency of our current service. A number of internal workshops have taken place over last 2 months to help better define the challenges whilst shaping the immediate areas of opportunity and priorities for the wider programme. These sessions have also provided some vital insight as part of the environmental scanning phase to help inform the long-term direction of travel for the service through to 2030. Replanning of the projects key deliverables and timelines are required.

4.4 Projects in Amber Status for Delivery

Air Ambulance

The Air Ambulance business case was delayed until March to ensure full due diligence. A preferred supplier has been identified and the business case has been submitted for approval at the March Board.

Maternity/Neonatal (Best Start)

The review of the workforce requirements for the ScotSTAR Neonatal Transport Service is ongoing and the plan will now be adapted in line with the recent announcement from the Scottish Government to move forward with three specialised Neonatal Intensive Care Units (NICUs) in Aberdeen, Glasgow and Edinburgh.

The Service are engaged at a national level to ensure alignment of our plan.

Doc: Delivering our 2030 Strategy Update	Page 4	Author: Associate Director Strategy Planning & Performance
Date: 2024-03-27	Version 1	Review Date: May 2024

The Service is awaiting an update on Demand and Capacity modelling that was commissioned by the Scottish Government and expected to be completed by the end of January 2024. While this should not delay the development of a new ScotSTAR Neonatal Transport Service model it can inform and reinforce decision-making around this.

Digital Patient Handover (Scottish Ambulance Service/NHS 24)

The digital patient handover is expected to reduce the requirement for unnecessary voice traffic between services, thus also improving patient and staff experience.

The inbound interface from NHS24 to SAS is built and licenced for use. The Board were advised in January that a critical issue relating to address matching had been identified and that work was underway to resolve the issue to enable implementation. A technical solution is now available, and testing is due to commencing week commencing 18 March. If successful, go-live for timed admission calls is expected on 8 April 2024.

Healthcare Professional Online Booking

The Healthcare Professional (HCP) online booking project is the implementation of an online ambulance booking system for use by HCPs. This will become the recommended alternative to telephone bookings.

Whilst this is currently reporting Amber, work has continued to progress since the last update to the Board. The software has now been tested and signed off and is ready for piloting in April 2024.

CALEAS

The Portfolio Board received a presentation on the update of the drone's programme in February. The project was reporting amber due to an unfortunate delay as a result of timing of approvals for the research work, this has now been resolved and the research study and filming is being planned for June 2024.

Mental Health Strategy Implementation

This relates to the delivery actions to implement year 2 of the mental health strategy. Significant progress has been made in agreeing the workstream priorities, NHS 24 handover, education sessions and training sessions in suicide intervention and prevention.

Some aspects of mental health work are still amber to reflect reduced capacity in the mental health team. Plans are in place to replace these gaps and return to full work plan delivery over the next few months.

Dementia Strategy Implementation

This action is to develop the Service dementia strategy and implementation plan.

Delivery of this work is currently impacted by significant resourcing shortages within the team. Recruitment took place throughout January and February 2024.

A meeting is due to be rescheduled with Alzheimer's Scotland to explore funding opportunities and to develop a memorandum of understanding.

Doc: Delivering our 2030 Strategy Update	Page 5	Author: Associate Director Strategy Planning & Performance
Date: 2024-03-27	Version 1	Review Date: May 2024

Agile Working

There has been a delay in development of SAS supporting guidance for Agile working following the roll out of the National Once for Scotland Policy in November 2023. The update to the Board last month indicated that this would be completed by the end of March 2024, work is ongoing to have this in place as soon as possible.

Health & Care Staffing Act

Progress is being made in relation to readiness for the implementation of the Health & Care Staffing Act. Our draft Q3 report shows 95% of our RAG statuses are green/yellow and work is ongoing to understand the work required to enable full compliance.

4.5 Issues and Risks for Escalation

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

Doc: Delivering our 2030 Strategy Update	Page 6	Author: Associate Director Strategy Planning & Performance
Date: 2024-03-27	Version 1	Review Date: May 2024





Service Board Portfolio Summary Pack

March 2024

Reporting as at 23 February 2024







Paul Bassett

Period covered: 27 Ja

27 Jan to 23 Feb Portfolio RAG

Portfolio Summary

Progress continues to be made across the portfolio of work with 7 out of 12 projects/programmes on track and the remaining projects being realigned to revised timelines. This includes replanning of the plan to support the implementation of Best Start.

The Advanced Practice roster development and implementation project has been re-established to move forward with the implementation of rotational rosters for Advanced Practitioners (AP), using existing workforce numbers. A Planning session was held for this in January and work is underway to agree the profiles and establish working parties in April.

In January, the ICHub had 12051 patient interventions against an objective of 13000 per month. This is an increase of 399 against December figures and an increase of 1583 in comparison to January 2023 which is going in the right direction, however it is unlikely that the target of 13000 interactions per month will be reached by the end of March. Recruitment is ongoing.

In relation to Air Ambulance, a preferred supplier has been identified and the full business case in due to be presented to the SAS Board at the end of March.

The structure and span of control for resource planning was dependent on which e-rostering system the service will have long term. Build work and testing of the new national e-rostering system has now been completed and a number of specification issues remain unresolved. Now that it would appear likely the current e-rostering system will remain in place for the imminent future, all aspects of the resource planning review recommendations that were paused are being reinstated. The Statement of works for the existing e-rostering system server migration has been reviewed and agreed. The migration kick off meeting is due to be held on 19th March.





Paul Bassett

Period covered:

27 Jan to 23 Feb

Feb Portfolio RAG

AG

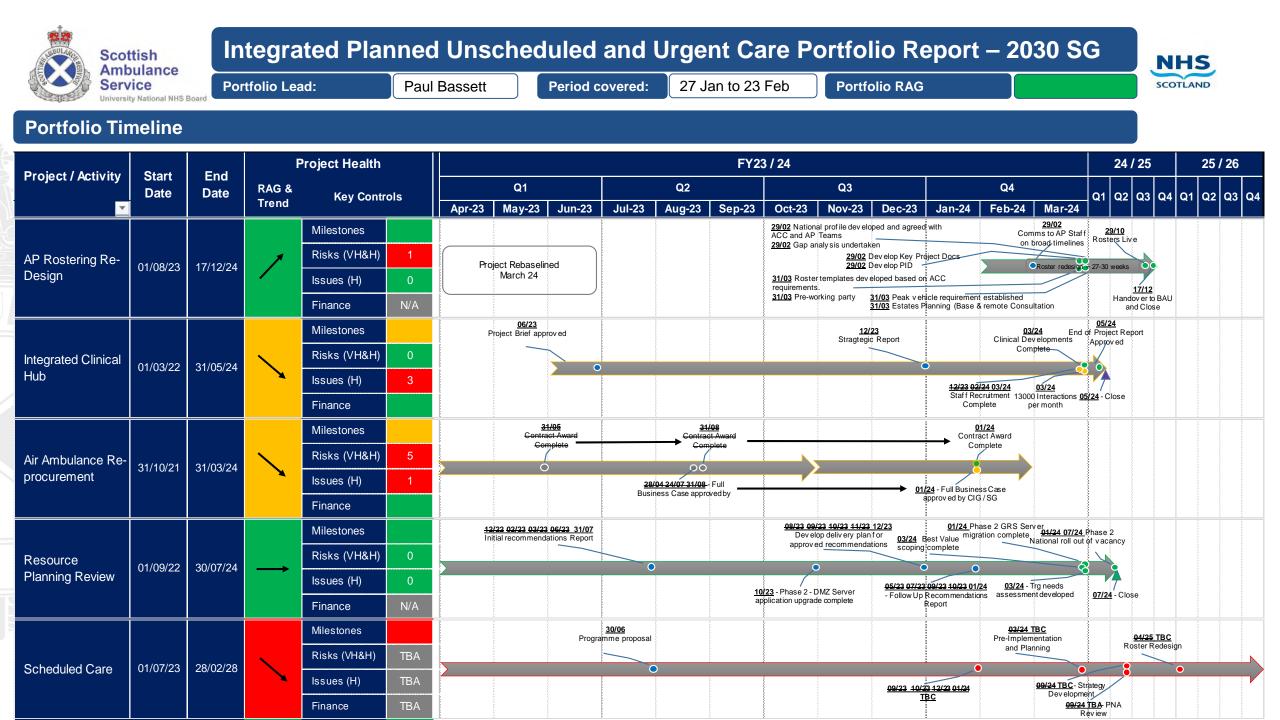
Portfolio Summary (cont'd)

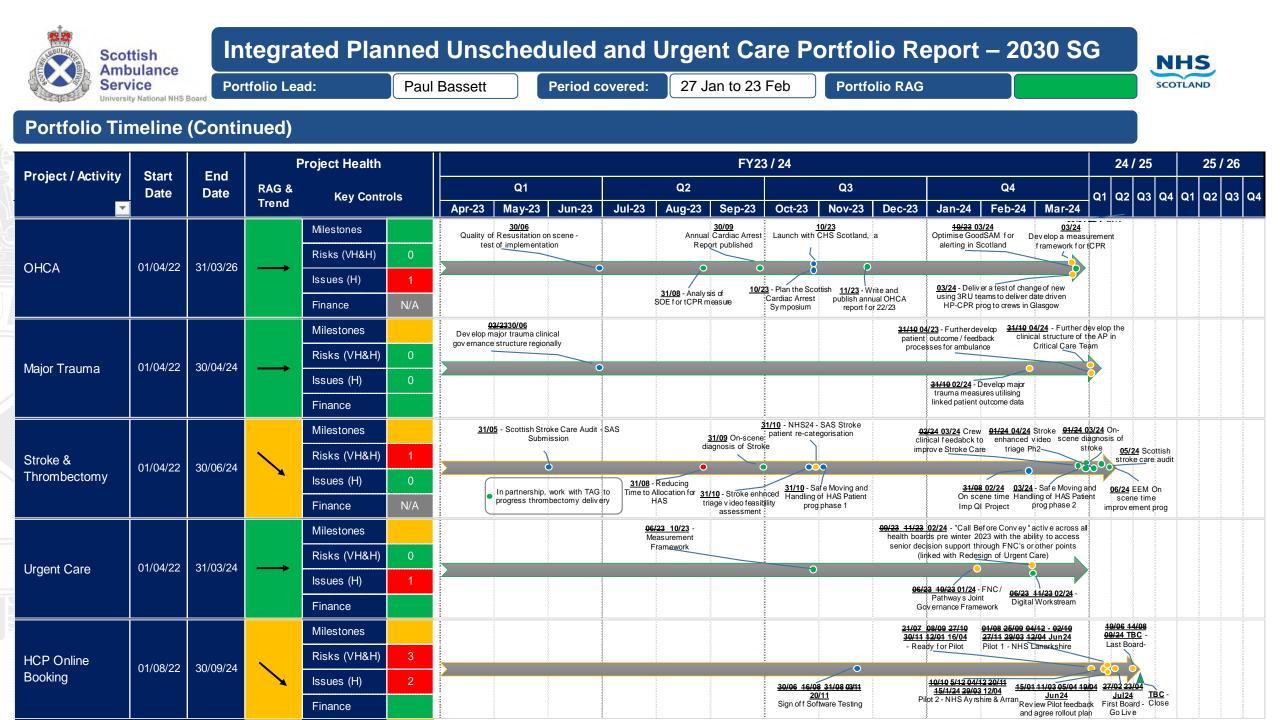
The development of the Scheduled Care Strategy has been postponed to focus on review the efficiency of the current service and agree the baseline for further strategic reviews. A number of internal workshops have taken place over last 2 months to help better define the challenges, whilst shaping the immediate areas of opportunity and priorities for the wider programme. These sessions have also provided some vital insight as part of the environmental scanning phase to help inform the long-term direction of travel for the service through to 2030. Replanning of the project is required.

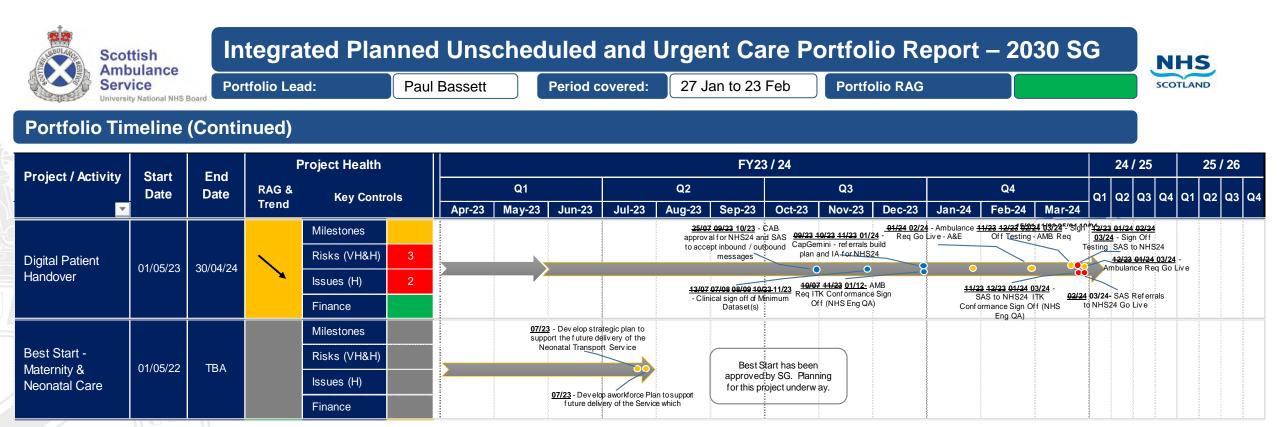
The interface from NHS 24 to SAS was previously delayed due to a critical issue relating to address matching. A technical solution is now available, and testing is due to commence week commencing 18th March. If successful, go-live for timed admission calls is expected on 8th April 2024.

Good progress is being made around all clinical work streams. There has however been some delays in Stroke & Thrombectomy work due to analysts resourcing levels.

A significant amount of work continues on the urgent & unscheduled care collaboration to improve flow across the wider NHS system.











d: Emma Stirling

Period covered: 27 J

27 Jan to 23 Feb Portfolio RAG

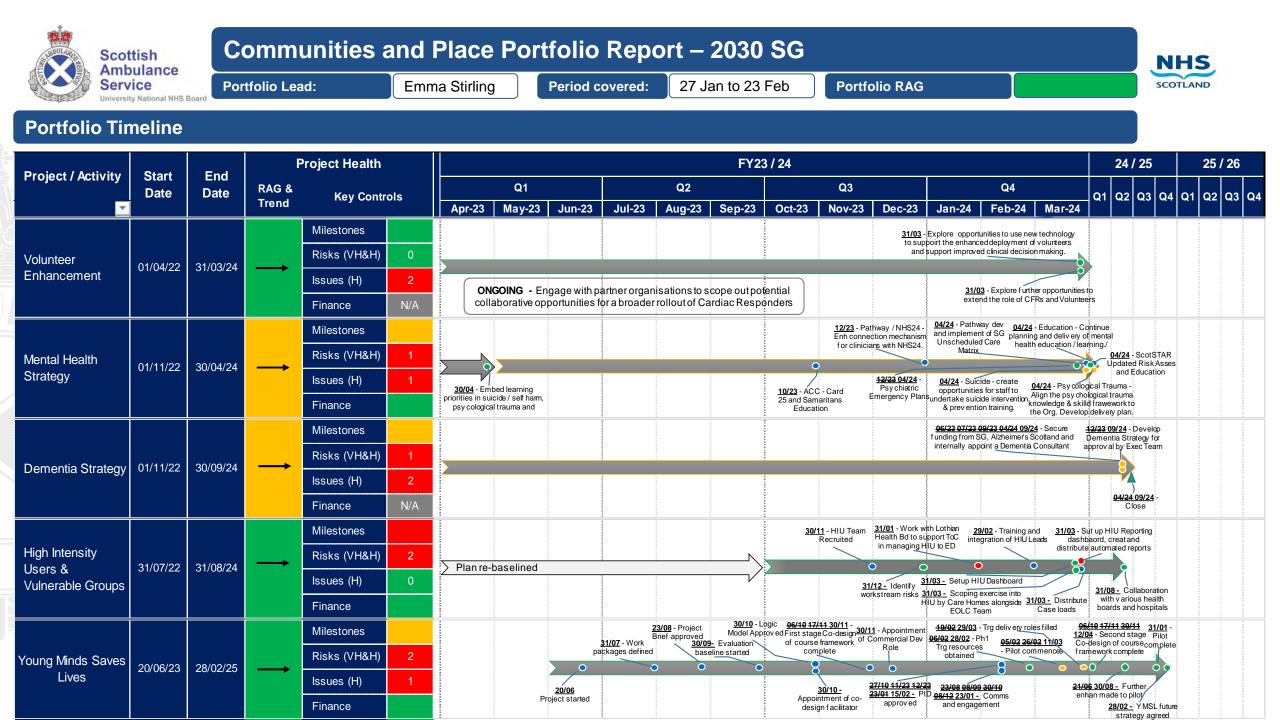
Portfolio Summary

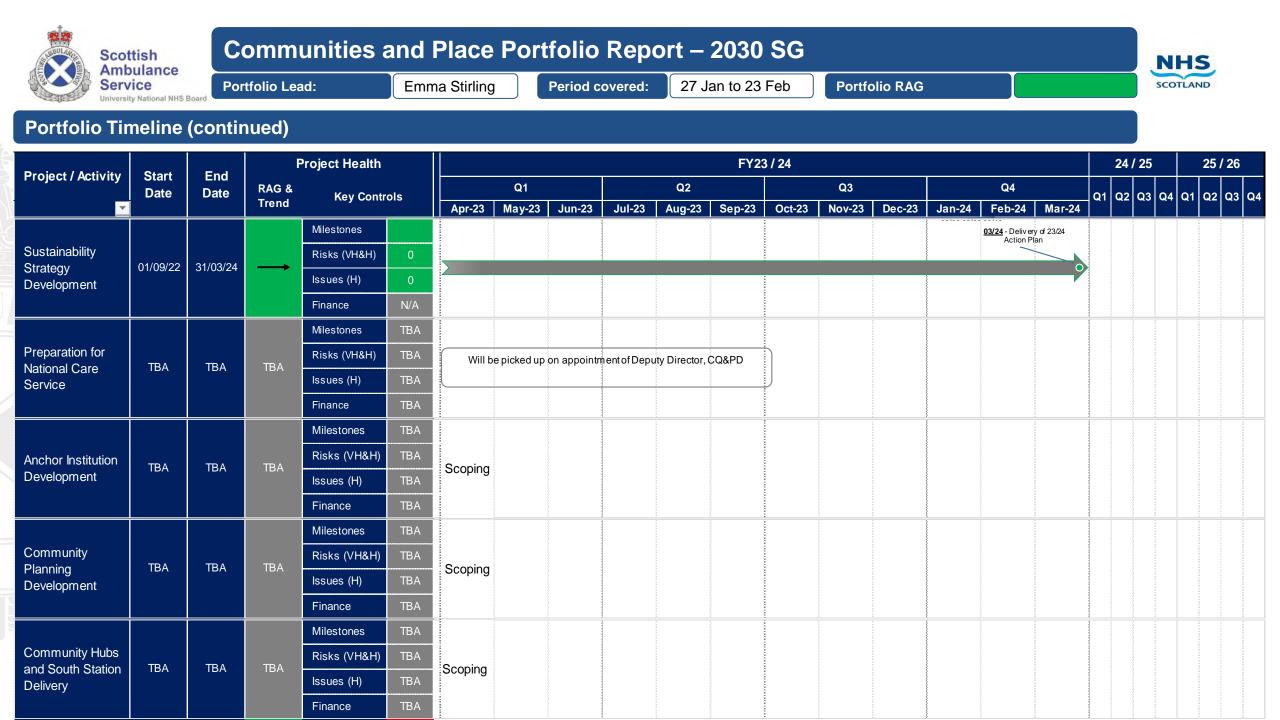
It is important to recognise that this work remains at different phases with some projects still in a scoping phase the projects still in scoping phase will be reviewed to understand if they will remain within this portfolio.

Specific key points for noting are;

• Community First Responders: Proactive support and engagement with existing cohort of CFR volunteers. During the last 3 months (Nov 23 – Jan 24), CFRs attended 1568 calls, an increase of 4% on the previous 3 months. Enhanced reporting is in place for volunteers to provide feedback and outputs of this are being reviewed.

- Mental Health: Variety of vacant posts have now been recruited across the country, this reflects the current Amber level due to the reduced capacity. The national SAS Mental Health Care Patient Survey no.3 created with See Me, Scotland's anti-stigma organisation is due for launch in March 2024 to run for six weeks.
- Dementia Strategy: Capacity of Interim Mental Health and Dementia Care team adversely impacted due to significant staffing shortages in the MH&D Team at present. Recruitment to vacant CEL posts taking place over Jan/Feb 2024.
- Reporting format for Public Protection and High Intensity Users is being reviewed to ensure that we are reporting on the new and developing workstreams to support progress towards service developments into 2030.. SAS have agreed to host FreCaNN (Frequent Caller National Network) for April 2024, with delegates from ambulance Trusts across the UK and ROI attending.
- The Young Minds Saves Lives Project is on track to start delivering training to both schools before the school Easter break.
- The Anchors Strategy has been submitted following Board approval. Baseline Activity Metrics paper has been approved by Execs and has been virtually circulated to the Board for approval and submission for the 27th March.









Julie Carter

Period covered: 27

27 Jan to 23 Feb Portfolio RAG

Portfolio Summary

Overall good progress continues to be made across all projects within the portfolio with work ongoing to progress the Digital Delivery Plan projects/work-streams in line with the agreed milestones.

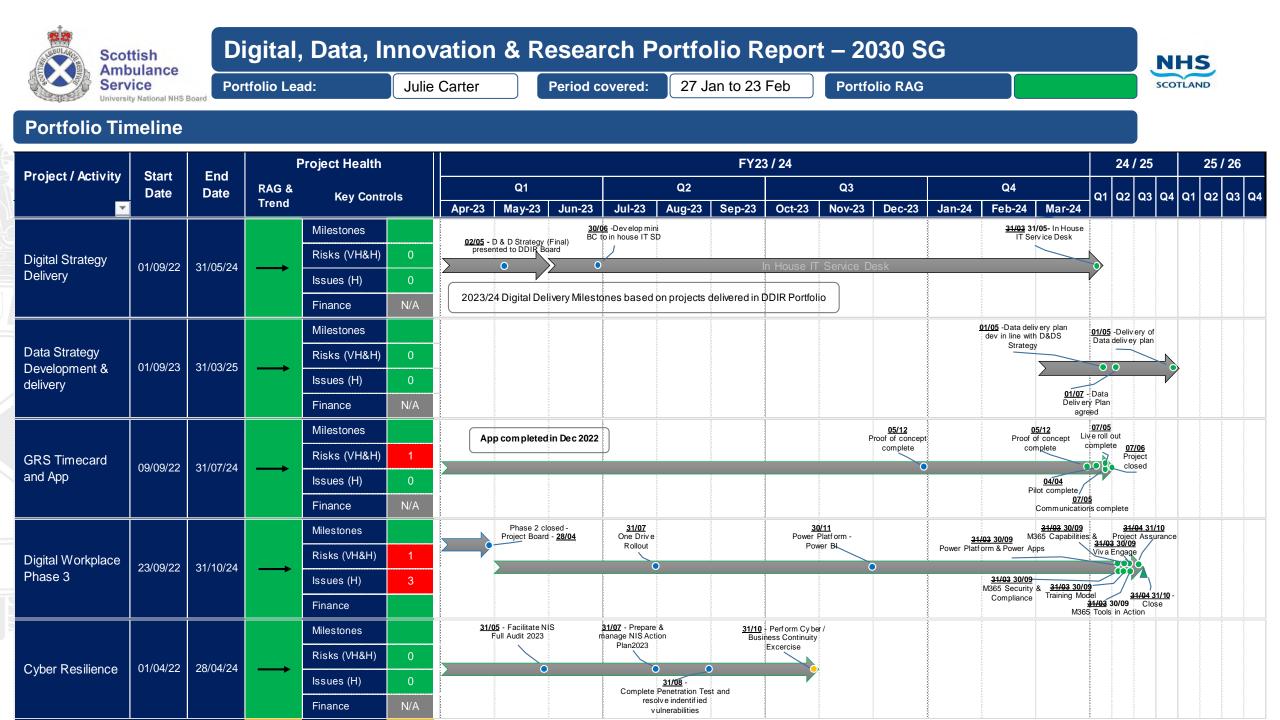
Following the successful ICCS system roll out and subsequent resolution of post implementation issues, the project is now closed with the project close report being approved at the Portfolio Board meeting in November. It was agreed then that the team would present a lessons learnt to the Portfolio meeting in March, which was actioned and well received. This focus on this presentation was learning from implementing a national system and working to timelines that can be out with SAS control. The PMO have noted this work and will be applied to future national system projects.

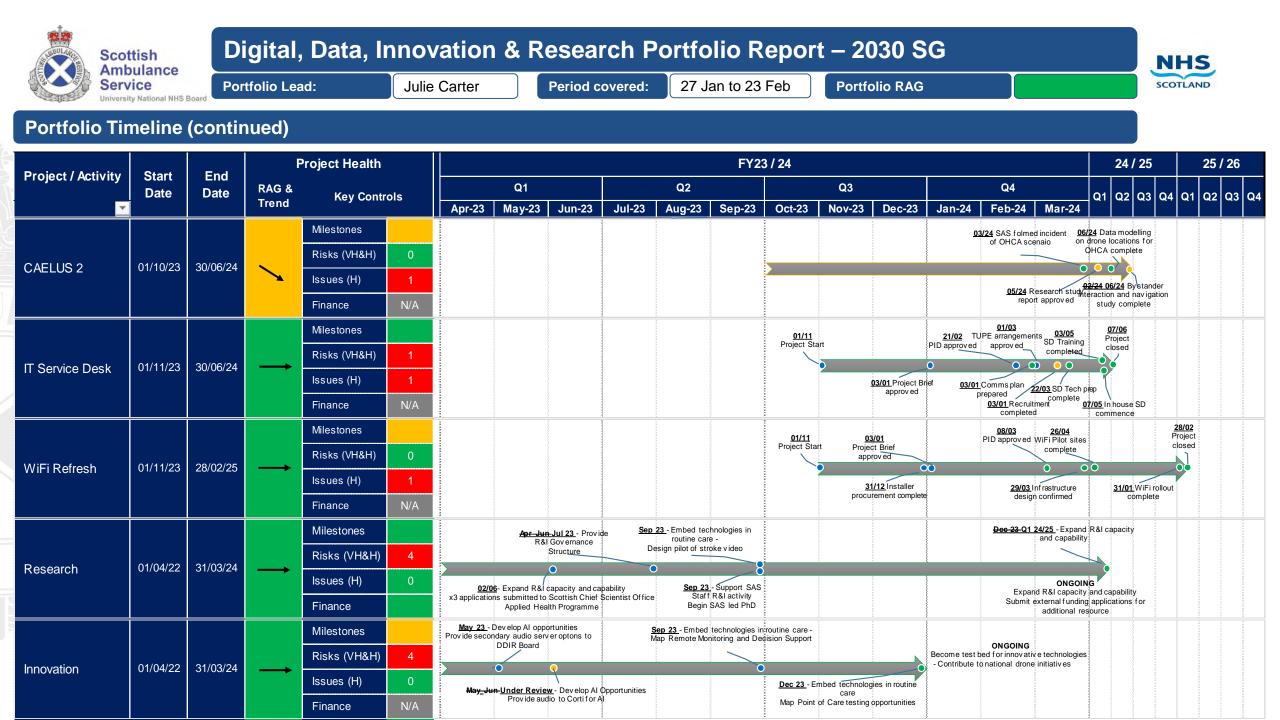
Since the last update, significant progress has been in resolving the Timecard technical system issues. A full end to end live test between timecard and Payroll was carried out in December for one station with no system issues and live testing for 5 additional locations toom place in January. The Portfolio Board received an update on progress with a number of further system and process issues being identified. As these are being worked through it was noted that the timeline for implementation is likely to slip to May 2024.

In relation to Cyber Resilience, the Annual Penetration test has been completed and the reports provided. A Cyber/BC exercise took place on the 27th February for the Senior Leadership team and good learning shared.

Airwave Sustainability end of project report was presented and approved by the Board, with the outstanding risks transferred and monitored by the Airwave Governance Group.

On the CAELUS project, The Board received an excellent presentation on the update of the drones programme, with an unfortunate slight delay as a result of timing of approvals, this has now been resolved and the research study and filming is being planned for June 2024. A no cost extension has also been approved.







Preventative and Proactive Care Portfolio Report – 2030 SG



Portfolio Lead:

Jim Ward

Period covered:

27 Jan to 23 Feb

Portfolio RAG

Portfolio Summary

As the portfolio matures, the links between the component parts continue to strengthen within this portfolio and across a number of workstreams in partner portfolios.

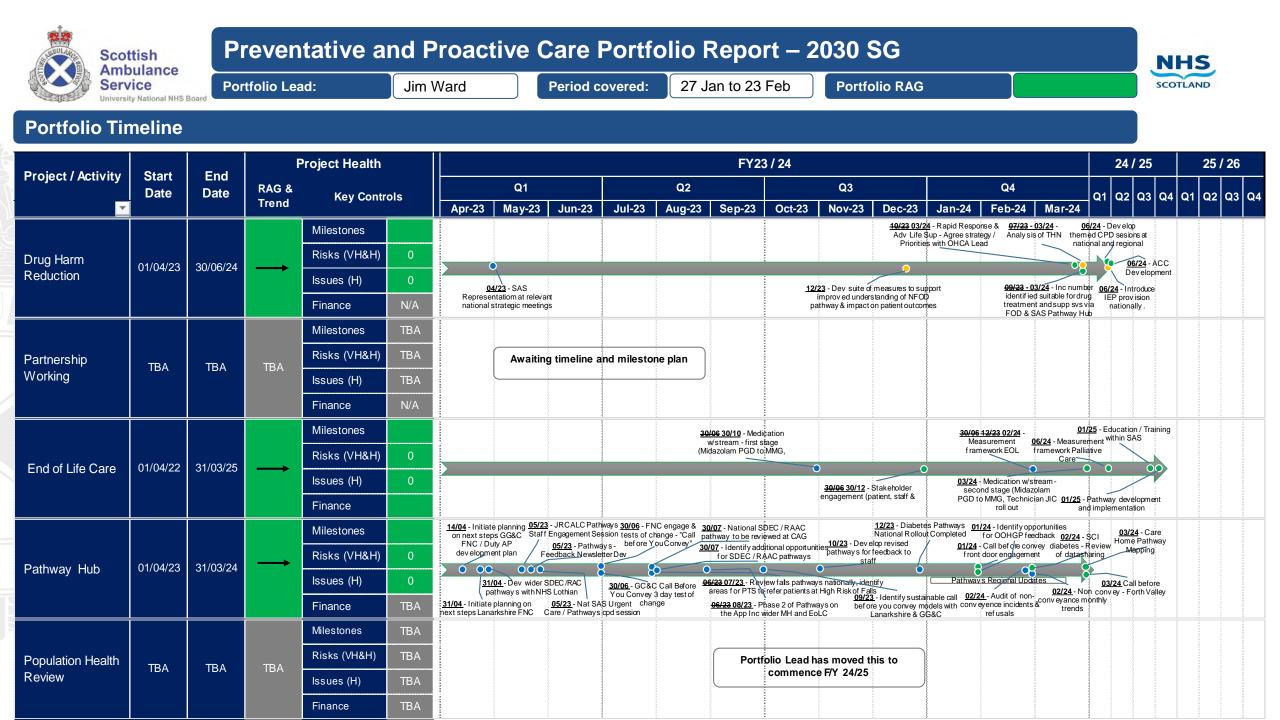
The Drug Harm Reduction programme continues to engage with a range of external partners to support the national mission to reduce harm from drugs. Naloxone distribution remains a key priority and work is underway with all regions/sub-regions to highlight the importance of this work.

The impact of the Pathways work continues to be seen in terms of increasing numbers of referrals to other health and care providers and increased non-conveyance rates. This work is enabled through engagement with territorial health boards and other partners as well as ensuring our frontline clinicians are supported with the knowledge and skills to manage urgent care demand.

End of Life care work has become well established with a strong network of partners and increasing synergy with our work around urgent care in Care Homes. Work with Business Intelligence is underway to help improve understanding of the impact of this work.

Our work in partnership with NHS24 and GP OOH services continues to progress, seeking to improve the patient pathway at both the early part of the patient journey and in the final referral elements.

A position paper relating to Health Inequalities and Population Health will be taken to the executive team in April 2024.







Avril Keen

Period covered:

27 Jan to 23 Feb P

Feb Portfolio RAG

Portfolio Summary

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

The Once for Scotland policy soft launching is now completed in line with the second phase of the Once for Scotland policies, of which the Flexible Work Location policy was introduced. This is a national policy, which will apply to all of the NHS in Scotland.. Further local guidance is being developed by the HR team and Management teams to allow the establishment of Agile working. Work is underway to have this guidance in place as early as possible in 24/25.

The People strategy was drafted and published on @SAS for feedback, focus groups were set up and a questionnaire made available for staff to provide feedback. Proposals to address this was presented to SGC March, work is ongoing to agree a further piece of work and timescales.

Our workforce performance metrics are currently being re-assessed and a group has been established to identify data processes throughout SAS to enable a more effective and efficient way of producing workforce data. This group will meet for the first-time end March 24 and will continue to progress at pace to re-align our workforce performance measures accordingly. Systems are being developed via power BI for dashboards, in line NHS Scotland Policy.

In relation to Rest Break Compliance, A trial was completed which proved to be successful, with a number of changes and iterations during a 12-week period leading to compliance well above 90%. This then led to an agreement being reached with Staff Side to progress with an updated SOP whilst focusing on 2nd rest break period compliance. Further developments have been agreed and will be put in place to trial increased performance to 2nd rest break compliance in the coming weeks.

The proposals in regard to the new training model are still under discussion and progress may be limited until autumn 2023, with wide staff engagement.

All e learning modules have been developed with the assistance of SME's. All modules have now gone live and the working group of SMEs continue the development of the Turas platform and all clinical staff statutory and mandatory education and training.

The leadership and management training and development is progressing well, with a very clear focus on equipping all our managers with a comprehensive toolkit of skills.

