



## **NOT PROTECTIVELY MARKED**

## **Public Board Meeting**

31 May 2023 Item 06

## THIS PAPER IS FOR DISCUSSION

## **DELIVERING OUR 2030 STRATEGY UPDATE**

Lead Director	Pauline Howie, Chief Executive									
Author	Portfolio Executive Directors									
	Karen Brogan, Associate Director of St	rategy, P	lanning &	Progr	ammes					
Action required	The Board is asked to									
	<ul> <li>Note the ongoing development of the report to incorporate Board feedback, recognising that work continues on development.</li> <li>Discuss progress in relation to delivery of the 2030 Strategy portfolios.</li> </ul>									
Key points	The purpose of the 2030 Strategy Portf	olio Boar	d update	is to						
	<ul> <li>Provide a high level summary of progress around delivery of the 2030 Strategy Portfolios and demonstrate the impact on delivery of our strategic aims.</li> <li>Provide assurance to the Board that mitigating actions are in place for projects that are not within timeline.</li> <li>Highlight any issues or risks that require escalation to the Board.</li> <li>Overall good progress continues to be made across all portfolios of work</li> <li>Table 1 – High Level Summary of Project Status</li> </ul>									
	Portfolio Green Amber Red Other									
	Integrated Planned, Unscheduled & Urgent Care	Integrated Planned, Unscheduled & 9 2 1								
	Data, Digital, Innovation & Research	6	1							
	Communities & Place	4			4					
	Preventative & Proactive Care	5								
	Workforce & Wellbeing	7	2		1					
	Totals	31	5		6					

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	There are no issues or risks that require escalation to the Board.
Timing	This paper is presented to the May 2023 Board and is a standing item on the Board agenda.
Associated Corporate Risk Identification	4636 – Health & Wellbeing of Staff 4639 – Response to a Cyber Incident 4638 – Wider System Changes & Pressures 5062 – Failure to achieve Financial Targets 4649 – Further ESN Slippage
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	<ul> <li>Safe</li> <li>Effective</li> <li>Person Centred</li> </ul>
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.

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#### SCOTTISH AMBULANCE SERVICE BOARD

#### 2030 STRATEGY DELIVERY UPDATE

# KAREN BROGAN, ASSOCIATE 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 the ongoing development of the report to incorporate Board feedback, recognising that work continues on development.
- Discuss progress in relation to delivery of the 2030 Strategy portfolios.

#### SECTION 3: BACKGROUND

The 2030 Portfolio Boards met for the first time in November 2022, chaired by their respective Portfolio Executive leads. 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.

It is important to note that reporting is still very much evolving with ongoing support to delivery leads to guide them through the new reporting templates and requirements and the development of detailed impact assessments and performance reporting is also being progressed. In supporting the development of the reporting, four of the non Executive Board

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members have met with the Portfolio Manager and their suggestions are being progressed. An update on the discussion is included within the paper.

## 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.

Table 1 – High Level Summary of Project Status

Portfolio	Green	Amber	Red	Other
Integrated Planned, Unscheduled & Urgent Care	9	2		1
Data, Digital, Innovation & Research	6	1		
Communities & Place	4			4
Preventative & Proactive Care	5			
Workforce & Wellbeing	7	2		1
Totals	31	5		6

## 4.2 Projects in Other Status

In relation to the 'other' category there are 4 Projects within the Communities & Place Portfolio, 1 in Integrated Planned, Urgent & Unscheduled Care and 1 in Workforce & Wellbeing which are all in planning or early scoping stages.

## **Community Hubs / South Station Delivery**

The South Station project has successfully cleared the Initial Agreement (IA) stage, next steps are to progress towards Outline Business Case.

The Community Hub's Project Brief has been created and sent to the PMO for a thorough review of its scope and scale. The objectives of the project are now outlined comprehensively. We have identified the key stakeholders involved and are conducting monthly meetings with HIS.

#### **Community Planning Development**

The analysis of the Service's representation in CPPs throughout Scotland has been completed.

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

Our next step is to examine the representative roles in these partnerships more closely, highlighting the specific ways the Service contributes and finding methods to improve our

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effectiveness in these community collaborations in addition to addressing representation gaps.

## **Preparation for National Care Service**

Deputy Director of Care Quality and Professional Development will lead on the National Care Service portfolio once appointed. The West Regional Planning Manager has agreed to join the network of meetings for this work in the interim.

## **Development of Sustainability Strategy**

The Development of the sustainability strategy is now complete and in implementation stages.

## **Technician to Paramedic Progression**

Extensive research and engagement has been taking place over the last few months to explore potential education routes for progression from Technician to Paramedic.

Positive steps have been made towards finding a solution through an in-depth understanding of the landscape and complexities and extensive strategic engagement endeavours.

These options have been explored in detail in the form of a business case to the Board.

## **Scheduled Care Transformation Programme**

A new Scheduled Care Transformation Programme is being established in May 2023 to enable

- 1. Development of a Scheduled Care strategy
- Delivery of the ORH Demand & Capacity Review outputs which will see shift patterns optimised across the country and resource realigned to support timed admissions
- 3. A full review and implementation of a revised Patient Needs Assessment (PNA)
- 4. A review and Implementation of Auto plan

A draft programme proposal was submitted to the engine room and approved and a Programme Board will be established in May 2023.

#### 4.3 Projects in Red Status for Delivery

There are no projects in Red status for delivery.

Since the last update to the Board there have been developments around the ICCS Project which now has a confirmed a rollout date commencing Monday 5 June 2023.

#### 4.4 Projects in Amber Status for Delivery

## **HCP Online Bookings**

The aim of the HCP Online Booking Project is to implement an online ambulance booking system for use by Healthcare Professionals. The online booking of emergency and timed admissions will become the recommended alternative to telephone bookings. The target

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date for the final go-live date by which all territorial Boards can make online bookings has yet to be agreed but is expected to be no earlier than autumn 2023.

The project is now Amber due to postponement of the first pilot to prioritise resources towards the NHS 24 2 way interface work. There is now a requirement to assess and agree new delivery timelines at the next project Board in May 2023.

In the meantime, software enhancements have been developed and are available to deploy to the test environment. There is also a process underway to identify the boards which the Service would most like to participate in the pilot, with the aim to have this decision approved by the Project Board during May 2023.

## SAS/NHS 24 (Digital Patient Handover)

The 2 way Interface with NHS 24 (Digital patient handover) was initially expected be completed in Q1 2023/24 however development work on the NHS 24 system is still required. Although the technical aspects are complete from a SAS perspective and there is understanding of the work packages to be delivered, there is not yet an agreed outline plan with new start/finish dates and durations.

To enable delivery, a new joint Project Board has been established and met for the first time in May and it is expected that delivery timelines will be agreed at the next meeting on 17 June 2023.

## GRS Timecard Project & Implementation of the APP

This particular project is the development and implementation of an electronic timesheet on the GRS system to feed the payroll system to reduce the requirements for paper timesheets and the introduction and rollout of GRS App to Mobile Devices.

The App was successfully implemented in December 2022 however this project continues to be affected by an unresolved technical issue which was expected to be resolved by the end of March 2023. The technical issue has been escalated to the Managing Director of the supplier organisation, and now awaiting a date for a formal meeting.

In the meantime, whilst discussions are being progressed around a technical fix, workshops have been held with staff to map existing processes and develop end to end process and governance arrangements for implementation.

#### **Statutory & Mandatory Training**

Discussions are continuing with NES around TURAS Learn and the ongoing reporting of statutory and mandatory training for Service staff with a revised implementation date of June 2023.

#### **Rest Period**

While significant work has already taken place jointly with our staff side partners in relation to the Rest Period project, it is unlikely that we will reach formal agreement at this stage. A further date with ACAS has been arranged for 22 May 2023.

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## 4.5 Programmes/Projects Back on Track

The High Intensity User Project, Health & Wellbeing, ICCS Project and Maternity and Neonatal Project are now back on track since the last update to the Board in March 2023.

## 4.6 Portfolio impact on Delivery of Strategic Aims

Our 2030 Strategy and supporting delivery plans aims to

- 1. Save more lives
- 2. Improve Health & Wellbeing
- 3. Reduce Inequalities

The Board will be aware that in order to reduce duplication and to enhance our assurance reporting, work is ongoing to revise and align various Board papers.

Development of additional KPI measures in future reports will bring together the timebased measures alongside new and revised workforce and clinically focused performance indicators as discussed at Board development sessions.

Linking to this, discussions and workshops have taken place to start to define a measurement framework and plan to develop a suite of reports to measure the impact at project and portfolio level. Details of identified process and outcome measures have been included for information.

## 4.7 Issues and Risks for Escalation

At this stage there are no issues or 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.

## 4.8 Other Key Developments

#### 4.8.1 Risk Training, Reporting & Management

Risk Training was rolled out to all project leads at the May 2023 Portfolio Boards to maximise the use of the DATIX system to log and manage overall Portfolio Risks in line with the Service Risk Management Policy. The Portfolio Team and Risk Manager are now supporting Project leads with the transfer of all risks onto the DATIX system and this is expected to be complete by the end of May 2023.

The DATIX system has also been updated to include all of the projects within the portfolios, prefixed with portfolio initials. This will enable the extraction of risks from DATIX for all portfolios broken down by project level.

## 4.8.2 Project Milestones/Timelines

Following meetings with Non-Executive Board members, Carol Sinclair and Liz Humphreys, Madeline Smith and Irene Oldfather work has commenced on developing a high level overview of key milestones for each project within the portfolios. A draft of the format has been included within the supporting portfolio packs. Please note that we are currently transitioning from our 2022/23 plan into our 2023/24 plan and there are a number of projects

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where new work plans and milestones are in development. These will be firmed up for the July 2023 Board meeting.

It was anticipated that the development of a measurement framework to assess the impact of projects on the Board strategic ambitions would have been complete by the end of May 2023, however there has been a delay in completing this due to the level of development required on the annual delivery plans. A workshop and follow up meeting have taken place and work to further progress this will be carried out following the development of the medium term plan in June 2023.

It should be noted that there are some early indications of a number of project/portfolio measures that are already contained and reported within the Board's performance reporting and therefore work is required to streamline and minimise any duplication.

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# **Service Board Portfolio Summary Pack**May 2023







Portfolio Lead:

Paul Bassett

Period covered:

1 April to 24 April

**Portfolio RAG** 

## **Portfolio Summary**

Significant progress continues across the portfolio of work with 11 out of 14 projects/programmes on track. CCRP Phase 1 is complete and has now been approved for closure.

The HCP Online Booking Project is now Amber due to postponement of the first pilot to prioritise resources towards the NHS 24 2 way interface work. There is now a requirement to assess and agree new delivery timelines at the next project Board in May 2023. In the meantime, software enhancements have now been developed and are available to deploy to the C3 Test environment and testing of the software enhancements is being scheduled. There is also a process underway to identify the boards which the Service would most like to participate in the pilot, with the aim to have this decision approved by the Project Board during May 2023. The communications and engagement plan will also be reviewed by clinical stakeholders during May 2023.

The 2 way Interface with NHS 24 (Digital patient handover) was initially expected be completed in Q1 2023/24 however development work on the NHS 24 system is still required. Although the technical aspects are complete from a SAS perspective and there is understanding of the work packages to be delivered, there is not yet an agreed outline plan with new start/finish dates and durations. A new joint Project Board has been established and met for the first time in May 2023 and it is expected that delivery timelines will be agreed at the next meeting on 17 June 2023.

In relation to the Demand & Capacity Programme, the Programme is progressing well and remains Green at this stage, however there are some challenges with the availability of Regional Teams that are already undertaking UT and RRV impacting capacity to deliver APs at the same time and Programme Team Resource with PSO moving to a new role out with the Service. In addition to this, there are also some ongoing discussions with Staff Side Colleagues in relation to concerns around a number of locations where the UT/RRV profiles is reducing or being augmented by a different resource type. A meeting is planned for Wednesday 25 May 2023.

A new Scheduled Care Transformation Programme is being established to take forward delivery of a number of key pieces of work that will deliver improvements. The Programme proposal has been approved at engine room and will be tabled at the 2030 Steering Group meeting.





Portfolio Lead:	Paul Bassett	Period covered:	1 April to 24 April	Portfolio RAG				
Related Corporate	Related 4638 – Wider System Changes & Pressures 5062 – Failure to achieve Financial Targets		Pro	ogress	Ri	sks	Issues	Finance
Risks			Last Period	This Period	VH	Н	Н	
Demand and	Capacity Program	nme			0	1	1	
Integrated Cli	nical Hub				0	0	0	
Air Ambulanc	e Re-Procuremen	nt Project			1	3	0	
Resource Pla	nning Review and	l Redesign Projec	et 💮 💮		0	0	0	N/A
Scheduled Ca	re Transformatio	n Programme			0	0	0	N/A
OHCA Project					0	0	1	N/A
Major Trauma	Project				0	1	0	N/A
Stroke / Thror	nbectomy Projec	t			0	0	0	N/A
Urgent & Uns	cheduled Care Co	ollaborative Proje	ct		0	0	2	N/A
HCP Online B	ooking Project	>			0	3	1	
NHS 24 (Digital	al Patient Handov	ver)			0	2	0	TBA
Maternity and	Neonatal Project				0	2	0	N/A





Portfolio Lead:

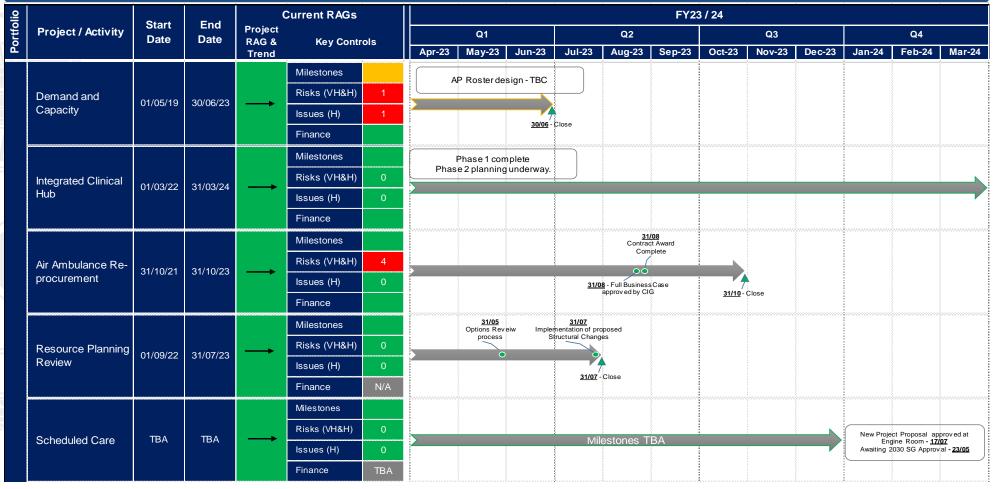
Paul Bassett

Period covered:

1 April to 24 April

Portfolio RAG









Portfolio Lead:

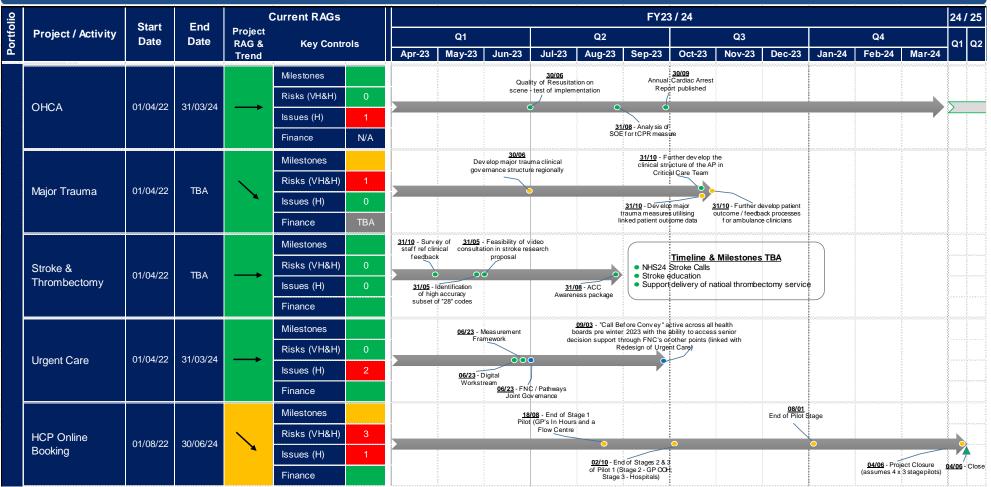
Paul Bassett

Period covered:

1 April to 24 April

Portfolio RAG

## **Portfolio Timeline (continued)**







Portfolio Lead:

Paul Bassett

Period covered:

1 April to 24 April

Portfolio RAG

## **Portfolio Timeline (continued)**

ollo		Current RAGs Start End Project						FY23 / 24																
Portfolio	Project / Activity	Date	Date	Project RAG &	Key Contr	Key Controls		Key Controls		Key Controls		Key Controls		Q1			Q2			Q3			Q4	
ď				Trend	,		Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24						
					Milestones		Sign (	31/05 - ITK Conformance Sign Off (NHS Digital					9 8 8 8 8											
	NHS 2-Way	01/05/23	TBA		Risks (VH&H)	2	qali	ity assurance								1 1 1 1 1								
	Interface	01/03/23	IDA	*	Issues (H)	0			0000	/O 4 N.E.L 4		- : cc	. T II 4											
					Finance				2023	/24 Milestor	nes nave be	en identified	. Timeline ti	o be agreed	and update	1.								
					Milestones			suppo	- Develop stra	livery of the														
	Best Start - Maternity &	01/05/22	31/07/23		Risks (VH&H)	2		Neonatal Transpoi																
	Neonatal Care	01/03/22	31/01/23		Issues (H)	0	<u>07/23</u> - Dev elop awc f uture deliviery of includes integration																	
					Finance	TBA				ery of the Service	e which					: : : : : :								





Portfolio I ead:

Emma Stirling

Period covered:

1 April to 24 April

Portfolio RAG

## **Portfolio Summary**

It is important to recognise that this work is at different phases and to understand the impact that recent system pressures and delays in funding allocation agreement will have had on the progress of some of these projects. Those programmes not yet allocated a lead will be allocated once the Associate Director of Care Quality and Professional Development is in post.

For those projects that are up and running, good work is being progressed. Specific key points for noting are;

- (a) With the announcement of the South Station project successfully clearing the Initial Agreement (IA) stage, the next steps are progressing towards the Outline Business Case.
- (b) The Community Hub's Project Brief has been created and sent to the PMO for a thorough review of its scope and scale. The objectives of the project are now outlined comprehensively. We have identified the key stakeholders involved and are conducting monthly meetings with HIS
- (c) JRCALC Scottish Mental Health Legislation Banner developed and progressing through internal approval mechanisms
- (d) HIU work being progressed following approval from Executive Team to use of Action 15 monies. Recruitment process currently with HR awaiting Vacancy Approval Form sign off by HR lead before recruitment can commence.
- (b) The analysis of SAS's representation in CPPs throughout Scotland has been completed. Our next step is to examine the representative roles in these partnerships more closely, highlighting the specific ways SAS contributes and finding methods to improve our effectiveness in these community collaborations.
- (c) Associate Director of Care Quality and Professional Development will lead on the National Care Service portfolio once appointed.

  The Regional Planning Manager has agreed to join the network of meetings for this work and will discuss once this has taken place.





Portfolio Lead:	Emma Stirling Period covered:	1 April to 24 April	Portfolio RAG				
Related Corporate	4638-Wider system changes & pressures	Prog	ress	Ri	sks	Issues	Finance
Risks		Last Period	This Period	VH	Н	Н	
Community H	lubs / South Station Delivery			TBA	TBA	TBA	TBA
Volunteer En	hancement			0	0	2	N/A
Mental Health	Strategy Implementation			0	1	0	N/A
Dementia Stra	ategy Implementation			0	0	1	N/A
Community P	Planning Development			TBA	TBA	TBA	N/A
High Intensity	y User Service			0	0	0	N/A
Sustainability	Strategy Development			0	0	0	N/A
Preparation for	or National Care Service			TBA	TBA	TBA	TBA



G SCOTLAND

Portfolio Lead:

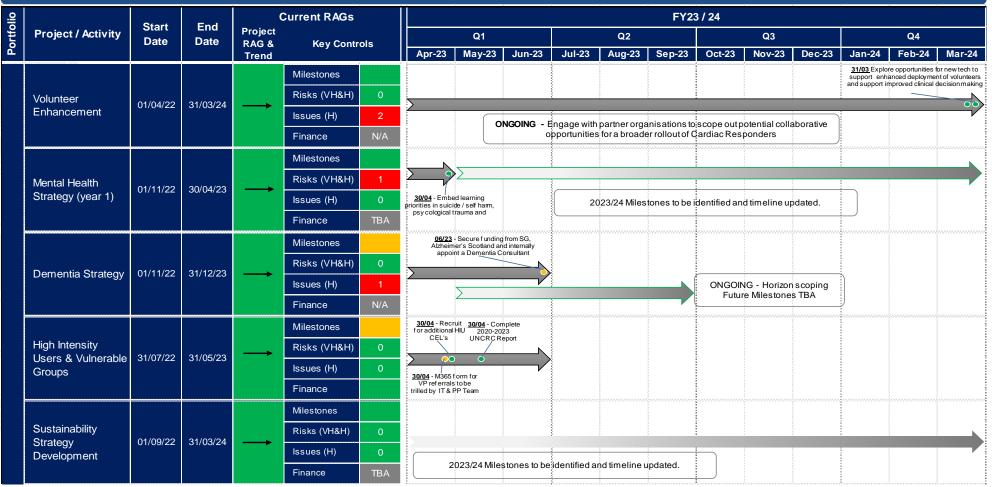
Emma Stirling

Period covered:

1 April to 24 April

Portfolio RAG

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NHS

Portfolio Lead:

Emma Stirling

Period covered:

1 April to 24 April

Portfolio RAG

Portfolio Timeline (	(continued)
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olio		Start	End	_	Current RAGs		FY23 / 24											
Portfolio	Project / Activity	Date	Date	Project RAG &	Key Contro	ols		Q1			Q2			Q3			Q4	
ď				Trend			Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24
					Milestones	TBA					,							
	Preparation for National Care	TBA	TBA	TBA	Risks (VH&H)	TBA	Will be	Will be picked up on appointm			ntment of Deputy Director, CQ&PD				1	:		1
	National Care Service	IBA	IDA	TDA	Issues (H)	TBA							J		1			
					Finance	TBA			į									
					Milestones	ТВА			ļ	<u> </u>	<u> </u>	<u> </u>						
	Anchor Institution				Risks (VH&H)	ТВА									1			
	Development	TBA	TBA	TBA	Issues (H)	ТВА	Scoping						1		1	:		1
					Finance	TBA	1											
					Milestones	ТВА	` <u> </u>		ļ				ļ			·····		
	Community				Risks (VH&H)	ТВА			1									ţ i
	Planning Development	TBA	TBA	ТВА	Issues (H)	TBA	1			1					1			
	Development				Finance	TBA							1					
					Milestones	ТВА			ļ	<b></b>								\
	Community Hubs				Risks (VH&H)	TBA	New Pro	oject Propos	sal for Youn			proved at			1	;		1
	and South Station	TBA	ТВА	ТВА	· · · · · · · · · · · · · · · · · · ·					oom - <u>17/07</u>					1			
	Delivery				Issues (H)	TBA							V		1			
					Finance	TBA												
					Milestones	TBA			1	1					1			
	UNCRC	TBA	ТВА	ТВА	Risks (VH&H)	TBA	UNC	RC Report o	completed -	awaiting out	put and next	steps						
					Issues (H)	TBA	`	1					IJ		1	;		1
					Finance	TBA	`L			<u></u>	<u></u>							





Portfolio Lead:

Julie Carter

Period covered:

1 April to 24 April

Portfolio RAG

#### **Portfolio Summary**

Overall good progress continues to be made across the majority of projects within the portfolio, however as reported in the last period the UK led Emergency Services Mobile Communications Programme (ESMCP) has incurred further delays, which means that SAS will not transition off Airwave on to ESN before 2028. In response to this the Service has reviewed its actions and governance to ensure risks and implications of this delay are minimised.

A new business case and integrated programme plan is expected at the earliest in 2024 from the Home Office and as a result the SAS Programme Management Office has decided to close down this SAS ESN Delivery Programme and the Programme team will be stood down on a temporary basis. As previously reported the Airwave Sustainability project has been stood up to ensure the Service ICCS and Airwave terminal provision are sustainable until transition to the Emergency Service Network (ESN).

At this stage of the Portfolio reporting SAS has also not been able to complete the end-to-end testing on LifeX due to unavailability of test environment. This was expected to be available in January 2023 and at this stage there was no update on when the system will be available for testing. If there were any delays to delivery of the upgraded test environment beyond February 2023, this date for implementation in May is likely to slip. At this time of reporting (May 2023) there has been significant work on the end to end testing and the Service is planned go live with the new ICCS on 5 June 2023. There is a detailed implementation plan in place and a go/no go decision will be made in early June 2023.

There has also been delays to GRS Timecard due to a technical issue with the supplier. The technical issue has been escalated within the supplier organisation and expected to be resolved **imminently.** Meanwhile, workshops have been arranged with staff to map existing processes and develop end to end process and governance arrangements for implementation. In addition to this, a Project Board is being established to oversee the roll out of this.

Work is ongoing to develop the Delivery Plan required to implement the Service Digital & Data Strategy. A draft delivery plan for 2023/24 was presented at the March 2023 DDIR Portfolio Board meeting to enable feedback from members to further develop with a view to presenting a final draft for approval at the DDIR Board meeting on 2 May 2023. This will be aligned and incorporated into the Annual Delivery Plan for 2023/24.

The "cyber resilience improvement objective" is on track with work to progress the "2022 NIS Action Plan" with identified action owners. The New Public Sector Cyber Resilience Framework v2.0 (PSCRF) has been received from Scottish Government and there is a plan to complete a full review of PSCRF to provide the necessary evidence for the 2023 audit.

The Smart Phone Project has now been closed with an end of Project Report due to be presented to the 2030 Steering Group to discuss next steps in identifying an operational lead to take forward the Smartphone Usage.





Portfolio Lead:	Julie Carter Period covered: 1 A	pril to 24 April	Portfolio RAG				
Related Corporate Risks	4639 – Response to a Cyber Incident 4649 – Further Slippage in ESN 5062 – Failure to achieve Financial Targets	Prog Last Period	gress This Period	Ris	sks H	Issues H	Finance
Digital and Da	ata Strategy Delivery			0	0	0	N/A
GRS Timecar	rd and App			0	5	0	N/A
ICCS				0	1	2	
Airwave Sust	ainability Project			0	2	0	N/A
Digital Workp	place Phase 2			0	1	3	
RD&I Strategy	y Development and Implementation			2	1	2	N/A
Cyber Resilie	nce			0	0	0	N/A



NHS

Portfolio Lead:

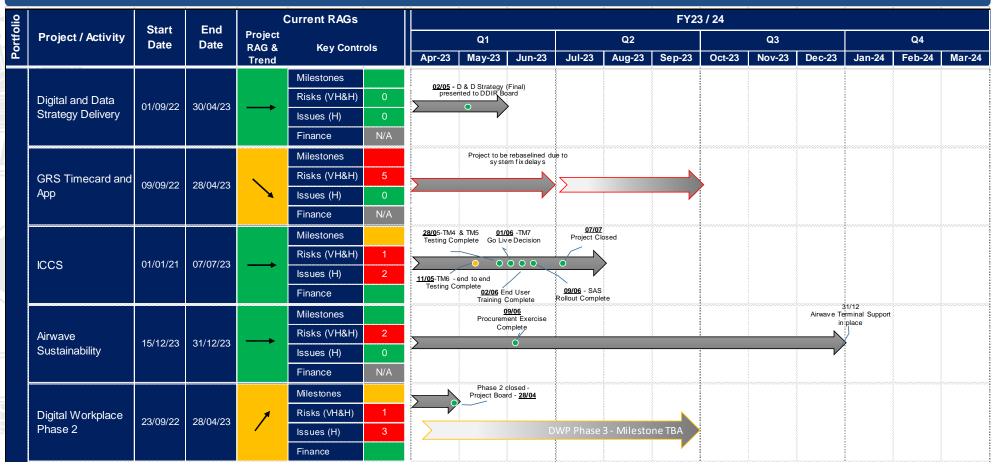
Julie Carter

Period covered:

1 April to 24 April

Portfolio RAG

## **Portfolio Timeline**





NHS

Portfolio Lead:

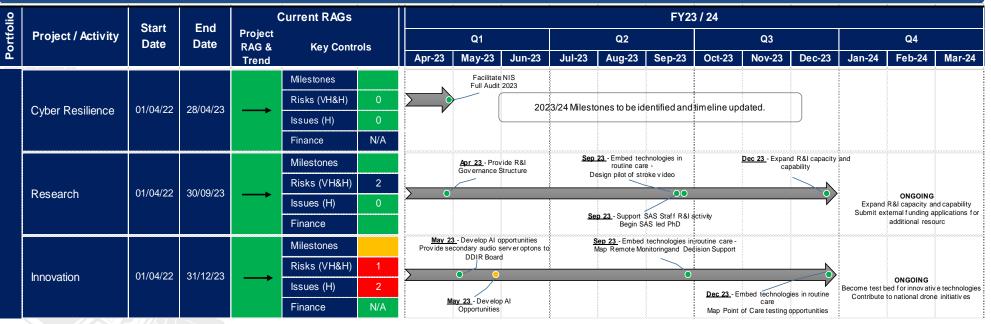
Julie Carter

Period covered:

1 April to 24 April

Portfolio RAG

## **Portfolio Timeline (continued)**





## **Preventative and Proactive Care Portfolio Report – 2030 SG**



Portfolio I ead:

Jim Ward

Period covered:

1 April to 24 April

Portfolio RAG

## **Portfolio Summary**

Progress is being made across the entire portfolio as system pressures have eased off, however there is a key risk around delivery of the Drug Harm work on an ongoing basis.

Drug Harm Reduction team funding has been indicated as continuing with commitment from SAS to continue the work beyond 2025 being sought. Securing funding remains a key priority to build on the significant gains already made and to ensure delivery of the aims of the drug death task force. However all three previous members of staff are moving on and a new team will need to be introduced to build on the significant success of the initial project. Approval to recruit was agreed by Executive Team mid May.

Pathway Navigation has continued to contribute to strong performance in non-conveyance. Specific engagement and support of this has been with Flow Navigation Centres, SDEC and falls pathways. The central pathways hub continues to see a high volume of calls, with evidence of increasing referrals for key priorities such as mental health, through the facilitation of DBI referrals.

Work is underway to utilise the Pathways section within JRCALC to create a central point for pathway information, reducing variation and increasing access to this information for clinicians.

Significant progress has been made in the provision and roll out of End of Life Training, development of guidelines, engagement with partners, development of pathways and IT developments to support improvements in End of Life Care.

The Northern Alliance Ambulance Improving Population Health & Reducing Inequalities Group are in the process of developing a toolkit and self assessment matrix for Ambulance Services to test PH maturity levels that could be helpful in identifying areas of improvement and opportunity.



# **Preventative and Proactive Care Portfolio Report – 2030 SG**



Portfolio Lead:	Jim Ward	Period covered:	1 April to 24 April	Portfolio RAG				
Related Corporate	4638-Wider system cl 5062-Failure to achiev		Prog	gress	Ris	sks	Issues	Finance
Risks	3002-1 allule to acrite	ve imaneiai target	Last Period	This Period	VH	Н	Н	
Drug Harm R	eduction				0	0	0	TBA
Partnership V	Vorking (Primary (	Care & NHS24)			0	0	0	TBA
End of Life C	are				0	0	0	N/A
Pathway Nav	igation Hub Pathw	ays			0	0	0	N/A
Population H	ealth Improvemen	t			0	0	0	N/A



# **Preventative and Proactive Care Portfolio Report – 2030 SG**

NHS

Portfolio Lead:

Jim Ward

Period covered:

1 April to 24 April

Portfolio RAG

## **Portfolio Timeline**

oilo		Ctout	End	(	Current RAGs		FY23 / 24 24	/ 25	
Portfolio	Project / Activity	Start Date	End Date	Project RAG &	Key Contr	ole	Q1 Q2 Q3 Q4 Q1 Q1	2 03	04
P				Trend	Ney Conti	Ols	Apr-23 May-23 Jun-23 Jul-23 Aug-23 Sep-23 Oct-23 Nov-23 Dec-23 Jan-24 Feb-24 Mar-24	2 00	<b>4</b>
					Milestones		06/23 - Ordering O7/23 - Analysis of O6/23 - Ordering THN supply across of IEP DIDTE turbet project Of IEP Supply & data revised Alcohol/Drugs O7/23 - Rapid Response & Ady Life Supply across of IEP DIDTE turbet project O7 IEP Supply & data revised Alcohol/Drugs O7/23 - Rapid Response & Ady Life Supply & DIDTE turbet project O7 IEP Supply & DIDTE turbet D7 IEP Supply &		
	Drug Harm	04/04/00	31/12/23		Risks (VH&H)	0	equipment confirmed sharing with PHS /Poisoning.screen Agree strategy / Priorities with OHCA Lead		
	Reduction	01/04/23	31/12/23		Issues (H)	0	06/23 - IEP JRCALC 07/23 - Automation 09/23 - Inc number of monthly PHS 07/23 - Stations Idd & identified suitable for drug 12/23 . Dev suite of measures		
					Finance	N/A	95/23 - Procure guidlines finalised of monthly PHS guidlines finalised of monthly PHS guidlines finalised THN supply data equip on board vehicles for initial IEP roll cut of the same to support improved to support improved understanding of NFOD		
					Milestones	TBA			
	Partnership	ТВА	ТВА	TBA	Risks (VH&H)	TBA	Awaiting timeline and milestone plan		
	Working	IDA	IDA	IDA	Issues (H)	TBA			
					Finance	N/A			
					Milestones		10/23 - Measurement framework 10/23 - Stakeholder engagement 01/25 - Education / Train	iing	
	End of Life Care	01/04/22	31/01/25		Risks (VH&H)	0	(patient, staff & partners) within SAS		
	Life of Life Care	01/04/22	31/01/23		Issues (H)	0	12/23 - Medication w/stream -	//	
					Finance	TBA	First stage (Midazolam PGD to  01/25 - Pathway de MMG, Technician JIC paper  and implement	velopment tation	
					Milestones		14/04 - Initiate planning 05/23 - Pathway s - Staff on next steps GG&C Engagement Session FNC / Duty AP		
	Pathway Navigation	01/04/23	30/06/23	<b>→</b>	Risks (VH&H)	0	dev elopment plan Feedback Newsletter Dev		
	Hub	01/01/20	30/00/20		Issues (H)	0	06/23 - Review falls pathways 31/04 - Dev wider SDEC /RAC nationally, identify areas for PTS pathways with NHS Lothian to refer patients at High Risk of		
					Finance	TBA	31/04 - Initiate planning on p5/23 - Nat SAS Urgent Care next steps Lanarkshire FNC / Pathway's cpd session		
					Milestones	TBA			
	Population Health	TBA	ТВА	TBA	Risks (VH&H)	TBA	Awaiting timeline and milestone plan		
	Review				Issues (H)	TBA			
					Finance	TBA			





Portfolio I ead:

Avril Keen

Period covered:

1 April to 24 April

Portfolio RAG

## **Portfolio Summary**

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

The People strategy is now well underway in terms of its design and progress will formally be chartered from now on with a dedicated highlight report. Our workforce performance metrics are currently being re-assessed by the Head of Workforce Systems and Analytics and this work is continuing at pace to re-align our workforce performance measures accordingly. One of the key portfolios relates to Rest Breaks and whilst significant work has already taken place jointly with our staff side partners, it is unlikely that we will reach formal agreement at this stage. A further date with ACAS has been arranged for 22 May 2023.

The Agile Working Group is being re-started as, in the absence of the paused further guidance from Scottish Government, it is necessary to review our current guidance and consider how this will operate going forward within SAS.

The proposals in regard to the new training model are still under discussion and progress may be limited until June 2023. Discussions are continuing with NES around TURAS Learn and the ongoing reporting of statutory and mandatory training for SAS staff with a revised implementation date of June 2023.

In relation to the reduction in on call work, the West Region now has enough staff to remove on call working and implement 2 x 24/7 vehicles after March 2023.

Finally, it is pleasing to note our commitment to leadership and management training and development is re-affirmed with the formal re-start of our FLMP courses, with a very clear focus on equipping all of our managers with a comprehensive toolkit of skills. This is further enhanced by the design and implementation of a programme for aspiring managers within SAS.





Portfolio Lead:	Avril Keen Period	covered: 1 Ap	oril to 24 April	Portfolio RAG				
Related Corporate	1 – Risk 4636 (Rest Break Compli	ance)	Prog	jress	Ris	sks	Issues	Finance
Risks			Last Period	This Period	VH	Н	Н	
Health and W	ellbeing Implementation				0	0	0	N/A
Agile Working	g Group				0	0	0	N/A
Organisation	al Leadership Developmen	nt			0	0	1	N/A
Rest Break Co	ompliance				0	0	1	N/A
Workforce Pla	anning & Performance Mo	nitoring			0	0	0	N/A
<b>Equality</b> , Dive	rsity and Inclusion				0	0	0	N/A
On Call Redu	ction				0	0	0	N/A
People Strate	gy Development				0	0	1	N/A
Training and	Education Model Develop	ment	ТВА	ТВА	TBA	TBA	TBA	TBA
Statutory and	Mandatory Training Deve	lopment			0	0	2	N/A



NHS

Portfolio Lead:

Avril Keen

Period covered:

1 April to 24 April

Portfolio RAG

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ollo		Ctout	End	C	Current RAGs						FY2	3 / 24					
Portfolio	Project / Activity	Start Date	End Date	Project RAG &	Key Cont	rols	Q1			Q2			Q3		Q4		
Pc				Trend	ney cont	-015	Apr-23 May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24
					Milestones		13/04 - Present initial work to Staff 05/2	3 - Present to	<b>08/2</b> Fina	23 - Publication o I People Strateg	i Y						
	Decade Chartery	31/08/22	31/08/23		Risks (VH&H)	0	Engagement Session Exec	3 - Present to Team and NPF									
	People Strategy	31/06/22	31/06/23		Issues (H)	1	15/05 - Additional Staff		<u> </u>								
					Finance	N/A	Engagement Sessions 3 (x3 Reg, plus Nat Ops)	1/05 - Draft pres to SAS Board	ented								
					Milestones		Culture Week	ver a Healthy Coincides with		an interactive	op and establish Wellbeing Hub						
		04/04/04	31/03/24		Risks (VH&H)	0	"What Matters To You Day"			on @SA	S website <sup>®</sup>						
	Health & Wellbeing	01/04/21	31/03/24		Issues (H)	0	31/05 - Complete TRiM as	sessor	3	<b>0/09</b> - Developa	wellbeing	31/10 - Develop a wellbeing network across					
					Finance	N/A	training, develop infrastruc support and launch our across SAS		calendar with ev ents, and promotional activi f or the yea		ity scheduled	SAS to promote and share good prace regarding wellbeing activity and progr approaches to peer support		d progress			
					Milestones		05/23 - Run data for O Locations during 22/23		review data a	t On Call WG to	ng review E	xec Team to C based on					
		04/04/20	30/00/32		Risks (VH&H)	0	gather intel			ority locations		available					
	On Call reduction	01/04/22	30/09/23	<b>—</b>	Issues (H)	0	06/23 - Identify new funding available		08/23 - [	Develop BC for							
					Finance		to reduce on call v 23/24 with Finar discussions with T	ce Team inc	23/24 set against funding av ail to reduce on call working	reduce on call		tionalise ion Plan					
					Milestones		<u>04/23</u> - Develop Agile Working										
	Agile Working	01/11/22	ТВА		Risks (VH&H)	0	Policy		Todayana NASA	stones TBA							
	Policy	01/11/22	IBA		Issues (H)	0	16/05 - Present		uture Miles	stones TBA							
					Finance	N/A	Policy to PRG										
					Milestones		27/04 - ALDP Course Design Complete	Col	BC Jul - FLMP ort 22-1 Finishe	es (	Cohort 23-2	TBC Oct - FLMF Cohort 22-3	, , ,			Coho	<u>r</u> - FLMP rt 23-1
	Organisational	01/04/22	31/03/24	1	Risks (VH&H)	0	27/04 - LftFEnrolement Commences				ommences	Finishes				Fini	shes
	Leadership Development	01/04/22	31/03/24		Issues (H)	1	27/04 - FLMP		TBC Jul -			TBC Oct -	TBC Oct			ть	C Mar -
					Finance	N/A	Commences ALDP Cohor	Cohort 23-1 ALDD Cohort 23-1 FLMD C			А	LDP Cohort 23- Finishes	1 ALDP Cohort Finishes	23-2		ALDP	Cohort 23-2 nishes



NHS

Portfolio Lead:

Avril Keen

Period covered:

1 April to 24 April

Portfolio RAG

Portfolio Timeline (continued)	I)
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ollo	Project / Activity	Start Date	End Date	Current RAGs			FY23 / 24											
Portfolio				Project RAG & Trend	Key Controls		Q1			Q2			Q3		Q4			
							Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24
	Turas Learn & Statutory / Mandatory Training	01/11/22	ТВА	>	Milestones		01/04 - MoU Signed	Agreement on how to manage users  31/05 - Go Live date for learners  15/06 - Report requirements explored										
					Risks (VH&H)	0				NA:L 1	TO A							
					Issues (H)	2				Milestone	s TBA							
					Finance	N/A			requirement	ring S								
	Rest Break	28/09/22	ТВА	>	Milestones		2023/24											
					Risks (VH&H)	0		4 Milestones have been i	dentified Tim	neline to be	e agreed and	updated						
					Issues (H)	1				acritile d.		agreed and	apadiod.	)				
					Finance	N/A												
	Equality, Diversity & Inclusion	ТВА	31/12/23	<b>-</b>	Milestones		; Outcomes U	lpdate, Gender P	reaming Report, Equality ite, Gender Pay Gap Report Statement approved by				Changing Faces action Plan					
					Risks (VH&H)	0	SGC and I	Board and submitted to SG.					Ongoing through 2023 / 24.					
					Issues (H)	0	04/23 - Establi Gender Equalit Woman's Netw				<u>09/23</u> - Equality		12/23 - Provide	ov ide updates to	SGC			
					Finance	N/A		lity /	ty /			Monitoring Repor Annual	-	Forum e.g	F on SAS Equali g. Proud@SAS, [ r Network, LGBT	thnic		
	Workforce Planning and Performance Monitoring	01/03/23	ТВА	<b>-</b>	Milestones		required actions for of a Workforce D	Review of initial recommendations	opment									
					Risks (VH&H)	0				Future	Milestones	TBA						
					Issues (H)	0				ratare	1111100101101							
					Finance	N/A			ication of further actions and dicative timescales									
	Training and Education Model Development	ТВА	ТВА		Milestones	TBA												
					Risks (VH&H)	ТВА	2023/24 Mile	tongs to be: "	entified and t	timelineur	adated							
					Issues (H)	TBA		JZS/Z4 IVIIIES	iones io de l	iuentilled and	ı tımeline up	Juated.						
					Finance	TBA												