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24 July 2019

Dear Angiolina,

Thank you for submitting your Annual Operational Plan (AOP), setting out your operational priorities and key actions for 2019/20. We would like to take this opportunity to thank you and your team for all the hard work that has gone into the preparation of the AOP over the last few months.

As detailed in the guidance we issued in February 2019, the AOP is intended to support NHS Boards and their partners to deliver safe, effective and accessible treatment and care, and provides the basis on which the Scottish Government will hold Boards to account for their contribution over the year to delivering the Cabinet Secretary's priorities including waiting times improvement; investment in mental health; and achieving greater progress and pace in the integration of Health and Social Care.

We are happy to sign off the NHS 24 Annual Operational Plan for this year and hope that the following comments will be helpful as your plan is taken forward.

As a Special Board operating an essential frontline service you have an important role to play in helping to support a number of SG priorities. Your plan presents a clear focus for this year on taking forward work in a number of these priority areas including primary care sustainability, waiting times improvement, support for mental health and digital transformation. As ever, close engagement with key partners such as Health and Social Care partnerships, Health Boards and the Ambulance Service will be essential in driving this work forward.

Performance:

Your plan provides significant detail on the work you are undertaking to improve the whole patient journey through your 111 service by beginning to focus on ensuring patients receive appropriate advice at the first point of contact and that patients who require a call back receive one within designated timeframes, ensuring patient safety. We are aware that engagement you have undertaken with users of your service have shown that this is what



patients would prefer. We appreciate the requirement for you to balance this new approach with ensuring that calls are still answered as quickly as possible and note your intention to look to achieve a 75% access service level by quarter 4 of 2019/20, as has been discussed and agreed with the sponsor team.

Workforce:

We are aware of the challenges NHS 24 has encountered in terms of staff absence levels and your plan details a number of actions which will be progressed in year to look to improve staff sickness rates. These include improved support for staff and a number of roadshow events to promote health and well being and communicate the issues around staff absence from work. We expect that this engagement and the revised approach to absence management will have a positive impact on absence levels in year.

Finance:

Your financial plan sets out an indicative breakeven position in each year of the three year planning cycle to 2021-22, along with detail of your planning assumptions and approach. We are content to approve the plan, with the expectation that the Board delivers breakeven in 2019-20. We will use the three-year finance plan as the basis of our discussions with you throughout 2019-20 and into future years.

Plans for the £15 million National Boards' efficiency savings were scheduled to be fully developed in collaboration with your National Board partners by the end of June 2019. We expect this to include any adjustment to the baseline position for 2019-20 as well as allocation of the shortfall from 2018-19. It is therefore essential that planning assumptions are aligned across National Boards and with the approach agreed by the National Boards' Directors of Finance Group.

In view of this, following the first quarter of the financial year, we have asked for an update on the Boards financial position, including progress in the identification and delivery of savings. Guidance has been issued to your Director of Finance and we look forward to receiving your update.

Conclusion:

As previously stated, the finalised AOP will be used as the basis for engagement with the Board over the coming year and we look forward to working with you to deliver ongoing improvement of safe and accessible treatment and care. We are particularly interested in hearing about progress on the ambitious actions around workforce and the developing Clinical Service Delivery Model. These have the potential to transform how services are delivered in a sometimes challenging environment.

Whilst not specifically mentioned in your plan we are aware of the challenges faced by the Service with regard to the impending accommodation move from the Golden Jubilee Hospital. It is important that realistic timescales are agreed here as part of your on-going discussions with NHS GG&C to help minimise the disruption of this move both to staff and to patients. We expect to be kept informed of progress as these discussions develop and if either the sponsor team or myself can help in any way to make this as smooth a transition as possible then please do let us know.

If you have any questions about this letter, please contact Fergus Millan in the Community Health and Social Care Directorate in the first instance (fergus.millan@gov.scot).

Yours sincerely,



Malcolm Wright
Director-General for Health & Social Care and Chief Executive of NHSScotland

