

NHS Ayrshire & Arran



Meeting:	Ayrshire and Arran NHS Board
Meeting date:	Monday 5 February 2024
Title:	Delivery Plan 2024-25
Responsible Director:	Kirstin Dickson, Director for Transformation and Sustainability
Report Author:	Gillian Arnold, Assistant Director of Planning and Commissioning Valerie Richmond, Senior Planning Officer

1. Purpose

This is presented to the Board for:

- Discussion

This paper relates to:

- Annual Operational Plan

This aligns to the following NHS Scotland quality ambitions:

- Safe
- Effective
- Person Centred

2. Report summary

2.1 Situation

The NHS Scotland Delivery Plan 2024-25 commissioning pack was received on 4 December 2023. Scottish Government are keen to integrate the different planning cycles, including financial, service and workforce. This will provide Boards with the opportunity for greater collaboration and alignment of plans across the different disciplines, ensuring clearer priorities and goals are set for the benefit of the population of Scotland.

The Board are being provided with the NHS Scotland Joint Commissioning Letter (Appendix 1) and Delivery Plan Guidance (Appendix 2) at this time for awareness and discussion.

2.2 Background

The previously issued NHS Delivery Plan Guidance 2023-24 took planning forward from the volatility of the previous three years and helped make further progress along the path towards recovery and renewal as set out in Remobilise, Recover, Re-design:

the framework for NHS Scotland. It asked all NHS Boards to produce both Annual Delivery Plans for 2023-24 and draft Medium Term Plans up to 2026.

The core aim of this year's guidance is to support NHS Ayrshire & Arran in updating our Delivery Plan into a Three Year Delivery Plan with detailed actions for 2024-25 which are both aligned to our Three Year Financial Plans and to the ministerial priorities as set out in the First Minister's vision for Scotland and the outcomes the government aims to achieve by 2026, [Equality, opportunity, community: New leadership - A fresh start - gov.scot \(www.gov.scot\)](https://www.gov.scot/Topics/Equality-Opportunity-Community). For 2024-25 and to maintain consistency the Delivery Plans are framed around the previously utilised 10 'Drivers for Recovery' from 2023-24.

2.3 Assessment

Boards have been asked to present realistic plans which reflect the extremely challenging financial position we face going into 2024. The planning priorities set out in the guidance are intended to give clarity on high level priorities which Boards should deliver in 202-25, whilst remaining flexible enough to allow Boards to appropriately plan and prioritise within our own financial context.

We will work alongside service leads across the health and care system within Ayrshire and Arran to develop the Delivery Plan. The plan will provide detail on how we will deliver at a local level on the ministerial commitments, how we will meet the needs of our local populations and how we will provide services within the scope of the resources available to us.

As signalled in the 2024-25 Delivery Plan Guidance, Scottish Government issued an overview on Delivering Sustainable Services (Appendix 3) and a template (Appendix 4) on 21 December 2023 for Boards to populate and return by 10 January 2024, this has now been extended to 12 January 2024. This will provide an understanding of the sustainability challenges in terms of clinical services across NHS Scotland and critically to develop options.

The primary mechanism against which the progress and impact of the Delivery Plans will be reported in 2024-25 will be via the forthcoming Delivery Performance Framework. This will replace the previous ADP2 excel template. Scottish Government will provide additional guidance by the end of January 2024 setting out the requirements on Boards to develop 2024-25 delivery trajectories and how this refreshed approach to reporting progress will be implemented.

Boards are to submit updated Three Year Delivery Plans by 7 March 2024, with the aim of signing these off early into 2024-25 financial year.

Following submission of our draft Delivery Plan 2024-25 in March 2024 to Scottish Government, we expect to present the Delivery Plan to the Board for approval in May 2024. The Delivery Plan 2024-25 will then become our contract with Scottish Government for the year.

2.3.1 Quality/patient care

The quality of care for patients will be a particular focus within the Delivery Plan and is described through the links with this document and the Delivery Plan.

2.3.2 Workforce

Workforce will form a component part of the Delivery Plan and further detail is clearly set out in the 3 Year Workforce Plans completed by NHS Ayrshire & Arran and East, North and South Ayrshire Health and Social Care Partnerships. These plans cover the period 2022–2025.

2.3.3 Financial

NHS Boards are required to provide financial plans in line with the NHS Scotland Financial Plans Guidance covering the three financial years: 2024-25 to 2026-27, to ensure consistency and to facilitate meaningful comparisons across NHS Scotland Boards. The Delivery Plan will be aligned to the Financial Plans.

2.3.4 Risk assessment/management

Risks to delivery of the various aspects of the Delivery Plan will be assessed and will be managed throughout the lifespan of the plan.

2.3.5 Equality and diversity, including health inequalities

The Delivery Plan will be drafted within the context of the Programme for Government and take cognisance of the delivery of services within the Public Sector Equality Duty, Fairer Scotland Duty and the Board's Equalities Outcomes. Impact assessments will be completed as required for the component parts of the Delivery Plan.

2.3.6 Other impacts

The Delivery Plan will be set within the context of all the work undertaken across the Health and Care system within Ayrshire and Arran. It will provide details of how we will deliver at a local level on the ministerial commitments, how we will meet the needs of our local populations and how we will provide services within the scope of the resources available to us.

2.3.7 Communication, involvement, engagement and consultation

The Delivery Plan will be developed in collaboration with NHS Ayrshire & Arran, East, North and South Health and Social Care Partnership and key partners. It will be a culmination of a number of plans which will have been communicated to staff and/or patients and public.

2.3.8 Route to the meeting

- 30 January 2024 – CMT Meeting – NHS Scotland Delivery Plan Guidance

2.4 Recommendation

For awareness. Members are asked to note the content of the NHS Scotland Joint Commissioning Letter dated 4 December 2023 and associated documents.

For discussion. Members are asked to review and ask any questions they may have on the content of the NHS Scotland Joint Commissioning Letter dated 4 December 2023 and associated documents.

3. List of appendices

The following appendices are included with this report:

- Appendix 1, NHS Scotland Joint Commissioning Letter
- Appendix 2, NHS Scotland Delivery Plan Guidance
- Appendix 3, Overview Delivering Sustainable Services
- Appendix 4, Delivering Sustainable Services Template

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To: NHS Board Chief Executives

Cc: NHS Directors of Finance

Cc: NHS Directors of Planning

via email

4 December 2023

Dear Colleagues

PLANNING APPROACH FOR 2024-25

As colleagues will be aware, the financial context is extremely challenging with the majority of NHS Boards presenting significant budgetary gaps. The letter of 29 November from the Director General for Health and Social Care and Chief Executive of NHS Scotland outlines recent Autumn Budget Statement did not provide any relief in terms of financial planning assumptions for the 2024-25 budget. We recognise short-term actions requested of NHS Boards to support 2023-24 financial performance will not support the wider scale of change required to meet pressures in 2024-25 and beyond.

In this context, we are writing to outline our approach to planning for the next financial year and beyond.

As you will be aware, we are keen to integrate our different planning cycles - including financial, service and workforce. This will provide Boards with opportunity for greater collaboration and alignment of plans across the different disciplines, ensuring clearer priorities and goals are set for the benefit of the population of Scotland. We acknowledge that this is an iterative process and, as such, this year we are commissioning the Financial Plans and Delivery Plans together.

It is recognised that the Delivery Plans will need to reflect the realities of the financial position that we face going into 2024-25. We are therefore asking Boards to present realistic plans in both areas, and to engage with Scottish Government colleagues where necessary to ensure accurate and robust forecasts.



Three Year Delivery Plans

The previously issued *NHS Delivery Plan Guidance 2023/24* took planning forward from the volatility of the previous three years and helped make further progress along the path towards recovery and renewal as set out in *Re-mobilise, Recover, Re-design: the framework for NHS Scotland*. It asked all NHS Boards to produce both Annual Delivery Plans for 2023-24 and Medium Term Plans covering up until 2026.

These plans are now in place and represent a significant step forward in moving towards a greater level of coordination across NHS Scotland in planning. As attention now turns to the year ahead, the intention is to build on the effective planning already underway, and in particular, to ensure that delivery planning for 2024/25 takes place within the context of the current Medium Term Plans.

Therefore, the core aim of this year's guidance is to support Boards in updating their Medium Term Plans into Three Year Delivery Plans with detailed actions for 24/25 and are both aligned to their Financial Plans, and to the ministerial priorities for NHS Scotland as set out in the guidance document.

The planning priorities set out in the guidance are intended to give clarity on the high level priorities which Boards should deliver in 2024/25, whilst remaining flexible enough to allow Boards to appropriately plan and prioritise within their own financial context.

NHS Boards are to submit updated Three Year Delivery Plans by 7 March 2024, with the aim of signing these off early into the 24/25 financial year. Please submit these returns to healthplanning@gov.scot.

2024-25 Three Year Financial Plans

As set out in the Financial Planning letter of 23 October 2023, NHS Boards are required to provide financial plans covering the three years: 2024-25 to 2026-27.

As stated in the previous letter, there is a clear expectation within the Scottish Government that NHS Boards financial plans for 2024-25 will present:

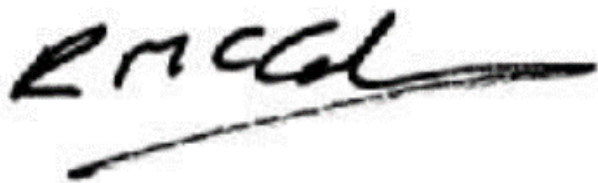
- a clear programme of work and supporting actions to achieve the target of 3% recurring savings on baseline budgets; and
- an improved forecast outturn position compared to your forecast outturn position reported at the start of 2023-24.

To support the preparation of these plans we are issuing a template, guidance and planning assumptions paper. Further guidance will be issued following Scottish Budget on 19 December.

NHS Boards are to provide a draft submission of your financial plans by 29 January, with financial submissions due on 11 March. Please submit these returns to NHSFinanceReturns@gov.scot.

The significant challenges – both financial and operational – facing the NHS in Scotland in 2024 and beyond require continued close working with Chief Executives and your teams to address this. We would like to thank you for your continued support and engagement.

Yours sincerely,



Richard McCallum
Director of Health and Social Care
Finance, Digital and Governance



John Burns
NHSScotland Chief Operating Officer



NHS Scotland Delivery Planning Guidance 2024/25



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1. Purpose of the NHS Scotland Delivery Plan Guidance

Introduction

The previously issued *NHS Delivery Plan Guidance 2023/24* took planning forward from the volatility of the previous three years and helped make further progress along the path towards recovery and renewal as set out in *Re-mobilise, Recover, Re-design: the framework for NHS Scotland*. It asked all NHS Boards to produce both Annual Delivery Plans for 2023-24 and Medium Term Plans covering up until 2026.

These plans are now in place and represent a significant step forward in moving towards a greater level of coordination across NHS Scotland in planning. As attention now turns to the year ahead, the intention is to build on the effective planning already underway, and in particular, to ensure that planning for 2024/25 takes place within the context of the current Medium Term Plans.

The 23/24 NHS Scotland Delivery Plan Guidance set out the first steps of how we will move to a greater level of coordination across NHS Scotland in our planning framework as we focus on delivery of services based on population need. We will consider how each of the component parts of NHS Scotland support Boards and partners in planning and delivering services to meet population needs. Figure 1 provides a summary of the main components of the planning framework. Work continues to establish greater planning coherence nationally, regionally and locally.

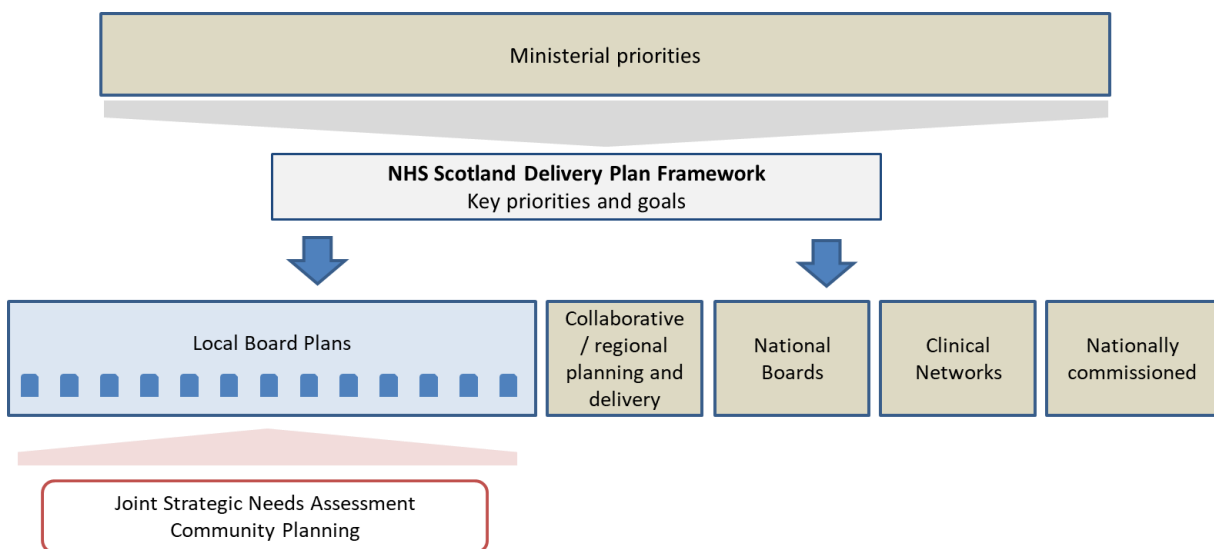


Figure 1

The planning priorities set out in the guidance are intended to give clarity on the high level priorities which Boards should deliver in 2024/25, whilst remaining flexible enough to allow Boards to appropriately plan and prioritise within their own financial context.

The core aim of this year’s guidance is to support Health Boards in updating their Delivery Plans into Three Year Delivery Plans with detailed actions for 24/25 which

are both aligned to their Three Year Financial Plans and to the ministerial priorities as set out in the First Minister’s vision for Scotland and the outcomes the government aims to achieve by 2026, [“Equality, opportunity, community: New leadership - A fresh start”](#)

The Scottish Government recognises that not all NHS Boards have the same set of responsibilities and will work with Boards to support them in applying this guidance in a way that meets their individual needs. In particular, Health Improvement Scotland, NHS 24, NHS Golden Jubilee, NHS NES, NHS National Services Scotland, Public Health Scotland, Scottish Ambulance Services and The State Hospital each has specific remits or organisational features which mean that the framework applicable to health boards will need to be adapted and tailored. To support this, supplementary guidance will be issued for National Boards, with Health Planning working with respective Sponsor Teams and National Board Directors of Planning on the development of the plans for each of these Boards.

Governance and Reporting

Key Dates	
3 Year Delivery Plan submission to SG	Thursday 7 March 2024
Formal confirmation to Boards that SG content with the plans	Friday 12 April 2024

At a local level

- Boards are accountable for the monitoring of their plans, and managing associated risks, ensuring arrangements for scrutiny and assurance regarding planning arrangements within the Board.

At a national level

- Following review, the Scottish Government will provide formal confirmation via a letter to the Chief Executive that it is content with NHS Board Delivery Plan
- At regular intervals Ministers will want to discuss progress with Chairs.
- Officials will discuss progress against the Delivery Plans and variations from plans through twice-a-year joint Executive Team meetings.

Monitoring progress and impact of Delivery Plans

Progress through the 2023/24 Delivery Plans was reported via quarterly updates to the Scottish Government on individual ‘Key Result Areas’. Whilst this provided a valuable level of detail and assurance in the context of re-establishing robust planning following the disruption of the pandemic, the intention is to now move to a more objective and data driven approach.

The primary mechanism against which the progress and impact of the Delivery Plans will be reported in 2024/25 will be via the forthcoming Delivery Performance Framework. Additional guidance will follow by the end of January 2024 setting out how this refreshed approach to reporting progress will be implemented.

2. Strategic Context

Ministerial Priorities

In April 2023, the First Minister set out the outcomes the Scottish Government aims to achieve by 2026 in [“Equality, opportunity, community: New leadership - A fresh start”](#). This helps set a refreshed strategic context and clarity for the priorities for the health service, whilst remaining consistent with the recovery drivers which framed last year Delivery Plan Guidance. The key Ministerial priorities which this year’s Delivery Planning Guidance supports are:

- Improve outcomes for people in primary, community, and social care, through enhanced integrated multi-disciplinary teams, with better digital tools including access to personal health information, and deliver sustained and improved equitable national access to NHS dentistry.
- Deliver year on year reductions in waiting times and lists
- Improve cancer outcomes through better prevention and diagnostics, including expanded Rapid Cancer Diagnostic Services
- Improve mental health and wellbeing support in a wide range of settings with reduced waiting times for Child & Adolescent Mental Health Services (CAMHS)
- Deliver improvements in workforce planning, attraction, training, employment and wellbeing, progressing towards a sustainable, skilled health and care workforce, with attractive career choices, where all are respected and valued for the work they do.
- Reduced drug deaths, take preventative action to reduce alcohol harm, and continue to increase physical activity.

Actions to achieve more coherent planning

The 23/24 NHS Scotland Delivery Plan Guidance marked the beginning of a new approach being developed to support more integrated and coherent planning and delivery processes. A range of steps have since been taken over the last year towards transforming our system, strengthening our integrated planning and delivery landscape.

In November the **NHS Scotland Planning & Delivery Board** was established with the purpose of strengthening the approach to planning and delivery, bringing cohesion and ensuring sustainability at local level. The Board will agree priorities working with Boards to strengthen delivery focus and an NHS Scotland approach and will initially focus on three main areas of focus: National & Regional Planning through the Strategic Planning Board, National Programmes and National Improvements. The scope of this Board will expand as it matures allowing flexibility and the ability to pivot to prioritise, plan, deliver and address challenges as they arise.

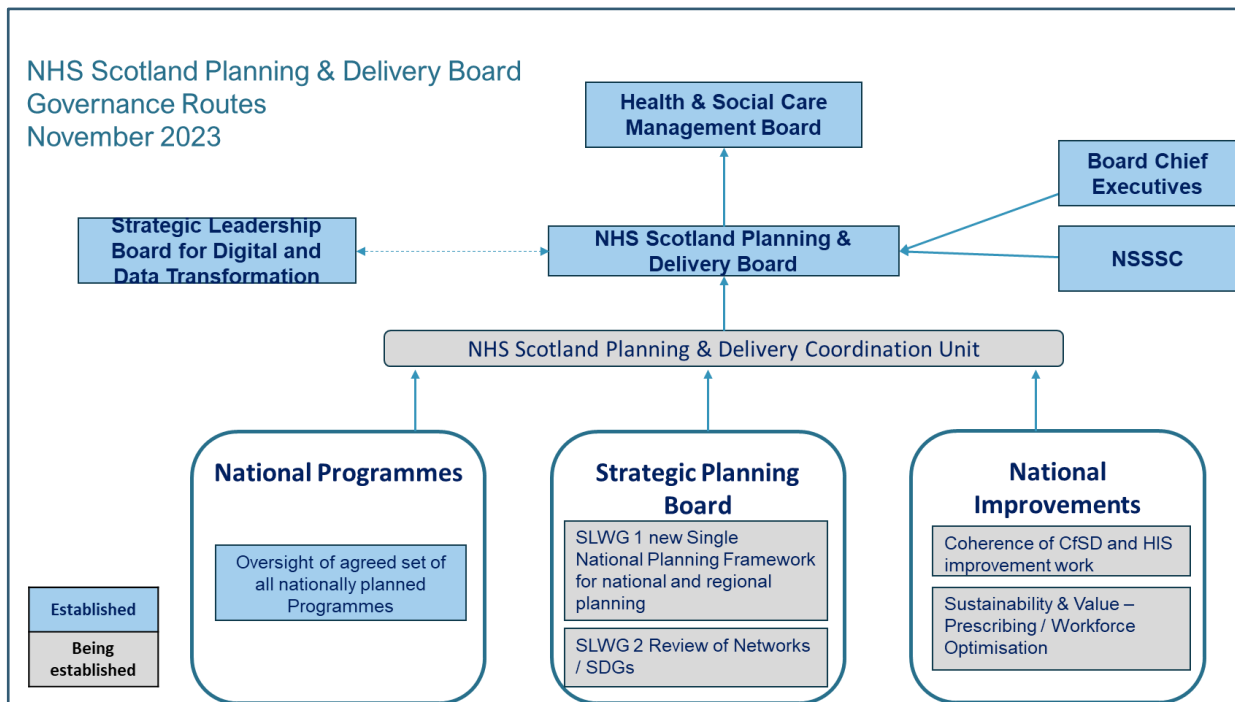


Figure 2

The **National and Regional Planning Short Life Working Group (SLWG)** was also established in May 2023 to inform next steps for strategic planning and delivery at a national, regional, and local level. The group brought together relevant stakeholders to develop recommendations to enhance national and regional planning in support of more collaborative planning. The SLWG produced a Recommendations Paper, with three high level recommendations which were approved at the Health and Social Care Management Board on 18 October 2023.

1. Development and implementation of a single planning framework to support more coherence in decision-making across NHS Scotland.
2. Improvement to National and Regional Planning.
3. Stronger understanding of the role of Networks and Associated Groups.

Work has since progressed to set up a new **NHS Scotland Strategic Planning Board (SPB)** and two supporting Short Life Working Groups. The SPB will oversee significant change in the way services are planned, organised, delivered and funded, by strengthening national and regional planning. The SPB will also own and implement the recommendations of the SLWG, ensuring a strong governance and accountability approach is enacted through greater collaboration between Scottish Government's Health and Social Care Management Board (HSCMB), the NHS Scotland Planning and Delivery Board and NHS Boards.

As part of a single planning framework, the new NHSS SPB will provide oversight, governance and decision making in relation to national and regional planning of NHSS services and set the strategic direction for the medium to long term taking account of the enabling resources – finance, workforce, and infrastructure.

Progress towards longer term planning for NHS Scotland

As the work around long-term ambition continues to gather pace, with the aim to adopt a far more preventative, collaborative and integrated approach to delivering services, it is intended that Boards will be asked to develop long term plans next year. Further information will be provided early in 2024.

3. Planning Context

Overview

NHS Board's Medium Term Plans are framed around 10 'Drivers of Recovery' as detailed in the 23/24 Guidance. The intention is that plans for 2024/25 will lay out what will be delivered in the coming year in support of the Medium Term Plans which are in place, and therefore the guidance for this year is framed around maintaining consistency with these same drivers.

In taking this approach of framing actions within a three-year period, we hope that Boards will be able to set out the actions to maximise sustainable capacity, support people in the most appropriate place of care, and take preventative actions to help people to live well in our communities. In focussing on sustainability, we can bring balance across workforce, finance and system challenges. We are also in a climate emergency and truly sustainable health services have to be environmentally sustainable health services. This plan sets out our continued commitment on driving forward our net zero and sustainability ambitions.

Boards should apply this framework with a degree of flexibility to ensure that it meets their own planning needs; however, it will be important that when these plans are reviewed, it is clear that all the planning priorities are appropriately covered with regards to the specific role and responsibilities of that Board. Boards should also set out any planning assumptions which underpin their plans.

For national Boards, reference should be made to the recovery drivers, where applicable to the main functions of that Board. Additional tailored guidance for national Boards will issue which should be used alongside this document when preparing these plans.

Planning Approach for 2024-25

This Delivery Plan guidance is issued alongside the *NHS Scotland Financial Plan 2024/25 Guidance*, and the two should be read in conjunction to ensure that delivery planning is affordable within a Boards financial envelope, and that this in turn supports the savings aims as set out in the finance guidance.

The planning priorities set out in this guidance are intended to give clarity on the high level priorities which Boards should deliver in 2024/25, whilst remaining flexible enough to allow Boards to appropriately plan and prioritise within their own financial context.

In addition, during 2023-24, work began to provide Boards with more clarity regarding their funding by assessing whether their existing allocations were appropriate for either baselining and/or bundling allocations into a bigger 'performance bundle' to allow greater flexibility. This should allow more agile planning across services and greater certainty on resources,

As well as ensuring Delivery Plans are affordable within the context of the Board's financial plan, they should also ensure the workforce is in place to support service delivery. Boards' existing three-year Strategic Workforce Plans set out how they are approaching supply, training, development and service delivery challenges at a local level, across the five pillars of the workforce journey (Plan, Attract, Train,

Employ, Nurture), and this should inform the development of Boards' Delivery Plans.

It is recognised that NHS Boards are operating under pressure, together with a level of uncertainty and volatility that remains across the system following the pandemic. The relevant delivery, finance and workforce planning teams within the Scottish Government will continue to work with and support NHS Boards to address these planning challenges throughout 2024/25.

Financial Planning

The Scottish Government budget will be confirmed on 19 December 2023. Assumptions to underpin financial plans have been developed by the NHS Corporate Finance Network to drive the consistency across all Boards. These will be distributed alongside the Financial Planning template and guidance, and should be used to support the development of Boards' plans

As set out in the letter sent by Richard McCallum on 23 October 2023, there is a clear expectation within the Scottish Government that NHS Boards will have financial plans which deliver a significant financial improvement on the 2023-24 position. NHS Boards financial plans for 2024-25 should present;

- a clear programme of work and supporting actions to achieve the target of 3% recurring savings on baseline budgets, a template will be provided for this; and
- an improved forecast outturn position compared to your forecast outturn position reported at the start of 2023-24.

An initial draft will be reviewed by the NHS Finance Delivery Unit and engagement will follow with Board finance and executive teams, ahead of a final submission. We will consider the overall position of NHS Boards before confirming acceptance of the financial plans.

4. 24/25 Delivery Plan Requirements

Key Dates	
24/25 Delivery Plan submission to SG	Thursday 7 March
Formal confirmation to Boards that SG content with the plans	Friday 12 April

Following on from the creation of Medium Term Plans through the 23/24 Delivery Plan Guidance, Boards are asked that for 24/25 that they develop their Medium Term Plans into Three Year Delivery Plans with detailed actions for 24/25 and are both aligned to their Financial Plans, and to the ministerial priorities for NHS Scotland as set out in the guidance document.

The three-year planning cycle enables Boards to clearly demonstrate what they are doing, in conjunction with their partners, to increase the pace and scale of change across the health and social care system, with the expectation that activity making greatest impact are positioned at the heart of Boards' medium term plans and associated transformation programmes.

The planning priorities set out in the guidance are intended to give clarity on the high level priorities which Boards should deliver in 2024/25, whilst remaining flexible enough to allow Boards to appropriately plan and prioritise within their own financial context.

The primary mechanism against which the progress and impact of the Delivery Plans will be reported in 2024/25 will be via the forthcoming Delivery Performance Framework. This will replace the ADP2 template process undertaken previously. Additional guidance will follow by the end of January 2024 setting out the requirements on Boards to develop 24/25 delivery trajectories and how this refreshed approach to reporting progress will be implemented. At its heart, this will seek to reduce the burden on Boards on quarterly reporting.

Delivery Priorities

Boards are asked that for 24/25 that they develop their Medium Term Plans into Three Year Delivery Plans with detailed actions for 24/25. Whilst Boards may apply this guidance flexibly to ensure that their plans meet their own needs, the following table sets out the expectations of what plans should incorporate as a minimum.

Area	Key Points to Cover
<p>A. Recovery Drivers</p>	<p>Set out approach to delivering the agreed ten national areas for recovery, as reiterated in this Guidance.</p> <p>Board 3 Year Delivery Plans should clearly set out what will be delivered in line over the next three years, with firm planned actions and programmes of activity for 24/25 and indicative set of actions for 25/26 and 26/27.</p> <p>These should also be clearly aligned to your 3 Year Financial Plans while accepting that, for future years, specific programmes of work may still be developing.</p> <p>The Value Based Health & Care Action Plan was published in November 2023. The plan sets out 13 high level actions which aim to support all health and care professionals across Scotland to practise Realistic Medicine and deliver better value care. Delivery of the core actions will be reported through the NHS Scotland Planning and Delivery Board.</p> <p><i>To note, these national areas are not exclusive and Boards are expected to continue to recover and deliver all core services.</i></p>
<p>B. Service sustainability</p>	<p>In order to plan nationally for our population, work is progressing through the Directors of Planning Group and the new Strategic Planning Board to undertake an assessment of services with sustainability and resilience issues.</p> <p>NHS Boards will be expected to participate and engage in this work, with the template issued to Boards by mid-December.</p>
<p>C. Risks</p>	<p>Boards are asked to identify any risks and issues associated with delivery, with reference to the need for financial balance and associated improvements.</p> <p>Boards are also asked to identify areas of workforce that pose a risk to service delivery and actions to manage this.</p>

Recovery Drivers

The table below sets out the ten Medium Term Plan ‘Drivers of Recovery’ which will be used to frame planning 2024-25. Whilst these remain broadly in line with those used in the 2023/24 guidance, the following changes have been made:

- The “*Health Inequalities Driver*” has been expanded to more explicitly cover a wider range of population health planning.
- The previously separate drivers covering “*Digital Services and Technology*” and “*Innovation Adoption*” have now been merged into a combined “*Digital Services Innovation Adoption*”
- A new “*Women and Children’s Health*” driver has been added, to better encapsulate planning priorities previously covered under other recovery drivers.

1	Improved access to primary and community care to enable earlier intervention and more care to be delivered in the community
2	Urgent & Unscheduled Care - Provide the Right Care, in the Right Place, at the right time through early consultation, advice and access to alternative pathways, protecting inpatient capacity for those in greatest need
3	Improve the delivery of mental health support and services
4	Recovering and improving the delivery of planned care
5	Delivering the National Cancer Action Plan (Spring 2023-2026)
6	Enhance planning and delivery of the approach to health inequalities and improved population health
7	Take forward the actions in the Women’s Health Plan and support good child and maternal health, so that all children in Scotland can have the best possible start in life.
8	Implementation of the Workforce Strategy
9	Optimise use of digital & data technologies in the design and delivery of health and care services for improved patient access and fast track the national adoption of proven innovations which could have a transformative impact on efficiency and patient outcomes
10	Climate Emergency and Environment

In addition to the above, we would highlight the importance of promoting and supporting clinical and translational research so that patients can benefit from new and better treatments, including facilitating General Medical Council Good Medical Practice 2024 guidelines on considering research opportunities.

1

Primary & Community Care

Improve access to primary and community care to enable earlier intervention and more care to be delivered in the community.

Planning Context

When developing plans, the following links provide useful wider context :

- [Primary care services - gov.scot \(www.gov.scot\)](http://www.gov.scot)
- <https://ihub.scot/improvement-programmes/primary-care/community-treatment-and-care/about-community-treatment-and-care/>

Planning Priorities

Board Delivery Plans should set out how they will progress delivery in the following priority areas:

- **Delivery of core primary care services**
- **Ongoing development of Community Treatment and Care (CTAC) services, supporting more local access to a wider range of services.**
- **Ensuring there is a sustainable Out of Hours service, utilising multi-disciplinary teams.**
- **Early detection and improved management of the key cardiovascular risk factor conditions, primarily diabetes, high blood pressure and high cholesterol.**
- **Delivery of sustained and improved equitable national access to NHS dentistry, setting out how they will assess and articulate local oral health needs, and engage with independent dental contractors and bodies corporates to ensure that patients receive the NHS oral health care they are entitled to.**
- **Increasing delivery of hospital-based eyecare into a primary care setting where appropriate.**
- **Provision of non-emergency patient transport services, working with bodies which provide community transport services in the Board area**

2

Urgent & Unscheduled Care

Access to urgent and unscheduled care, including scaling of integrated frailty services to reduce admissions to hospital.

Planning Context

Boards will be aware that the Centre for Sustainable Delivery has been working with local teams to undertake benchmarking across the country against key data metrics to understand what opportunities or gaps exist. Where this work has taken place, the summary report should allow Boards to target improvement initiatives towards areas of greatest need, which should contribute to easing access block and associated risks of harm, improving the timeliness and safety of care, and the overall patient and staff experience.

Based on the Discovery report, Boards should also reflect on where there are limitations to improvement initiatives and what changes may be required to the current physical estate, workforce, operational processes and community services to overcome these.

Where discovery work with CfSD has not yet concluded, the Scottish Government will engage with Boards throughout the year to further develop plans.

NHS Boards should set out in their 3 Year Plans how they anticipate impact of the delivery on the agreed Board Target Operating Model for Unscheduled Care, including continued improvement of the Emergency Access Target, eliminating 12 hour delays, performance of minors and improvement in ambulance handover times.

Plans should evidence commitment and compliance with the agreed national programmes and provide assurance on what actions are being taken. Areas of non-compliance must be highlighted including any associated remedial actions.

Planning Priorities

NHS Board plans for 2024/25 should set out how they will progress delivery in the following priority areas:

- **Improve urgent care pathways in the community and links across primary and secondary care.**
- **Ensuring patients receive the right care in the right place by optimising Flow Navigation Centres, signposting and scheduling of appointments to A&E where possible and increasing the routes for professional to professional advice and guidance with a specific focus on frailty pathways and care home support**
- **Improving access to Hospital at Home services across a range of pathways including OPAT, Respiratory, Older People, Paediatrics and Heart Failure.**
- **Optimising assessment and care in Emergency Departments by improving access to 'same day' services, the use of early and effective triage, rapid decision-making and streaming to assessment areas.**
- **Reducing the time people need to spend in hospital, increasing 1-3 day admissions and reducing delays over 14 days, by promoting early and effective discharge planning and robust and responsive operational management**
- **Reduce unscheduled admissions and keep people care for closer to home through reconfiguring existing resource to accelerate rapid assessment and evolve to implement Frailty Units**

3

Mental Health

Improving the delivery of mental health support and services, reflecting key priorities set out in the Mental health and wellbeing strategy.

Planning Context

When developing plans, the following links provide useful wider context :

- [Mental health and wellbeing strategy - gov.scot \(www.gov.scot\)](https://www.gov.scot/mental-health-and-wellbeing-strategy)

NHS Boards should consider how they anticipate that their plans will impact on the following metrics:

- CAMHS and PT 18-week referral to treatment standard

Planning Priorities

NHS Board plans for 2024/25 should set out how they will progress delivery in the following priority areas:

- **Improving Access to Mental Health services and building capacity to sustainably deliver and maintain the CAMHS and PT 18-week referral to treatment standard.**
- **Tackling inequalities in relation to accessing Mental Health services, strengthening provision in Community Mental Health teams and better supporting those with complex needs and delivering service reforms aimed at supporting more people in the community**
- **Developing and growing Primary Mental Health teams and integration of the primary care mental health workforce into wider primary care multi-disciplinary teams, community and secondary care.**
- **Delivering a coherent system of forensic mental health services, addressing issues raised by the independent review into such services.**
- **Improving support and developing the Mental Health workforce**
- **Improving the mental health built environment and patient safety**

Planning Context

When developing plans, the following documents provide useful wider context :

- [New national targets to tackle long waits for planned care - gov.scot \(www.gov.scot\)](https://www.gov.scot/publications/new-national-targets-to-tackle-long-waits-for-planned-care/pages/1-2.aspx)
- [7. The Six Principles of Good Rehabilitation - Rehabilitation and recovery: a person-centred approach - gov.scot \(www.gov.scot\)](https://www.gov.scot/publications/7-the-six-principles-of-good-rehabilitation-rehabilitation-and-recovery-a-person-centred-approach/pages/1-2.aspx)
- [Waiting times - Healthcare standards - gov.scot \(www.gov.scot\)](https://www.gov.scot/publications/waiting-times-healthcare-standards/pages/1-2.aspx)

As with 2023-24, a discrete planning process for Planned Care in 2024-25 is proceeding within the framework of Delivery Planning. The Scottish Government and the Centre for Sustainable Delivery have been engaging Boards through the autumn to progress this work and finalise the associated guidance, which will issue to Boards shortly. This will result in Board-level plans for Planned Care, which will then be reflected and referenced as appropriate within final 24/25 Delivery Plans.

Planning Priorities for 2024/25

NHS Board plans for 2024/25 should set out how they will progress delivery in the following priority areas:

- **Delivering year on year reductions in waiting times and tackling backlogs focusing on key specialities including cancer, orthopaedics, ophthalmology and diagnostics.**
- **Enabling a “hospital within a hospital” approach in order to protect the delivery of planned care.**
- **Maximising capacity to meet local demand trajectories.**
- **Match outstanding demand with available capacity across Scotland through regional and national working including through the National Treatment Centres (NTCs).**
- **Extending the scope of day surgery and 23-hour surgery to increase activity and maximise single procedure lists.**
- **Implement outcomes of Specialist Delivery Groups including reducing variation.**
- **Undertake regular waiting list validation**
- **Delivery of CfSD / NECU waiting times initiatives and productive opportunities**
- **Optimise theatre utilisation and implement digital solutions**

Planning Context

When developing plans, the following links provide useful wider context:

- [Cancer strategy 2023 to 2033 - gov.scot \(www.gov.scot\)](https://www.gov.scot/cancer-strategy-2023-to-2033)
- [Cancer action plan 2023 to 2026 - gov.scot \(www.gov.scot\)](https://www.gov.scot/cancer-action-plan-2023-to-2026)

NHS Boards should consider how they anticipate that their plans will impact on the following metrics:

- Cancer waiting time standards and, as a priority, improved performance of the 62 day waits.
- Diagnosis at disease stages III and IV
- Cancer Quality Performance Indicators
- Oncology Waiting Times

Planning Priorities for 2024/25

NHS Board plans for 2024/25 should set out how they will progress delivery in the following priority areas:

- **Improving cancer waiting times standards through ongoing delivery of the Framework for Effective Cancer Management, specifically highlighting key actions aimed at improving breast, colorectal and urology pathways.**
- **Increasing diagnostic capacity including endoscopy and its new alternatives, alongside assurances of the Board's plan to establish a Rapid Cancer Diagnostic Service.**
- **Embedding optimal cancer diagnostic pathways and clinical management pathways.**
- **Delivering single point of contact services for cancer patients**
- **Configuring services in line with national guidance and frameworks on effective cancer management; Rehabilitation; and psychological therapies and support**
- **Supporting the oncology transformation programme, including through sharing data and advice, and developing services and clinical practice in line with its nationally recommendations.**

6

Health Inequalities and Population Health

Enhance planning and delivery of the approach to tackling health inequalities and improving population health

Planning Context

When developing plans, the following links provide useful wider context :

- [National mission - Alcohol and drugs - gov.scot \(www.gov.scot\)](https://www.gov.scot/national-mission-alcohol-and-drugs)
- [Medication Assisted Treatment \(MAT\) standards: access, choice, support - gov.scot \(www.gov.scot\)](https://www.gov.scot/medication-assisted-treatment-standards)

Planning Priorities for 2024/25

NHS Board plans for 2024/25 should set out how they will progress delivery in the following priority areas:

- **Tackling local health inequalities (including racialised health inequalities) and reflecting population needs and local joint Strategic Needs Assessment**
- **Working with partners to support the National Mission on Drugs to reduce death and improve lives, including the implementation of MAT Standards, delivery of the treatment target and increasing access to residential rehabilitation**
- **Supporting improved population health, with particular reference to smoking cessation and weight management**
- **How they will redirect wealth back into their local community to help address the wider determinants of health inequalities, through actions set out in their “Anchors Strategic Plan”**
- **Commitment and contributions (leadership, funds, staffing and other resources) to Community Planning Partnerships (CPPs) to improve local outcomes agreed in Local Outcome Improvement Plans and Locality Plans.**
- **Improving custody healthcare through participation in the Executive Leads network and ensuring that the deaths in custody toolkit is implemented.**

7

Women and Children's Health

Take forward the actions in the Women's Health Plan and support good child and maternal health, so that all children in Scotland can have the best possible start in life.

Planning Context

When developing plans, the following links provide useful wider context :

- <https://www.gov.scot/groups/best-start-implementation-programme-board/>
- <https://perinatalnetwork.scot/>
- [Women's health plan - gov.scot \(www.gov.scot\)](https://www.gov.scot/news/womens-health-plan/)
- <https://www.gov.scot/news/tackling-child-poverty-delivery-plan-2022-26/>

Planning Priorities

NHS Board plans for 2024/25 should set out how they will progress delivery in the following priority areas:

- **Maternity and neonatal services, and in particular continuing delivery of 'Best Start' policy, with ongoing focus on delivery of continuity of carer and the new model of neonatal care, and that all eligible families are offered child health reviews at 13-15 months, 27-30 months and 4-5 years.**
- **Taking forward the relevant actions set out in the Women's Health Plan**
- **Setting out how they will work with their local authorities to take forward the actions in their Local Child Poverty Action Report**
- **Delivering high quality paediatric audiology services, taking into account the emerging actions arising from the Independent Review of Audiology and associated DG-HSC letter of 23 February 2023.**

Planning Context

When developing plans, the following links provide useful wider context :

- [Health and social care: national workforce strategy - gov.scot \(www.gov.scot\)](https://www.gov.scot/resources/documents/2022/06/Health_and_social_care_national_workforce_strategy.pdf)

Planning Priorities

The Workforce Strategy Implementation Programme will continue to take forward key workforce reform in 24/25 designed to enhance staff and patient safety, improve working cultures, optimise workforce planning and staff deployment, and deliver sustainable improvement in conditions of service.

As spend on staffing continues to rise as a proportion of total portfolio expenditure, Boards are asked to set out plans to:

- Achieve further reductions in agency staffing use and to optimise staff bank arrangements.
- Achieve reductions in medical locum spend
- Deliver a clear reduction in sickness absence by end of 24/25

The NHS Scotland Planning and Delivery Board is considering the requirement for a national-level business services transformation. As part of this, Boards will be expected to establish clear trajectories for increasing efficiencies across administrative and support services.

In addition, all territorial NHS Boards have signed up to the national eRostering contract, is a key enabler for Health Boards when complying with and reporting on the duties in the Health and Care (Staffing) (Scotland) Act 2019. In readiness for reporting by April 2025, Boards will have received access to eRostering and will have 6 rosters built by November 2024/ Boards are asked to set out in their 3 Year Delivery Plan:

- An implementation plan for eRostering in 24/25 with a view to implementing across all services and professions by 31st March 2026.

Board specific improvement plans and targets will be developed and issued via the Planning and Delivery Board and progress will be monitored through, inter alia, quarterly returns.

9

Digital Services Innovation Adoption

Optimise use of digital & data technologies in the design and delivery of health and care services for improved patient access and fast track the national adoption of proven innovations which could have a transformative impact on efficiency and patient outcomes

Planning Context

When developing plans, the following links provide useful wider context :

- [Digital health and care strategy - gov.scot \(www.gov.scot\)](http://www.gov.scot)

Planning Priorities

NHS Board plans for 2024/25 should set out how they will progress delivery in the following priority areas:

- **Adoption and implementation of the national digital programmes**
- **Improving cyber resilience and compliance with the Refreshed Public Sector Cyber Resilience Framework**
- **Executive support and commitment to optimising use of digital & data technologies in the delivery of health services, and ongoing commitment to developing and maintaining digital skills across the whole workforce**
- **Working collaboratively with other organisations to scale and adopt innovation, with particular reference to the adoption of Innovation Design Authority (IDA) approved innovations as part of the Accelerated National Innovation Adoption (ANIA) pathway.**

Planning Context

When developing plans, the following links provide useful wider context :

- [NHS Scotland climate emergency and sustainability strategy: 2022-2026 - gov.scot \(www.gov.scot\)](https://www.gov.scot)
- [A Policy for NHS Scotland on the Climate Emergency and Sustainable Development \(DL \(2021\) 38\)](#)

Planning Priorities

NHS Board plans for 2024/25 should set out how they will progress delivery in the following priority areas:

- **Greenhouse gas emissions reductions in line with national targets with particular focus on building energy use, inhaler propellant, transport and travel and nitrous oxide.**
- **Adapting to the impacts of climate change, enhancing the resilience of the healthcare assets and services of NHS Boards.**
- **The achievement of national waste targets, and local targets for clinical waste, and engagement with local procurement to progress Circular Economy programme within NHS Boards**
- **The decarbonisation of the NHS fleet in line with targets (2025 for cars / light commercial vehicles & 2032 for heavy vehicles at latest) and the implementation of the sustainable travel approach for business travel, commuting and patient and visitor travel, linking to other strategy areas such as greenspace and adaptation.**
- **Environmental management, including increasing biodiversity and improving greenspace across the NHS Scotland estate.**
- **Reducing the environmental impact of healthcare through adopting the National Green Theatre Programme actions, supporting the implementation of the Quality Prescribing Guides and the adoption of the sustainability in quality improvement approach.**



NHS Scotland Delivery Planning Guidance 2024/25

Issued December 2023

For further information, please get in touch via healthplanning@gov.scot



Delivering Sustainable Clinical Services for NHS Scotland

Guidance

Why do we need this?

In NHS Scotland we have a number of services which are not resilient or sustainable and this is reaching a critical point. NHS Boards need to work together in a co-ordinated and planned approach to support our population outcomes equitably and to view NHS Scotland as a system of healthcare that works collaboratively without borders.

What is our approach?

This approach will start to build on national planning for our population's needs above the organisational interest and beyond the constraints of their boundaries and associated political pressure. It seeks to focus on reform and within that the delivery of prudent and value based healthcare that is resilient and sustainable in areas where Boards cannot solve individually. It recognises that greater central focus is needed to make that behaviour and philosophy a reality. This will require a commitment from NHS Scotland and the Boards to work differently, in line with an improvement approach and in a different way. This is a critical foundation to wider change.

This may mean an NHS Scotland wide service delivery may not be from any one particular site but we work in a different networked way with clinical teams working in an extended team across NHS Scotland. This is a new approach which has not been done in this way previously.

What do we want to achieve?

We want to achieve a common understanding and develop a way forward for a strategic commissioning approach that is co-ordinated and managed to develop sustainable services. This will be achieved through collaboration, between Boards, focusing on collective responsibility for creating sustainable services to create a thriving reform agenda focusing on outcomes for our population.

What are the next steps?

The attached template focuses on the quadrant of quality, people, population and finance to develop a shared approach with key questions and criteria (appendix A). This template has not been designed to understand all of the detail but to provide a basis for prioritisation and to understand the focus required at a national level.

It is of course part of a much broader set of actions that are set out in the NHS Scotland Recovery Plan and the National Clinical Strategy which is designed to move us to a fit for purpose and sustainable health and care system. How we design and deliver our NHS clinical services is an absolutely fundamental aspect of how we can achieve that aim.

What are the key actions?

1. We are asking Boards, as signalled in the ADP, to complete the attached template for all speciality or sub specialty services that are not sustainable
2. This will develop a common understanding at national level that will then require assessment and prioritisation through an iterative approach
3. Further detail will be required from Boards who have not highlighted sustainability issues in the service highlighted through the approach
4. This will then be presented to the National Planning and Delivery Board on the 14th of February to develop an agreed way forward. This will also help inform the National Planning Framework and National Clinical Strategy Framework

Appendix A – Criteria

In order to provide an overview assessment criteria for unsustainable services please base your assessment on any or all of the below:

1. There is evidence that the outcomes for people are significantly below comparator Boards or there are significant patient safety concerns.
2. There is no viable prospect of the service meeting professional standards and/or recommended minimum volumes of activity to maintain high standards of care.
3. The workforce required to safely and sustainably deliver the service is not available because it cannot be recruited, developed or retained - or can only be delivered by a dependency on agency or locum staff.
4. There is professional consensus on the merits of reconfiguring services to deliver an enhanced pathway or a new service model.

Boards are asked to utilise the above criteria in the template in the last column.

Do you have any questions or queries?

If so please contact Lorraine Cowie, Professional Adviser – Health Planning (Lorraine.cowie@nhs.scot) or Paula Spiers, Deputy Chief Operating Officer.

Delivering Susta

Specialty/Sub Specialty Name:

Workforce Impact

Quality Impact

How many WTE do you have in terms of medical that contribute to this service ?

Are you meeting all legislative requirements ? YES/NO

How many WTE do you have in terms of nursing that contribute to this service ?

Are you meeting all of the quality standards set for this service/specialty ? YES/NO

How many DCC do you have if the challenge is medical capacity ?

If no please detail in brief?

Are you dependant on Locums? Please define if they are short or long term locums and overall WTE?

Do you have vacancies and are you trying to recruit ?

Should you have any additional narrative please use the space below to expand on any of th

inable Services - Template

XXX

Please complete a separate sheet for

Finance Impact	Performance Impact
Is there an agreed SLA with another board for delivery? Are there challenges to this?	Is this logged on your corporate or acute risk register ?
Is this service over budget? If so what are the key areas of overspend?	What is your current performance if applicable ? (TTG, OP, Return OP waiting lists and ability to meet SG targets)
Have all CFSD initiatives been implemented to maximise efficiency? (ACRT,PIR etc)	
What is your overall locum spend to support delivery? Is this framework or off framework?	

ie answers



each specialty of sub specialty as you feel necessary

Prioritisation Score

Assessment on 1-5 (See Appendix A)

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