**Appendix 1**

**NHS Golden Jubilee**

**Annual Delivery Plan (ADP) - Delivery Plan Update**

**Q2: July to September 2022**

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| **Executive Summary** |
| This update report provides an update on delivery of NHS GJ ADP Delivery Planning Templates. Specific detail is within the accompanying Delivery Planning Templates – these templates and an abridged version of this update report will form the basis of the Board’s quarterly return to Scottish Government. |

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| **Highlights during quarter** |
| Please see individual highlight reports. |
| **Risks and issues** |
| No risks escalated that require resolution at EDG at this time. Risks drawn from the highlight reports, are below or information. Individual Delivery Planning Templates provide further detail on risks / issues / mitigations. |
| HLD  Workforce challenge remains main risk- absence / vacancy mainly across critical care, but also within theatre and the medical workforce.  Establish Plain Film imaging department within redesigned orthopaedic outpatient facility - Funding for equipment and staff. Turnkey not due to complete until June 2023, equipment must be operational this financial year or risk to funding. Medical Physics managing and escalating. Scoping of activity a challenge, contingent on NES recruitment of clinical staff. Options for flow optimisation across two floors, dependant on projected increase. Option to remove the x-ray room due for replacement and site other imaging equipment - potentials being scoped but contingent on funding out with Capital stream.  Funding bids to increase Cardiology EP capacity (Mobile Lab) were unsuccessful. Ongoing challenge regarding long waiters with projections indicating that the service will not comply with 104 and 78 week targets. Availability of anaesthetic resource is the limiting factor for long waits. However, growing demand for the service means that all procedure waiting times are increasing. Activity levels in the WoS still benchmark below the UK average. |
| NES  Increasing numbers of long term patients who have been waiting in excess of 2 years is resulting in increased LoS. There is also pressure on elective beds in host boards which means there is an inability to repatriate long stay revision patients; this is reducing the number of beds available in NHS GJ |
| Digital  Digital Learning Pathway within the overall NHS Scotland Academy is delayed due to resource constraints in partner board, Work continues to resolve this issue, with RAG status changed from Green to Amber.  Short timescales for Laboratory Information Management System implementation introduces risk to delivery. Risk assessment and mitigations in place to ensure continuity of service. |
| Estates and Workforce  Continuation of previously identified risk: peri-operative nursing posts remain the key area of concern to recruit to for Phase 2 expansion.  Continuation of previously identified risk: Significant recruitment required to deliver Phase 2 NTC expansion. There are recognised shortages in skills and workforce capacity, accompanied by high market competitiveness. |
| Finance  Pay Policy implications - Financial Planning assumes a cost neutral approach, however every 1% increase in pay will result in circa £0.900m of cost increase for NHS GJ. There is a risk element of an award above the 5% value - based on circa 7% pay award would amount to £1.8m risk exposure. |
| GJCH  Additional GJ Conference Hotel bedroom space may be required for International Recruitment cohort 3 in early 2023. |
| Inequalities  Delivery of Diversity and Inclusion training may be constrained by staff availability / capacity in core team. |
| NHSSA  NTC Workforce Programme - Confirmation of funding for 2022/23 is still outstanding - this workstream was reduced from £4.5m to £3.5m, then £1.4M in governmental conversations, but there is no commitment in writing yet. Programme will not deliver intended benefits in respect of capacity and capability should sufficient learners not be identified and enabled to participate.  Progress is being made across all elements of the National Endoscopy Training Programme programmes, but challenges remain around faculty being released via SLAs to participate in the programme, and in operational issues including claiming for expenses, and implications of current pension-tax effecting or ability to attract/retain Consultants to this programme. |
| CfSD  Primary – Secondary Care Interface - Progress has been slower than anticipated due to delays in agreeing funding for progressing components of the work, coupled with competing priorities within CfSD.  NECU - While significant gains are being realised through WL Validation, key constraints currently are funding to support OP clinics and surgical treatment. |

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| **Delivery Planning Highlight Report – Heart, Lung and Diagnostic** | | | |
| **Deliverables Status**   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  | **Previous Quarter** | **Q2 (this report)** | **Change vs previous quarter** | |  | *Complete / target met* | 0 | 0 | No change | |  | *On track* | 6 | 6 | No change | |  | *At risk - requires action* | 7 | 7 | No change | |  | *Unlikely to complete on time/meet target* | 1 | 1 | No change | |  | Proposal - *New Proposal/no funding yet agreed* | 0 | 0 | No change | |  | **Total** | **14** | **14** | **No change** | | | | |
| **Summary of status changes** | **Highlights during quarter** | | **Upcoming / future deliverables** |
| No changes to delivery RAG status during Q2. | * 23 cardiac transplants delivered to end Q2 (SLA 20 / year) * 31 day cancer target - delivering consistently against 95% target. In August 22, 1 patient over 31 days (by 2 days) - due to complex care pathway * Full SG and Board approval to convert CT SLA to Cardiac inclusion in Radiology performance figures achieved during Q2. Included in GJ weekly performance report for W/C 10/10 onwards. The same agreement for MRI will be progressed in Q3. Training of Radiographers to lead and report CTCA lists being explored. Funding being scoped via Radiology endowment funds. * Borders connected with SNRRS in Q2. GJUNH funding being scoped for additional 50 workstations. 10 reporters have been recruited without hardware and are ready to go once equipment provided. Additional recruitment being explored for phased roll-out * As at 30/09/2022 - 25 patients waiting over 12 weeks for TAVI As at 30/09/2022 - 97 against target of 66 TAVI activity. 47% above activity plan. Funding and authorisation from WoS will be required to deliver activity to meet demand, discussions are ongoing. Negotiations underway with WoS boards to support additional activity to improve waiting times to acceptable levels. RED RAG status. * Funding bids to increase Cardiology EP capacity (Mobile Lab) were unsuccessful. Ongoing challenge regarding long waiters with projections indicating that the service will not comply with 104 and 78 week targets. Availability of anaesthetic resource is the limiting factor for long waits. However, growing demand for the service means that all procedure waiting times are increasing. Activity levels in the WoS still benchmark below the UK average. | | * Continued delivery of 22/23 activity plan * Colorectal Imaging - Equipment purchased and expectation of November delivery. CT Colon software - mini business case required. Staff training arranged with NHS GGC over next 3 months. Go live expected end of Q3. |
| **Recommendations / Information for Executive Directors** | | **Risks or Issues for Executive Directors awareness** | |
| Note update on delivery plan progress to end September 2022 | | Workforce challenge remains main risk- absence /vacancy mainly across critical care, but also within theatre and the medical workforce.  Establish Plain Film imaging department within redesigned orthopaedic outpatient facility - Funding for equipment and staff. Turnkey not due to complete until June 2023, equipment must be operational this financial year or risk to funding. Medical Physics managing and escalating. Scoping of activity a challenge, contingent on NES recruitment of clinical staff. Options for flow optimisation across two floors, dependant on projected increase. Option to remove the x-ray room due for replacement and site other imaging equipment - potentials being scoped but contingent on funding out with Capital stream.  See Cardiology EP update above. | |

**Please see Appendix 2: HLD Delivery Planning Template**

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| **Delivery Planning Highlight Report – National Elective Services** | | | |
| **Deliverables Status**   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  | **Previous Quarter** | **Q2 (this report)** | **Change vs previous quarter** | |  | *Complete / target met* | 0 | 0 | No change | |  | *On track* | 5 | 6 | +1 | |  | *At risk - requires action* | 6 | 5 | -1 | |  | *Unlikely to complete on time/meet target* | 0 | 0 | No change | |  | Proposal - *New Proposal/no funding yet agreed* | 1 | 0 | -1 | |  | **Total** | **12** | **11** | **-1** (bowel screening proposal deliverable closed) | | | | |
| **Summary of status changes** | **Highlights during quarter** | | **Upcoming / future deliverables** |
| One deliverable removed – *Pilot regional bowel screening*  One change from Amber to Green – *Synaptik contract* | * As at end of September 2022 2,243 orthopaedic procedures were performed against the revised plan of 2,477. YTD activity was ahead of plan for foot and ankle but behind for joints, soft tissue procedures and hand activity. * Endoscopy activity remains ahead of plan (682 at Q2 end). * Work continues to increase 4 joint lists. Remained ahead of target during Q2. * Colorectal activity 59 procedures ahead of plan. Da Vinci colorectal programme - All training for NHS GJ and Lanarkshire surgeons is complete. One surgeon trained from NHS Forth Valley. We are now looking to train a second surgeon from NHS Forth Valley. * Since early May a new contract has been operating which provides two theatres running on Saturdays for a duration of 33 weeks. As at the end of September 2022 729 procedures had been performed by Synaptik. This contract is on target to deliver the 1200 cases. | | * Continued delivery of 22/23 activity plan |
| **Recommendations / Information for Executive Directors** | | **Risks or Issues for Executive Directors awareness** | |
| Note update on delivery plan progress to end September 2022 | | Increasing numbers of long term patients who have been waiting in excess of 2 years is resulting in increased LoS. There is also pressure on elective beds in host boards which means there is an inability to repatriate long stay revision patients; this is reducing the number of beds available in NHS GJ | |

**Please see Appendix 3: NES Delivery Planning Template**

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| **Delivery Planning Highlight Report – Digital** | | | |
| **Deliverables Status**   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  | **Previous Quarter** | **Q2 (this report)** | **Change vs previous quarter** | |  | *Complete / target met* | 0 | 0 | No change | |  | *On track* | 4 | 4 | No change | |  | *At risk - requires action* | 1 | 1 | No change | |  | *Unlikely to complete on time/meet target* | 0 | 0 | No change | |  | Proposal - *New Proposal/no funding yet agreed* | 0 | 0 | No change | |  | **Total** | **5** | **5** | **No change** | | | | |
| **Summary of status changes** | **Highlights during quarter** | | **Upcoming / future deliverables** |
| One change from Green to Amber – *Digital learning pathway*  One change from Amber to Green – *Laboratory Information Management System replacement* | * Preliminary discussions with Microsoft to inform the Data Management Infrastructure OBC have been completed. Overall design / build delivery plan is in development. * Phase 2 Expansion - final detailed network solution work in progress. Current timescales remain on track for September 2023 commissioning. * Business Case approved for Laboratory Information System (LIMS) replacement. Scheduled for March 2023 completion. | | * An updated paper detailing the move from the NearMe pilot to a fully supported business as usual position will be submitted to the EDG by the end of November 2022 |
| **Recommendations / Information for Executive Directors** | | **Risks or Issues for Executive Directors awareness** | |
| Note update on delivery plan progress to end September 2022 | | Digital Learning Pathway within the overall NHS Scotland Academy is delayed due to resource constraints in partner board, Work continues to resolve this issue, with RAG status changed from Green to Amber.  Short timescales for LIMS implementation introduces risk to delivery. Risk assessment and mitigations in place to ensure continuity of service. | |

**Please see Appendix 4: Digital Delivery Planning Template**

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| **Delivery Planning Highlight Report – Estates** | | | |
| **Deliverables Status**   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  | **Previous Quarter** | **Q2 (this report)** | **Change vs previous quarter** | |  | *Complete / target met* | 0 | 0 | No change | |  | *On track* | 2 | 2 | No change | |  | *At risk - requires action* | 1 | 1 | No change | |  | *Unlikely to complete on time/meet target* | 0 | 0 | No change | |  | Proposal - *New Proposal/no funding yet agreed* | 0 | 1 | +1 | |  | **Total** | **3** | **5** | **+1 deliverable (2 new and 1 merged with NHSSA)** | | | | |
| **Summary of status changes** | **Highlights during quarter** | | **Upcoming / future deliverables** |
| Two new deliverables added:  One green – early stages of scoping the Board’s *Sustainability Strategy* has begun.  One proposal – Senior GJUNH and NHSSA teams are scoping the proposal for *Phase 4* to provide additional training / education space.  One deliverable will now be reported via NHS Scotland Academy’s template:  *Clinical skills support* deliverable 2021-GJ37, merged with NHSSA’s learning environment deliverable 2021-GJ66. | * Phase 2 expansion now within a year of handover. State of Readiness Group formed to oversee the delivery of Phase 2 during transitional phases. * Significant recruitment drive is underway to support the opening of the new Surgical Centre, although known challenges remain with peri-operative nursing posts. * Refurbishment of existing hospital accommodation is now underway to provide additional Orthopaedic Outpatient space. * Phase 4 project group established and team are in early discussions with potential partners such as Universities of Glasgow and Strathclyde. | | * Refurb of existing hospital accommodation is now underway to provide additional Orthopaedic Outpatient space to support increased activity. * Approval for NHSSA clinical skills area works in place, to begin during Q3. (Deliverable merged with NHSSA deliverable 2021-GJ66) * Phase 4 initial Strategic Assessment to be completed by Q3 end. |
| **Recommendations / Information for Executive Directors** | | **Risks or Issues for Executive Directors awareness** | |
| Note update on delivery plan progress to end September 2022 | | Continuation of previously identified risk: peri-operative nursing posts remain the key area of concern to recruit to for Phase 2. | |

**Please see Appendix 5: Estates Delivery Planning Template**

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| **Delivery Planning Highlight Report – Finance** | | | |
| **Deliverables Status**   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  | **Previous Quarter** | **Q2 (this report)** | **Change vs previous quarter** | |  | *Complete / target met* | 1 | 0 | One deliverable previously marked closed is reinstated as Green as ongoing requirement (FPR returns) | |  | *On track* | 2 | 4 | +2 | |  | *At risk - requires action* | 2 | 2 | No change | |  | *Unlikely to complete on time/meet target* | 0 | 0 | No change | |  | Proposal - *New Proposal/no funding yet agreed* | 0 | 0 | No change | |  | **Total** | **5** | **6** | **+1** | | | | |
| **Summary of status changes** | **Highlights during quarter** | | **Upcoming / future deliverables** |
| One change from Complete back to Green – *Submit RMP Finance Template Return within FPR*  One change from Amber to Green – *Compile and understand recurring Covid costs*  One new assessed as Amber - *Funding and management of Scottish Public Sector Pay Policy (SPSPP) for workforce* | * The Board has compiled a deeper dive for Q2 Covid related expenditure requested within the FPR return. This takes into consideration the recent Template changes. Detailed analysis undertaken, with level of risk exposure to be managed within overall NHS GJ financial position 23/24. * Mobile endoscopy and cataracts costs now incorporated as part of routine Planned Care reporting to SG / OPDB. * Efficiency Savings Target of £4.590m, £1.445m achieved as at M6 - September 2022 reporting. Further schemes to March 2023 have indicated £3m of schemes will be achievable with £1.590m remaining unachieved. | | * Focus of new Efficiency Savings process will be the transformation to recurring schemes as there is risk due to the reliance on non-recurring savings to support a recurring financial plan. * Ongoing SPSPP negotiations (nationally) |
| **Recommendations / Information for Executive Directors** | | **Risks or Issues for Executive Directors awareness** | |
| Note update on delivery plan progress to end September 2022 | | Pay Policy implications - Financial Planning assumes a cost neutral approach, however every 1% increase in pay will result in circa £0.900m of cost increase for NHS GJ. There is a risk element of an award above the 5% value - based on circa 7% pay award would amount to £1.8m risk exposure | |

**Please see Appendix 6: Finance Delivery Planning Template**

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| **Delivery Planning Highlight Report – Golden Jubilee Conference Hotel** | | | |
| **Deliverables Status**   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  | **Previous Quarter** | **Q2 (this report)** | **Change vs previous quarter** | |  | *Complete / target met* | 0 | 1 | +1 | |  | *On track* | 4 | 3 | -1 | |  | *At risk - requires action* | 1 | 1 | No change | |  | *Unlikely to complete on time/meet target* | 0 | 0 | No change | |  | Proposal - *New Proposal/no funding yet agreed* | 0 | 0 | No change | |  | **Total** | **5** | **5** | **No change** | | | | |
| **Summary of status changes** | **Highlights during quarter** | | **Upcoming / future deliverables** |
| One change from Green to Complete – *Refurbishment of 4th floor bedrooms to support International Recruitment requirements* | * University of Glasgow to utilise GJCH for OSCE examinations 2023, with provisional dates for 2024. * Work has completed on the 2nd and 3rd floor of the Hotel bedrooms. The Hotel has two full floors refurbished to a four star standard. * Work is complete on the bedroom and social space works to accommodate NHS GJ international recruits. The first cohort of recruits are currently onsite with a second cohort due to arrive in Nov 2022. * As at Q2, the Hotel's financial performance is ahead of the agreed 2022/23 financial plan. Work continues to fill in market gaps left by reduced NHS business. | | * Work has begun on the development of the Hotel Strategy (estimated Q4) * Large scale estate refurbishment including 4th floor bedrooms and expansion of Hotel footprint is on hold due to development of the 2023 Hotel Strategy (Q4). This is not having a negative impact on the Hotel's financial plan. |
| **Recommendations / Information for Executive Directors** | | **Risks or Issues for Executive Directors awareness** | |
| Note update on delivery plan progress to end September 2022 | | Additional bedroom space may be required for International Recruitment cohort 3 in early 2023. | |

**Please see Appendix 7: Golden Jubilee Conference Hotel Delivery Planning Template**

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| **Delivery Planning Highlight Report – Inequalities** | | | |
| **Deliverables Status**   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  | **Previous Quarter** | **Q2 (this report)** | **Change vs previous quarter** | |  | *Complete / target met* | 0 | 0 | No change | |  | *On track* | 4 | 4 | No change | |  | *At risk - requires action* | 1 | 1 | No change | |  | *Unlikely to complete on time/meet target* | 0 | 0 | No change | |  | Proposal - *New Proposal/no funding yet agreed* | 0 | 0 | No change | |  | **Total** | **5** | **5** | **No change** | | | | |
| **Summary of status changes** | **Highlights during quarter** | | **Upcoming / future deliverables** |
| No changes to delivery RAG status during Q2. | * 500+ members of staff have completed the new EQIA training module * Sunflower Scheme launched in NHS GJ * Disability Pay Gap reporting was included in 22/23 Workforce Monitoring Report * Inclusive Design Strategy for Phase 2 developed and due to be considered by Executive Directors Group at end of Oct. | | * Establishment of additional Staff Diversity Networks for Age and Sex. Options for Socio-Economic to be considered * Further engagement with NES around Diversity and Inclusion training, eLearning and resourcing |
| **Recommendations / Information for Executive Directors** | | **Risks or Issues for Executive Directors awareness** | |
| Note update on delivery plan progress to end September 2022 | | Delivery of Diversity and Inclusion training may be constrained by staff availability / capacity in core team. | |

**Please see Appendix 8: Inequalities Delivery Planning Template**

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| **Delivery Planning Highlight Report – NHS Scotland Academy** | | | |
| **Deliverables Status**   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  | **Previous Quarter** | **Q2 (this report)** | **Change vs previous quarter** | |  | *Complete / target met* | 0 | 0 | No change | |  | *On track* | 5 | 4 | -1 | |  | *At risk - requires action* | 1 | 2 | +1 | |  | *Unlikely to complete on time/meet target* | 0 | 0 | No change | |  | Proposal - *New Proposal/no funding yet agreed* | 0 | 0 | No change | |  | **Total** | **6** | **6** | **No change** | | | | |
| **Summary of status changes** | **Highlights during quarter** | | **Upcoming / future deliverables** |
| Two changes from Green to Amber -  *Establishment of National Endoscopy Programme* and *Establish National Treatment Centre Workforce Programme*  One change from Amber to Green -  *Establishment of NHSSA learning environment* | * Progress has been made with the space for the physical learning environment and stakeholders have been involved in creating the plans. * Several new colleagues have been on-boarded in the last quarter so we have increased capacity for the development of programmes. * The Endoscopy Assistant Practitioner programme went live this quarter, with the first 8 learners. * NTC programme - On track in terms of NHSSA deliverables - we are providing 12 places per cohort across the programmes, but uptake has been poor, with many vacant spaces as Boards have not been able to recruit to roles. Work is underway to promote perioperative careers in general to stimulate demand amongst newly-qualified nurses. * OSCE Preparation workstream on track - the two sets of resources we have released are being well used, and we have been commissioned to add two further sets of resources - one for adult Mental Health nursing and one for Paediatric nursing. | | * Continue to deliver existing programmes per schedule * By the end of Q3 all senior educators, principal leads and senior specialist leads will have been recruited for commissioned programmes, with on-boarding complete for most. * Workstream is now being scoped at the request of some Boards to support band 4 roles in the perioperative environment. * Ongoing dialogue regarding funding for, and uptake in, NTC workforce programme |
| **Recommendations / Information for Executive Directors** | | **Risks or Issues for Executive Directors awareness** | |
| Note update on delivery plan progress to end September 2022 | | NTC Workforce Programme - Confirmation of funding for 2022/23 is still outstanding - this workstream was reduced from £4.5m to £3.5m, then £1.4M in governmental conversations, but there is no commitment in writing yet. Programme will not deliver intended benefits in respect of capacity and capability should sufficient learners not be identified and enabled to participate.  Progress is being made across all elements of the National Endoscopy Training Programme programmes, but challenges remain around faculty being released via SLAs to participate in the programme, and in operational issues including claiming for expenses, and implications of current pension-tax effecting or ability to attract/retain Consultants to this programme. | |

**Please see Appendix 9: NHSSA Delivery Planning Template**

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| **Delivery Planning Highlight Report – Workforce** | | | |
| **Deliverables Status**   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  | **Previous Quarter** | **Q2 (this report)** | **Change vs previous quarter** | |  | *Complete / target met* | 0 | 0 | No change | |  | *On track* | 5 | 5 | No change | |  | *At risk - requires action* | 1 | 1 | No change | |  | *Unlikely to complete on time/meet target* | 0 | 0 | No change | |  | Proposal - *New Proposal/no funding yet agreed* | 0 | 0 | No change | |  | **Total** | **6** | **6** | **No change** | | | | |
| **Summary of status changes** | **Highlights during quarter** | | **Upcoming / future deliverables** |
| No changes to delivery RAG status during Q2. | * Phase 2 Expansion: Service areas are working actively to achieve the required workforce numbers at each milestone. Plans are underway to create innovative solutions to optimise recruitment campaigns at a time when there is a known shortage across NHS roles nationally. * Feedback from SG received for Workforce Plan. Final version to be considered by Staff Governance and Person Centred Committee on 1 Nov. * Staff vaccination programme 2022 underway: 99.25% of allocated Covid vaccinations administrated. Covid booster / Flu vaccination clinics underway. * Mental Health priority actions agreed and approved by Staff Governance Person Centred Committee. Mental Health First Aid classroom training has recommenced. * 61% iMatter response rate was achieved, an Employee Engagement Index of 74, and a thermometer score of 6.8 for the overall experience of working for the organisation. | | * Phased recruitment in run up to September 2023 Phase 2 opening. * Work ongoing on scoping out internal Mental Health referral pathways. * Plans are underway to establish two additional networks to represent the protected characteristics of:   Age - Young Persons Network  Sex - Women's Health Network   * Employee Assistance Programme contract to be extended. |
| **Recommendations / Information for Executive Directors** | | **Risks or Issues for Executive Directors awareness** | |
| Note update on delivery plan progress to end September 2022 | | Continuation of previously identified risk: Significant recruitment required to deliver Phase 2 NTC expansion. There are recognised shortages in skills and workforce capacity, accompanied by high market competitiveness. | |

**Please see Appendix 10: Workforce Delivery Planning Template**

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| **Delivery Planning Highlight Report – Centre for Sustainable Delivery** | | | |
| **Deliverables Status**   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  |  | **Previous Quarter** | **Q2 (this report)** | **Change vs previous quarter** | |  | *Complete / target met* | 0 | 0 | No change | |  | *On track* | 3 | 3 | No change | |  | *At risk - requires action* | 0 | 2 | +2 | |  | *Unlikely to complete on time/meet target* | 0 | 0 | No change | |  | Proposal - *New Proposal/no funding yet agreed* | 2 | 0 | No change | |  | **Total** | **5** | **5** | **No change** | | | | |
| **Summary of status changes** | **Highlights during quarter** | | **Upcoming / future deliverables** |
| One change from Green to Amber – *Development of Primary – Secondary Care interface*  One change from Proposal to Amber – *National Elective Coordination Centre (NECU)* | * CfSD worked in collaboration with the Innovation Design Authority (IDA). The first IDA took place in Aug 2022 and will now meet on a monthly basis moving forward. The IDA Board will oversee the work of the ANIA Collaborative; ensure that engagement with Boards, and that funding pathways are agreed at an early stage. IDA met on 22 September 2022 and approved 3 Strategic Assessments. * Within the Primary – Secondary Care Interface, three initial projects (digital dermatology, chronic pain and SACT) have been agreed and work has commenced. A draft model for effective engagement with Primary Care guiding principles to support the pipeline process of potential projects have been developed. * Progress in establishing core team and programme governance for National Green Theatres Programme. * Recruitment of initial NECU project team complete, with key governance documents drafted and awaiting sign-off. Workforce sub-group established to develop workforce operating model and arrangements. Significant gains being realised through WL validation. | | * Multiple delivery milestones during 2022 as detailed within the CfSD Delivery Planning template. |
| **Recommendations / Information for Executive Directors** | | **Risks or Issues for Executive Directors awareness** | |
| Note update on delivery plan progress to end September 2022 | | Primary – Secondary Care Interface - Progress has been slower than anticipated due to delays in agreeing funding for progressing components of the work, coupled with competing priorities within CfSD.  NECU - While significant gains are being realised through WL Validation, key constraints currently are funding to support OP clinics and surgical treatment. | |

**Please see Appendix 11: CfSD Delivery Planning Template**