

Population Health and Wellbeing Mid-Year Report 2024-2025

Living well, working well and
flourishing in Fife

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Our strategic framework: *how we're delivering our population health and wellbeing strategy*

Vision: Living well, working well and flourishing in Fife



Our Values

Care and compassion

Dignity and respect

Openness, honesty and responsibility

Quality and teamwork



Our Principles

Listening and involving

Supporting communities

Empowering people
Prevention and early intervention

Creating wellbeing

Being kind

Strategic Priorities



Strategic Priority 1:
Improve health and wellbeing

We work to close the inequality gap ensuring that all people of Fife can flourish from cradle to grave.



Strategic Priority 2:
Improve the quality of health and care services

We provide the safest and best possible health and care services, from cradle to grave, for the people of Fife.



Strategic Priority 3:
Improve staff experience and wellbeing

We value and look after our staff.



Strategic Priority 4:
Deliver value and sustainability

We use our resources wisely to ensure our services are sustainable and meet our population's needs.

Tactical Response

Reform, Transform and Perform (RTP)

Enabling Strategies

NHS Fife Strategies

- Anchor Institution Strategic Plan
- Cancer Framework
- Clinical Governance Strategic Framework
- Digital and Information Strategy
- Greenspace Strategy
- Pharmacy and Medicines Strategic Framework
- Property and Asset Management Strategy
- Research, Innovation, and Knowledge Strategy
- Realistic Medicine and Value Based Health
- Women's Health Plan
- Workforce Plan and HSCP Workforce Plan and Strategy

Fife HSCP Supporting Strategies

(aligned to Fife HSCP Strategic Plan)

- Alcohol and Drug Strategy
- Carers Strategy
- Childrens Services Plan
- Dementia Strategy
- Home First Strategy
- Learning Disability Strategy
- Mental Health Strategy
- Prevention and Early Intervention Strategy
- Primary Care Strategy

Delivery

NHS Fife Corporate Objectives

Assurance

Annual Delivery Plan (ADP) | Integrated Performance and Quality Report (IPQR)

Introduction

We are now into the second year of implementing our [Population Health and Wellbeing Strategy](#). Signed off by NHS Fife's Board in March 2023 we are continuing to work towards the vision outlined in this strategy of *Living Well, Working Well and Flourishing in Fife*. Building on the work in 2023-24, this report provides an update on the progress we have made in the period April-September 2024.

The focus of our strategy is to ensure that we are improving population health and wellbeing, recognising where we can make an impact on the social determinants of health and address health inequalities. When we developed the strategy, recognising the high degree of uncertainty we faced, we chose to not develop detailed plans and commitments. Instead, we committed to take a more agile approach allowing us to adapt our approach as circumstances necessitated.

As we move forward both the opportunities and challenges are becoming clearer. Recognising the significant financial challenges we face as an organisation, whilst also mindful of our commitment to delivering high quality care, we have developed our Reform, Transform, Perform (RTP) framework. This is our tactical response to addressing our financial challenges, whilst in tandem, describing how we will create the conditions for us to evolve our services, empower our staff and to secure a more sustainable future. This approach is supporting closer whole system working with our strategic partners across the Fife health and care system. Our RTP Framework is firmly rooted in the ambitions laid out in our NHS Fife Population Health and Wellbeing Strategy and will accelerate progress with our transformation journey.

Updates in this report are structured around the NHS Fife Corporate Objectives. Appendix one details how these are aligned with the existing strategic priorities within the Population Health and Wellbeing Strategy. They also reflect the focus areas of the Re-form, Transform, Perform Framework and the NHS Fife Annual Delivery Plan for 2024/25 agreed with Scottish Government. For each corporate update we have provided context, where necessary explaining how the corporate objective builds on work already undertaken. There is then an update on what has been achieved in April-September 2024 and what we plan to do in the latter half of the financial year (October 2024-March 2025).

Additionally, there is a range of information included in appendix two which provides more detail on our strategies and programmes across NHS Fife as well as the work underway supporting implementation of our RTP Framework. Appendix 3 provides an overview of how we are measuring the impact of the Population Health and Wellbeing Strategy. We also have provided two case studies which show how we are redesigning our services in practice. The first describes the impact of the recently implemented Rapid Cancer Diagnostic Service and the what the evaluation of this service has showed. The second outlines how we are reducing admissions to hospital for our most frail patients through collaborative working across our admissions team and our Hospital at Home Service.

The breadth and range of work described in this report is a testament to the continued efforts and support all the staff employed by NHS Fife who have demonstrated their ongoing commitment to the ambitions set out in our Population Health and Wellbeing Strategy. We thank them for all the work that they do and how they allow us to care for the population of Fife.

Our work in action: *how we are making a difference to our health and wellbeing*

Evaluating the impact of the Rapid Cancer Diagnostic Service

About the Rapid Cancer Diagnostic Service

When John first visited his GP, he had vague symptoms—nothing too alarming, yet enough to concern him. His journey could have led to multiple appointments, tests, and long waiting times, adding to his anxiety. Instead, thanks to the Rapid Cancer Diagnostic Service (RCDS), John received prompt, coordinated care.

We have well established standard cancer referral pathways for patients who meet clear referral criteria. However sometimes patients present to their GP with non-specific symptoms such as vague discomfort, unexplained fatigue, or subtle changes. These symptoms might be early signs of something serious, like cancer, but they don't meet the criteria for referral to secondary care.

NHS Fife established an award-winning RCDS in June 2021, supporting patients like John, whose story we shared in the [Population Health and Wellbeing Strategy](#) (page 23). The RCDS provides primary care with an alternative route to refer patients with non-specific symptoms where the GP is concerned about the possibility of cancer. Patients referred to the RCDS receive co-ordinated examination and investigations based on their needs with rapid reporting of results.

How did we evaluate our Rapid Cancer Diagnostic Service?

The University of Strathclyde completed an evaluation of three pilot RCDS sites in Scotland, which includes the service provided in NHS Fife. A range of data was collected on the activity and performance of the RCDS for patients referred between June 2021 – June 2023. Opinions of the RCDS from patients and health professionals were also sought through online surveys and qualitative interviews. Further feedback was also gathered from [Care Opinion](#).



What did the evaluation tell us?

The evaluation of all three RCDS pilot sites found:

- 12% of patients seen over the two-year period were diagnosed with cancer.
- 6% were given a pre-cancer diagnosis, meaning they required further monitoring in case a cancer develops.
- 41% were diagnosed with a non-cancer condition.
- 41% were given the all-clear and referred back to primary care.

It also highlighted that the model delivers a **quality service at speed, is cost effective** compared to previous pathways, and **highly valued by patients and staff**. Positive patient experience is attributed to the speed of referral, reduction in waiting times for diagnostic tests, having a single point of contact and enhanced information and communication throughout the RCDS pathway.

When patients are referred to the RCDS, they receive an experience built on speed, support, and understanding. As one patient described, *'I could not have been treated with more courtesy...she [staff member] spent time trying to put me at ease.'*

Our RCDS is breaking down barriers, reaching people in Fife's most deprived communities. As shown in the figure below, most referrals into the service were made for patients living in the most deprived areas (SIMD 1). This compares positively with the Urgent Suspicion of Cancer referral route. The services were positively received by patients, with more than 96% giving the service a positive satisfaction rating of eight or more (with a maximum score of 10).

	% RCDS Referrals June 2021-June 2023 by deprivation category	% Urgent Suspicion of Cancer Referrals June 2021-June 2023 by deprivation category
SIMD Q1 (most deprived)	24.4%	20.4%
SIMD Q2	22.1%	20.6%
SIMD Q3	19.0%	21.0%
SIMD Q4	17.8%	19.6%
SIMD Q5 (least deprived)	16.2%	18.4%

What are we doing next?

Funding for 5 pilot RCDS sites cross Scotland, including Fife, has been provided until March 2025 and outcomes are continuing to be monitored.

How NHS Fife is tackling frailty

What is Frailty?

'Frailty' is a term that is used a lot but is often misunderstood. When used appropriately, it refers to a person's mental and physical resilience, or their ability to bounce back and recover from events like illness and injury¹. Frailty is progressive, negatively impacting independence and quality of life and is linked to an increased use of health and social care services. Frailty can affect people as young as 50 years old. It is projected that as our population ages, there will be an increase in those living with frailty. Consequently, there is a need to plan for clinical services to manage the increase in the frail older population.

Developing our services for our frailest patients

We have been undertaking a range of redesign to improve our services for our frailest patients. Our approach is supported by working in partnership with a wide range of organisations in Fife coordinated through the Frailty Managed Clinical and Care Network (MCCN). The network priorities include frailty prevention, early intervention and integrated support and care across Fife.

Between October 2023 and January 2024, we tested an in-reach approach in which an Advanced Nurse Practitioner (ANP) working in the Victoria Hospital Kirkcaldy facilitated the earlier discharges of patients living with frailty, with support from the NHS Fife [Hospital at Home](#).

How did we evaluate the in-reach frailty model?

During this time, 168 early supported discharge (ESD) patients transitioned from an acute setting to the Hospital at Home service, 92 of which were identified by the In reach Hospital at Home ANP and Frailty ANPs. 77% of the patients identified by in-reach were discharged on their day of admission. A total of 555 bed days were saved (based on the monthly average Length of Stay).



¹ [What is frailty? | Age UK](#)

The table below details the impact our service has made.

Month	Total Patients Identified as Early Supported Discharge by In-Reach ANP	Same Day Discharge	% Same Day Discharge	Average Monthly Length of Stay (Days)	Average Acute Bed Days Saved
October 2023	18	10	56%	7.5	75
November 2023	53	41	77%	7.7	316
December 2023	10	10	100%	8.2	82
January 2024	11	10	91%	8.2	82
Total	92	71	77%	-	555

Over the 4-month period of the test of change we have saved 555 bed days.

What are we doing next?

Following the recruitment of two ANPs, we are now expanding the Hospital at Home in-reach frailty service, enabling earlier discharge of frail patients so they can be cared for in a homely environment in conjunction with our Hospital at Home service.



Re-form, Transform, Perform

We agreed our Reform, Perform, Transform (RTP) framework in March 2024 as our tactical response to support NHS Fife to actively undertake the transformation of our organisation. It sets out how we will implement a renewed strategic approach to creating the right conditions for us to evolve our services, empower our staff and to ensure a more sustainable future.

This framework is rooted in the ambitions laid out in our NHS Fife Population Health and Wellbeing Strategy and serves as a tactical plan for the organisation, underpinned by our Corporate Objectives, our Annual Delivery Plan (ADP) and Medium-Term Financial Plan (MTFP).

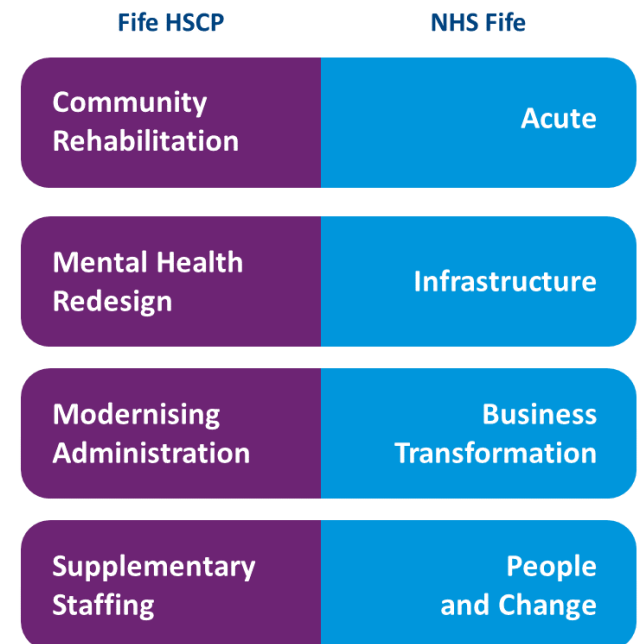
The evolving healthcare landscape and increasing financial pressures has necessitated a structured and long-term approach to transformation. In December 2023, following the Scottish Governments budget announcement, Richard McCallum, Director of Health and Social Care Finance, Digital & Governance at NHS Scotland wrote to all NHS Board Chief Executives, stating that *'The financial pressures across health and social care are by far the most challenging since devolution'*.

As a first step to begin addressing this financial challenge, our RTP Framework sets out how we will deliver £25million recurrent savings in the 2024-25 financial year. This equates to 3% of our total budget. To achieve our savings target we have identified 13 schemes. These schemes vary in scale and complexity but collectively are supporting delivery of our savings target.

The next stage of our framework is the development of our transformation strategic portfolio with a coordinated collection of initiatives, programmes and projects that align with our Population Health and Wellbeing Strategy and long-term ambitions. The portfolio will ensure continued balance between quality and safety of care, strategic delivery, staff experience, and financial improvement, value, and sustainability. Our four key transformation programmes are Acute, Business Transformation, Infrastructure, and People and Change. In tandem, a joint transformation plan is being prepared that will align the RTP framework with the transformation work of Fife Health and Social Care Partnership (HSCP).

This will support all partner organisations in Fife to jointly pursue high quality outcomes and value for the population of Fife. It also enables us to adapt our work to the emergent local, regional, and national context. Appendix One describes the alignment between the delivery of our RTP framework and the 2024-25 Corporate Objectives.

Aligning the NHS Fife and Fife HSCP Transformation Work



RE-FORM

We need to Re-form

- Immediate changes to how we work across the organisation
- Increased grip and control
- Principles to enable systems leadership to improve our position



Delivery of 3% efficiency target

TRANSFORM

We need to Transform

- Make changes to our services, structure and care delivery
- Develop proposals that will require choices to how we deliver services across NHS Fife
- Ensure change balances the financial position with safety, quality and performance



Delivery of additional 4% to support balance

PERFORM

We need to Perform

- Demonstrate sustainable improvements to our financial position
- Ensure our improvements are sustainable
- Realise our strategic ambition



Sustainable financial position

Strategic Priority 1: *improve health and wellbeing*

Corporate Objective 1: *we will deliver pathways into employment in support of our Anchor ambitions through the development of innovative approaches to support priority groups to choose careers with NHS Fife.*

Provision of good stable employment, particularly for the most disadvantaged in society, can address health inequalities and impact positively on the social determinants of health. In our Anchors Strategic Plan, we identified a key focus of our work would be to promote employment opportunities in Fife with a focus on progressive recruitment practices.

What we have done April- September 2024:

- Collaborating with NHS Education for Scotland (NES) and Fife College we are delivering '[EMERGE](#)'. This is targeted at Fife school pupils (aged 14–16 years) from areas of multiple deprivation, with an interest in pursuing a career in health. Participants undertake a 12-month qualification through Fife College, including a placement within NHS Fife.
- Collaborating with Fife Council to deliver 'Life Chances', supporting Community Wealth Building via 13-week placements leading to sustainable employment. Fife Council provides support and training to develop employability skills.
- Working together with Fife College we are expanding the delivery of Modern Apprenticeships to Healthcare Support Workers employed within NHS Fife. In doing so employees are gaining on the job experience with a qualification, which enhances the nursing career pathway.
- We are working in partnership with St Andrew's University to deliver the innovative Scottish Community Orientated Medicine (ScotCOM) programme. This is focussed on community based clinical teaching and providing students with comprehensive understanding of community care services. It is expected that in the longer term this degree programme will train our future community based medical workforce.
- Supporting our Anchor objectives, NHS Fife has applied jointly with Fife Council to be part of the Collaboration for Health Equity for Scotland (CHES) programme. This is being delivered in partnership by Public Health Scotland (PHS), Sir Michael Marmot and Institute of Health Equity (IHE).

What we will do before 31st March 2025:

- We will continue to facilitate placements for participants on the EMERGE and Life Chances programme. We will ensure that all plans are complete for the first cohort of the ScotCOM programme starting in autumn 2025.
- We will improve our engagement with High Schools in Fife by developing and delivering dedicated Health and Social Care Careers Events for pupils to attend at our Queen Margaret Hospital Education Centre.
- In addition, we will continue to work with the [Prince's Trust](#) to provide 4 week placements to candidates interested in Health and Social Care, aged between 16 – 30 years of age who have been marginalised or are disengaged. Prince's Trust and NHS Fife will help those on placement build both confidence and skills.

Corporate Objective 2: *we will finalise the prevention and early intervention strategy and action plan across the life course focusing on child health and working with partners to address the building blocks for health.*

Prevention and early intervention underpins the delivery of our Population Health and Wellbeing Strategy. It will lead to better health outcomes for people, their families, and our wider communities. We can reduce the burden of illness and reduce early deaths for our population. Getting this right will lead to benefits for our health and care system through reduced demand for services.

What we have done April- September 2024:

- Developed the Prevention and Early Intervention Strategy with input from a wide range of stakeholders. This included developing definitions of prevention and early intervention, so these are shared meaningful concepts across our Health and Care System.
- The Prevention and Early Intervention Strategy has been approved by the Fife HSCP at the Integration Joint Board in September 2024.

What we will do before 31st March 2025:

- Gain approval from the NHS Fife Board.
- Finalise and commence our year one delivery plan which will take a life course approach working alongside existing strategies recognising the interconnectedness of factors such as social, economic, and environmental influences.



Corporate Objective 3: *we will provide tiered support for people who are waiting for planned care building on the established 'Well' initiative and embed new learning from pilot work to support people who are waiting for appointments, procedures, and other care.*

Our services are under pressure and sometimes patients are having to wait longer than we would like. [Waiting well](#) approaches enable people to support their health and wellbeing while they are waiting for their appointment, procedure, and other care. In 2024-25, we tested ways of embedding a waiting well approach in our Orthopaedics service. This showed that there are benefits of raising awareness of all the resources available. We also found that when we communicate directly with patients, using person centred approaches to understand 'what matters', this is more likely to see positive outcomes such as increased uptake of supporting services.

Through our work to date we have built close working relationships between acute services (where patients are typically waiting) and [The Well](#) (run by Fife HSCP) who run drop-in services providing free information and general advice to help people stay well and independent within their local community.

What we have done April- September 2024:

- Building on the learning in Orthopaedics, we have ensured information on waiting well is readily available on the NHS Fife Website, on the Patient Hub app, in outpatient clinics, and in letters for patients of all specialties. We have also included links to the NHS Fife [Pain Talking](#) website.
- Developed referral pathways to The Well to ensure all patients who can benefit from this service can do so.

What we will do before 31st March 2025:

- Continue to ensure that we embed and maximise use of the wide range of resources available to us including holistic community service provided by The Well.
- Develop plans and agree next steps to take forward Waiting Well. This will include consideration on how we can provide a more proactive approach to embedding waiting well into all our services, recognising that patients are more likely to utilise services following direct contact.



Strategic Priority 2: *improve quality of health and care services*

Corporate Objective 4: *we will establish a transformative and sustainable model for unscheduled care in Fife and implement sustainable changes that will lay a solid foundation for the reformation and continuous improvement of unscheduled care services, ensuring they are integrated, efficient, and responsive to the needs of our community.*

Urgent and unscheduled care services provide any care in an emergency including during out of hours. It includes care provided by our Accident and Emergency department, minor injury units and a range of community services. Our services have experienced increasing demand with year-on-year increases in presentations to our Accident and Emergency department. This pressure is seen in our ED waiting times which have increased. In previous years we have invested in growing our capacity and undertaken redesign of our unscheduled care services. Further work is ongoing to embed changes and take forward further improvements across our health and care system to ensure that our unscheduled care services provide high quality sustainable care in the longer term.

What we have done April- September 2024:

- We have four priority workstreams underway: Flow Navigation Centre (FNC), Rapid Triage Unit, Transforming Urgent Care, and Optimising Care Home Pathways. Progress is monitored regularly through the Integrated Unscheduled Care Programme Board.
- Following the alignment of the FNC to our Acute Services Medical Directorate in 2023-24, we have seen an increase in redirections away from A&E. This means more patients are being seen in the most clinically appropriate setting for their needs and avoids long waits at A&E.
- We have identified further options for service redesign which are currently being considered in conjunction with a range of stakeholders.
- Our performance against the 4-hour standard (95% of patients to wait less than 4 hours in A&E (Emergency Department or Minor Injuries Unit) from arrival to admission, discharge, or transfer) is reported every month in our Integrated Performance and Quality Report (IPQR). In September 2024 was 75.4%. The most recent publication from PHS, for month of Aug-24, shows that NHS Fife continues to be in the mid-range of all Mainland Health Boards and above the Scottish average.

What we will do before 31st March 2025:

- We will continue working in partnership across the Fife health and care system to support the ongoing transformation of unscheduled care. This includes working with the public, primary care colleagues such as GPs, and staff side representation.

Corporate Objective 5: *We will develop an Acute Services Clinical Framework and action plan that will guide the strategic direction and delivery of services throughout the lifespan of the strategy, ensuring a cohesive and integrated approach to healthcare provision that meets the evolving needs of our patient population.*

Supporting our Population Health and Wellbeing Strategy, we are developing an Acute Services Clinical Framework covering the period 2025-28. We will also prepare a delivery plan which will detail changes we want to make. Together, this will outline how we will deliver safe and sustainable acute services that meet the needs of Fife. This will guide the transformation of acute services and will be aligned to our Reform, Transform, Perform framework.

What we have done April-September 2024:

- We have begun scoping the Acute Services Framework through reviewing of existing directorate plans and strategies with a focus on the ambitions of clinical services for next three years.

What we will do before 31st March 2025:

- Through engagement with our clinical stakeholders, we will prepare a framework for sign-off by the NHS Fife Board.



Corporate Objective 6: *We will develop an approach to clinically underpin Re-form, Perform and Transform initiatives enabling Realistic, Timely and Personalised Care through developing clear methodologies for implementation and measurement, and underlining the intrinsic link between this approach and the sustainability and value of healthcare services in Fife.*

[Realistic Medicine](#) and Value Based Healthcare are central to our RTP framework. The realistic medicine principles include shared decision making, personalising approaches to care, reducing waste and harm caused by healthcare, reducing unwarranted variation, better managing risk, and seeking to continually improve and innovate. NHS Fife agreed its Realistic Medicine Delivery Plan with Scottish Government and the work is continuing to deliver this.

What we have done April- September 2024:

- The Realistic Medicine Principles are being embedded as part of the RTP Medicines Optimisation scheme and our Medicines Safety Programme to ensure the safety, sustainability, and value from medicines.
- Delivering awareness raising sessions across all parts of our organisation which include promoting the TURAS module on Shared Decision Making and national campaign [It's ok to Ask](#) and the [Benefits, Risks, Alternatives and do Nothing \(BRAN\)](#) questions.
- We have tested the delivery of Quality-of-Care Reviews within acute services, and we have developed plan to scale this work up with further testing in community services from September.
- We are scoping further work around reviewing medicines and procedures of low clinical value and approaches to realistic prescribing.

What we will do before 31st March 2025:

- We will continue work already underway, embedding Realistic Medicine principles across all our work.
- Working with our frailty team to revise guidelines for Realistic Prescribing in Frailty
- Realistic Diagnostics to deliver value-based care.



Strategic Priority 3: *improve staff experience and wellbeing*

Corporate Objective 7: *We will develop a workforce staffing model in line with our Re-form, Perform, Transform objectives. This will include full review of establishments across NHS Fife, demand modelling, and a full review of our skills and expertise to maximise our opportunities and continued pursuit of teaching board status.*

NHS Fife's workforce is essential to the delivery of high-quality services. We know that the best way to deliver high quality care is to have substantive staff that are part of our clinical teams. Our Workforce Plan (2022-25) sets out our plans for how we will develop our workforce to ensure that we deploy our staffing resources effectively and this aligns with plans to redesign and transform services. Much of this work aligns with RTP and is being managed as part of the RTP People and Change Programme and Business Transformation Programme. We are also making links with the HSCP Modernising Administration Services and Supplementary staffing programmes.

What we have done April- September 2024:

- Across all staff groups we have taken steps to move away from using supplementary staffing. Where we do need to use supplementary staffing, we have taken steps to increase the governance and scrutiny of this. For services with specific staffing challenges, we are looking at redesign to protect continued delivery of care.
- [The Health and Care \(Staffing\) \(Scotland\) Act](#) came into force on 1 April 2024. In line with the provisions of the Act we have commenced use of a range of [tools](#) to assess our staffing levels and provide assurance these are safe to meet the safe delivery of patient care.
- Commenced reviewing our staffing structures across all grades and all parts of our workforce. This will ensure that our staff maximise their impact and support delivery of everything we do. We are considering how the deployment of digital approaches can support our workforce to deliver their roles.
- We are developing workforce models for all parts of our medical, nursing, midwifery, and Allied Health Professional (AHP) workforce to project our workforce requirements in future years.

What we will do before 31st March 2025:

- Use the outputs of the work underway to inform our workforce plans going forward.
- Commence reporting of the Healthcare Staffing Programme tools via internal governance routes.
- Begin development of the board's workforce plan for 2025 to 2028.

Corporate Objective 8: *We will deliver against key staff governance metrics for 24/25. This includes reducing sickness absence levels to at least 6.5% and maintaining 80% compliance with mandatory training and 60% uptake of Personal Development Plans and Reviews (PDPR)².*

NHS Fife is committed to improving the wellbeing of our staff, believing that this supports the ongoing retention of our workforce and positively contributes to improved patient care and clinical outcomes. Our staff governance metrics provide an insight into how well we are delivering this in practice. Recognising that there is room for improvement we are seeking to reduce sickness absence rates and increase uptake of mandatory training and PDPR. As we take this forward, we are ensuring that we deliver [Protected Learning Time \(PLT\)](#) for all relevant staff groups.

What we have done April- September 2024:

- Refreshed our data on absence management, working hours lost and trajectory information reviewed to help us understand how we are currently doing.
- Reviewed our ‘Promoting Attendance’ panels to ensure a consistent approach to the management of attendance.
- Commenced development of a refreshed core skills training programme and a blended corporate induction programme.
- Opened the Victoria Training Hub which provides a dedicated space for the provision of resuscitation, manual handling, and clinical skills training. It also includes a digital training suite. This space will support effective delivery of PLT once fully established.
- Tested the provision of a core skills compliance report which details rates of completion of mandatory training.
- At the end of September 2024 our sickness absence and PDPR completion performance was reported in the IPQR:
 - Sickness absence rate was 6.51%, a decrease from 7.47% in Jul-24. The latest benchmarking for Jun-24 shows NHS Fife to be in the mid-range of all the territorial NHS Boards.
 - PDPR completion was 42.9%, a decrease from the previous month but an increase of 1.6% on the same month in 2023.

What we will do before 31st March 2025:

- Benchmark to other NHS Boards to identify further opportunities where we can improve attendance in a supportive way.
- Deliver a Managers Essential Learning Programme designed to support new managers in their role to manage, engage and support team members.
- Provide a reporting dashboard for managers detailing team members engagement in core skills training activities and highlighting outstanding requirements.

² The PDPR is developed between an employee and their line manager. It sets out the employee’s objectives for the year ahead, any agreed development needs, and a plan for how these will be achieved.

Corporate Objective 9: *We will develop and launch a leadership framework focussed on compassionate leadership and an open, transparent, and nurturing culture, underpinned by strong staff engagement.*

As a priority commitment this year, we are seeking to develop our Fife Leadership Framework that has reach and relevance for all of us in NHS Fife. This puts a significant stake in the ground for Fife at a time when both performance and culture are mission critical to our ambitions and capabilities to deliver excellent care, with our people at the heart of our approach. The intention of developing Our Leadership Way is that we co-design it, so that we build confidence in the leadership behaviours that matter the most to us here in Fife. These leadership behaviours will be applicable to all of us, regardless of role, grade, or profession, we are all leaders, with a voice and responsibility to make a difference.

What we have done April- September 2024:

- Commenced our inquiry work to bring forward of 'Our Leadership Way' which seeks to develop a shared leadership philosophy for NHS Fife. This will be informed and shaped by the experiences and expectations of colleagues at all levels across the organisation.
- Formed a collaborative volunteer group who have come together to drive forward the development of Our Leadership Way. This diverse group of interested and passionate colleagues are actively creating ways to engage, inquire and inform to bring forward a leadership framework developed for Fife, by Fife.

What we will do before 31st March 2025:

- Finalise and publicise Our Leadership Way by the end of March 2025. This work will continue into 2025-26 and beyond with the aim of growing and developing our leadership capability and supporting teams to embed our shared leadership philosophy in practice.



Strategic Priority 4: *deliver value and sustainability*

Corporate Objective 10: *We will Re-form, Transform and Perform our organisation to deliver a minimum of 3% recurring savings, and design, approve and commence plans to deliver break even for 2024/25, in support of medium to long term financial sustainability.*

The first phase of our Reform, Transform, Perform framework has been a series of savings schemes to help us secure the minimum 3% savings target. This equates to £25million of savings across our total expenditure.

What we have done April- September 2024:

- As part of the first phase of RTP, we have implemented 13 schemes which are currently in the process of being delivered with monthly reviews through our governance and assurance framework.
- As at the end of September 2024, there has been moderate assurance provided to the Board that £23.2m savings are on track. Work is ongoing at pace to close the gap to achieve the remainder of the savings target.
- We have now established a strategic portfolio with a coordinated collection of initiatives, programmes and projects which will be developed throughout the remainder of 2024-25.

What we will do before 31st March 2025:

- We will continue monitoring and delivery of the RTP 13 schemes.
- We will move towards a wider transformation portfolio, focussing on addressing medium- and longer-term challenges, alongside the ongoing urgent financial sustainability work.



Corporate Objective 11: *We will develop a digital framework to underpin RTP including specific delivery plans: to modernise administration and business enabling functions; to enhance adoption of technologies; to implement Digital Medicines; and to ensure further innovative approaches to support clinical redesign.*

Use of digital approaches is central to how we are redesigning services. To support this work, we are replacing our existing digital strategy with an updated Digital Framework. This will build flexibility into our delivery plans, underpin our RTP Business Transformation Programme, and ultimately ensure that we utilise our financial resources wisely.

What we have done April- September 2024:

- Commenced drafting our digital framework including identifying key objectives and how these align with national, regional, and local objectives (including RTP)
- Working with key suppliers, revised our programme plans and timelines to deliver prioritised digital programmes including electronic immediate discharge documentation, pharmacy stock control and Hospital Electronic Prescribing and Medicines Administration (HEPMA)
- Worked collaboratively with suppliers to identify cost savings for NHS Fife to continue to ensure best value.
- Begun scoping the Business Transformation Programme seeking to improve use of digital solutions to complete internal administration and digital functions. For example, supporting the recruitment process.

What we will do before 31st March 2025:

- Finalise and publish our Digital Framework.
- Deliver Electronic Immediate Discharge Documentation (EIDD) and continue working towards delivery of Pharmacy Stock Control and HEPMA.
- Finalise the scoping and delivery of the Business Transformation Programme.

Corporate Objective 12: *We will continue to implement actions to support the challenge of climate emergency including the reduction of energy, carbon, waste, and unnecessary travel together with improved use of our Greenspace; including the development of the whole system infrastructure plan.*

NHS Fife, in common with other NHS Boards, recognises the climate emergency and has made a commitment to developing sustainable practices and working towards net zero. Our aim is to reduce greenhouse gas emissions from our buildings by at least 75% by 2030 compared to a 1990 baseline, by 2038 to use renewable heating systems for all NHS-owned buildings, and by 2040 for all our estate to achieve net-zero emissions (meaning overall we are not increasing levels of carbon dioxide in our atmosphere). Recognising the scale of this work, we have developed a range of interconnected strategies and programmes which support us to deliver this in a phased way.

What we have done April- September 2024:

- Published a Prior Information Notice (PIN) to test the market for fully funded renewable technology solutions (for example, Battery Energy Storage Systems (BESS), additional solar PV installations, solar car park hubs and EV charge hubs). This will support generation of renewable energy.
- Continued to reduce the impact of our waste through taking steps to actively reduce, reuse and recycle across the organisation. For example, we have NHS Fife is using 'Warp-it' to create an internal reuse network across the organisation. Since March 2024 over 500 staff members joined the platform and have recycled a range of furniture, supplies, and other equipment across the organisation.
- Reducing the impact of travel. For example, we have applied for grant funding to improve cycling infrastructure at our main sites through provision of showering and changing facilities.
- Developing plans for how we can utilise our green spaces, for example we have undertaken a detailed full site survey at Lynebank Hospital to explore the scope to create a therapeutic garden to support the Pain Management Service.

What we will do before 31st March 2025:

- Continue with the national procurement process towards development of renewable energy infrastructure.
- Exploring ways to increase our recycling rates across clinical settings.
- Continuing our work to develop our green spaces.

Appendix One: Alignment of RTP Portfolio with Corporate Objectives

	Acute	Business Transformation	Infrastructure	People & Change
Corporate Objective 1: we will deliver pathways into employment in support of our Anchor ambitions through the development of innovative approaches to support priority groups to choose careers with NHS Fife.				●
Corporate Objective 2: we will finalise the prevention and early intervention strategy and action plan across the life course focusing on child health and working with partners to address the building blocks for health.	●			
Corporate Objective 3: we will provide tiered support for people who are waiting for planned care building on the established 'Well' initiative and embed new learning from pilot work to support people who are waiting for appointments, procedures, and other care.	●			
Corporate Objective 4: we will establish a transformative and sustainable model for unscheduled care in Fife and implement sustainable changes that will lay a solid foundation for the reformation and continuous improvement of unscheduled care services, ensuring they are integrated, efficient, and responsive to the needs of our community.	●			
Corporate Objective 5: We will develop an Acute Services Clinical Framework and action plan that will guide the strategic direction and delivery of services throughout the lifespan of the strategy, ensuring a cohesive and integrated approach to healthcare provision that meets the evolving needs of our patient population.	●			
Corporate Objective 6: We will develop an approach to clinically underpin Re-form, Perform and Transform initiatives enabling Realistic, Timely and Personalised Care through developing clear methodologies for implementation and measurement, and underlining the intrinsic link between this approach and the sustainability and value of healthcare services in Fife.	●			
Corporate Objective 7: We will develop a workforce staffing model in line with our Re-form, Perform, Transform objectives. This will include full review of establishments across NHS Fife, demand modelling, and a full review of our skills and expertise to maximise our opportunities and continued pursuit of teaching board status.				●
Corporate Objective 8: We will deliver against key staff governance metrics for 24/25. This includes reducing sickness absence levels to at least 6.5% and maintaining 80% compliance with mandatory training and 60% uptake of Personal Development Plans and Reviews (PDPR).				●
Corporate Objective 9: We will develop and launch a leadership framework focussed on compassionate leadership and an open, transparent, and nurturing culture, underpinned by strong staff engagement.		●		●
Corporate Objective 10: We will Re-form, Transform and Perform our organisation to deliver a minimum of 3% recurring savings, and design, approve and commence plans to deliver break even for 2024/25, in support of medium to long term financial sustainability.	●	●	●	●
Corporate Objective 11: We will develop a digital framework to underpin RTP including specific delivery plans: to modernise administration and business enabling functions; to enhance adoption of technologies; to implement Digital Medicines; and to ensure further innovative approaches to support clinical redesign.		●		
Corporate Objective 12: We will continue to implement actions to support the challenge of climate emergency including the reduction of energy, carbon, waste, and unnecessary travel together with improved use of our Greenspace; including the development of the whole system infrastructure plan			●	

Appendix Two: *Strategies and Programmes Update*

NHS Fife Local Strategies

Strategy		Timeline	Status	Strategic Priority				Summary of Progress
				1	2	3	4	
1.	Anchor Institution Strategic Plan	2023-2028	Delivery	●		●	●	The focus of the current workplan is on Employability in collaboration with various groups. Work is ongoing to develop opportunities for child poverty priority groups, within areas of multiple deprivation.
2.	Cancer Framework	2022-2025	Delivery		●			Work has started on the refresh of the Cancer Framework and delivery plan. A draft has been developed with meetings scheduled to review the commitments of the revised framework.
3.	Clinical Governance Strategic Framework	2022-2025	Delivery		●		●	Overall on track to deliver; update scheduled for Clinical Governance committee in November 24.
4.	Digital and Information Strategy	2019-2024	Delivery				●	A closure report will be provided to NHS Fife Board in November 2024, outlining the progress associated with the Digital Strategy 2019-2024.
5.	Greenspace Strategy	2023-2030	Delivery	●			●	Agreement, via the corporate objectives, to move to a Digital Framework aligned to the Population Health and Wellbeing Strategy has been agreed and will be delivered by March 2025
6.	Pharmacy and Medicines Strategic Framework	2024-2026	Development		●			Continued partnership working with Fife Communities Climate Action Network (FCCAN) and community groups to establish opportunities.
7.	Property and Asset Management Strategy (PAMS)	2023-2030	Delivery				●	Strategic framework objectives have been agreed within Pharmacy and are progressing with agreed leadership.
8.	Research Innovation and Knowledge Strategy	2022-2025	Delivery	●	●		●	Draft Research Innovation and Knowledge Strategic priorities have been identified through a development workshop session.
9.	Realistic Medicine and Value Based Health	2024-2025	Delivery	●	●		●	Consideration being given to how realistic medicine can be further embedded within the RTP programme.

10.	Women's Health Plan	Ongoing	Delivery		●			Nurse led appointments have significantly reduced menopause waiting times. Menopause educational activities are in place in secondary care, with discussions ongoing with GPs regarding online training. EPC scanning expansion has been paused and a bereavement nurse led service for patients who have suffered pregnancy loss, has been well received.
11.	Workforce Plan and HSCP Workforce Plan and Strategy	2022-2025	Delivery			●		Linkages between RTP and future shape / size of workforce are being explored. Revised SG Workforce Planning 2025-2028 guidance and plan anticipated to be issued imminently.

NHS Fife Strategic Programmes Update

Strategy	Timeline	Status	Strategic Priority				Summary of Progress	
			1	2	3	4		
1.	Integrated Unscheduled Care Programme	March 2025	Delivery		●			The Integrated Unscheduled Care Programme remains on track for the deliverables set out for 2024-25. There is a focus on joint working across the Fife health and care system to develop transformed models of care, utilising learning from FNC redesign, and development of the Rapid Triage Unit. We are also analysing attendances and admissions from care home to identify opportunities for further improvement.
2.	Integrated Planned Care Programme	March 2025	Delivery		●			The Integrated Planned Care Programme remains on track for the deliverables set out for 2024-25, incorporating pathway and service improvements, with a clear focus on optimising productive opportunities, enabled by associated digital and information schemes to deliver the remobilisation and recovery of elective care. These workstreams aim to continue to develop and improve Active Clinical Referral Triage (ACRT) and Patient Initiated Review (PIR) usage, day surgery and theatre capacity and waiting times trajectories alongside digital improvements such as digital hub and results reconciliation.

Fife HSCP Strategies

Strategy		Timeline	Status	Strategic Priority				Summary of Progress
				1	2	3	4	
1.	Alcohol & Drug Strategy	2024-2027	Development	●				The Alcohol and Drug Partnership have finalised the 2024 to 2027 strategy and this is supported by a delivery plan, centred around five themes from the National Drugs Mission Plan priorities.
2.	Carers Strategy	2023-2026	Delivery		●			Strategy in delivery focussed around five outcomes. Key challenges being addressed by collaborative working with external partners.eg recruitment of staff to provide support to carers.
3.	Childrens Services Plan	2021-2023	Delivery		●			Children’s Services Plan is now in delivery with 4 priorities: Closing the Equity Gap; Supporting Wellbeing; Children’s Rights; and Delivering the Promise.
4.	Dementia Strategy	TBC	Development		●			A draft Fife Dementia Strategy is in development with a target delivery for March 2025. The purpose of the strategy is to provide realistic and achievable priorities supported by an implementation plan covering a four-year period.
5.	Home First Strategy	2023-2026	Delivery		●			First Annual Report for the Home First Programme was submitted to Committee(s) in summer 2024.
6.	Learning Disability Strategy	TBC	Development		●			A draft Learning Disabilities Strategy is in development with a target delivery for March 2025
7.	Mental Health Strategy	2024-2027	Development		●			A draft strategy is in development and will be supported by a delivery plan, informed from outputs from the Mental Health Services Redesign Programme.
8.	Prevention and Early Intervention Strategy	TBC	Development	●				The Prevention and Early Intervention Strategy was approved by the Fife Integration Joint Board (IJB) at the end of September and will be submitted to the NHS Fife Board for approval.
9.	Primary Care Strategy	2023-2026	Delivery		●			First Annual Report was delivered in September 2024 and provides an update of actions referenced in the delivery plan.

Appendix Three: *Assessing our Impact*

We are measuring our impact by following a selection of key metrics to measure the health and wellbeing of the population. These metrics are published on an annual basis by the [Scottish Public Health Observatory](#). We included a summary of key insights from the data in our [2023-24 Annual Report](#).

These metrics have been selected for one or more of the following reasons:

- They are routinely captured by information systems allowing us to easily report on them.
- They can be disaggregated by Scottish Index of Multiple Deprivation (SIMD), which is critical given the strategy aims to address health inequalities.
- They directly link to at least one of the four priorities of the Population Health and Wellbeing strategy; and
- They are indicators where Fife is faring worse than the Scottish average and so the scope to improve upon current performance is high.

The metrics we are tracking include:

1. Healthy Life Expectancy
2. Life Expectancy and Deprivation
3. Early Years and Young People
 - a. Child Dental Health in primary 1
 - b. Child Healthy Weight in primary 1
 - c. Teenage Pregnancies
4. Alcohol and Drugs
 - a. Alcohol specific deaths
 - b. Drug-related deaths
5. Mental Wellbeing
 - a. Mental wellbeing score, female
 - b. Mental wellbeing score, male
6. Hospital Admissions
 - a. Multiple emergency hospital admissions, aged >65 years
7. Mortality
 - a. Early Deaths from coronary heart disease (CHD), aged <75years
8. Screening
 - a. Bowel Screening Uptake
9. Smoking
 - a. Smoking during pregnancy

We will provide an update on these metrics in our 2024-25 Annual Report which is expected in Spring 2025.

Appendix Four: *Glossary of Abbreviations and Acronyms*

A&E	Accident & Emergency	IPQR	Integrated Performance Quality Framework
ACRT	Active Clinical Referral Triage	LoS	Length of Stay
ADP	Annual Delivery Plan	MCCN	Managed Clinical Care Network
AHP	Allied Health Professional	MTFP	Medium Term Financial Plan
ANP	Advanced Nurse Practitioner	NES	NHS Education for Scotland
ASD	Acute Services Division	PAMS	Property and Asset Management Strategy
BRAN	Benefits, Risks, Alternatives, and do-Nothing framework	PDPR	Personal Development Plans & Reviews
CHES	Collaboration for Health Equity for Scotland	PHS	Public Health Scotland
ED	Emergency Department	PIN	Prior Information Notice
EIDD	Electronic Immediate Discharge Documentation	PIR	Patient Initiated Review
EPC	Early Pregnancy Clinic	PLT	Protected Learn Time
EV	Electric Vehicle	PV	Photovoltaic System
FCCAN	Fife Communities Climate Action Network	RCDS	Rapid Cancer Diagnostic Service
FNC	Flow Navigation Centre	RTP	Reform Transform Perform
HEPMA	Hospital Electronic Prescribing Management Administration	ScotCOM	Scottish Community Orientated Medicine
HSCP	Health and Social Care Partnership	SG	Scottish Government
IHE	Institute of Health Equity	SIMD	Scottish Index of Multiple Deprivation
IJB	Integrated Joint Board	TBC	To be confirmed

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