

NHS Greater Glasgow and Clyde	Paper No. 25/158
Meeting:	NHSGGC Board Meeting
Meeting Date:	18 December 2025
Title:	Transforming Together & GGC Way Forward Portfolio Report
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1. Purpose

The purpose of this paper is to provide an update on the implementation of the Transforming Together & GGC Way Forward Portfolio. This paper is for assurance.

2. Executive Summary

The paper can be summarised as follows:

This “Transforming Together” Portfolio Report for NHSGGC provides an update on the progress of our six transformation programmes:

1. GGC Way Forward
2. Interface & Urgent Care
3. Primary Care
4. Mental Health
5. Cancer & Planned Care
6. Women’s and Children’s.

Portfolio Status:

All programmes within the Transforming Together Portfolio are on track and make positive progress. The upwards trend has continued as projects continue to mobilise. Most milestones continue to complete as planned, with the pace of delivery expected.

The report sets out a summary of the key achievements across each programme:

- **GGC Way Forward:** with 146 of 193 actions. The programme remains on track across both the wider whole system and sector-based action plans.
- **The Interface & Urgent Care Programme** continues to be on track, with lots of activity underway to support the priority actions across the five core projects. This programme is supported by c.£20.9m additional Scottish Government funding allocated to NHSGGC for 25/26.
- **Additional Programmes:** Our wider programmes: Women & Children's, Primary Care, Mental Health and Cancer & Planned Care all remain on track with an increasing number of priorities and projects established this period.

We established full reporting for all programmes for the November Portfolio Board. Monthly reporting will continue in alignment with our monthly reporting and meeting cadence.

3. Recommendations

The NHS GGC Board is asked to note progress made to date in the implementation of the Transforming Together & GGC Way Forward Portfolio.

4. Response Required

This paper is presented for assurance.

5. Impact Assessment

The impact of this paper on NHSGGC's corporate aims, approach to equality and diversity and environmental impact are assessed as follows:

- | | |
|------------------------|------------------------|
| • Better Health | <u>Positive</u> impact |
| • Better Care | <u>Positive</u> impact |
| • Better Value | <u>Positive</u> impact |
| • Better Workplace | <u>Positive</u> impact |
| • Equality & Diversity | <u>Neutral</u> impact |
| • Environment | <u>Positive</u> impact |

6. Engagement & Communications

The issues addressed in this paper were subject to the following engagement and communications activity:

This report has been developed with input from senior system leaders with the in GGC, key services and executive leads via the Transforming Together and GGC Way Forward Programme.

7. Governance Route

This paper has been previously considered by the following groups as part of its development:

The Portfolio and Programme updates outlined in this paper have previously been presented and considered at:

BOARD OFFICIAL

Transforming Together Portfolio Board – Friday 14 November 2025

Transforming Together & GGC Way Forward Executive Oversight Group – Monday 22 November 2025

Corporate Management Team – Monday 8 December 2025

Finance, Planning and Performance Committee – Thursday 11 December

8. Date Prepared & Issued

Prepared on: 8 December 2025

Issued on: 10 December 2025

Transforming Together - GGC Way Forward Portfolio Report

Board Report

Thursday 18th December 2025

“Listening, Learning and Transforming Together”

1. Introduction

This report provides an update on the progress across our Transforming Together Portfolio, and follows the previous report presented to the Board on the 30 October. This report was presented to the Corporate Management Team on 8 December and Finance, Planning & Performance Committee on the 11 December.

This report is drawn from programme status reports presented to the Transforming Together Executive Oversight Group on the 20 November.

2. Programme Management Office (PMO) Framework & Monitoring

All six programmes have now established milestone plans. A portfolio risk and issue register is now in place. There is regular discussion of the risk and issues register at the Portfolio Board.

During the next period we will develop and implement our change control process to ensure oversight and assured decision-making where milestone dates, project scope/priorities or outcomes deviate from the original intention.

3. Portfolio Status - Overview

Key Highlights:

- The Transforming Together Portfolio has maintained a positive trajectory
- All programmes remain on track and many of the projects within are on an upwards trajectory where they are establishing their detailed plans, deliverables and also anticipating risks for inclusion and consideration in planning.
- Projects are continuing to mobilise, and delivery is increasing at pace.
- Variance in the maturity of programmes remains, meaning impact delivery will be specific to programme and project completion, each programme and project is summarised within this report.

Transforming Together Portfolio			Overall Portfolio Status:			On Track
Overall Portfolio Trend	No in Portfolio	Not Started	Complete	On Track	At Risk	Delayed
↑	6	0	0	6	0	0
Portfolio Executive Summary						
<p>The Transforming Together Portfolio continues to progress with all six programmes delivering actions in the last reporting period. Section 4 provides programme updates including a 70 day look forward and key achievements this period.</p> <p>Main achievements across the portfolio in the last period include:</p> <p>A. GGC Way Forward</p> <ul style="list-style-type: none"> 76% (146/193) actions completed (up 10 from last period) Within Glasgow City HSCP the new Red Cross support service now fully established. Solicitor in post and supporting patients at risk of becoming AWI Discharges to be discharged home with additional support OPAT Service launched at GRI in November (already in place at QEUH and RAH) Point of care rapid troponin testing launched November at QEUH Interim report on progress now shared with HIS <p>B. Interface & Urgent Care</p> <ul style="list-style-type: none"> GP Calls to FNC+ live South sector live at end October, North sector went live end November Escalation & Decompression Huddles November Headache, Hypertension and Discharge to Scan pathways within FNC+ launched November e-Triage procurement completed, contract awarded and project moving to implementation phase System Reset to decompress the system commenced from 20 November to 8 December <p>C. Primary Care</p> <ul style="list-style-type: none"> Collaboration with Interface directorate on delivery of GP Calls to FNC+ which went live in October as above <p>F. Women & Children</p> <ul style="list-style-type: none"> First Paediatric virtual beds utilised (2 neonate babies) in November 						

4. Programme Update

4.1 GGC Way Forward Programme

A summary of the programme status and achievements is detailed below:

GGC Way Forward Programme		Programme Status	On Track	Trend	↑
GGC WF Theme	Key Achievements				
Patient Safety & Care	<ul style="list-style-type: none"> • ED Doors at RAH site now replaced • Plans for improving campus security at RAH, QEUH & GRI have been approved • Comms process to share staff learning established 				
Staffing Concerns	<ul style="list-style-type: none"> • Proposal for Advanced Nursing roles within ED completed for North sector • Advanced Nursing roles and additional Nursing staff appointed in Clyde sector 				
Staff Wellbeing	<ul style="list-style-type: none"> • Medical job plan reviews complete in all sectors 				
Trust & Communications	<ul style="list-style-type: none"> • Sector Newsletters live in all sectors with regular circulation scheduled 				
Infrastructure	<ul style="list-style-type: none"> • Programme of minor works in place in Clyde sector, new drug preparation room created and in use from end October 				
ED Flow	<ul style="list-style-type: none"> • Task and finish groups established in South to review majors and specialty pathways • TAU extended opening hours in Clyde progressed • OPAT service launched at GRI – October (already in place QEUH & RAH) 				
Wider Whole System Operational Improvement Plan	<ul style="list-style-type: none"> • Intermediate Care Beds and complex discharge beds have been open in 5/6 HSCPs since September – a full evaluation of use after 3 months is now underway • SAS Call Before you Convey (CBYC) pathway into FNC+ preventing conveyances, medical staff supporting the pathway from end November as Senior Clinical Decision Maker (SCDM) and will support alignment with ED consultants • Point of care troponin testing commenced in South in November. Evaluation findings will inform further expansion to other sectors. 				

Key activities for the GCC Way Forward ~Programme over the next 70 days are set out in the table below.

Key Activities Planned in next 70-day Period
<p>Whole system</p> <ul style="list-style-type: none"> • Frailty and Admission avoidance: Home first response services planned to expand to 7-day coverage at all major sites (Jan) noting a dependency on recruitment being finalised • Introduction of AHP 7 day working in downstream wards at QEUH, RAH, and GRI. Recruitment is at different stages across the sectors implementation taking place between October and January • Digital Triage procurement - procurement process is now almost complete, we expect to commence roll out in our EDs from January onwards, this will enhance patient flow through Emergency Departments <p>South Sector</p> <ul style="list-style-type: none"> • ED Safer Staffing Group established & eHealth optimise eRoster, Test of change to continue and modification of data entry process to be implemented (Nov) • Staff that require additional support identified and engaged with physiotherapy and occupational health services as required <p>Clyde Sector</p> <ul style="list-style-type: none"> • Trauma Assessment Unit (TAU) extension of opening hours – recruitment process underway, expecting extension of hours by January • Nursing Advanced Practice roles to start in post (Dec) • Recruitment for RAH Security will start in December. Anticipated launch April 2026 <p>North Sector</p> <ul style="list-style-type: none"> • New flow/criteria for patients admitted to short stay ward implemented to ensure patients have been appropriately streamed (for short stay criteria) to help ensure patient safety and system flow • Launch of Specialty Triage Guidance Document (December)

4.2 Interface & Urgent Care Programme

The Interface & Urgent Care Programme status remains on track for all five core projects. A summary of key achievements across the projects is detailed below.

Programme: Interface and Urgent Care			
Project	Status	Summary of Progress	Trend
Escalation and De-compression	On Track	<ul style="list-style-type: none"> An initial draft of a Dashboard developed (QUEST – Quality with Everyone focusing on Safety & Teamworking). Currently includes Acute thresholds – HSCP and Interface metrics have been scoped and actions underway to include QUEST Escalation Huddle rolled out (Oct) as whole system approach – this will be an evolving, whole system process, learning from experience during system reset will be used to further improve QUEST huddles FNC+ control room being set up to oversee dashboard and facilitate huddles. Processes in place to standardise metrics and develop thresholds 	↑
FNC+ & Pathways	On Track	<ul style="list-style-type: none"> Medical model has been agreed, and actions are underway to recruit Wider Nursing Model progressing with Lead Nurse appointed and additional Registered Nurses now in post to support call handling. Further recruitment underway GP Medical Calls live (Oct) in South Sector (QEUH), GRI live (Nov) and RAH expected to follow in December 3 Clinical pathways launched end November: Headache, Hypertension and Discharge to Scan pathways scheduled for review following system reset Virtual ED continues to support scheduling of care to other services including MIU, ED, other specialities, and where possible provide self-care advice or prescriptions therefore avoiding hospital attendance 	↑
Front door Redesign: Digital Triage & Rapid Assessment & Care (RAaC)	On Track	<ul style="list-style-type: none"> Rapid Assessment and Care (RAaC) vision proposal approved & Implementation Group initiated E-Triage procurement tender now in final stages expecting to go live in January 2026 	→
Virtual Hospital Expansion	On Track	<ul style="list-style-type: none"> Paediatric pathways live (Nov) for: <ul style="list-style-type: none"> Faecal Impaction Generic Paediatric Pathway Neonatal jaundice OPAT Hospital at Home pilot to be taken forward with 3 HSCTPs (West Dunbartonshire, East Renfrewshire and East Dunbartonshire) in line with agreed service framework Recruitment for frailty practitioners underway. Recruitment to support OPAT additionality complete starting in November 	↑

Flow Improvement	On Track	<ul style="list-style-type: none"> Continued drive on priority actions around improving flow and reducing delayed discharge. Integrated Discharge Teams are now live in key sites across all 3 sectors working closely with social work to proactively manage discharges and accelerate social work assessments Additional wrap around support via new Red Cross service for discharge of patients who have high likelihood of being delayed went live in October with full staffing compliment operational from early November. 48 referrals reported to mid November Additional solicitor in place from November to support AWI legal processes and reduce length of stay for patients in delay HFRS expansion continues to progress. Staff at RAH due to start December with Physio and OT staff at GRI to follow, facilitating launch dates shortly after. Complex Discharge Units and intermediate care beds continue to be utilised across the system, with an increasing number of bed days being saved – full evaluation of use at the 3 month mark is underway 	↑
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Key activities expected in the next 70 days are set out below.

Key Activities Planned in next 70-day Period	
<ul style="list-style-type: none"> Progression of recruitment and implementation of medical model - locum adverts are to go live for acute physicians to support call handling and virtual ward pathways Expansion of GP Medical calls - Clyde sector calls will go to FNC+ from December Clinical pathways – preparations are being finalised for implementation with target dates of: <ul style="list-style-type: none"> Mental Health (Dec) Respiratory Self-management (Dec) commencing on boarding in the coming weeks Frailty (Care Home CBYC Pathway) (Dec) Cardiology (Jan) Remote Diagnostics (Jan) Hospital at Home- Frailty Expansion (Jan) A summary of the expected bed days saved by each new virtual hospital pathway month on month is being developed and will be monitored thereafter FNC+ additional nursing workforce appointed 	

4.3 Primary Care Programme

Overall, the Primary Care Programme remains on track, with progress across the three projects, highlighted below. A summary of key achievements across the projects is detailed below.

Programme: Primary Care			
Project	Status	Summary of Progress	Trend

Digitally enabled primary care	On Track	<ul style="list-style-type: none"> • Recommence roll out of Vision: –national implementation of this system remains delayed due to the system provider entering administration in December 2024. A new supplier has now been identified. Official confirmation from NSS regards a commencement date for the implementation is anticipated early in the new year, with an expectation of full implementation by mid-2027 • Docman 10 Implementation: a national delay in confirming arrangements continues. NHSGGC continues to contribute to the project via the national group, maintaining strong links with ongoing developments. Further detail regards timelines is anticipated soon • Digital Asynchronous Consulting (DACs): reviews and evaluation with the practices involved in the pilot ongoing with detailed report expected December 2025. Funding to roll this out across all practices was included in the recent Scottish Government announcement on 29 October 	→
Accommodation, premises & estate	On Track	<ul style="list-style-type: none"> • The Primary Care Premises Strategy refresh and agreement of associated priority areas, continues to progress through formal governance including HSCP's (Chief Officers and IJBs). Presentation to be made to LMC. Progress will be dependent on further SG capital funding and the broader prioritisation of all NHSGGC capital projects 	→
Monitoring, Evaluation, Intelligence	On Track	<ul style="list-style-type: none"> • Information pack requesting approval to access practice data is being prepared and is almost complete for circulation to practices. If practices consent, it will enable data to be gathered in support of building the Primary Care Information dashboard • Baseline measures for the Primary Care Strategy are being compiled 	→

Key activities for the Primary Care Programme that are expected in the next 70 days are set out below.

Key Activities Planned in next 70-day Period	
<ul style="list-style-type: none"> • Implementation of new GP IT system: NHSGGC continues to prepare practices for the transition to the new system. New supplier has been identified. Presentation will be delivered to Renfrewshire GP Forum as early implementers • E-triage Findings - Digital Asynchronous Consulting (DACS) Pilot: completed evaluation report on the outcomes of the pilot (Dec) • Primary care Dashboard: baseline measures for the Primary Care Strategy are to be compiled and signed off by the end of December • Configure infrastructure for GP Data repository: commence initial extractions for consented practices • Communications plan: first phase launched to engage primary care stakeholders with improvement priorities 	

4.4 Mental Health Programme

The Mental Health Programme remains on track. Following a pause early 2025, the Mental Health Strategy Programme Board has adopted a framework which aligns with the Transforming Together Portfolio. A summary of key achievements across the projects is detailed below.

Programme: Mental Health			
Project	Status	Summary of Progress	Trend
Inpatient Bed Reconfiguration	On Track	<ul style="list-style-type: none"> • Options appraisal stakeholder engagement being taken forward • Aiming to complete options appraisal by May 2026 	→
Community Mental Health Acute Care Service (CMHACS)	On Track	<ul style="list-style-type: none"> • Feedback on Community Mental Health Acute Care Services (CMHACS) board-wide operational policy, that aligns all 6 HSCPs approach to assessment and care (completed Oct). Feedback being used to finalise policy for implementation from December 2025 	→
Unified Referral Management	On Track	<ul style="list-style-type: none"> • Concept developed via Hackathon #3 on 19 November. Further data being gathered to inform work 	→
Expanded Borderline Personality Disorder Pathway	On Track	<ul style="list-style-type: none"> • Evidence from current cohorts indicates ~50% reduction in bed days for those patients receiving MBT / DBT therapies 	→
Remote Monitoring – Clozapine/ADHD	On Track	<ul style="list-style-type: none"> • Initial sites for Community Clozapine Titration confirmed as Esteem North and GRI • Pathway set to progress through the virtual hospital with Clozapine titration due to go live December 2025 	→

Key activities expected in the next 70 days are set out below.

Key Activities Planned in next 70-day Period	
Community Mental Health Acute Care Services:	
<ul style="list-style-type: none"> Glasgow City information / engagement sessions being organised to support staff on the level of organisational change that has occurred in unscheduled care in the HSCP Community Clozapine Titration pathway due to go live December 2025 Community Mental Health Acute Care Service Operational policy due to be implemented December 2025 to ensure consistent assessment and care offering across the whole of GGC 	

4.5 Cancer & Planned Care Programme

The Cancer & Planned Care Programme overall is on track. Programme mobilisation well underway and project groups are being established to support delivery projects. A summary of key achievements across the projects is detailed below.

Programme: Cancer & Planned Care			
Project	Status	Summary of Progress	Trend
Peri-Operative Transformation	On Track	<ul style="list-style-type: none"> Workplan scoping commenced with priorities being identified, and milestones established across four key areas: peri-operative transformation, theatre process standardisation, data and other transformational opportunities 	↑
Orthopaedic High Productivity/Blueprint	On Track	<ul style="list-style-type: none"> Work has commenced on creating the Blueprint for orthopaedics and developing a set KPIs and associated monitoring framework 	↑
Urology Review	On Track	<ul style="list-style-type: none"> Pathway for bladder and prostate cancers agreed Recruitment for Additional CNS posts underway Direct to MRI vetting underway 	↑

Key activities expected in the next 70 days are set out below.

Key Activities Planned in next 70-day Period	
Orthopaedics:	<ul style="list-style-type: none"> ○ A cross-sector Orthopaedic session planned for December ○ Outputs from this session will enable further development of the Blueprint
Urology:	<ul style="list-style-type: none"> ○ Appoint additional Cancer Nurse Specialists ○ Direct to MRI for urgent suspicion of cancer is due to go live in South by end of 2025 ○ Plans for diagnostic hubs due end March 2026 ○ Demand and Capacity modelling for all cancer types by end of January

4.6 Women and Children's Programme

The Women and Children's Programme remains on track, with ongoing development and implementation across the four projects. Key deliverables across the programme and key activities in the next 70 days are set out below

Programme: Women and Children's			
Project	Status	Summary of Progress	Trend
Paediatric Hospital at Home Service	On Track	<ul style="list-style-type: none"> • Workforce, e-health, and pathway development have been the primary focus with additional work undertaken to identify and secure physical space • Work is progressing to integrate DOCLA into core pathways • Liaison with colleagues from HIS & Public Health Scotland regarding reporting and development of pathways to ensure GGC approach alignment 	↑
Neonatal Hospital at Home	On Track	<ul style="list-style-type: none"> • Patient information leaflets in core languages quality assured by medical illustration • Physical space identified and virtual ward live • Neonatal nursing job specification complete and progressed to recruitment • Staff training and EQIA approach defined • Neonatal admissions began end November 	↑
West of Scotland Neonatal Redesign	On Track	<ul style="list-style-type: none"> • The West of Scotland Boards continue to work up a plan to be submitted to the national task and finish group by the end of December 2025 • Local plans being finalised • Priorities and Milestones established 	↑
Maternity Redesign	On Track	<ul style="list-style-type: none"> • Implementation of a new model for triage care- including BSOTs (Birmingham Symptom Specific Obstetric triage 	↑

		<p>system), centralised triage telephone team; call recording well underway and due for completion in January 2026</p> <ul style="list-style-type: none"> • Review and redesign of EPAS (Early Pregnancy Advisory Service) in line with Scottish Government Miscarriage Framework, commenced as October 2025 • Review of Midwifery staffing – using workload tools and common staffing method, leading to agreement for additional midwives for triage and labor ward staffing – recruitment commenced due for completion in January 2026. • Developing leadership, specialist, and advanced practice roles with new consultant midwife roles 	
Gynaecology / Women's Health	On Track	<ul style="list-style-type: none"> • Meeting held with public health regards the wider women's health plan which is being drafted • Working with Diagnostics to support the HRT/PMB cancer referral pathway • Clinical Nurse Specialists (CNSs) training ongoing for one stop clinics – scan / hysteroscope 	↑

Key Activities Planned in next 70-day Period

- Transition Planning for approved Neonatal WOS option - January 2026
- Additional beds available for paediatric / neonatal hospital at home by end of January/February
- Recruitment for additional maternity workforce underway in January 2026

4. Recommendations

The Board are asked to note the progress made to date in the implementation of the Transforming Together & GGC Way Forward Portfolio. This portfolio status report is presented for assurance.

Appendix 1: Status Report Keys

Risks / Issues Status Rating	
R	<ul style="list-style-type: none"> Risk / issue affecting the ability to achieve plan, delays already experienced. Either no agreed plan to achieve or no confidence in mitigation/resolution.
O	<ul style="list-style-type: none"> Risk / issue has the potential to affect the ability to achieve plan, not delayed as yet. Higher likelihood of experiencing impact and impact more significant than yellow. Low confidence in mitigation/resolution and ability to maintain plan.
Y	<ul style="list-style-type: none"> Risk / issue has the potential to slightly affect the ability to achieve plan, not delayed as yet. Lower likelihood of experiencing impact and impact less than that of orange. Agreed plan to achieve and greater degree of confidence in mitigation/resolution.
G	<ul style="list-style-type: none"> Risk or issue identified and reported for awareness but likelihood and or impact low and deemed manageable to achieve plan.

Action / project / Programme and milestone status	
R	Delayed
O	At Risk
B	On Track
G	Complete

Trajectory	
↑	Upwards Trend Acceleration of pace due to new resource being added and or key milestones <u>achieved</u> or risks/issues addressed enabling greater degree of progress than previous period.
→	Continued Trend Pace of delivery continued as previous reporting period. No new significant risks/ issues and all milestones proceeding as planned.
↓	Downwards Trend Pace of delivery slower than anticipated due to risks/issues affecting the progression of milestones as per plan. Reporting should highlight the risks/issues affecting delivery and identify clear mitigating and resolutions with a revised forecast date for the milestones not achieved and dates of resolution.