

NHS Greater Glasgow and Clyde	Paper No. 25/111
Meeting:	NHSGGC Board Meeting
Meeting Date:	21 August 2025
Title:	Quality Strategy, Quality Everyone Everywhere – Impact Report 2024/25
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1. Purpose

The purpose of the attached paper is to: present the Annual Impact Report for Year 1 of NHSGGC's [Quality Strategy: Quality Everyone Everywhere](#). The report provides a summary of progress achieved so far, shares key insights from work progressed across all five key priorities and summarises challenges experienced with mitigating actions being explored.

2. Executive Summary

The paper can be summarised as follows:

2.1 Background:

The 2024/25 Impact Report for NHSGGC's Quality Strategy, **Quality Everyone Everywhere**, provides a comprehensive overview of the progress made in the first year of the strategy's implementation. Approved by the Board on 25 June 2024, the strategy aims to position NHSGGC as a world-leading quality healthcare organisation by 2029. The strategy focuses on five key priorities: Safe, Effective and Efficient, Person-centred, Co-production, Listening, Learning and Improving and commits to satisfying the requirements of the Equality Act (2010) and the Public Sector Equality Duty.

2.2 Year 1 Delivery Plan:

- The delivery plan for 2024/25 was approved on 9 January 2025 and included 44 deliverables under 5 priorities, designed to create conditions for building quality across NHSGGC. It forms a framework for local implementation plans to drive continuous improvement.
- The implementation approach translated the NHSGGC Quality Model into action, ensuring that the people who use and work in the services remain central to the aspirations.
- A [Communication Plan](#) was developed in partnership with the Corporate Communication and Engagement Team, using the OASIS Framework to increase the reach and spread of the strategy. Quarterly newsletters have been published to socialise the strategy with all staff groups and invite ongoing interaction and engagement across NHSGGC.

2.3 Progress on Delivering Quality Everyone Everywhere:

- Seventeen deliverables and forty-four planned actions were identified for the five key priorities. By the end of June 2025, 16% of planned actions were completed, 70% were on schedule, and 14% were delayed.
- The 2024/25 Impact Report for **Quality Everyone Everywhere** demonstrates significant progress has been achieved across all five key priorities, with several initiatives focused on fostering individual respect, compassion, and transparent communication throughout NHSGGC. This includes the following initiatives:
 1. **Shared Decision Making:** Over 50 education and awareness sessions have been delivered, including 17 Realistic Conversations sessions with over 600 trained participants.
 2. **Person-Centred Standard and Measures:** The NHSGGC Board-wide Person-Centred Standard and Measurement Framework has been co-designed with representation from all EiC families and supporting structures.
 3. **DNACPR Guideline Review and Approval:** The DNACPR Guideline review has been completed and approved through multiple governance groups, with final approval expected by June 2025.
 4. **Values Based Reflective Practice:** Thirteen VBRP groups are active, and meeting monthly with positive feedback on the effectiveness of the approach in both professional and personal contexts.
 5. **Palliative Care and Care Around Dying Strategy:** An Accelerated Design Event (ADE) was held on 31 March 2025, bringing together 163 people from across NHSGGC to develop a new framework for Palliative Care. The event included health and care staff from various sectors and people with lived experience of palliative and end of life care.

These initiatives reflect NHSGGC's commitment to ensuring that the voices of the population and the people who use and work in the services are embedded in the decisions made, aiming to provide person-centred high-quality care in every place and every interaction.

2.4 Challenges:

Delays in some actions were attributed to competing priorities and resource constraints, impacting the ability to finalise projects within the reporting period.

2.5 Looking Ahead - Year 2 and Beyond

As we progress the year 2 delivery plan the emphasis will be to continue to co-design the future together, with people, kindness, courage and quality at the heart. This will include:

- Building the corporate leadership capacity and resource to support the quality strategy, our ambitious and transformational vision
- Launch of the Quality Strategy Programme Board
- Establishing the Kindness Programme with underpinning outcome measures for success
- Embedding the Quality Management System and self-evaluation
- Continuing to invest in improvement capability (SIFS, SCIL, VBRP other quality methodology)
- Continuing to shape our key deliverables through co-production; guided by curiosity, collaboration, and a shared commitment to innovation and impact.

3. Recommendations

The Board is asked to consider the following recommendations:

- Note the progress against NHSGGC Quality Strategy: Quality Everyone Everywhere Delivery Plan for 2024/25
- Note immediate delivery is on target in terms of scope, timescales, risks/mitigations and being monitored quarterly
- Note the ongoing focus on communications and engagement to support Quality Everyone Everywhere which are patient and staff focussed

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>Positive</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:

- Key Quality Strategy Stakeholders and Leaders
- Person-Centred Steering Group

- Quality Improvement Network

7. Governance Route

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

- END SMT
- Corporate Management Team (3 July 2025)

8. Date Prepared & Issued

Prepared on: 31 July 2025

Date issued: 13 August 2025

quality
everyone everywhere



Quality Everyone Everywhere

2024/25 Impact Report

NHSGGC Quality Strategy: Quality Everyone Everywhere

Year 1 Impact

The strategy, ***Quality Everyone Everywhere***, is a whole-system commitment to embedding quality in every role, team and interaction across NHSGGC.

Year 1 Delivered Meaningful Progress

- Highlights include:
 - Co-design of the Kindness Programme
 - Co-production of a Person-Centred Standard and Measures
 - Expansion of Shared Decision Making training
 - Progress in Infection Prevention and Control
 - Growth in Quality Improvement capability (SIFS, SCIL)
 - Co-production of a Palliative Care and Care Around Dying Strategy
- Most deliverables are either completed or on schedule, reflecting strong commitment from staff and services.
- The evidence indicates that NHSGGC is actively making progress to embed a culture of kindness, person-centred care, and continuous improvement.

Challenges, Learning and Looking Ahead

- Some actions were delayed due to resource constraints, competing priorities or ambitious timelines.
- Year 2 will focus on:
 - Establishing the Quality Strategy Programme Board
 - Embedding the Quality Management System
 - Scaling the Kindness Programme with measurable outcomes
 - Continuing to invest in training and leadership capacity
 - Strengthening co-production and communication
- The current situation highlights a system that is increasingly aligned with our strategic vision for **Quality Everyone Everywhere**. As NHSGGC moves into Year 2, the need for a unified quality infrastructure, enhanced digital solutions and a strong leadership capacity are central to sustaining momentum and achieving long-term impact.

Context

This Annual Impact Report for Year 1 of NHSGGC's Quality Strategy, **Quality Everyone Everywhere** provides a summary of progress achieved so far, shares key insights from work progressed across all five key priorities and summarises the challenges experienced with mitigating actions being explored.

Background

Quality Everyone Everywhere:

- Approved by the Board on 25 June 2024
- Sets out direction and approach for 2024-2029
- Sets out a clear vision for NHSGGC to be a world leading quality healthcare organisation
- Includes five key priorities, emerged from extensive engagement and consultation, which resonate with national and international thinking and reflect what matters to those who use and work in our services
- Sets out a commitment that all aligned programmes of work will satisfy the requirements of the Equality Act (2010) and aligned Public Sector Equality Duty





Aims of the Strategy

1. NHSGGC is recognised as a world leading quality healthcare organisation.
2. People experience person-centred high-quality care in every place and every interaction.
3. The voices of our population, and people who use and work in our services are embedded in the decisions we make.

To achieve our aims the strategy seeks to develop connectivity across both formal and informal networks at a system-wide level, in our teams, and at the point of care, encouraging local ownership and accountability as part of the approach.

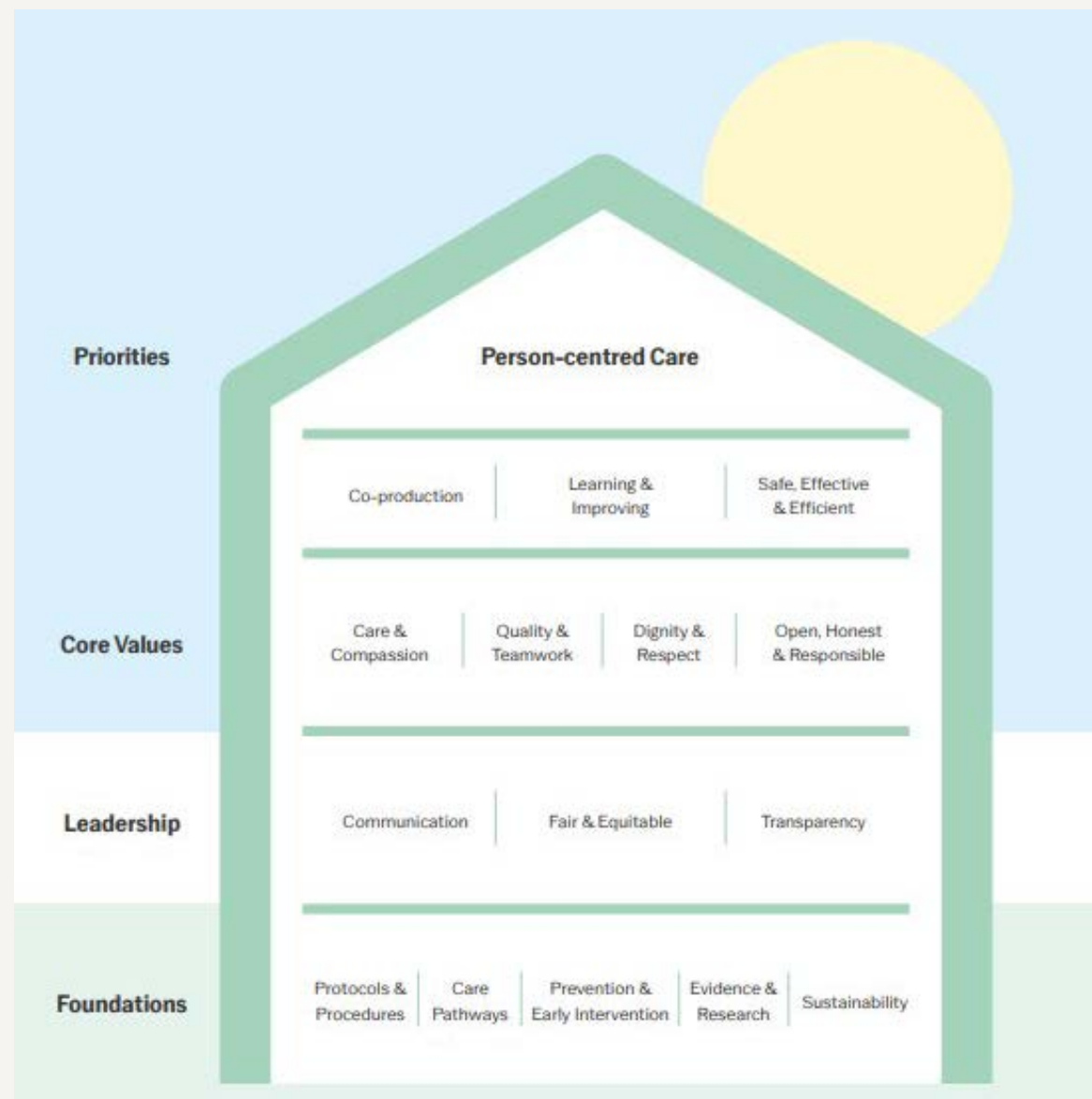
Year 1 Delivery Plan

- Structured around 44 defined deliverables under the five priorities with clear timelines and accountable leadership.
- Designed to create the conditions for building quality across NHSGGC, ensuring that the most impactful and relevant programmes are identified.
- Forms a framework to allow development of local implementation plans to continuously drive improvement in all our services.

Implementation Approach

- Approved by CMT on 28 October 2024
- Designed to translate the NHSGGC Quality Model into action
- Ensures our purpose, values, aims and priorities, and the people who use and work in our services remain at the centre of our aspirations
- The evidence-backed model and implementation approach is currently being tested with senior colleagues in the Estates and Facilities Directorate to further develop the conditions for building capacity and capability for quality

NHSGGC Quality Model



Communication Plan

- In partnership with the Corporate Communication and Engagement Team a communication plan has been developed using the OASIS Framework to increase the reach and spread of **Quality Everyone Everywhere** across NHSGGC. Work continues to embed the actions included in the plan.
- Quality Strategy Newsletters have been published on a quarterly basis and circulated via the Core Brief, Quality Strategy Webpage and NHSGGC Quality Improvement Network.
- The purpose of the newsletter is firstly to increase socialisation of **Quality Everyone Everywhere** with all staff groups, secondly to spread activities and ideas and to also invite continuing interaction and engagement.
- Newsletter analytics show views of between 350 – 550 views per issue.

Objectives of the Comms Plan

- Increase awareness, understanding and engagement of the Quality Strategy across NHSGGC.
- Provide information about the strategy and implementation plan so that people, staff, services and other stakeholder groups are kept up to date and supported to participate in strategy implementation by sharing their views and ideas.
- Recognise and highlight the contribution of the Quality Strategy at all levels.



Progress on Delivering Quality Everyone Everywhere

- Key strategy deliverables and planned actions were identified for each of the 5 priorities.
- In total seventeen (17) deliverables and forty-four (44) planned actions were identified.
- At the end of June 2025, the status of the planned actions can be summarised as follows:
 - 16% of planned actions are completed.
 - 70% are on schedule for the milestone date.
 - 14% are delayed.

Priority	Number of Planned Actions	Actions Completed		Actions On Schedule		Actions Delayed	
		Number of Actions	% of Action	Number of Action	% of Actions	Number of Action	% of Actions
Priority 1: Quality Everyone Everywhere	8	1	12%	6	76%	1	12%
Priority 2: Person-Centred	10	4	40%	5	50%	1	10%
Priority 3: Co-Production	5	2	40%	3	60%	0	0%
Priority 4: Safe, Effective and Efficient	9	0	0%	6	67%	3	23%
Priority 5: Learning, Listening and Improving	12	0	0%	11	92%	1	8%
TOTALS	44	7	16%	31	70%	6	14%

Quality Everyone Everywhere

- Development of Kindness Programme
- Leadership for Quality
- Frontline Equality Assessment Tool Delivery and Reporting

Person-Centred

- Shared Decision Making
- Person-Centred Standard and Measures
- DNACPR Guidelines Review and Approval
- Palliative Care and Care Around Dying Strategy
- Spiritual Care and Values Based Reflective Practice Training Expansion

Co-production

- Community Engagement Tool
- Third Sector Collaboration
- Building Strong Connections
- Co-production of Plans about our Services

Safe, Effective and Efficient

- Infection Prevention and Control Strategy
- Innovations in Infection Prevention and Control
- Progress in Improvement Programs
- Clinical Guidelines and Publications

Learning, Listening and Improving

- Quality Improvement Capability
- Quality Management System

Celebrating Success

The Year 1 Delivery Plan for **Quality Everyone Everywhere** demonstrates significant progress across all five key priorities which includes the adjacent key achievements under each of the key priorities.

More details on each of these achievement can be found in the following slides.

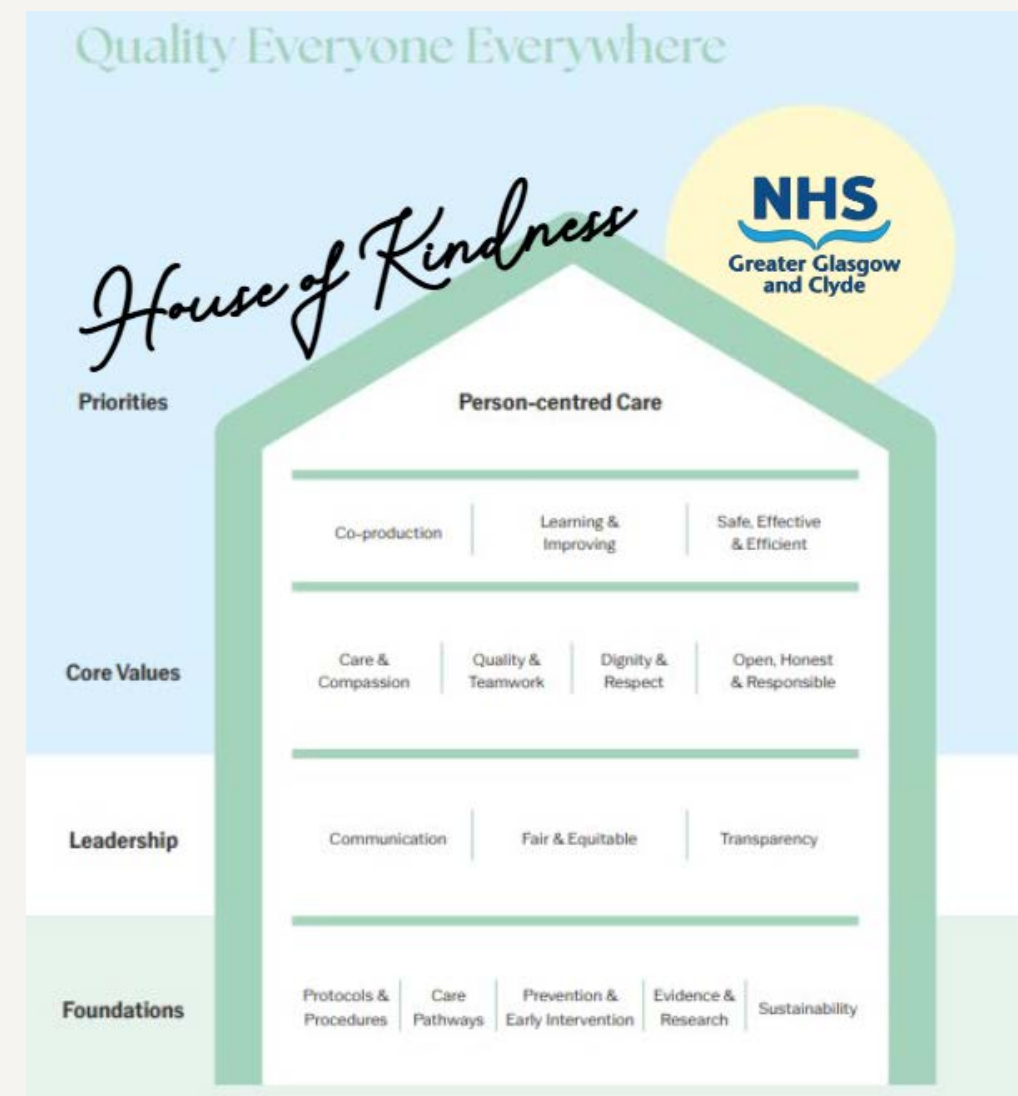
1.

Connecting Individuals to Foster a
Supportive Culture for Quality

Quality Everyone Everywhere

Development of a Kindness Programme

- The NHSGGC 'House of Kindness Programme' is being co-designed through collaboration with various groups.
- Scoping and benchmarking with other programmes of work including Civility Saves Lives, Medical Wellbeing Group and the Peer Support Network have been completed to ensure alignment.
- External provider engagement is ongoing to progress a train-the-trainer initiative.
- Through the QI Network two inspirational sessions have been hosted to launch **Quality Everyone Everywhere** with a focus on transformation and instilling a culture of kindness across NHSGGC.



1.

Connecting Individuals to Foster a
Supportive Culture for Quality

Quality Everyone Everywhere

Development of a Kindness Programme

Recordings and slides of these inspirational sessions can be accessed via the following links:



[QI Network Quality Strategy Launch Part 1](#)

[QI Network Quality Strategy Launch Part 2](#)

[Tim Keogh - A Kind LifeSlides](#)

[QI Network Quality Strategy Launch Follow-up Part 1](#)

[QI Network Quality Strategy Launch Follow-up Part 2](#)

"It was useful to see how all the different parts link together and helped validate that kindness is a quality we should be nurturing in our workforce."

"Hearing that staff wellbeing is now so visible and being discussed."

"Tim's presentation was inspiring - so much that we think we are doing but the stats and research tell us otherwise."

"Keynote speech was inspirational, passionate and referred to direct impact on patient care and staff experience at work."

"Seeing that our leaders are visible, friendly and approachable. I have never felt this with leadership in GGC before. The kindness session was excellent - I went straight onto amazon to buy the book."

"Hearing from the new Chief Exec, great to see this approachable and compassionate style and to hear directly about the wider vision and priorities."

1.

Connecting Individuals to Foster a
Supportive Culture for Quality

Quality Everyone Everywhere

Leadership For Quality

- Mapping of quality structures and quality management components across NHSGGC has been completed.
- Tabletop exercise undertaken with Estates and Facilities Directorate and Regional Services Management Team to map local governance meetings and governance structures to the proposed NHSGGC Quality Strategy Reporting Structure, and to identify benefits, risks and challenges of a new approach.
- Draft Terms of Reference for a new Programme Board has been development, with plans for establishment in late summer 2025.

Frontline Equality Assessment Tool Delivery and Reporting

- FEAT tool assessments have been completed across 38 wards for 2024/25.
- A composite report on physical access issues has been returned to the Estates and Facilities Directorate, with overarching findings expected by 30 June 2025.



2.

Cultivating a Movement of Kindness
Focused on Individuals, Where Respect and
Compassion Promote a Culture of Safe and
Transparent Communication

Person-Centred

Shared Decision Making

- Over 50 education and awareness sessions delivered, including 17 Realistic Conversations sessions with 600+ trained participants.
- Developed SDM training for GP Trainees, reaching 300+ GPSTs.
- Positive feedback highlights increased confidence and skill application.

Person-Centred Standard and Measures

- Co-designed NHSGGC Board-wide Person-Centred Standard and Measurement Framework with representation from all EiC families and supporting structures.
- Approved consultation and testing processes are underway.
- Aiming for implementation by the end of 2025.

DNACPR Guideline Review and Approval

- Completed and approved DNACPR Guideline review through multiple governance groups.
- The updated guideline is set to progress through Board-wide governance for final approval in June 2025.

Spiritual Care and Values Based Reflective Practice Training Expansion

- Three additional registered chaplains signed off to deliver VBRP training, increasing the total to six.
- Thirteen VBRP groups are active, meeting monthly with positive feedback on the effectiveness of the approach in both professional and personal contexts.

"I've been using the language of noticing and wondering with patients and found it works really well."

2. Cultivating a Movement of Kindness Focused on Individuals, Where Respect and Compassion Promote a Culture of Safe and Transparent Communication

Person-Centred

Palliative Care and Care Around Dying Strategy

- On Monday 31 March 2025, 163 people from across NHSGGC formed a deliberate community of wide-ranging expertise at an Accelerated Design Event (ADE) to develop a new Palliative Care and Care Around Dying Strategy across our whole system.
- Attendance at the event included health and care staff from primary care, community care, acute services, hospices, 3rd sector, the corporate team and people with lived experience of palliative and end of life care.
- The Event was facilitated by the NHS Horizons' rapid insight team and supported by NHSGGC staff recently training in using Rapid Insights©.
- Using the three horizons approach model developed by Bill Sharpe¹, event participants had the opportunity to step into the future, at the same time as exploring how they might build on current strengths.



2.

Cultivating a Movement of Kindness
Focused on Individuals, Where Respect and
Compassion Promote a Culture of Safe and
Transparent Communication

Person-Centred

Palliative Care and Care Around Dying Strategy

- Rapid Insight© was used to turn the facilitated discussions into areas of focus for moving to action. The full insight output can be viewed here: [Insights From PEOLC ADE March 2025](#)

The ADE aim and purpose was set out by hearing from Executive Nurse Director, Professor Angela Wallace, Dr. Scott Davidson, Medical Director and Claire O'Neill, Lead Nurse and Clinical Service Manager for Palliative Care who described:

- Building the case for change, emphasising the importance of acting promptly and the need for transformation.
- Projection of population level palliative care need in Scotland by 2040, where 90% of all deaths will need palliative care with the greatest need being among older adults.
- Keeping patients and families at the heart of all that we do in co-creating services that meet the needs of our population.
- The context of NHS Scotland's ambitious reform plans and making change at pace.



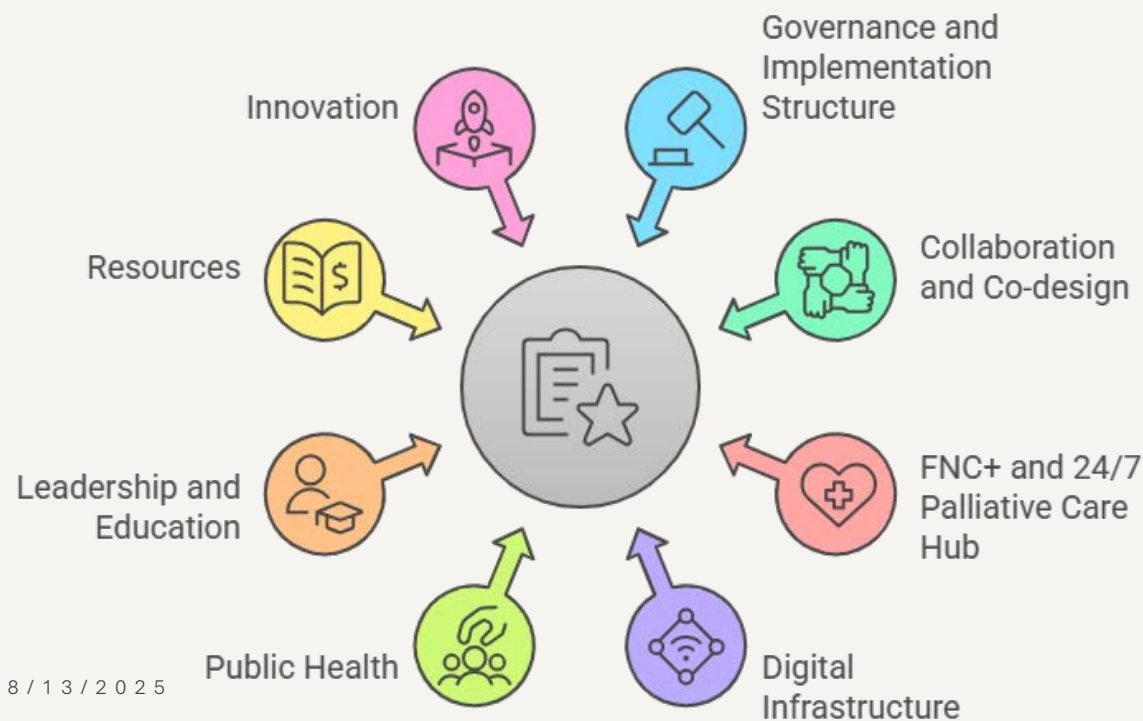
2.

Cultivating a Movement of Kindness
Focused on Individuals, Where Respect and
Compassion Promote a Culture of Safe and
Transparent Communication

Person-Centred

Palliative Care and Care Around Dying Strategy

What will it take to get us to our collective vision for
the future of palliative care and care around dying?



8 / 13 / 2025

A short video showcasing the voices of
people who attended the event:



3.

Enhancing Quality Through Partnership and Shared Experience

Co-production

Community Engagement Tool

- Self-evaluation tool produced and revised following a period of initial testing.
- Action plan in development with further test areas being sought.

Building Strong Connections

- A plan has been formulated to work directly with community groups in HSCPs, with a target of 24 community groups across 2025-26

Third Sector Collaboration

- Continued active engagement with over 40 organisations, SLA drafting, and new volunteering system are in progress.

Co-production of Plans about our Services

- Palliative care and care around dying strategy
- Person-centred standard and associated measurement framework
- QMS Self-Evaluation Tool
- Kindness Programme



4.

Expanding Evidence-Based Improvement and Value-Based Care

Safe, Effective and Efficient

Infection Prevention and Control Strategy

Strategy in draft format.

Organisational Development support being explored to support an event to finalise the IPC objectives.

Clinical Guidelines and Publications

Specific improvement activities are focused on the efficiency of the review and approval process.

Updates on Clinical Quality Publications and SNAP Governance processes are presented quarterly, with ongoing reviews of open publications and red flags.

Programs addressing Deteriorating Patient and Falls in Acute Adult care are producing outcome measures quarterly.

The Perinatal and Paediatrics programmes are actively engaging teams in improvement work, with systems in place for measurement, review and reporting.

Within Mental Health, a QI group meets bi-monthly to support improvement work and review key measures.

Progress in Improvement Programs

QR codes have been developed to enhance access to IPC information via smart devices, supported by promotional posters.

Evaluation of QR code-linked videos is scheduled for Autumn 2025.

Lunch and learn events and 'Have you got a minute' initiatives continue to promote IPC awareness.

Innovations in Infection Prevention and Control

5.

Advancing Quality Through Active Listening, Learning, and Improvement

Learning, Listening and Improving

Quality Improvement Capability

- Delivered 11 SIFS* cohorts with 216 participants from September 2024 to June 2025, with 157 participants completing the programme by June 2025.
- Four additional SIFS cohorts are planned for September 2025, aiming for 15 cohorts by December 2025. Evaluation and return on investment processes are ongoing.
- SCLIP cohort started in May 2025 with 19 participants, due to complete in June 2025. Evaluation and return on investment assessment are planned for September 2025.
- Awaiting the launch of the Practical Quality Improvement Learning Pathway in August 2025 to scope and design a local delivery programme.



5.

Advancing Quality Through Active
Listening, Learning, and Improvement

Learning, Listening and Improving

Learning Systems

- As part of our commitment to creating the conditions for Quality and working at scale to share skills, knowledge and techniques we have scoped mature learning systems, identifying limited examples across health and social care, with insights drawn from the Health Foundation and Healthcare Improvement Scotland.
- Developing a Learning System hub on StaffNet and a standardised learning summary to share insights from various reviews and projects. Testing a toolkit for service-specific learning systems is planned for July-September 2025.

"A learning health system is a way of describing a systematic approach to iterative, data-driven improvement. Learning health systems are able to learn from the routine care they deliver and improve it as a result – as part of business as usual."

- The Health Foundation

5.

Advancing Quality Through Active
Listening, Learning, and Improvement

Learning, Listening and Improving

Quality Management System

- An iterative approach to develop and test the Quality Management System Self-evaluation Tool with colleagues from Healthcare Improvement Scotland (HIS) has undergone testing at 4 different levels within the Board with feedback and learning gathered throughout the process.
- The final tool is in progress for future use in NHSGGC and we are committed over the next five years, at regular intervals, to self-assess the maturity of our Quality Management System and act on the outputs.
- Plans are progressing with HIS colleagues to evaluate, write-up and publish the approach taken, learning and recommendations.



Key Challenges in Delivery

There are 6 planned actions where progress has been slower than anticipated. Delays have occurred due to competing priorities and resources. Some of the actions are continuous projects which make it difficult to put a closure date against in the 12-month reporting period. Some of the planned actions on reflection were overly ambitious to achieve in 2024/25.

Priority	Deliverable	Reason for Delay
Priority 1: Quality Everyone Everywhere	Leadership and Governance	Delayed due to governance review. Draft terms and structural mapping are underway.
Priority 2: Person-Centred	Shared Decision Making	The implementation of the eHealth solution remains delayed due to financial constraints.
Priority 4: Safe, Effective and Efficient	Older People Framework	This action is delayed and will be carried into Year 2.
Priority 5: Learning, Listening and Improving	QI Network and Repository	The development of the repository is delayed due to the need for consolidation of several local repositories.

Overview of Year 2 Delivery Plan (2025/26)

To take forward the recommendations and learning from Year 1, the following next steps are proposed for Year 2 (2025/26):

Resources Required

- Review the current corporate leadership capacity and resource to support the strategy deliverables, sustainability and further develop our quality innovation.
- Strengthen leadership capacity, particularly in governance and QI Network coordination.
- Dedicated project management and digital support for delayed initiatives (e.g. eHealth solutions, QI repository).
- Continued investment in training and development (e.g., SIFS, SCIL, VBRP).

Implementation and Monitoring

- Establish a Quality Strategy Programme Board (or similar) to provide oversight for implementation of the key priorities.
- Provide regular updates to the Corporate Management Team and NHSGGC Board.
- Maintain existing governance arrangements for the Safe Effective and Efficient deliverables.
- Explore and establish revised reporting and governance arrangements for the other priorities

Communications Plan

- Continued engagement with staff through newsletters, intranet updates and QI Network events.
- Targeted communications to promote awareness of new standards, training opportunities and success stories.
- Inclusion of patient and public voices in communication materials to reinforce co-production.

The Year 2 delivery plan will be guided by a structured framework that includes learning from year 1 experience to help inform development of a delivery plan for 2025/26 plan.

Continuing to Transform Together

Quality is Everyone's Business

Every role, every team, every interaction, contributes to delivering safe, person-centred, and high-quality care - whether you're on the frontline or behind the scenes.

Listening, Learning and Improving

Your voice matters. Whether it's staff, patients, or communities, quality starts with listening, acting on feedback, and continuously improving together.

We're in This Together

Quality is a shared commitment. Support, innovation, and teamwork will help us embed quality in everything we do.

Small Changes, Big Impact

Quality improvement doesn't have to be complicated - simple, everyday actions can make a huge difference to patient experience, safety, and efficiency.



Looking Ahead: Year 2 and Beyond

Momentum is Building

- 70% of actions are on track and we're learning from every step

What's Next?

- Build the corporate leadership capacity and resource to support the quality strategy, our ambitious and transformational vision
- Launch of the Quality Strategy Programme Board
- Establish the Kindness Programme with underpinning outcome measures for success
- Embed the Quality Management System and self-evaluation
- Continue to invest in improvement capability (SIFS, SCIL, VBRP other quality methodology)
- Continue to shape our key deliverables through co-production; guided by curiosity, collaboration, and a shared commitment to innovation and impact.



*Continue to co-design the future
together, with people, kindness,
courage and quality at the
heart.*

Every role. Every team. Every interaction.
Quality Everyone Everywhere.

Appendix

The following links are accessible for further reading:

[Quality Everyone Everywhere: Year 1 Delivery Tracker](#)

[Quality Everyone Everywhere: OASIS Framework and Comms Plan](#)