

NHS Greater Glasgow and Clyde	Paper No. 26/75
Meeting:	NHSGGC Board Meeting
Meeting Date:	25 June 2026
Title:	GGC Way Forward Update - Emergency Department Improvement Programme
Sponsoring Director/Manager:	Russell Coulthard, Interim Chief Operating Officer & Deputy Chief Executive
Report Author:	Claire MacArthur, Director of Planning

1. Purpose

The purpose of the attached paper is to:

Provide the board with an update on the GGC Way Forward Programme of Improvement work within our Emergency Departments.

2. Executive Summary

The paper can be summarised as follows:

The paper provides a high-level update of progress in achieving the delivery of the GGC Way Forward Programme and associated work.

3. Recommendations

The NHS Board are asked to note this report, noting that a 12-month progress review report is being submitted to Healthcare Improvement Scotland during June.

The report is provided for assurance.

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:

The work of the GGC Way forward programme is delivered and managed through three sector groups: North, South and Clyde, in addition there is a whole system group chaired by the Chief Operating Officer & Deputy Chief Executive which reports to the Transforming Together Executive Oversight Group, chaired by the Chief Executive.

This paper has been developed using the monthly status reports provided by the three-sector clinical and operational leadership teams over the last 12 months.

7. Governance Route

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

This paper has been prepared for Board members to provide assurance of the progress and the ongoing work being undertaken as part of the GGC Way Forward Programme and NHSGGCs programme of improvement work to address the recommendations within the HIS ED Review.

8. Date Prepared & Issued

Paper Prepared: 15 June 2026

Paper Issued: 19 June 2026

1. Introduction

The Healthcare Improvement Scotland (HIS) Emergency Department Review gave NHS Greater Glasgow and Clyde an important opportunity to listen, reflect and act on the issues identified across our Emergency Departments.

The review set out 30 recommendations focused on supporting practical, evidence-based and sustainable improvements in the quality, safety and experience of urgent and emergency care and were aligned to three overarching themes:

- Patient Experience
- Quality of Care and Patient Safety
- and Leadership and Culture.

Through our GGC Way Forward Programme, we have taken forward a structured programme of improvement in response to the 30 recommendations. This has supported clearer leadership, strengthened governance and escalation routes, and enabled a number of practical improvements for both patients and staff.

2. Progress to Date

This report follows the previous report to HIS on 20th November 2025 which outlined our progress at that point.

Our improvement programme identified 193 actions to address the HIS recommendations, significant work has been undertaken and to date we have completed 175 actions. However where these actions have not yet delivered the intended impact we have not marked the recommendation as achieved at this point.

In assessing progress against each of the recommendations we have considered both completion of actions and impact of the actions and ongoing work. We have therefore assessed 15 of the 30 recommendations as 'Achieved', with the remaining 15 being assessed as 'Partially Achieved/Ongoing' and work continues to ensure both the completion of all outstanding actions and the intended impact of actions is delivered to enable remaining recommendations to be fully achieved.

3. Key Messages – Positive Patient Feedback

We continue to gather patient feedback, to date we have had feedback from over 600 patients since January 2026, key metrics include:

- **Compassion, Dignity and Respect** – movement from 88% to minimum of 92% of patients reporting being treated with dignity and respect
- **Involved in Shared Decision Making** - movement from 71% to minimum of 82% of patients reporting they felt involved in shared decision making
- **Safety** - movement from 83% to a minimum of 92% of patients reporting they feel safe within our ED environment
- **Safety with other patients** - 58% to a minimum of 87% of patients always felt safe around other patients and visitors
- **Overall Experience of Care** - 75% to a minimum of 88% of patients had a very good / good experience.

4. Ongoing System Challenges

While clear progress and improvements have been made within our EDs, work continues to further ensure improvements deliver the intended impact for our patients and staff. The GGC Way Forward Programme of improvement has strengthened governance, clinical and operational ownership, escalation routes, and supported a substantial programme of actions across patient experience, safety, workforce, environment, leadership and culture. However, urgent and emergency care continues to operate in the context of sustained demand, high occupancy and wider whole-system pressures, including a significant number of patients in delay, which continue to impact on performance, patient flow and the experience of both patients and staff.

We are therefore clear that the completion of actions against the HIS recommendations is not, in itself, the end point. Our focus is on ensuring that the changes made are being embedded, sustained and translated into consistent improvement and impact in day-to-day practice. This means continuing to listen to staff and patients, using evidence and data to understand impact, escalating barriers where further action is required, and maintaining a strong connection between Emergency Department improvement, urgent care redesign and whole-system flow.

The work undertaken to date has created a stronger framework for improvement, work will continue to deliver the level of sustained change that patients, families and staff should expect. Through the GGC Way Forward and the wider Transforming Together portfolio, we will continue to focus on completing remaining actions, ensuring their impact is sustainable, strengthening alternatives to Emergency Department attendance and admission, improving flow across hospital sites, and supporting staff to deliver safe, timely and person-centred care in the best possible environment.

A 12-month progress report is currently in development for submission to Healthcare Improvement Scotland (HIS), setting out delivery to date against each of the agreed recommendations. This report will provide a structured assessment of progress, including evidence of implementation, impact to date, and areas requiring further action. It will draw on performance data, stakeholder feedback and service-level evaluation to demonstrate how changes have been embedded across NHSGGC, alongside identifying any residual risks or dependencies. The report will also outline the next phase of improvement activity to support sustained delivery and continued alignment with HIS expectations.

5. Continued Staff Engagement – Co-production of a Progress Report for Staff

Staff engagement will remain central to the next phase of the programme. We have adopted a collaborative approach to communicating the HIS report and its findings with staff.

In partnership with Sectors Directors and Clinical Leads during June and July, we are co-producing a report, the report will have specific North, South and Clyde sections and will:

- Take stock of work to date, setting out the timeline of key actions to date, key investments and improvements,
- Outline reflections to date, including staff responses and feedback, patient feedback
- Provide an overview of performance
- Set out the key next steps to build on progress and support continued improvement within our EDs and complete all HIS recommendations.

The report will ensure staff are well informed of the current position, key investments and improvements delivered to date. This will include feedback from the recent staff survey, an overview of patient experience and how this has progressed since 2025, alongside current performance and reporting metrics. The report will also set out the next steps

6. Next Steps

The next phase of work will continue to focus on:

- Completing the remaining improvement actions and ensuring that they are fully embedded and sustained within routine operational, clinical and governance arrangements. This will include maintaining robust oversight through established governance structures, with clear ownership, defined milestones, and continued monitoring of risks, challenges and delivery.
- Continuing to evaluate of impact of our actions across key areas including patient and staff experience, safety, escalation, flow, environment and performance. This approach will help us to understand not only whether actions have been completed, but whether they are making a sustainable difference for patients and staff
- Finalise the 12-month progress report and submit to HealthCare Improvement Scotland
- Finalise the co-produced staff report to ensure staff are clearly informed of key investments and improvements delivered to date. The report will also set out the next steps to build on progress and support continued improvement.

In addition we will continue to use feedback from Emergency Department teams and wider system colleagues to test whether changes are working in practice, identify further barriers to improvement, and ensure that actions and improvements remain grounded in the experience of those delivering care.

The programme will remain closely aligned with the wider urgent care and whole-system flow agenda through the Transforming Together portfolio. This will support continued focus on alternatives to Emergency Department attendance and admission, improving flow across hospital sites, strengthening escalation and governance, and supporting staff and teams to deliver safe, timely and person-centred care.