

ANNUAL RESERVICE ANNUAL REVIEW PROPERTY OF THE PROPERTY OF THE

Presented by Sarah Compton-Bishop



BUILDING FORWARD HEALTHCARE ACROSS OUR LANDSCAPE





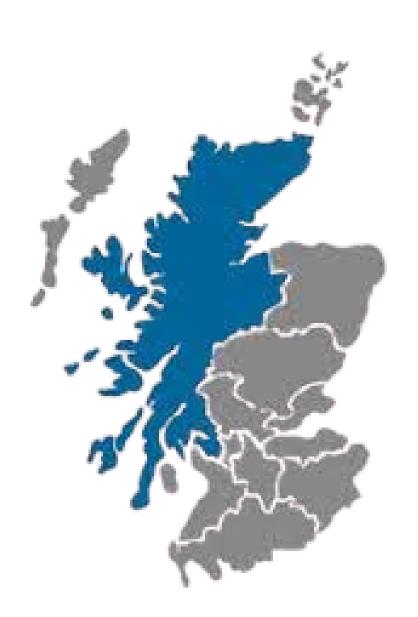
UNDERSTANDING OUR CHALLENGE

POPULATION PROFILE

- Older than Scottish average, increasingly complex health needs
- Geographic spread across 42% of Scotland
- Rural challenges: transport, housing, access to services
- Deprivation and health inequalities

SYSTEM PRESSURES

- Delayed discharge
- Care home capacity challenges
- Workforce recruitment in specialist areas
- Seasonal tourism workforce impacts



HONEST ABOUT CHALLENGES, CLEAR ABOUT SOLUTIONS



BUDGET PRESSURES DRIVING INNOVATION

2024-25 FINANCIAL POSITION

- Opened with £112m forecast deficit
- Final deficit: £49.5m
- Brokerage: £49.7m
- Final position: £206k surplus
- Agency/locum spend significantly reduced

2025-26 CHALLENGE

- £110m opening gap
- £55.7m opening deficit position
- No future brokerage available
- £40m deficit support funding
- 3% value & efficiency target
- Strategic transformation essential
- Innovation, service redesign and workforce solutions

INNOVATION, SERVICE REDESIGN AND WORKFORCE SOLUTIONS



A YEAR OF AMBITION

TOGETHER WE CARE STRATEGY IN ACTION
WITH SEVEN MAJOR TRANSFORMATION PROGRAMMES

CARE PATHWAYS

- Person Centred Pathways
- Integrated Urgent Care Strategy
- Prevention and Health Inequalities

SERVICE MODELS

- Integrated Care
- Primary Care
- Mental Health & Learning Disabilities
- Frailty Services

DELIVERING SUSTAINABLE, EQUITABLE CARE ACROSS OUR REGION



COMMUNITY VOICES

STRONGER PARTNERSHIPS

LOCALITY PLANNING - Community voices shaping service design - District planning groups - Democracy in action

WORKING WITH COMMUNITIES

- Highland Council Integration Model evolving
- Close collaboration between Council and Argyll & Bute Integrated Joint Board
- Community planning partnerships

WHEN WE FOCUS TOGETHER ON ACHIEVING THE BEST OUTCOMES FOR PEOPLE, EVERYONE WINS



TACKLING INEQUALITIES THROUGH POPULATION HEALTH

OUR APPROACH

- Prevention focus embedded across all services
- Health inequalities reduction as core priority
- Population health framework guiding decisions
- Community-based interventions

CHALLENGES WE'RE ADDRESSING

- Geographic health variations
- Fuel poverty and cost of living impacts
- Access barriers in remote communities
- Deprivation-related health gaps



WORKING WITH COMMUNITIES TO DESIGN SOLUTIONS THAT ADDRESS ROOT CAUSES



PLACE-BASED TRANSFORMATION IN ACTION



HIGHLAND MUSCOSKELETAL DAY, INVERNESS

- Multi-agency one-stop shop for MSK patients
- NHS and Third Sector Partners
- 60 weeks 8 weeks waiting time
- 4.75/5 patient rating
- 43% took up community fitness service

TRANSFORMATION THAT STARTS WITH COMMUNITY AND BUILDS OUTWARDS



PLACE-BASED TRANSFORMATION IN ACTION



ARGYLL & BUTE HOSPITAL AT HOME, OBAN

- Hospital-level care delivered in patients' homes
- strong community collaboration
- Exceptional patient satisfaction
- Proven reduction in hospital admissions

TRANSFORMATION THAT STARTS WITH COMMUNITY AND BUILDS OUTWARDS





NEW WAYS OF WORKING



THE REALITY OF SPECIALIST SERVICES

- Vascular surgery requires critical mass for quality
- Oncology expertise concentrated for better outcomes
- Recruitment challenges in single-site models

OUR APPROACH

- Regional pathways with partner boards
- Centres of excellence for complex care
- Enhanced local assessment and support
- Seamless patient journeys

STRENGTHENING LOCAL SERVICES

- Investment in diagnostics and assessment locally
- Telemedicine and remote consultations



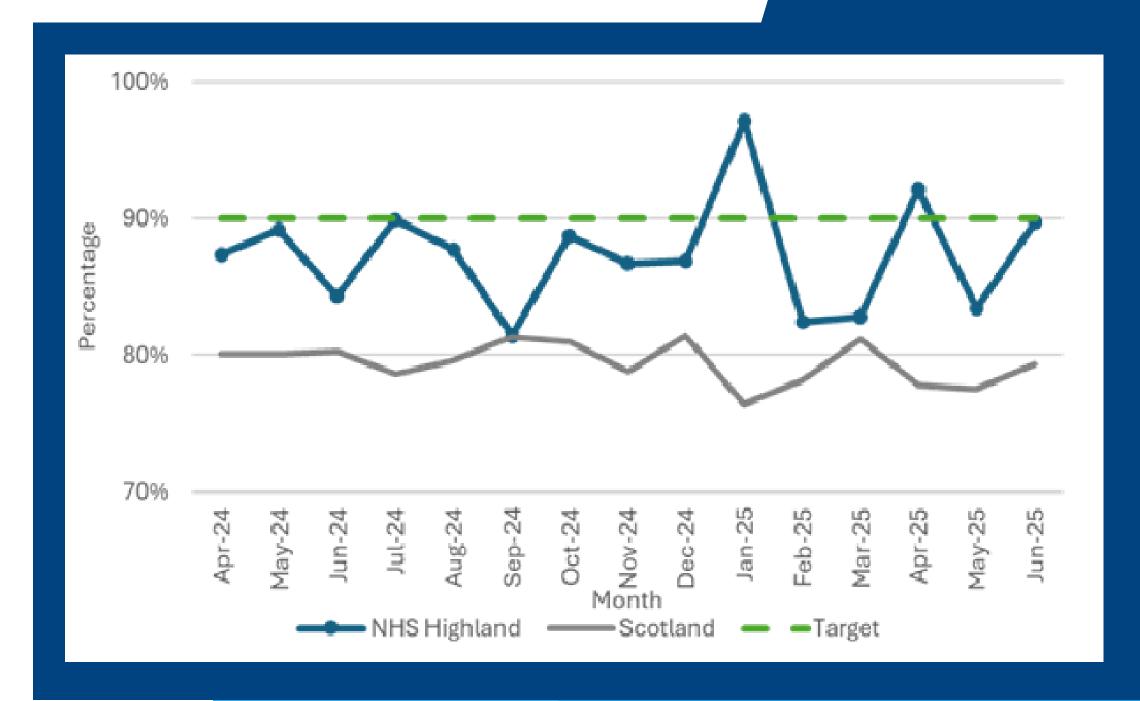
IMPROVING PERFORMANCE: EVIDENCE OF PROGRESS

PSYCHOLOGICAL THERAPIES:

- NHS Highland: 87.4% within 18 weeks
- Scotland average: 79.7%
- June 2025: 90% target achieved

KEY SUCCESS FACTORS:

- Data-driven pathway improvements
- Total waiting numbers reduced simultaneously
- Top performing mainland board in Scotland



AREAS FOR IMPROVEMENT

SCHEDULED CARE

• Reduce waits > 52 weeks to agreed levels by March 2026

CANCER

Improve 31-day and 62-day waiting time performance Enhance timely access to diagnosis and treatment

CHILD AND ADOLESCENT MENTAL HEALTH SERVICES

Achieve 90% within 18 weeks standard

UNSCHEDULED CARE

Reduce delayed discharges - Improve A&E to 95% within 4 hours Reduce length of stay





CURRENT PERFORMANCE AND TARGETS

SCHEDULED CARE:

- 95% of new patients seen within 12 weeks (target)
- New outpatients waiting >52 weeks: 5,000 → 1,393 by March 2026
- TTG patients waiting >52 weeks: 900 → 200 by March 2026

CANCER

- 31-day standard: 95% begin treatment within 31 days
- 62-day standard: Trajectory to 80% by March 2026 (patients referred with urgent suspicion of cancer)

CHILD AND ADOLESCENT MENTAL HEALTH SERVICES

- 90% of patients within 18 weeks from referral to treatment
- Target: December 2025



CURRENT PERFORMANCE AND TARGETS CONT.

UNSCHEDULED CARE:

• A&E performance: 83% within 4 hours by March 2026 (striving towards 95% national target)

- Minimise 8 and 12-hour waits
- Delayed discharge: Reduce to <188 by March 2026
- Ambulance turnaround: Maintain above national average

HOSPITAL AT HOME EXPANSION:

- 15 virtual beds in Highland by March 2026
- 16 virtual beds in Argyll & Bute by March 2026





DELIVERING IMPROVEMENT THE ACTIONS



SCHEDULED CARE

- Additional investment targeting longestwaiting patients
- Ahead of schedule in reducing >52 week waits
- Focus on imaging, endoscopy, and treatment services

UNSCHEDULED CARE

- Shifting balance of care from acute to community
- Expanding Hospital at Home and Same Day Emergency Care
- Advanced practitioners at front door
- Aligned Flow Navigation Centre and Out of Hours
- Consistent discharge and rehabilitation pathways

CLEAR ACTIONS WITH MEASURABLE MILESTONES

DELIVERING IMPROVEMENT THE ACTIONS



CANCER

- Weekly escalation and monitoring of every patient
- Targeted pathway improvements expected by March 2026

CHILD AND ADOLESCENT MENTAL HEALTH SERVICES

- Reducing total numbers waiting for treatment
- Streamlined pathways to achieve 90% standard

CLEAR ACTIONS WITH MEASURABLE MILESTONES



KEY ACHIEVEMENTS 2024-2025

PEOPLE AND CULTURE DEVELOPMENT

Building workforce capability:

- 100+ colleagues completed leadership and culture training
- Culture & Leadership Framework Phase 2 delivered

Strategic Foundations

- Learning & Development Group established
- Systems and frameworks positioned for future delivery

Listening, learning & living our values









BUILDING CAPABILITY AND CULTURE FOR SUSTAINABLE EXCELLENCE



KEY ACHIEVEMENTS 2024–2025

PEOPLE AND CULTURE DEVELOPMENT

Health & Care Staffing Act compliance

- Major reduction in high-cost agency usage
- E-rostering system rebuilt at Raigmore
- Maternity staffing evaluations completed

Embedding EDI and professional standards

- Workforce Monitoring Report completed and ratified
- Professional assurance framework initiated
- EDI Workforce Strategy progressed



BUILDING CAPABILITY AND CULTURE FOR SUSTAINABLE EXCELLENCE

STRONG GOVERNANCE = QUALITY SERVICES

2024-2025 ACHIEVEMENTS

- All 17 Blueprint for Good Governance actions progressing
- Committees self-evaluations completed
- Annual workplan framework implemented

INDEPENDENT AUDIT OPINION

 Reasonable assurance regarding effective and efficient achievement of objectives.





LOOKING FORWARD:

THREE COMMITMENTS FOR 2025/26

1. SUSTAINABLE SERVICES

Completing transformation programmes to ensure long-term viability of care across our region.

2. PARTNERSHIP DELIVERY

Deepening integration with councils and communities to achieve better outcomes together.

3. WORKFORCE EXCELLENCE

Supporting and growing our teams to meet current and future healthcare needs.



BUILDING HEALTH TOGETHER

