Centre for Sustainable Delivery

NHS SCOTLAND

Centre for Sustainable Delivery

Annual Work Plan

2025 - 2026

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Introduction

The Centre for Sustainable Delivery (CfSD) is uniquely positioned within NHS Scotland as a national, clinically led delivery unit that bridges the gap between government policies and frontline healthcare.

We play a key role in the redesign and reform of NHS Scotland Healthcare services ensuring alignment to a number of commitments set out within Sottish Governments Programme for Government (PfG) and NHS Scotland Operational Improvement Plan.

The purpose of the Centre for Sustainable Delivery is to:

- Design and scale system-wide solutions that tackle NHS Scotland's biggest health challenges: quickly, equitably and sustainably.
- Provide the agility and authority to coordinate national innovations, sustainability initiatives and to ensure that proven technologies and models are adopted across NHS Scotland.
- Deliver national improvement in care across NHS Scotland through the implementation of optimal care pathways, sustainable improvements in service delivery, and the sharing of best practice.
- Drive redesign and transformation through collaboration and partnership working – developing and maintaining networks of clinicians and senior leaders across specialities and settings.
- Undertake research and publish evidence based learning to establish the CfSD as an internationally recognised unit for supporting system change.
- Assess, monitor and redesign through data analysis, by using national and local data to inform system understanding, prioritisation and programme design to optimally achieve key objectives.
- Support the NHS Scotland Care and Wellbeing Portfolio by reducing inequalities, improving access, and delivering better value for public investment.
- Utilise a clinical leadership approach to ensure equality and quality of care by understanding and reducing unwarranted variation, increasing reliability and consistency of care.

Programme and Teams

The Centre for Sustainable Delivery consists of a number of national programmes and teams:

Programme/Team	Strategic Aim
Modernising Patient Pathways (MPP) Programme	The Modernising Patient Pathways team support front line clinical teams to develop sustainable improvements in service delivery, primarily in planned care. The team redesign models of care, share best practice, and work to balance capacity with demand for services.
National Elective Coordination Unit (NECU)	The National Elective Coordination Unit (NECU) provides a centralised and coordinated resource that works with Boards to match service demand to capacity, and maximise capacity utilisation.
National Unscheduled Care Improvement Programme	The National Unscheduled Care Improvement team works with NHS Boards across Scotland to understand their systems through identifying areas of unwarranted variation, triangulating operational, strategic and clinical leaders around the most productive opportunities in order to improve the timeliness, quality and safety of care. This includes defining and creating clinical consensus around optimal models and best practice, facilitating learning and sharing while Boards adopt national tools and guidance to support the delivery of their improvement aims and objectives.
Cancer Improvement and Earlier Diagnosis Programme	The Cancer Team drives NHS Scotland's ambition to diagnose Cancer earlier and faster, with a particular focus on later stage disease. This includes work to enhance diagnostics, improve public education, and invest in innovation and to support primary care.
National Endoscopy Programme	The National Endoscopy Programme helps support the delivery of the National Endoscopy and Urology Recovery and Renewal Plan. They are working with Boards to develop a new national sustainable plan for Endoscopy.
Innovation Programme	The Accelerated National Innovation Adoption (ANIA) Pathway facilitates the rapid identification and assessment of new technologies for potential national adoption and lead the accelerated implementation of approved technologies across NHS Scotland.
National Green Theatres Programme	The Green Theatres Programme helps embed environmental sustainability across NHS Scotland. They deliver clinically-led quality improvements to support a healthier, more sustainable future and support the Scottish Government's net zero ambitions.
Planned Care Programme	The Planned Care Programme support the delivery of planned care, by facilitating initiatives designed to improve demand and capacity, promote greater elective activity and reduce waiting times.
National Clinical Directors	Our Clinical Directors support all CfSD Programmes ensuring a clinical leadership approach is adopted for our national improvement work. By working in partnership with and alongside senior clinicians from all Boards, this ensures that clinical staff are fully involved in the design, delivery, and evaluation of our transformation and improvement programmes.
Strategic Planning and Programme Management Office	The SP&PMO team within CfSD provide internal support to the other CfSD programme teams in relation to programme management governance and standardisation of programme/project management best practice to facilitate teams to achieve their strategic priorities. The team are responsible for strategic planning, internal and external portfolio reporting and ensuring both robust internal governance and quality assurance controls are in place. In working with CfSD National Programmes the team support the realisation of benefits in evidencing and demonstrating the value and impact being achieved

Our Strategic Priorities

The CfSD has 8 key strategic priorities which help guide the development and prioritisation of its work. These are:

Objectives		
	Strategic Priority	**Definition**
1	**Quality and Efficiency**	CfSD supports the delivery of effective, safe, and patient-centred care. We work with boards to maximise capacity, reduce unnecessary demand, and ensure patients are treated by the right clinician, in the right setting, at the right time.
2	**Promoting and implementing sustainable solutions**	We support boards to implement long-term, sustainable services across NHS Scotland. This includes redesigning models of care, promoting best practice and implementing national care pathways.
3	**Supporting Workforce**	CfSD helps support the transformation and sustainability of healthcare roles. This includes identifying and maximising opportunities for staff upskilling and new ways of working.
4	**Driving Health Technology and Innovation**	We play a key role in driving the assessment and implementation of technological innovations to address complex health challenges across NHS Scotland.
5	**Stakeholder Engagement and Collaboration**	CfSD will develop strong working partnerships with a wide range of organisations. This includes territorial and national boards, primary care, the third sector, commercial organisations, and multiple Scottish Government directorates.
6	**Data and Evidence**	CfSD is a data-led and evidence-driven organisation. We work with Public Health Scotland and territorial boards to analyse and utilise management information to support service redesign and improvement work across Scotland.
7	**National Reporting and Strategic Oversight**	We directly support the Scottish Government to oversee and monitor board improvement activity and the implementation of national strategic plans. This enables the Scottish Government to support improvement, identify issues, and ensure accountability.
8	**Planetary Health**	CfSD supports the aims set out in the NHS Scotland Climate Emergency and Sustainability strategy. We led on the delivery of changes to policy and practice in line to reduce the environmental impact of healthcare delivery on planetary health.

Mapping Priorities

Each CfSD National Programme will deliver their aims and objectives aligned to our strategic priorities. There will be different levels of outcomes aligned to these priorities dependent on the National Programme. To illustrate this, below is a high level mapping by applying a high, medium and low level outcome indicator.

	Quality and Efficiency	Implementing sustainable solutions	Supporting Workforce	Driving Health	Stakeholder	Data and Evidence	National Reporting and Strategic oversight	Planetary Health
Modernising Patient Pathway	●	●	●	●	●	●	●	○
National Elective Coordination Unit	●	●	◐	◐	◐	●	◐	○
National Unscheduled Care Improvement	●	●	◐	◐	●	●	●	○
Cancer Improvement and Earlier Diagnosis	●	●	●	○	●	●	●	○
Innovation	●	●	●	●	●	●	●	○
National Green Theatres	◐	◐	◐	◐	◐	◐	◐	●
National Endoscopy	●	●	●	◐	●	◐	◐	○
Planned Care	●	●	●	○	●	●	●	○

High ● **Medium** ◐ **Low** ○

CfSD Delivery Principles

The CfSD annual plan for 2025/26 includes individual workplans for all our National Programmes (See Appendix A). It also includes 8 delivery principles that the workplan is based on. These principles help guide the overarching strategic development of CfSD and the prioritisation of its work.

Delivery Principles		
	Principle	**Areas of work and key outcomes**
1	**Clinical Leadership Model**	Providing robust, credible clinical leadership is key to ensuring that CfSD can support effective and sustainable transformation across NHS Scotland. CfSD ensures that all improvement work is clinically-led. This includes national clinical leads who provide specific expertise and understanding around a speciality or improvement area, and CfSD National Associate Clinical Directors who ensure that the improvement work takes a whole system approach that is aligned with broader improvement and recovery of NHS Scotland.
2	**Speciality or Strategic Delivery Groups**	Speciality or Strategic Delivery Groups (SDGs) are designed to bring together key multidisciplinary stakeholders from across Scotland, including both clinical and operational leadership. This provides a practical mechanism to enable clinically led, locally relevant service redesign and transformation that is capable of addressing key challenges within a specific speciality or improvement area
3	**Board Engagement**	CfSD Champions have been embedded within each territorial Health Board. The CfSD champions act as a key conduit between the Boards and CfSD. They are designed to help facilitate relationships between CfSD and local operational teams and to support the implementation of improvement opportunities. To support this process, there are regular Board engagement meetings between senior CfSD staff and the local board CfSD champions, which are aimed at highlighting additional improvement opportunities and identifying solutions to any current challenges.
4	**Promoting and Embedding Best Practice**	All CfSD Programme Teams have a focus on developing and delivering best practice to support the delivery of care, reducing unwarranted variation across services and ensuring best practice is embedded across NHS Scotland. This includes work to optimise and maximise capability and capacity across NHS Scotland, and to ensure that patients are treated by the right clinician, in the right setting, at the right time. This avoids waste and enables rapid access to treatment to those who need it most. This includes work designed to deploy and optimise national pathways across Scotland, and to balance national service capacity with current demand for services.

CfSD Delivery Principles

Delivery Principles		
	Principle	**Areas of work and key outcomes**
5	**Primary/ Secondary Care Engagement**	CfSD works closely with primary care stakeholders to help build and sustain stronger relationships between primary care and secondary care. This includes identifying opportunities to implement and improve person-centred pathways and other innovations and improvements across primary and secondary care.
6	**Enhance Staff Capability and Capacity**	We identify and maximise opportunities for staff upskilling, including working with NHS Scotland Academy and NHS Education Services to develop future workforce models. This includes taking into account the demands of the changing health and care environment and new ways of working.
7	**Provision of Expert Advice and Analysis**	The CfSD will work collaboratively with Health Boards and other key stakeholders to provide the Scottish Government with aggregated advice and analysis relating to national improvement actions, opportunities and themes. This will help inform the development of national plans to support planned care, unscheduled care and other key areas across NHS Scotland.
8	**Share, promote and publish knowledge and achievements**	CfSD aims to become an internationally recognised unit for supporting transformation and system change. To do this, we will identify and explore opportunities to promote and share our knowledge and achievements. This will include publishing research and learning that demonstrates and evidences the value, impact and benefits realisation of our programmes and helps promote the adoption of best practice.

Appendix A

Programme workplans – Modernising Patient Pathways (MPP) Programme			
Aim and objective		**Workstreams: Areas of work and key outcomes**	**Strategic Priority**
SA1	**To support front line clinical teams to develop sustainable improvements in service delivery, primarily in planned care with redesigning models of care, sharing best practice, and work to balance capacity with demand for services.**	**1.1 Board engagement and clinical leadership** • Use SDGs to continue to develop and maintain robust engagement with Boards. • Utilise Heatmaps to ensure shared prioritisation and Board support including developing an initial Heatmap that sets out a shared view of the 2025/26 ambitions, and ongoing engagement with Board Leadership and operational teams. • Ongoing development of Clinical Leadership Model for Speciality Delivery Groups with national clinical leads providing subject matter expertise, ensuring focus on high impact opportunities.	Stakeholder engagement and collaboration Improving quality and efficiency
		1.2 Development and Dissemination of National Pathways and Resources • Scope, develop and publish new national pathways and/or resources across a range of clinical specialties. • Ensure active dissemination, implementation and monitoring of published pathways. • Use Heatmap process to assess national implementation of pathways. • Develop resources to support active dissemination, such as videos, webinars, publications, and case studies. • Work with Healthcare Improvement Scotland (HIS) and the Right Decision Service (RDS) and ensure active dissemination of pathways, including through national and local meetings and the development of a RDS webinar series. • Via SDGs, lead local discussions and drive implementation of pathways. • Develop a new cancer prehabilitation pathway. This will include publication, active dissemination and implementation of the pathway, and a review of digital innovations to support the pathway. • Develop the national digital platform infrastructure required to enable the structured collection and review of patient reported outcome measures (PROMS). • Support Target Operating Model commissions from the Scottish Government through the relevant SDGs.	Improving quality and efficiency Promoting and implementing sustainable solutions

Aim and objective		Workstreams: Areas of work and key outcomes	Strategic Priority
SA1	**To support front line clinical teams to develop sustainable improvements in service delivery, primarily in planned care with redesigning models of care, sharing best practice, and work to balance capacity with demand for services.**	**1.3 Demonstrating impact through Measurement and analysis** • Further develop methodology to capture adoption and impact of CfSD clinical pathways through SDGs and the Heatmap. • Continue development of recording and reporting of opt-in pathways at both local and national level. • Further develop and promote SDG Waiting Times Dashboard to support SDG workplans. • Work in partnership with National Services Scotland (NSS) Digital to scope and develop national data dashboards, including hosting on national platforms (such as SEER2), to facilitate ongoing programmes.	Data and evidence
		1.4 Enabling the Embedding of Sustainable Waiting List Management Approaches • Continue focus on measuring, promoting and maximising Active Clinical Referral Triage (ACRT) and Patient Initiated Review (PIR) via the Speciality Delivery Groups (SDGs). • Develop improvement resources to support adoption of Patient Focused Booking to drive efficiencies within Outpatients, including improved clinic utilisation and reduction in did-not-attend (DNA) rate. • Promote optimal waiting list management approaches including the application of Booking in Turn to support a reduction in long waits. • Support development and implementation of national Productivity and Efficiency Plan. This will include developing an Outpatient Operational Improvement Group with nominated Board representation to support Area 1 (Outpatient Improvement) of the plan.	Promoting and implementing sustainable solutions

Aim and objective		Workstreams: Areas of work and key outcomes	Strategic Priority
SA1	**To support front line clinical teams to develop sustainable improvements in service delivery, primarily in planned care with redesigning models of care, sharing best practice, and work to balance capacity with demand for services.**	**1.5 Supporting Sustainable Theatre Redesign and Improvement** • Finalise and publish the National Framework for Perioperative Principles developed by Perioperative Delivery Group (PDG) which will support creating optimal conditions for adoption of Digital Scheduling. • Develop the National Theatre Information Group (NTIG) to establish key metrics, improve NTIG data quality and further enhance and develop existing and new analytical outputs. • The NTIG group will also support Area 2 (Surgery and High Volume Low Complexity Pathways) of the national Productivity and Efficiency Plan. • Work with the Perioperative Delivery Group (PDG) to ensure NTIG data is used to support a national focus on theatre productivity and efficiency. • Through collaboration between the PDG and NTIG, use the newly published Framework for Perioperative Principles to realise improvements in productivity, efficiency and outcomes. • Continue work to promote hi-flow cataract surgery. • Ensure a national approach to the use of theatre productivity and efficiency metrics.	Promoting and implementing sustainable solutions
		1.6 Sustainable Workforce Redesign • Improve the use of team service planning and non-medical roles. • Ensure that SDGs promote team service planning approaches, including flexible workforce approaches and use of DCAQ (Demand Capacity Activity Queue). • Ensure that SDGs collaborate with National Education for Scotland (NES) and NHS Scotland Academy to maximise use of non-medical roles and innovative approaches to workforce.	Supporting Workforce
		1.7 Supporting Innovation • Support the ANIA pathway and ensure SDGs help facilitate the spread of innovation. This will include working with the Innovation Team to support the digital dermatology project and to identify new approaches to care. • Work with the Green Theatres Team to identify opportunities for green pathways. • Complete the evaluation of the Sunrise (Respiratory) innovation in partnership with relevant partners.	Driving Health Technology and Innovation

Programme workplans – National Elective Coordination Unit (NECU)			
Aim and objective		**Workstreams: Areas of work and key outcomes**	**Strategic Priority**
SA2	**To provide a centralised and coordinated resource that works with Boards to match service demand to capacity, and maximise capacity utilisation.**	**2.1 NHS Scotland waiting list validation** • Standardised approach to validation of local Board waiting lists across outpatients, inpatient and day cases, and diagnostic specialties based on a rolling programme	Promoting and implementing sustainable solutions
		2.2 Patient treatment capacity campaigns • Delivery of bespoke capacity campaigns to match overspill capacity to demand across NHS Scotland. This will maximise patient treatment opportunities and reduce waiting times.	Improving quality and efficiency
		2.3 Development of NECU digital infrastructure • Development of digital and service delivery roadmap via managed partner to support future infrastructure development. This will support an efficient NECU capability. • Ensure technical integration with current digital systems.	Promoting and implementing sustainable solutions
		2.4 Development of NECU Hub and Spoke model with provider Boards • Continue to develop strategic partnership arrangements with NECU provider(s) to improve flow of patients into overspill capacity, and to increase productivity and improve patient treatment. • Continue to support current hub and spoke pilot in NHS Forth Valley.	Promoting and implementing sustainable solutions
		2.5 Diabetes Closed Loop System (CLS) • Lead delivery of National Diabetes CLS Onboarding Programme. • Over the year, onboard an additional 1200 patients to the CLS Programme. • Work in collaboration with Scottish Government to evaluate and identify most suitable host for programme to deliver as business-as-usual (BAU) from 26/27 onwards.	Driving Health Technology and Innovation Promoting and implementing sustainable solutions

Programme workplans – National Unscheduled Care Improvement Programme			
Aim and objective		**Workstreams: Areas of work and key outcomes**	**Strategic Priority**
SA3	**To work with NHS Boards across Scotland to understand their systems through identifying areas of unwarranted variation, triangulating operational, strategic and clinical leaders around the most productive opportunities in order to improve the timeliness, quality and safety of unscheduled care.**	**3.1 Board Engagement and Clinical Leadership** • Complete a series of diagnostic visits to Boards with external teams and make recommendations around areas of significant variation/opportunity and explore change ideas with frontline teams. • Support Boards to create the conditions for change through observation and recommendations around the infrastructure and cultural enablers; building clinical engagement in improvement planning and delivery. • Use CfSD Strategic Planning Groups (SPGs) and Operational Delivery Networks (ODNs) to engage with Boards to develop and agree guiding principles, best practice/minimum standards and pathways • Ongoing development of Clinical Leadership Model for SPGs and ODNs with national clinical leads providing subject matter expertise, ensuring focus on high impact opportunities. • Implementation of a revised dashboard to monitor the impact of improvement activity • Agree with Boards holistic improvement plans connecting recommendations and areas of most significant variation to practical improvement planning processes to ensure optimal impact. • Agree guiding principles and best practice/minimum standards and pathways through strategic development and delivery groups. • Work with Boards to adopt and embed guiding principles across Scotland.	National Reporting and Strategic Oversight Stakeholder Engagement and Collaboration Promoting and Implementing sustainable solutions Improving Quality and Efficiency
		3.2 Productivity and Performance Monitoring • Support the increase in productivity and efficiency and reduce variation across Unscheduled Care services. • Assess each Boards ability to deliver in line with their proposed trajectories, offering an impartial and independent view to the Scottish Government and Scottish Ministers if required. • Support Boards and also offer an assessment to the deliverability of the programme and specifically the opportunities or barriers to improvement. • Provide additional support to individual boards making use the expertise from other organisations or groups such as Healthcare Improvement Scotland (HIS) groups or the Discharge without Delay Collaborative and underpinned by data. • Deliver a clinically relevant and meaningful data pack highlighting areas of significant variation and opportunity, engage Boards in exploring challenges. • Report effectiveness and publish national tools and guidance to build confidence and engagement.	National Reporting and Strategic Oversight Promoting and Implementing sustainable solutions

Aim and objective		Workstreams: Areas of work and key outcomes	Strategic Priority
SA3	**To work with NHS Boards across Scotland to understand their systems through identifying areas of unwarranted variation, triangulating operational, strategic and clinical leaders around the most productive opportunities in order to improve the timeliness, quality and safety of unscheduled care.**	**3.3 Supporting improved access to Community Urgent Care** • Finalise Stakeholder map of services and sectors in relation to community urgent care. • Analyse relationships between acute admissions and community/Care Homes to ensure patients are seen in most appropriate setting. • Understand and develop palliative and multiple disadvantage workstreams within Care Home and Community contexts. • Develop and test optimal models for care home pathways for unscheduled care, including Prof-to-Prof and Call before Convey pathways. • Work to better understand the community urgent care landscape at Board level through pilot work to map out ecosystems and assess direct public and professional experience. • Work with pilot boards to identify areas of opportunity to declutter and improve access to urgent unscheduled care in the community and better articulate longer term commissioning needs. • Extrapolate national learning from pilot board mapping to shape future strategic development of this portfolio.	Promoting and implementing sustainable solutions Improving quality and efficiency Supporting workforce
		3.4 Support Optimisation of Flow Navigation • Ensure all Boards develop process for submitting monthly Flow Navigation activity data. • Work with PHS around future involvement in collection of validated FNC activity data. • Work with Boards to increase scheduling of appropriate patients into planned urgent care pathways. • Work with Boards to develop coordinated Flow Navigation care home support pathways. • Promote and spread the use of “Prof-2-Prof” communication platforms and existing ambulance “Call Before Convey” pathways. • Work with Boards to collate patient experience feedback. Review flow navigation to urgent care pathway patient experience data. • Assist in the strategic scoping of the future state for Flow Navigation models.	Promoting and implementing sustainable solutions Improving quality and efficiency Supporting workforce Data and evidence

Aim and objective		Workstreams: Areas of work and key outcomes	Strategic Priority
SA3	**To work with NHS Boards across Scotland to understand their systems through identifying areas of unwarranted variation, triangulating operational, strategic and clinical leaders around the most productive opportunities in order to improve the timeliness, quality and safety of unscheduled care.**	**3.5 Support Optimisation of Front Door Medicine** • Establish National Same Day Emergency Care (SDEC) Short Life Working Group and Acute Assessment SLWG to define optimal models and set out guiding principles for recommendation to the UC Strategic Delivery Group. • Carry out baseline mapping and capacity and demand modelling of SDEC (0 - 24 hrs) and Acute Assessment Units (24-72 hrs) to establish scope of future work. • Agree standards for SDEC and Acute Assessment Units (AAU). • Create Operational Delivery Networks to support adoption and local development of Front Door pathways aligned to local Board improvement plans and share learning.	Promoting and implementing sustainable solutions Improving quality and efficiency Data and evidence
		3.6 Support Optimising Flow • Publish a Whole System Operating Framework (WSOF) through the UC SDG and Scottish Government performance team, to support and standardise escalation measures within Boards. Support implementation of WSOF within relevant Boards through an ODN. • Development of Scottish Ambulance Service (SAS) and NHS24 phase of the WSOF. • Define and standardise top-end triggers and measures for escalation beyond a standard "operational management" response. • Develop national best practice guidance for access to diagnostics, speciality in-reach models and for improving flow. • Develop an optimal length-of-stay (LOS) model through use of testing data algorithm and associated test of changes in a minimum of 1 Board with extrapolated learning presented for assessment of further scalability. • Provide advice to the National Discharge without Delay collaborative.	Promoting and implementing sustainable solutions Improving quality and efficiency Supporting workforce Data and evidence

Programme workplans – Cancer Improvement and Earlier Diagnosis Programme			
Aim and objective		**Workstreams: Areas of work and key outcomes**	**Strategic Priority**
SA4	**To drive NHS Scotland's ambition to diagnose Cancer earlier and faster, with a particular focus on later stage disease. This includes work to enhance diagnostics, improve public education, and invest in innovation and to support primary care.**	**4.1 Cancer Action Plan Development and National Reporting** • Contribute to publication of second annual report for the Cancer Strategy (2023-33). • Regularly update key stakeholders on progress of the Cancer Action Plan (2023-2026) through the Quarterly progress report. • Develop next Cancer Action Plan (2026-2029).	National reporting and strategic oversight Stakeholder Engagement and collaboration
		4.2 Supporting Implementation of the Framework for Effective Cancer Management (FECM) • Continue to regularly meet with Board Cancer Management Teams to ensure the FECM is embedded supporting patients being diagnosed and treated as quickly as possible. • Where cancer pathway challenges are identified, explore potential for innovative solutions. • Identify, lead and support the sharing of best practice within Cancer services. • Carry out Board support visits as necessary. • Lead Cancer Performance Delivery Board (CPDB) and Boards to develop cancer backlog clearance plans. • Lead CPDB to develop a urological cancer improvement plan, including DCAQ analysis to understand services. • Link with relevant SDGs to ensure alignment of cancer improvements with clinical pathways. • Support boards to implement their cancer improvement plans. • Support Boards with development of additionality funding bids, including monitoring of Board progress and reporting activity to SG. • Support and appraise the development and delivery of Board Annual Delivery Plans (ADPs).	Promoting and Implementing sustainable solutions Improving quality and efficiency Stakeholder engagement and collaboration
		4.3 Lead Review of Cancer Waiting Times (CWT) Standards • Undertake full clinical review of cancer waiting times standards in Scotland, including initial scoping exercise, establishment of project group and a review of the current CWT Data and Definitions manual and waiting times adjustments.	Data and evidence National reporting and strategic oversight

Aim and objective		Workstreams: Areas of work and key outcomes	Strategic Priority
SA4	**To drive NHS Scotland's ambition to diagnose Cancer earlier and faster, with a particular focus on later stage disease. This includes work to enhance diagnostics, improve public education, and invest in innovation and to support primary care.**	**4.4 Detect Cancer Earlier (DCE) Programme** • The Detect Cancer Earlier Programme includes 5 large-scale workstreams that will deliver key elements of the National Cancer Strategy, as set out below.	
		4.4a Public education/ empowerment • Delivery of multi-faceted DCE communications strategy. • Implementation of DCE marketing, public relations and stakeholder engagement activity. • Evaluate "Be the Early Bird" campaign performance and use learning for continuous improvement.	Stakeholder engagement and collaboration
		4.4b Diagnostics • Expand network of Rapid Cancer Diagnostic Services (RCDS). • Collect and publish RCDS data via PHS. • Support implementation of optimal published cancer diagnostic pathways (lung, head and neck and colorectal). • Begin scoping work for next optimal diagnostic cancer pathway (exact pathway to be confirmed). • Carry out review of optimal diagnostic pathways as per review timetable.	Promoting and Implementing sustainable solutions Improving quality and efficiency Data and evidence Supporting workforce
		4.4c Demonstrating impact through Measurement and analysis • Engage with Health Boards to ensure complete, validated urgent suspicion of cancer (USC) referral data is available for PHS to publish. • Clarify proxy measures to support earlier diagnosis ambition (particularly for blood and brain cancers). • Support publication of routine cancer diagnosis through emergency presentation data by PHS.	Data and evidence Stakeholder engagement and collaboration National reporting and strategic oversight

Aim and objective		Workstreams: Areas of work and key outcomes	Strategic Priority
SA4	**To drive NHS Scotland's ambition to diagnose Cancer earlier and faster, with a particular focus on later stage disease. This includes work to enhance diagnostics, improve public education, and invest in innovation and to support primary care.**	**4.4d Supporting Innovation** • Continue to support potential national roll out of Chest X-Ray Artificial Intelligence project, including working with 2 test beds and supporting further evidence gathering. Project will go through an implementation development phase for 6 months with assessment by Innovation Design Authority in October 2026. • Review evidence from Cancer Research UK's TET (Test, Evidence, Transition) projects in NHS Scotland and advise on wider adoption. • Provide advice to external key stakeholders and organisations, including the third sector, to help direct wider cancer innovation efforts undertaken in Scotland.	Driving Health Technology and Innovation Stakeholder engagement and collaboration
		4.4e Primary Care • Complete full clinical review of Scottish Referral Guidelines (SRGs) for Suspected Cancer, including publication of revised guidelines and associated communication plan and development of education workshops and resources. • Further explore the potential role for community pharmacists to support earlier diagnosis efforts. • Support roll-out of Gateway C education platform for primary care clinicians in Scotland. Support Gateway C to update course content, in line with the new Scottish Referral Guidelines	Improving quality and efficiency Promoting and implementing sustainable solutions

Programme workplans – National Endoscopy Programme			
Aim and objective		**Workstreams: Areas of work and key outcomes**	**Strategic Priority**
SA5	**To support the ongoing delivery of the Endoscopy and Urology Diagnostic Recovery and Renewal Plan**	**5.1 Board Engagement and Clinical Leadership** • Hold regular engagement calls with NHS Board endoscopy service teams. • Carry out visits to provide onsite support to Boards as required. • Lead quarterly Endoscopy SDG meetings to promote and support the implementation of national endoscopy plans.	Stakeholder engagement and collaboration National reporting and strategic oversight
		5.2 Improving Quality and Efficiency • Work with the Endoscopy Speciality Delivery Group (SDG) to identify opportunities to develop national clinical pathways. • Support Boards to scope out productive opportunities, including transnasal endoscopy (TNE). • Implementation of refreshed qFIT clinical consensus. • Provide bespoke support and recommendations to Boards facing Endoscopy service challenges. • Support board to conduct regular validation campaigns through the National Elective Coordination Unit (NECU). • Support boards to develop their Demand, Capacity, Activity and Queue (DCAQ) modelling work to support local capacity planning. • Support boards to implement their endoscopy improvement plans. • Support Boards with development of additionality funding bids, including monitoring of Board progress and reporting activity to SG. • Support NHS Golden Jubilee allocation of endoscopy capacity to Boards • Support and appraise the development and delivery of Board Annual Delivery Plans (ADPs).	Improving quality and efficiency Promoting and implementing sustainable solutions
		5.3 Sustainable Workforce Redesign • Work with the NHS Scotland Academy to encourage Boards to enrol staff on Non-Medical Endoscopy courses. • Support boards to identify workforce opportunities for Endoscopy including the creation of multi-professional workforces.	Supporting workforce Promoting and implementing sustainable solutions

Aim and objective		Workstreams: Areas of work and key outcomes	Strategic Priority

SA5	**To support the ongoing delivery of the Endoscopy and Urology Diagnostic Recovery and Renewal Plan**	**5.4 Promote and implement sustainable opportunities**
		• The Endoscopy SDG will develop and promote a national Endoscopy sustainability plan to supersede the previous renewal plan with a focus on sustainable endoscopy services including:
		  • Demand and capacity (including establishment of a national baseline)
		  • Workforce planning
		  • Waiting list validation
		  • Enhanced Triage
		  • Green Endoscopy
		  • Patient information
		  • Transnasal Endoscopy
		  • Equipment
		  • Realistic Medicine
			Promoting and implementing sustainable solutions
			
			Improving quality and efficiency

		5.5 Supporting Innovation • Implementation of Endoscopy Reporting System (ERS) • Work with Boards and the software provider to implement the Endoscopy Reporting System (ERS) during 25/26. • Maintain ERS Programme Board to oversee roll out escalating risks as required.	Promoting and implementing sustainable solutions Driving Health Technology and Innovation

Programme workplans – Innovation Programme			
Aim and objective		**Workstreams: Areas of work and key outcomes**	**Strategic Priority**
SA6	**To facilitate the rapid identification and assessment of new technologies for potential national adoption and lead the accelerated implementation of approved technologies across NHS Scotland**	**6.1 Horizon Scanning** • Work with Scottish Health Technologies Group (SHTG) to lead horizon scanning for the Accelerated National Innovation Adoption (ANIA) pathway. Submit quarterly reports to the Innovation Design Authority (IDA) to highlight new technologies that could enter the ANIA Pathway. • Oversee the initial assessment/evaluation of identified technologies by SHTG via agreed criteria. • Identify technologies for consideration by IDA by working with the Horizon Scan Shortlisting Group to shortlist innovations via a 2-stage process. • Following approval by IDA, ensure that new innovations are successfully introduced onto the ANIA pathway.	Data and evidence Driving Health Technology and Innovation Stakeholder Engagement and collaboration
		6.2 Strategic Case Development • Develop a Strategic Case for all new technologies approved by the IDA following horizon scanning and accepted onto the ANIA pathway. This will be carried out within 12 weeks and will outline why the technology should be adopted, the underpinning evidence base and the potential impact on NHS Scotland. • Lead the ANIA Partnership (with HIS, PHS, NSS and NES) and co-ordinate their specialist input into the Strategic Case.	Improving quality and efficiency Driving Health Technology and Innovation Stakeholder engagement and collaboration
		6.3 Value Case Development • Following IDA approval of Strategic Cases, develop full Value Cases for IDA consideration. This will take 6 months and will detail how a technology will be adopted, how much it will costs and how long will it take to implement across all parts of NHS Scotland. • Lead the ANIA Partnership (with HIS, PHS, NSS and NES) and co-ordinate their specialist inputs to the development of the Value Case.	Driving Health Technology and Innovation Promoting and implementing sustainable solutions

Aim and objective		Workstreams: Areas of work and key outcomes	Strategic Priority
SA6	**To facilitate the rapid identification and assessment of new technologies for potential national adoption and lead the accelerated implementation of approved technologies across NHS Scotland**	**6.4 Implementation of innovations approved by IDA for national adoption** • Complete implementation of the Digital Dermatology innovation, including ensuring a transition to business-as-usual (BAU) from September 2025 and optimising uptake across NHS Scotland. • Lead delivery of Type 2 Diabetes Remission Programme. This will include establishing the Programme Delivery Board and related working groups for each area of implementation including workforce, training and education, governance and assurance, digital and implementation / change management. • Lead delivery of Pharmacogenetic Testing Programme. This will include establishing the Programme Delivery Boards and related working groups for each area of implementation including; workforce, training and education, governance and assurance, digital and implementation / change management. • Lead the ANIA Partnership (with HIS, PHS, NSS and NES) and co-ordinate their specialist inputs to delivery and adhere to IDA change request process and reporting requirements.	Driving Health Technology and Innovation Promoting and implementing sustainable solutions
		6.5 Value and impact reporting • Report Digital Dermatology usage benefits on a monthly basis (primarily number of photo sessions and SCI Gateway referrals). • Implement post implementation benefits realisation for Digital Dermatology. Benefits realisation reporting will commence in Q1 25/26 and will report on referral pathway numbers, before progressing to ACRT outcomes and impact, for example the number of patients returned to primary care with advice and guidance without the need for a face-to-face appointment	National reporting and strategic oversight Data and evidence

Programme workplans – National Green Theatres Programme			
Aim and objective		**Workstreams: Areas of work and key outcomes**	**Strategic Priority**
SA7	**To improve and evidence environmental sustainability across NHS Scotland**	**7.1 Identify, develop and release carbon saving actions.** • Work with clinicians and support staff to identify potential new carbon saving actions through the Speciality Delivery Group (SDG). • Work with clinicians and support staff to develop guidance and resources to support implementation of carbon saving actions. • Work with national bodies, including Antimicrobial Resistance and Healthcare Associated Infection (ARHAI) Scotland, to enable change. • Release carbon saving actions through a planned quarterly cycle.	Planetary Health Promoting and implementing sustainable solutions Supporting workforce
		7.2 Board Engagement and Clinical Leadership • Promote opportunities for Boards to connect and share learning and successes. • Utilise the Speciality Delivery Group (SDG) to support Boards to share progress and learning in implementing carbon saving actions. • Convene, where required, topic specific workshops with subject matter experts to provide a forum to discuss and address challenges in implementing carbon saving actions. • Where appropriate, establish project groups to support implementation of carbon saving actions. • Develop case studies outlining how actions have been realised and publish results and key findings from pilot projects.	Stakeholder engagement and collaboration Promoting and implementing sustainable solutions
		7.3 Demonstrating impact through Measurement and analysis • Deploy measurement plan to support progress and demonstrate impact • Review and refine the measurement plan on a quarterly basis. • Maintain a high level of Board engagement to support accurate and timely completion of the measurement plan. • Scope out potential to automate data collection process to improve the robustness of data, reduce workload and minimise the potential for data errors.	National reporting and strategic oversight Data and evidence

Aim and objective		Workstreams: Areas of work and key outcomes	Strategic Priority
SA7	**To improve and evidence environmental sustainability across NHS Scotland**	**7.4 Embed national Green Theatre principals into future national design and guidance** • Establish links with NHS Assure and identify deliverable actions. • Review, refine and develop actions to contribute into future NHS Scotland building design. • Identify relevant engineering and structural actions to be incorporated into Scottish Health Technical Memoranda (SHTM) and national guidance. • Promote new and revised SHTM guidance as appropriate. • Work with national partners to maximise opportunities to influence development of guidance	Planetary Health Promoting and implementing sustainable solutions
		7.5 Supporting Innovation • Encourage principles of environmental sustainability to be included in educational curriculum. • Review, refine and develop actions to contribute into future innovation opportunities. • Explore opportunities to harness innovation and research in partnership with academia and industry.	Stakeholder engagement and collaboration
		7.6 Scope out opportunities for expansion of programme into other high impact areas • Scope out opportunity to develop green endoscopy, green renal, green laboratories and green pathways programme areas. • Understand the potential and priorities for a national programme to implement high impact changes. • Establish the programme, governance and delivery approach for new programme areas following the design phase.	Planetary Health National reporting and strategic oversight

Programme workplans – Planned Care Programme – Performance			
Aim and objective		**Workstreams: Areas of work and key outcomes**	**Strategic Priority**
SA8	**To enhance the delivery of planned care, by facilitating initiatives designed to improve the management of demand and capacity, promote greater elective activity and address waiting times.**	• The Planned Care Programme consists of 4 separate areas of work: Planned Care Performance, Orthopaedics, Ophthalmology, and Radiology. • Each of these areas have their own workstreams, as set out below. • Ongoing monitoring of Boards Scheduled Care Performance specifically in relation to enhanced activity and reduction in long waiting patients. This includes diagnostic imaging. • Escalation of key risks and challenges to SG in relation to Boards delivering against Plan • Provide SG with preferred annual Board Planning process, and appraisal of proposed Board initiatives • Develop analytical models and utilise outputs to support Board Planning and Performance	
		8a.1 Support Boards to reduce long waits and maximise local and regional capacity, with a focus on key specialties • To actively monitor and track delivery against performance using validated data provided by the Scottish Government's Whole System Information Analysis Team • Engage and work with Boards to identify and implement tailored solutions to enable backlog reduction and capacity maximisation. With a focus on performance monitoring, including Actual Vs Planned and initiatives that receive additional funding. • Encourage Boards to increase New Outpatient, Diagnostic and Treatment Time Guarantee activity numbers in collaboration with SDGs and Productivity and Efficiency Group (PEG) • Encourage Boards to utilise NECU campaigns, including promotion of regular waiting list validation, travel campaigns and good waiting list management. • Work with NHS National Services Scotland (NSS) to implement insourcing and/or outsourcing support to meet Board needs as and when required.	Improving quality and efficiency Stakeholder engagement and collaboration

Aim and objective		Workstreams: Areas of work and key outcomes	Strategic Priority

SA8	**To enhance the delivery of planned care, by facilitating initiatives designed to improve the management of demand and capacity, promote greater elective activity and address waiting times.**	**8a.2 Match national demand with available capacity including through the National Treatment Centres**
		• Allocate National Treatment Centre (NTC) capacity for all specialties.
		• Engage with the boards regarding:
		  • Theatre utilisation and performance monitoring
		  • Comparison of planned and actual activity performance
		  • Scoping and support for Board proposals to increase capacity regionally and nationally
		  • Identification of proactive solutions to accommodate national challenges
		  • Promotion of CfSD initiatives, such as Peri – op framework to supporting improvements in theatre performance, including use of NECU;
		  • Identification of solutions to enable Boards to maximise theatre utilisation, including use of National Treatment Centres (NTC) and Regional Treatment Centres;
		  • Collaborative working across regions.
		• Ensure NTC utilisation and promote use of waiting list validation;
		• Conduct regular performance monitoring of NTC referral management and treatment activity delivered against agreed targets.
		• Work with NTC Leads to implement Scan for Safety programme actions across all National Treatment Centres.
			Improving quality and efficiency
			Promoting and implementing sustainable solutions
			Stakeholder engagement and collaboration

		8a.3 Productivity and Performance Monitoring • Support increase in productivity and efficiency and reduce variation. • Support development of productivity framework to be deployed in Boards and monitor progress • Ensure clear and efficient treatment pathways developed by MPPP are implemented and maintained by Boards for key specialties, with a particular focus on the top 5 most challenged specialties as well as Orthopaedics and Ophthalmology. • Engage with Boards to promote improvement in performance in theatre capacity, activity, workforce and theatre productivity to support maximisation of theatre utilisation, day surgery capacity and performance in conjunction with MPPP. • Encourage implementation of digital solutions, including the theatre scheduling tool Infix, Scan for Safety Genesis and other potential solutions.	Improving quality and efficiency Data and evidence Stakeholder engagement and collaboration

Aim and objective		Workstreams: Areas of work and key outcomes	Strategic Priority
SA8	**To enhance the delivery of planned care, by facilitating initiatives designed to improve the management of demand and capacity, promote greater elective activity and address waiting times.**	**8a.4 Support Whole System Flow and protection of Planned Care** • Support Boards to actively participate and support the work of the Speciality Delivery Groups (SDGs). • Work with Unscheduled Care Programme to support interrelated improvement work. • Collating and conducing analysis of planned care data in support of identifying improvement opportunities	Promoting and implementing sustainable solutions Improving quality and efficiency Supporting workforce

Programme workplans – Planned Care Programme – Trauma and Orthopaedics			
Aim and objective		**Workstreams: Areas of work and key outcomes**	**Strategic Priority**
SA8	**To enhance the delivery of planned care, by facilitating initiatives designed to improve the management of demand and capacity, promote greater elective activity and address waiting times.**	**8b.1 Implementation of National Trauma and Orthopaedic Plan** • Support the implementation of the National Orthopaedic Plan to ensure maximum utilisation of available capacity. Dependent on additional funding, provide additional improvements to support patient access and reduction of waiting lists. • Monitor Board plans to ensure activity is delivered against agreed targets.	Improving quality and efficiency National reporting and strategic oversight
		8b.2 Development and Dissemination of National Pathways and Resources Via the Scottish Orthopaedic Services Delivery Group (SOSDG): • Develop and implement 2 national clinical pathways to reduce variation and improve patient access. • Support Boards to implement high impact opportunities (including ACRT, PIR, ERAS) and reduce unwarranted variation. The focus of ACRT will be on certain key conditions, particularly hip and knee osteoarthritis, wrist ganglia, tennis elbow, and halus valgus. For PIR, the key focus will be arthroplasty and foot and ankle/shoulder/hand subspecialties. • Monitor ERAS and same-day surgery activity through the ARISE dataset (on a quarterly basis). • Share best practice on developing clinical teams and work with workforce planning to support service delivery for frailty trauma patients. Develop an organisational survey on current trauma provision across Scotland. Benchmark services and identify service needs to assist with strategic trauma and hip fracture strategic planning. • Incorporate analysis of Care Opinion feedback into local and national meetings to understand needs of patients, carers and service users, starting with the Scottish Hip Fracture Audit. This will help to inform and develop trauma and orthopaedic services. • Create and maintain information about key trauma and orthopaedic conditions and after-care on NHS Inform to support patients, carers, service users and the general public.	Promoting and implementing sustainable solutions Improving quality and efficiency Data and evidence Stakeholder engagement and collaboration

Aim and objective		Workstreams: Areas of work and key outcomes	Strategic Priority
SA8	**To enhance the delivery of planned care, by facilitating initiatives designed to improve the management of demand and capacity, promote greater elective activity and address waiting times.**	**8b.3 Board Engagement and Clinical Leadership** • Lead ongoing T&O Peer Review Cycle to ensure that recommendations have been implemented and any ongoing challenges are addressed to improve patient access and clinical care. • Share learning and good practice and developments from Peer reviews across Scotland. • Implement Getting it Right First Time (GIRFT) principles to reduce variation, improve pathways, increase efficiency and effectiveness and achieve cost savings via procurement savings.	Stakeholder engagement and collaboration Improving quality and efficiency
		8b.4 Demonstrating impact through Measurement and analysis • Organise and participate in national events, including the annual Scottish Hip Fracture Audit (SHFA) to help drive improvement across NHS Scotland. • Support the implementation of the national Scan for Safety programme through the Scottish Arthroplasty Project (SAP) and Public Health Scotland (PHS). • Support the Scottish National Audit Programme (SNAP) to monitor outcomes and outliers through National Audits, including the Scottish Hip Fracture Audit (SHFA) and Scottish Arthroplasty Project (SAP). Address any negative outliers through the SNAP process and escalation policy to improve outcomes. • Support ongoing SAP and SHFA research programmes to improve standards of care and clinical outcomes. • Develop Fracture Liaison Service (FLS) Audit to streamline pathways and treatment to prevent future fractures • Provide relevant content and narrative in support of PHS publishing the Annual SHFA and SAP reports. • Support waiting time's performance and the allocation of additional funding opportunities to maximise capacity, improve patient access and improve waiting times.	National reporting and strategic oversight Improving quality and efficiency
		8b.5 Strategic planning • Support Boards to undertake strategic planning to understand future capacity requirements, including through recognised published trajectories (Hip Fractures) and future CfSD funded analytical work on scheduled and unscheduled care.	Improving quality and efficiency Data and evidence

Programme workplans – Planned Care Programme – Ophthalmology			
Aim and objective		**Workstreams: Areas of work and key outcomes**	**Strategic Priority**
SA8	**To enhance the delivery of planned care, by facilitating initiatives designed to improve the management of demand and capacity, promote greater elective activity and address waiting times.**	**8c.1 Supporting Innovation** • Implementation of Once for Scotland Ophthalmology Electronic Patient Record (EPR) • Ensure the Ophthalmology Electronic Patient Record project is on track to deliver expected outcomes. Manage project spend. Hold regular meetings with NES Technology (the delivery partner) and submit regular reports to the Scottish Government. • Manage ongoing project governance of the project via regular Board meetings (usually every 6 weeks). • Support the Medical Device Unit to carry out data mining and migration and upload patient-level data to the EPR. • Deliver the EPR across the West of Scotland by the end of 2025/26. • Work with the Boards in the North of Scotland to commence EPR implementation. Work with East of Scotland Boards to prepare for EPR implementation in the following year. • Work with the UK National Ophthalmology Data Set (NOD) Programme and other partners to deliver high-quality patient-level outcomes to support patient safety and holistic care.	Promoting and implementing sustainable solutions Improving Quality and Efficiency Data and evidence Stakeholder engagement and collaboration
		8c.2 Board Engagement and Clinical Leadership • Lead clinically-led peer reviews in Boards • Monitor adoption of recommendations around best practices and evidence based guidance. • Conduct 8 peer reviews during the year (2025/26). • Work with Boards to ensure clear and efficient hospital eye service (HES) treatment pathways are implemented and maintained, • Work with the Scottish Government AHP chief officer to review orthoptic services across all Boards.	Stakeholder engagement and collaboration Improving quality and efficiency

Aim and objective		Workstreams: Areas of work and key outcomes	Strategic Priority
SA8	**To enhance the delivery of planned care, by facilitating initiatives designed to improve the management of demand and capacity, promote greater elective activity and address waiting times.**	**8c.3 Improving Quality and Efficiency** • Monitor Board cataract activity though use of anonymised surgical data. • Monitor increase in Immediate Sequential Bilateral Cataract Surgery (ISBCS) though use of Public Health Scotland's Discovery Dashboard. • Work with Boards to implement the cataract blueprint, including work around ISBCS and immersion training sub-groups. • Work with Boards to increase New Outpatient and Treatment Time Guarantee activity. • Allocate NTC Capacity for cataract surgery and ensure planned activity levels are successfully achieved. • Focus on Referral Management (FORM) – reduce unwarranted variation and avoidable referrals across 5 electronic ophthalmic pathways. This involves a focus on joint decision making between the optometrist and the patient in line with realistic medicine. • Work with multi-disciplinary colleagues to seek national agreement for 2 additional ophthalmology referral forms. • Hold community optometry educational event to support cataract referrals.	National reporting and strategic oversight Improving quality and efficiency Stakeholder engagement and collaboration Promoting and implementing sustainable solutions
		8c.4 Demonstrating impact through Measurement and analysis • Ensure patient level outcomes available across cataract surgery and long term care (LTC) management to help embed evidence base medicine across eyecare services. • Publish 1 peer reviewed academic paper during the year (2025/26).	Data and evidence
		8c.5 Performance monitoring and capacity allocation • Work with Boards to identify and implement tailored solutions to enable long wait reduction across hospital eye services (HES), including areas identified for improvement as part of the peer review process; • Identify solutions to enable Boards to maximise theatre utilisation, including use of National Treatment Centres (NTC) and Regional Treatment Centres. • Carry out performance monitoring of NTC referral management and treatment activity against agreed targets. • Work with NTC Leads to implement Scan-for-Safety programme and associated benefits across all NTCs.	National reporting and strategic oversight Data and evidence

Programme workplans – Planned Care Programme – Radiology			
Aim and objective		**Workstreams: Areas of work and key outcomes**	**Strategic Priority**
SA8	**To enhance the delivery of planned care, by facilitating initiatives designed to improve the management of demand and capacity, promote greater elective activity and address waiting times.**	**8d.1 Monitor efficiency and productivity across NHS Scotland** • Engage with Boards to identify local opportunities to improve efficiency and productivity through the participation in Scottish Strategic Network for Diagnostics (SSND) groups and workshops to inform opportunities for transformation and redesign • Ensure monthly completion of scorecard data by Boards. • Monitor national capacity utilisation and work with Boards to ensure capacity is maximised.	Improving quality and efficiency Stakeholder engagement and collaboration
		8d.2 Develop specialist training workforce • Work with the NHSS Academy's National Ultrasound Training Programme (NUTP) to monitor activity of the expanded training programme and escalate any issues if necessary.	Supporting workforce
		8d.3 Performance monitoring • Conduct monitoring of Board activity against Scottish Government investment plans for 2025-26. Work with Boards to resolve any issues, and escalate issues if necessary. • Work with Boards to identify opportunities to reduce waiting times.	National reporting and strategic oversight
		8d.4 Sustainability planning • Provide advice to the Scottish Government to inform the Diagnostics Transformation Plan. • Participate in Scottish Strategic Network for Diagnostics (SSND) groups and workshops to inform opportunities for transformation and redesign.	Promoting and implementing sustainable solutions Stakeholder engagement and collaboration

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