Annual Delivery Plan 2026/27

NHS Board: The State Hospital

Contents

1. INTRODUCTION

The State Hospital (TSH) has developed its Medium Term Plan 2025/28 (MTP) which provides detail of the high-level priority actions for delivery. This Annual Delivery Plan 2026/27 (ADP 2026/27) has been developed to reflect the second year's delivery of the key priorities in the MTP. It both reflects the local needs and priorities of the State Hospital, and the Scottish Government and NHS Scotland's national priorities detailed in the Service Renewal Framework 2025/35[1], Scotland's Population Health Framework 2025/35[2] as they relate to forensic mental healthcare. This delivery plan sets out anticipated areas of risk, service change and how the long-term sustainability of services can be supported. It also highlights any national or local performance measures to evidence the anticipated impact that plans will have on service delivery.

NHS Boards are required to ensure that their delivery plans are aligned with the implementation of sub-national planning directions outlined in National Planning DL (2025) 25[3] to reflect collaboration across Boards for population and service planning. The State Hospital has also considered national strategies and service reform agenda in the development of this plan.

2. ROLE AND FUNCTION OF THE STATE HOSPITAL

The State Hospital is the national high-secure forensic mental health care provider for Scotland and Northern Ireland. The organisation provides specialist individualised assessment, treatment and care in conditions of high security for patients with major mental disorders and intellectual disabilities. The patients, because of their serious violent or criminal behaviours cannot be cared for in any other setting. Working closely with partners in the Forensic Network for Scotland, the organisation is recognised for high standards of care, treatment, research and education.

The State Hospital leads on the delivery of exceptional and innovative care, treatment and risk management to support patients in their recovery journey and improve their mental health and reduce risk. The State Hospital aims to support patients to actively participate in their treatment, experience improved overall health and well-being whilst ensuring public safety within a high-secure environment.

The provision of the Mental Health (Care and Treatment) (Scotland) Act 2003 allows for detention in hospital and compulsory medical treatment on the grounds of mental disorder. Rigorous safeguards apply which include the right to independent advocacy, an independent mental health tribunal for Scotland and the independent Mental Welfare Commission. The Scottish Government has committed to consider changes to practice and legislation to improve or simplify the delivery of forensic mental health services.

The State Hospital is based within a single site in Carstairs, South Lanarkshire. The site is in a rural location. The hospital has 120 beds available for male patients, 108 beds for patients with Major Mental Illness and 12 beds for patients with Intellectual Disabilities. In 2025 the State Hospital opened an interim high-secure inpatient service for women, engaged with stakeholders on the development of an outreach service and commenced planning for the development of a central woman's service 'treatment hub' for the coming years.

[1] Health and Social Care Service Renewal Framework - gov.scot
[2] Scotland's Population Health Framework - gov.scot
[3] DL (2025) 25 Sub National Planning First Tier

An extensive consultation exercise was carried out in 2024/25 with staff, stakeholders and patients. This activity supported the development of the Medium-Term Plan 2025/28 and the revised vision, mission and critical success factors that are required to deliver excellent forensic mental health care and treatment. The following was agreed:

2.1 **The vision** is to be a leader in delivering relationally informed, person-centred, high-secure mental health care that enables recovery whilst ensuring the safety and wellbeing of staff, patients, and the public.

2.2 **The mission** of the hospital is to assess and treat major mental disorders in a secure and person-centred care environment that manages risks, supports recovery, rehabilitation and onward progression.

2.3 **Critical success factors** are the central things the State Hospital does to achieve its mission and focus on:

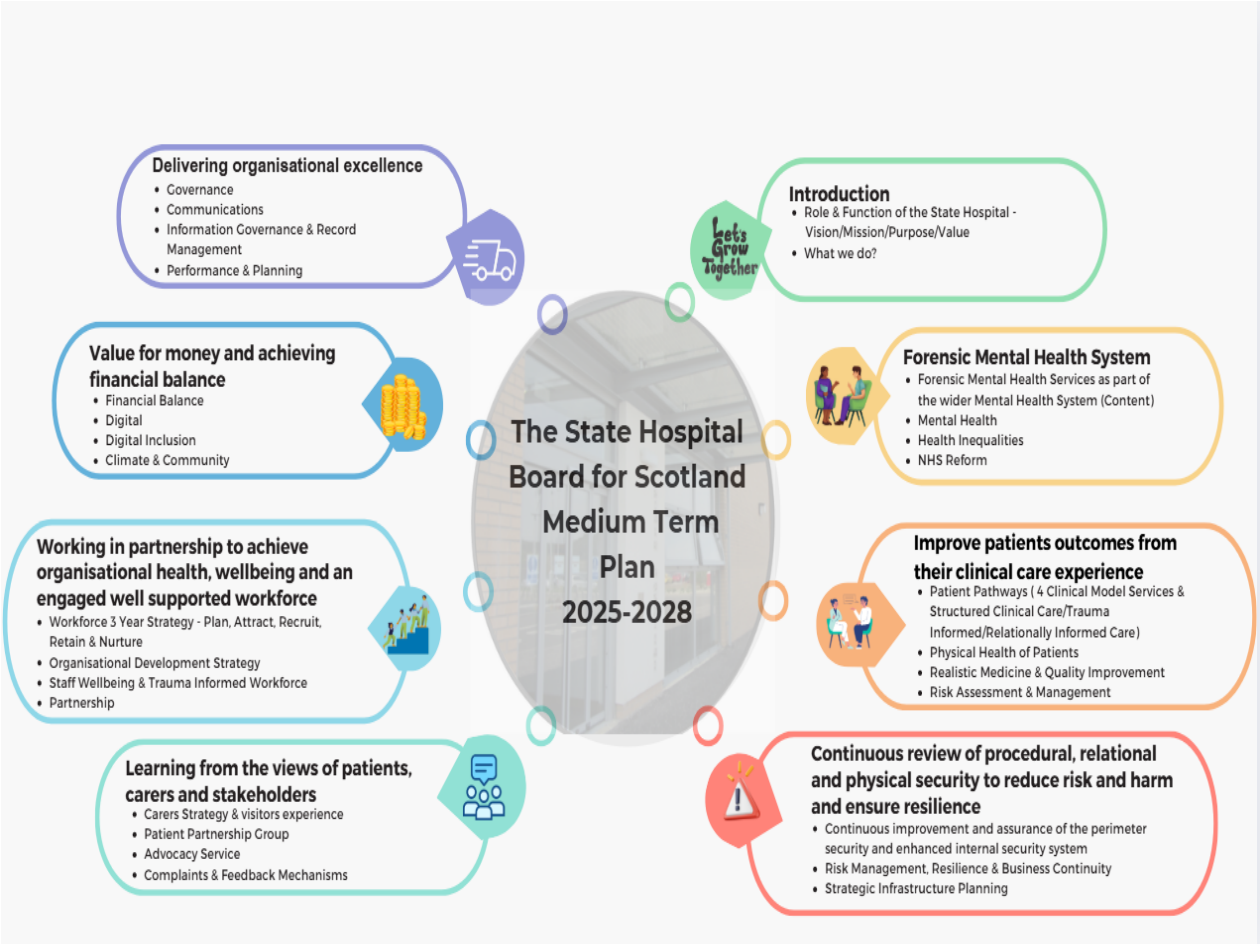
- Improving patient outcomes from their clinical care experience.
- Continuous review of procedural, relational and physical security to reduce risk and harm and ensure resilience.
- Learning from the views of patients, carers, and stakeholders.
- Working in partnership to achieve organisational health well-being and an engaged well supported workforce.
- Value for money and achieving financial balance.

The values of the State Hospital align with NHSScotland, they are:

- Care and compassion.
- Dignity and respect.
- Openness, honesty, and responsibility.
- Quality and teamwork.

3. MEDIUM TERM PLAN 2025/28

The Medium-Term Plan 2025/28 (MTP) structure is presented below and was developed through extensive engagement. The Annual Delivery Plan 2026/27 (ADP 2026/27) has been developed to reflect the second year's delivery of the key priorities in the MTP. It builds on delivery in 2025/26 which saw some notable successes in terms of the completion of the security upgrade project, the establishment of the high-secure woman's interim service, completion of the Care programme approach (CPA) project and the development of the Organisational Development Strategy and the Workforce Plan 2025–28. Three-year plans have been developed and Year 1 (2025/26) reviewed as part of the MTP. All directorates discussed and reflected on the vision and mission of the State Hospital, which has been revised following the consultation. The critical success factors which are central to the achievement of the State Hospital's vision and mission have been used as pillars to structure the MTP. Through the engagement process, and over the delivery of this MTP, the focus has been on delivering effective care and treatment whilst focusing on the balance and calibration of organisational performance and health.



4. MENTAL HEALTH

The Mental Health and Wellbeing Strategy[4], launched in 2023, outlines Scotland's legislative framework and priorities for mental health. The Scottish Government will create an updated Mental Health Delivery and Workforce Plan in 2026, merging current action and delivery plans from 2023-25. The refreshed plan will focus on strategic commitments that have the greatest impact on people's lives within broader health and social care reforms. [5]

4.1. NHS SCOTLAND REFORM

The Scottish Government published the Service Renewal Framework (SRF) 2025/35 in June 2025 to set out its strategic vision for health and social care reform over the next 10 years. The core principles are focused on prevention, person-centred care, community-based care, population level service and delivery planning and digital innovation. The SRF also compliments the Population Health Framework (PHF) 2025/35, which focuses on preventing illness, tackling social determinants of health and reducing health inequalities. The reform agenda outlines that the Scottish Government vision is to enable people to live longer healthier and more fulfilling lives. These frameworks are intended to steer short, medium and long term planning for NHS Boards, with the expectation that NHS Boards ensure that their Delivery Plans are aligned with the national priorities. The State Hospital aligns its planning and priorities to these frameworks to ensure that delivery is consistent with the national direction set for NHS Scotland. This plan demonstrates how the State Hospital will contribute to Scotland's wider transformation.

[4] Mental health and wellbeing strategy - gov.scot
[5] Mental Health and Wellbeing Strategy - Interim Report

4.2. CONTRIBUTION TO SERVICE RENEWAL PRIORITIES

4.2.1 Modernising and redesigning services

The State Hospital will continue to embed service improvement and redesign consistent with the national drive for renewal. This includes strengthening clinical pathways, enhancing digital capabilities within secure mental health settings, and contributing to nationally coordinated planning for specialist services, including working collaboratively with the Forensic Network for Scotland.

4.2.2 Workforce sustainability and capability

Renewal requires a resilient and well-supported workforce. Through ongoing workforce planning aligned to national guidance, the State Hospital will build capacity, develop specialist skills, and contribute to national efforts to ensure long-term service sustainability.

4.2.3 Supporting system transformation

As part of Scotland's specialist services, the hospital will actively engage in national collaboration to support transformation across forensic mental health provision and interface services, aligning with the government's call to place modern, efficient national delivery at the centre of renewal. The State Hospital has well-established partnerships including the Scottish Prison Service and criminal justices' services.

4.2.4 Sub-national Planning

The Scottish Government issued DL(2025)25 in November 2025, setting out a refreshed statutory approach to sub-national planning across NHS Scotland, aligning with the principles of service reform. The direction introduces two new collaborative sub-national structures. Each new area established a Sub-National Planning and Delivery Committee (SPDC) to progress planning and collaboration:

1. Scotland East: Borders, Fife, Grampian, Lothian, Orkney, Shetland and Tayside
2. Scotland West: Ayrshire & Arran, Dumfries & Galloway, Forth Valley, Greater Glasgow & Clyde, Highland, Lanarkshire and Western Isles

While individual NHS Boards remain responsible and accountable for all statutory functions, DL(2025)25 outlines an expectation that they align planning resources and expertise to support the new arrangements and ensure coherence with community health services and nationally commissioned programmes. NHS Boards are expected to plan above organisational interests and beyond traditional boundaries aligning workforce planning with population-level health priorities.

The sub-national planning structures will focus on four shared priorities, including Digital Front Door (MyCare.scot), orthopaedic treatment time guarantee delivery (planned care waiting times), emergency healthcare services, and a Once for Scotland approach to business systems. Both sub-national groups are required to produce consolidated financial planning for 2026/27 and provide quarterly performance reporting to Ministers commencing Quarter 1 of 2026/27.

The State Hospital is represented on both sub-national groups and will progress alignment of the forensic system with wider mental health system reform, building on previous work with Forensic Network and the Healthcare and Custody Oversight Group. The State Hospital is an active cross-boundary collaborator and connects with a range of partners in health, criminal justice, policy and resilience. The State Hospital will continue active collaboration with the Healthcare in Custody Network to ensure alignment of pathways, shared standards, and national assurance across forensic and custodial health systems.

The State Hospital Board actions in 2026/27 to address health and care system reform

No	Planning Commitment	The State Hospital Board action	2026/27 Delivery timescale
1.1	The State Hospital will engage with the emerging sub-national planning structure	The State Hospital will engage with the Sub-national Planning Committees with membership of both East and West committees	2026/28
1.2	The State Hospital will align delivery plans with national priorities	The State Hospital will embed service improvement and redesign to ensure that transformation and sustainability are built into planning processes.	2026/28
1.3	Public service reform and cross system collaboration.	The State Hospital will actively engage in national collaboration to support transformation across forensic mental health provision and interface services	2026/28
1.4	Public service reform and cross system collaboration	The State Hospital will continue to collaborate with the Healthcare in Custody Network to ensure alignment of pathways, shared standards, and national assurance.	2026/28

5. HEALTH INEQUALITIES

There are many, diverse and interacting determinants of mental health and wellbeing, with these being driven by structural factors such as unequal distribution of income, power and wealth, global, national and local economic and political forces and priorities, and societal attitudes. Within the State Hospital individual health inequalities and health behaviours are addressed later in this plan through the supporting healthy choices and physical health projects. The more structural elements of population health and health inequalities are addressed in this section with a focus on improving health by supporting a circular economy via The State Hospital Anchors Strategy.

5.2 THE STATE HOSPITAL ANCHORS STRATEGY 2026/28

The Scottish Government commissioned all NHS Boards to produce an Anchors Strategic Plan in 2023 to demonstrate how Boards will take action to contribute to Community Wealth Building. The State Hospital Audit and Risk Committee approved a refreshed Anchors Strategy 2026/28. This strategy continues to focus on procurement, employment and sustainable use of land and assets. It has an associated action plan that is monitored and reported through the Audit and Risk Committee and onwards to the Scottish Government. The anchors' themes include:

- Progressive Procurement - The State Hospital can make direct investment into the local region through procurement practices, which in turn can create new employment locally.
- Employment - The State Hospital is a large local employer within an area of deprivation. Development of recruitment practices to encourage community members to consider employment in the State Hospital is a key area of development.
- Sustainable use of land and property - consideration given to the use of land and sustainable practices.

The State Hospital Board actions in 2026/27 to address health inequalities

No	Planning Commitment	The State Hospital Board action	2026/27 Delivery timescale
3.1	Implement Anchors Strategy 2026/28.	Implement and explore ways to enhance the Anchors Strategy Action Plan with focus on: • Progressive procurement. • Employment. • Land and assets.	Q2 & Q4

Risks
Risks emerging from the above actions will be reviewed regularly by the Anchors Strategy Group and if required will be added to either Local Risk Registers or the Corporate Risk Register to manage risks and mitigate potential impacts on current services.

6. IMPROVED PATIENT OUTCOMES

6.1 WOMEN'S HIGH-SECURE SERVICE

6.1.1 Phase 1 – Interim Women's Service

The State Hospital established an interim high-secure service for woman in July 2025. The woman's high-secure service is segregated from the male service to protect patients and support recovery. This is in line with how similar services are delivered in England. Individual risk assessments are used to provide as much opportunity for access to the wider environment in the hospital as possible, however it should be noted that access for women to wider off ward activities is significantly limited in comparison to male patients. The woman's high-secure service has segregated arrangements to provide:

- Access to Activity.
- Grounds/Outdoor access.
- Dedicated therapeutic and recreational physical environment.
- Activities Centre.
- Access to Healthcare Services.

There is a risk that women are unlikely to move beyond 'safety and stabilisation' in their clinical treatment journey if they are within a mixed-gender environment. High-secure women's service delivery is now embedded in the State Hospital with patient's referral process through agreed routes and assessment and treatment being delivered within the service.

During the initial implementation of the service, the State Hospital conducted a comprehensive review of the resources necessary to deliver care and maintain safe service standards. Based on the initial operating experience, a revised staffing revenue profile has been submitted to the Scottish Government.

6.1.2 Phase 2 – Development of comprehensive Woman's Service Hub

Phase 2 of this service will progress through a strategic assessment process, developed in partnership with NHS Assure, to establish a comprehensive women's service hub that delivers assessment, treatment, and rehabilitation for female patients in a trauma-informed and recovery-oriented manner. This phase will be guided by the findings of a feasibility study conducted in 2025, which will underpin the development of the Strategic Assessment. The Strategic Assessment will be submitted to Scottish Governments Capital Investment Group for review, and the projects' next steps will depend on feedback from this group. Details such as budget allocation, timelines, and milestones will be established after the assessment is complete. Throughout, the project will comply with all relevant statutory standards and regulatory requirements.

The indicative timeline is:

- Development of Strategic Assessment – Q2 2026

6.2 PATIENT PATHWAYS

6.2.1 Clinical Model

A new clinical model was introduced in July 2023 to provide patients with a recovery pathway through the hospital and address issues raised by staff around feelings of safety, confidence and practice. The new clinical model saw the establishment of four new services: Admissions and Assessment, Treatment and Recovery, Transitions, and Intellectual Disability. Service Leadership Teams were established for each service. Clinical Model Guidance was developed to guide and support implementation with detailed sections on the four new services. Referral between services is now expected with all major mental illness patients being admitted into Admission and Assessment wards, then progressing, if required, through the Treatment and Recovery and onwards to Transitions service. Patients with an Intellectual Disability are admitted directly to the Intellectual Disability service.

Each service has developed a three-year implementation plan to outline what they seek to achieve. In 2026/27 services will move to Admissions and Recovery, Learning Disabilities, Transitions and Women's services. The clinical guidance document will be reviewed as part of the maturation of each service. Any updates to the clinical guidance will be received through the Clinical Governance route.

6.2.2 Patient needs and resource review

The State Hospital will continue to prioritise resourcing and leadership development as outlined in the Organisational Development Strategy, utilising the McKinsey Seven S model. A comprehensive review of the funded establishment was conducted to ensure that available resources and the skill mix are aligned with patient needs and the delivery of safe, effective care. This renewed focus on optimising resource deployment to support patient safety, and requirements will aid in the elimination of Daytime Confinement (DTC).

6.2.3 Structured Clinical Care (SCC)

Structured Clinical Care is a whole-system framework that promotes relational working and the use of psychological formulation to enhance the care and treatment of patients, particularly those with complex relational needs. It is intended to be embedded, involving all staff who work directly with patients or support patient care. To support implementation, The State Hospital developed an e-learning module, 'Essential Relational Aspects of Care', which was launched on LearnPro in September 2025. All staff are encouraged to complete this module to build shared understanding and consistent practice.

The State Hospital will complete a needs and gap analysis in relation to SCC. This will help direct the next steps for potential implementation.

6.2.4 Risk Assessment and Trauma-informed Care

Psychological therapies including trauma-informed approaches that are evidence-based and reflect best practice are key for effective and safe care delivery. The State Hospital will continue to implement trauma-informed training. A core aspect of care planning and delivery is the assessment and treatment of risk to ensure appropriate management. Shared objectives which cut across all services on these areas is required to be developed. An information sharing protocol with partner agencies including these areas continues to be a priority for the State Hospital.

6.2.5 Least Restrictive Practices

National guidance From Observation to Intervention: A proactive, responsive and personalised care and treatment framework for acutely unwell people in mental health care' was published by the Scottish Government in 2018. The overarching aim of the policy is to replace traditional "enhanced observation" practices in mental health inpatient care with a more proactive, personalised, therapeutic and human-rights-based model of care. The guidance has several guiding principles to support a multidisciplinary approach to person-centred, least restrictive care that is delivered by a trauma-informed workforce and involves the patient and their families wherever possible.

This guidance formed the basis of the State Hospital's new Clinical Care Policy which was implemented on 1 May 2024. In 2025/26 the first annual audit of the Clinical Care Policy in the hospital, highlighted areas for practice improvement to ensure that the local policy did result in personalised responsive, multidisciplinary therapeutic engagement. The State Hospital will ensure that continuous improvement approaches are used to support embedding the policy with an audit being repeated in 2026/27. Oversight and monitored by the Patient Safety Group with reporting to the Clinical Governance group at six-monthly intervals.

The State Hospital will develop and monitor key performance indicators for restrictive practices, including seclusion and use of soft restraint kits, aligned to Mental Welfare Commission definitions. Quarterly assurance reporting will be provided through the Patient Safety Group.

6.2.6 Developing person-centred care through the revised Care programme approach (CPA)

All patients who are admitted to the State Hospital will have their care and treatment planned using the Care programme approach (CPA). Guidance for the application of CPA for restricted patients is contained in the Scottish Government CEL 13 (2007) and the Memorandum of Procedure on restricted patients CEL 20 (2010). In recent years the CPA process has been reviewed to be more patient centred, embed parity of input from the multidisciplinary team and be accessible through the electronic patient record (RIO) system. This new electronic system was tested over 2025/26 and a Peer Review Panel established to have oversight and provide assurance of the new CPA process. The Peer Review Panel will monitor the CPA process in 2026/27 to ensure it delivers as expected. A staff engagement process to collate information and learning about teams' experiences of using the new documentation and processes at a 'one year on' point. This will be scheduled for September 2026.

6.2.7 Realistic Medicine (RM)

Realistic Medicine (RM) is the Scottish Government's approach to delivering Value Based Health and Care (VBH&C) in Scotland. VBH&C is defined as "the delivery of better outcomes and experiences for the people we care for through the equitable, sustainable, appropriate and transparent use of available resources".

The State Hospital develops a Realistic Medicine Action Plan annually to outline the key projects associated with the approach. The State Hospital will continue to link with national networks to share practice. Priorities in 2026/27 will be to continue to champion RM, and VBH&C, embedding Shared Decision Making and championing the use and adaptation of BRAN questions (benefits, risks, alternatives and no action) within a secure setting. Team Based Quality Reviews (TBQR) are a structured approach to continuous quality improvement, enabling multidisciplinary teams to reflect on practice and identify actions for enhancement. This collaborative process strengthens team accountability, promotes shared learning, and contributes to safe, person-centred care. TBQR panels will continue to develop across the organisation, reinforcing the State Hospital's commitment to continuous improvement and collaborative learning. Each project in the RM action

plan has also been aligned with the relevant commitment from the Scottish Government's VBH&C action plan.

6.2.8 Physical Health of patients

Individuals living with severe mental health conditions frequently experience higher incidences of physical ill-health, including cardiovascular disease, respiratory disease, diabetes, obesity, digestive diseases, and cancer. The presence of mental health difficulties can exacerbate these physical health problems, further impacting overall wellbeing.

For those with severe and enduring mental illness, life expectancy is often reduced by between 15 and 20 years. A significant proportion of this reduction is attributed to physical ill-health, much of which is preventable.

The State Hospital has developed a new Physical Health Strategy (2026–2029) to address the significantly poorer physical health outcomes experienced by individuals with severe mental illness. The strategy sets out a commitment to improving physical health outcomes through evidence-based practice, prevention, and integrated whole-system approaches. The State Hospital will implement the Physical Health Strategy over 2026/27, aligning programme delivery to Key Performance Indicators. Progress will be reported through the clinical governance and performance frameworks.

The State Hospital prioritises health improvement and disease prevention, focusing on obesity and cardiovascular risk. Physical activity is emphasised as vital to patient care, and teams are increasing activity options for patients. Progress is tracked by the Clinical Quality Department and reported to clinical teams and through the clinical governance route.

To help enhance practice, the monitoring and reporting of weight management using Key Performance Indicators was reviewed during 2025/26. As a result, a more realistic and motivating target has been adopted to better address weight gain and support weight management strategies.

The State Hospital has a dedicated group which focuses predominately on improving physical health outcomes and aims to create an environment that best supports patients to engage in behaviours that support their physical health and healthy weight. The State Hospital will implement the Physical Health Strategy over 2026/27, aligning programme delivery to Key Performance Indicators. Progress will be reported through the clinical governance and performance frameworks

Priorities to progress physical health of patients include:

1. Strengthen multi-pronged prevention efforts, particularly limiting weight gain via medication review, early metformin co-prescribing, and enhanced lifestyle interventions.
2. Increase screening and vaccination engagement using targeted health education and patient-centred conversations.
3. Enhance physical activity uptake through personalised programmes and improved encouragement from Clinical Teams, Service Leadership Teams, and the Skye Centre.
4. Improve digital monitoring systems (RiO, Tableau) to support real-time tracking of physical health metrics.
5. Embed women's health pathways including cervical screening, breast screening, maternity support, and nutrition guidance.
6. Expand staff, patient, and carer education to ensure consistent physical health messaging across all interactions.
7. Improve unscheduled care pathways, including the new out-of-hours protocol incorporating the FNC.
8. Monitor progress using qualitative and quantitative measures, including corporate KPIs, patient feedback, and What Matters to Me events.
9. Ensure governance oversight through the Physical Health Steering Group, Clinical Governance structures, and clear accountability for all staff.

6.2.9 Unscheduled Care

Patients in the State Hospital at times require care from other NHS Board's, predominately, but not exclusively from NHS Lanarkshire. In 2024/25 the State Hospital reviewed its arrangement for unscheduled care outings of patients to identify areas for improvement. The review identified areas to further test which include use of the Flow Navigation Centre (FNC). The purpose of a Flow Navigation Centre (FNC) in healthcare, particularly within NHS Scotland, is to provide urgent, non-life-threatening care by directing patients to the right place at the right time, often bypassing Emergency Departments (ED).The FNC would provide a single point of contact for emergency outings with the ability to time ambulance arrivals at the State Hospital with the receiving hospital appointment to lessen time waiting for the State Hospital patients and staff at external venues. The recommendations from the unscheduled care group, which are in the process of being implemented in 2025/26 will continue to be taken forward in 2026/27 and improvements, where found, adopted.

6.2.10 Evidence-based care and treatment

The State Hospital launched its Research Strategy 2025-2029 in August 2025 and has an active Research Committee who support and review clinical research. The action plan for the strategy will continue to be developed and implemented with a strategic focus to patient involvement in all stages of the research process.

The State Hospital Board actions in 2026/27 to improve patient outcomes

No	Planning Commitment	The State Hospital Board actions	2026/27 Delivery timescale
4.1	Woman's service Phase 1	Embed principles of trauma-informed care If resource available, continue to develop outreach service and build relationships across woman's pathway	2026/27
4.2	Woman's service Phase 2	Strategic Assessment – The State Hospital will submit the SA for consideration by the SG Capitol investment group, as per timelines outlined in DL 14 (2025)	Q2
4.3	Continue to embed the clinical model.	Each service will review the Clinical guidance and update as required. Each service will review its 3 year plan at end Y2, Y3 and take part in forward planning as appropriate. Hub based leadership approaches will be implemented over 2026/27.	2026/27 Q3 2026/27
4.4	Review of resource to match patient needs	Continue to review the available resources and skill mix to ensure alignment with patient needs and the delivery of safe, effective care	2026/27

No	Planning Commitment	The State Hospital Board actions	2026/27 Delivery timescale
4.5	The Intellectual Disability service will develop its care approach using positive behaviour support planning.	Continue to deliver training to develop staff skills and capabilities on Positive Behaviour Support Planning.	2026/27
4.6	Review of Risk Assessment Process.	The State Hospital will improve the quality of risk assessments including. • identify a Police Scotland SPOC for provision of information, • collaborate on the introduction of MAPPS. • implement a peer review process for completed assessments. • improve use of risk assessment information to inform decision making	Q4
4.7	Review of Psychological Therapies Group Work and Patients Needs	Review the needs of the patient group and the current suite of psychological group work interventions to assess if they continue to meet the needs of the State Hospital patients	Q2
4.8	Outcomes focus.	Develop recommendations for a suite of outcomes for patients	Q2
4.9	The State Hospital will review new frameworks of care e.g. Structured Clinical Care/ Relationally Informed Care and develop most appropriate pathway.	Complete a needs and gap analysis in relation to SCC to direct next steps	Q2
4.10	Pharmacy	Advance the clinical and educational role of pharmacy team. Implement the Protocol for Prevention and Management of Obesity	Q1 & Q4 2026/27
4.11	Clinical Care Policy	The State Hospital will ensure that continuous improvement approaches are used to support embedding the policy with an audit being repeated in the financial year.	2026/27
4.12	Least Restrictive Practices	The State Hospital will develop and monitor key performance indicators for restrictive practices, including seclusion and use of soft restraint kit, aligned to Mental Welfare Commission definitions.	Q2 & Q4
4.13	CPA process	Staff engagement process to collate learning and feedback from Year 1 implementation of new process.	Q2

No	Planning Commitment	The State Hospital Board actions	2026/27 Delivery timescale
4.14	Development of evidence-based care and treatment.	Implement approach to expand the range of patient involvement within research process and inform a co-productive approach	Q2 & Q4
4.15	Unscheduled care.	Monitor and report on effectiveness of Flow Navigation Centre.	Q2
4.16	Physical Health Strategy - Reduce weight gain.	Implement prevention efforts, particularly limiting weight gain via medication review, early metformin co-prescribing, and enhanced lifestyle interventions for limiting patient weight gain and support weight management strategies	2026/27
4.17	Physical Health Strategy – screening and vaccination	Promote screening and vaccination uptake	Q2 & Q4
4.18	Physical Health Strategy Increase uptake of activity for patients.	Enhance physical activity uptake through personalised programmes and support from Clinical Teams.	2026/27
4.19	Progress RM and VBH&C principles.	Implement Realistic Medicine (RM) Action Plan 2026/27 and update the Scottish Government 6 monthly on progress. Submit RM Action Plan 2027/28 to the Scottish Government.	Q2 & Q4 Q4
4.20	Progress RM and VBH&C principles.	Continue to promote Shared Decision Making by increasing the uptake of the learning module and increase the use of BRAN questions through nursing care plans	2026/27
4.21	Build capacity and champion quality improvement (QI)	Establish Team Based Quality Review process across each service (TBQR): Review process. Deliver and support QI training	Q2 Q4 Q3 & Q4
4.22	TSH3030 – Organisational approach to QI.	• Plan and implement a cycle of TSH3030. • Support sustainability of projects started through TSH3030.	Q1 Q2- Q4
4.23	Champion quality assurance and improvement.	Monitor and implement actions from the Clinical Quality Strategy Action Plan.	2026/27

Risks

Risks emerging from the above actions will be reviewed regularly. If required, risks will be added to either Local Risk Registers or escalation to the Corporate Risk Register to manage risks and mitigate potential impacts. Specific Directorate Risks and Issues will be escalated and reported through the quarterly Directorate Performance Meetings.

Risks emerging from the development of a high-secure woman's service is a significant addition to The State Hospital function. As a complex project it has a Project Management and Governance systems in place, including risk and issues registers. The State Hospital will report significant risk to the Scottish Government Mental Health Policy Team through the sponsorship arrangements.

7. CONTINUOUS REVIEW OF PROCEDURAL, RELATIONAL AND PHYSICAL SECURITY TO REDUCE RISK AND HARM AND ENSURE RESILIENCE

7.1 Security

The purpose of security in forensic mental healthcare is to provide a safe and secure environment for patients, staff, volunteers and visitors which facilitates appropriate treatment for patients and protects the wider public. This involves maintaining a secure environment where mental health care can be delivered, mitigating risks, preventing violence or self-harm and responding effectively to incidents. There are unique challenges posed within a high-secure setting and security measures require to be both effective and respectful of people's dignity and mental health needs.

All patients in the State Hospital have been assessed as requiring high-secure care.

The specific features of high security are categorised into three domains: physical, procedural, and relational. These are interdependent and essential for the delivery of safe and secure care:

1) Physical security - A multi-layered approach, including fences, gates, locks, surveillance (CCTV), security personnel, and access control systems to restrict, detect, and respond to threats.
2) Procedural security - The range of policies and procedures that control access/egress, movement across the hospital site, patient communication, patient possessions, and visits, etc.
3) Relational security - The ability of staff to develop therapeutic relationships with patients, leading to trust and engagement between staff and patients.

In addition to the measures in place across the site, all patients are subject to a range of security measures tailored to their clinical and risk evaluation needs and the stage of their treatment journey.

The State Hospital completed the Perimeter Security and Enhanced Internal Security Systems initiative in 2025. The State Hospital has developed a security framework through standard procedures, staff training, and quality assurance, aligning with standards from high-secure UK hospitals and Scottish legislation. The framework will include core Security Quality Indicators (SQIs) to measure physical, procedural, and relational security. Policies will be refined to ensure trauma-informed interventions, proactive threat assessments, and tailored security planning.

7.2 Risk Management System

The State Hospital aims to reduce risks for staff and patients while promoting a positive risk culture. In 2025/26, the State Hospital transitioned to a new risk management platform that records incidents and risks. InPhase will launch in March/April 2026, supported by staff training. The priority in 2026/27 is to embed and monitor the new system, addressing any issues that arise.

7.3 Health and Safety, Resilience

The State Hospital follows a structured method for overseeing, evaluating, and updating its health and safety processes, procedures, and practices. In 2025/26, a system review was completed. Identified areas for improvement will guide enhancements in 2026/27, adopting changes and upgrades. The State Hospital also has a focused approach to resilience, with a multi-faceted suite of plans that align to recognised risks that can affect the hospital during day-to-day operations. These plans are reviewed regularly and updated accordingly.

7.4 Strategic Infrastructure Planning

The Scottish Government have introduced a new approach to strategic infrastructure planning and investment across NHS Scotland. Each NHS Board were required to submit a Programme Initial Agreement which sets out a deliverable whole-system service and infrastructure change plan for the next 20-30 years. The first phase of this new approach to planning was the development and submission of a maintenance only business continuity plan (BCP) based on the risk assessment of the boards existing infrastructure.

The State Hospital has carried out a risk- based assessment of essential maintenance, which is prioritised as part of the completed BCP. Each risk has been considered through their probability and impact in the key areas of Business/Financial, Staff/Health and Safety/Injury, Clinical/Service and Reputational/Adverse Publicity/Complaint and Claims.

The work incorporated in the State Hospital's BCP investment programme will support the work identified within the existing Capital Allocation. The BCP investment will allow the hospital to maintain a good standard of accommodation to support the clinical demand.

The Capital Group at the State Hospital oversees the management and distribution of the capital allocation. For 2026/27, the allocation is set to fund projects such as enhancing security in patient rooms, upgrading systems and lighting, and refurbishing building, digital inclusion and digital platforms.

The State Hospital Board actions for 2026/27 to enhance security, reduce risk and harm

No	Planning Commitment	The State Hospital Board action	2026/27 Delivery timescale
5.1	Security.	Audit of the State Hospital security processes, procedures and practice against new security standards. Implementation of audit action plan	Q2-Q4
5.2	Security Quality Assurance Framework	The State Hospital will define, adopt, and report against a core set of Security Quality Indicators (SQIs) to provide measurable assurance of physical, procedural, and relational security following completion of the security upgrade programme.	Q2
5.3	Risk Management.	Embed and monitor the new incident reporting system, addressing any issues that arise.	Q2-Q4
5.4	Health and Safety	Confirm and agree refreshed Health and Safety Training Plan Implement revised Health and Safety Training Plan Complete transition to new Health and Safety platform	Q2 Q4 Q4

No	Planning Commitment	The State Hospital Board actions	2026/27 Delivery timescale
5.5	Strategic Infrastructure Planning.	Business Continuity Planning/ Programme Initiation Assessment - assess current situation – prepare submission for November 2026 to set out planning priorities for 2027/28 Deliver Capital budget commitments for 2026/27 (digital inclusion, vehicles, and digital platforms)	Q3-Q4 Q4

Risks
Risks emerging from the above actions will be reviewed regularly through the quarterly Directorate Performance Meetings.

8. LEARNING FROM THE VIEWS OF THE STATE HOSPITAL'S PATIENTS, CARERS AND STAKEHOLDERS

Hearing from and learning about the views of the State Hospital's patients, carers and stakeholders is an important aspect of designing and delivering care and treatment for the hospital. Engagement and feedback help to develop an awareness and understanding of the impact of care and treatment on patients, their carers, friends and family members. Understanding the views and experiences of patients and carers also enables the State Hospital to identify areas for improvement.

A detailed overview of the activities and processes in place across the State Hospital to support effective engagement with patients, carers and stakeholders can be found in the MTP. The State Hospital Board regularly receive updates on patients and carers experiences through patient / carer agenda item at the Board Meetings and through regular attendance at the Patient Partnership Group meeting

Progress has been made in 2025/26 with notable engagement from the PPG in the TSH3030 QI sprint and their ongoing commitment to improving communication across the patient group. The State Hospital also supported the work of the Forensic Network Improving Carer Experience Group, the State Hospital worked collaboratively with NHS Tayside's Rohallion Medium Secure Unit to contribute to revision of the 'Carer support and involvement in secure mental health services - A Toolkit'.

8.1 Carer Strategy

The State Hospital has developed a Carer Strategy 2025-2028 to meet the specific needs of carers involved in a high-secure forensic setting. It is essential to recognise the unique experiences of carers navigating the judicial and forensic health settings, to understand their needs and respond appropriately.

Following the Visitor Experience audit and subsequent engagement with carers conducted in 2024, four priority areas were identified, in 2026/27 the continued focus will be on the following:

1) The Triangle of Care – Audit completed in 2025/26, priority for 2026 /27 is to implement actions form the self-assessment.
2) Carer communication and sharing of information – Information for carers has been updated on the internet, in 2026/27 the Carer Information Pack will be updated to include information specific to each clinical area including the new woman's service.

3) Enhancing the experience for carers during visits. Collaboration with patients and carers to improve visiting will remain ongoing, with a particular emphasis on child visitors—a focus that began in 2025/26 and will continue through 2026/27. Additionally, the State Hospital will maintain its practice of offering visitors a post-visit check-in and provide onward signposting to other support services.
4) Carer Pathway – Link carers with the wider Forensic Network through the Forensic Network Improving Carer Experience Group.

The State Hospital Board actions for 2026/27 to support learning from the views of patients and carers

No	Planning Commitment	The State Hospital Board action	2026/27 Delivery timescale
6.1	Implementation of the Carers Strategy.	Triangle of care - implement the actions from the self-assessment	2026/27
6.2	Communication with Carers.	Review carer information packs and include the child friendly literature in relation to the State Hospital to support child visits. Establish carer's support group.	2026/27
6.3	Stakeholder awareness and skills development.	Carer and Workforce Training and Development. Developing relationships with Partner Agencies.	2026/27

Risks
Risks emerging from the above actions will be reviewed regularly through the quarterly Directorate Performance Meetings.

9. WORKING IN PARTNERSHIP TO PRIORITISE ORGANISATIONAL HEALTH, SUPPORT STAFF WELLBEING AND DEVELOP AN ENGAGED SUSTAINABLE WORKFORCE

9.1 Workforce

The State Hospital has developed its Workforce Plan 2025-2028 aligned with service planning priorities of the State Hospital's Medium Term Plan and national priorities. The Workforce Plan describes how the State Hospital will shape, support and implement change in its workforce. The Scottish Government will create an updated Mental Health Delivery and Workforce Plan in 2026 to ensure alignment between the delivery and workforce plans, and with cross portfolio work. The State Hospital Workforce Plan 2025/28 aligns with the five pillars of workforce planning:

1) Plan.
2) Attract.
3) Train.
4) Employ.
5) Nurture.

As of April 2025, the State Hospital employed 698 staff (593.65 WTE) and was funded for 608.13 WTE. Just over two thirds of the workforce are in clinical roles, with nursing staff comprising the majority of these roles with the remainder providing key support and board wide services.

The State Hospital workforce vision is that it works in partnership to achieve organisational health, wellbeing and an engaged and well supported workforce. The State Hospital aims to be the

healthiest, most inclusive and engaged NHS Board in Scotland and considered to be an employer of choice. To achieve this, the State Hospital aims to prioritise organisational health and enhance its performance.

Despite the relative scale of the Board, there is an opportunity to ensure that the State Hospital staff are at the forefront of everything the State Hospital does, that it is closely aligned to its service objectives and that its focus in these areas will be demonstrated by the levels of patient care offered.

The key strategic themes for the Workforce Directorate over this 3 year period will be:

1) Prioritise Organisational Health

The State Hospital prioritisation of Organisational Health will focus on direction, leadership and work environment. The State Hospital aims to support staff health through management practices that can promote a positive culture.

2) Become more data focused.

A key theme to support workforce strategic development is the ongoing progression of how the State Hospital uses its data. A priority for the State Hospital is the development of data literacy, use of data visualisation tools to understand patterns and trends and integration of data driven processes into workflows. By collecting and analysing relevant data and transforming insights into actionable steps, the State Hospital will improve planning, performance and accountability through evidence-based practice. The State Hospital aims to improve accessibility and quality of workforce data available to managers to support decision making and workforce planning

3) Strategically Aligned and champion a culture of improvement and innovation

The State Hospital will progress work to ensure that a culture of improvement and innovation is embedded in how it supports workforce development. A significant service development over 2026/27 will be to change the workforce service support to Business Partner model, across all the hospital services. This will allow the workforce team to become more involved and integrated in the delivery of key service, adding value in all key activities.

4) Sustainable Workforce

The State Hospital is committed to ensuring that it has the right people with the right skills and training in the right place at the right time to support its services. This strategic theme will cover:

- Recruitment and Retention.
- Develop leadership and managerial capabilities and capacity.
- Employability/Career Pathways/Anchor organisation.
- Building resilience and succession planning.
- Focused approach to Learning and Education which meets service needs.
- Ensuring a safe, fair, and inclusive working environment for staff.

The State Hospital will complete the adoption and local implementation of the ‘Once for Scotland’ suite of HR policies during 2026/27, ensuring consistent application through Workforce Governance oversight and staff awareness activities.

The Workforce Equalities Group will develop and implement the 2026/27 Equalities Action Plan, ensuring mainstreaming of equality duties and delivery of associated outcomes, with mid-year and end-year progress reporting.

The State Hospital will enhance access to Occupational Health and staff support services, publishing service standards, strengthening referral pathways and monitoring utilisation metrics quarterly.

9.2 Whistleblowing

The State Hospital will implement the refreshed local approach to the Independent National Whistleblowing Standards, including awareness sessions for staff and quarterly reporting to Workforce Governance Group

The State Hospital Board actions for 2026/27 to support The State Hospital workforce

No	Planning Commitment	The State Hospital Board action	2026/27 Delivery timescale
7.1	Sustainable workforce.	Continue to focus on maximising attendance, with linkage to proactive approaches	2026/27
7.2	Sustainable workforce.	Continue to implement actions to progress Recruitment and Retention	2026/27
7.3	Organisational Health	Roll out of Board Cultural Assessment Tool	2026/27
7.4	Organisational Health	Integration of Leadership Development Programme and approach for the State Hospital	Q1
7.5	Sustainable workforce.	Develop a robust approach to succession planning	Q3
7.6	Culture of improvement and innovation	Fully implement Protected Learning Time	Q2
7.7	Sustainable workforce.	Develop and implement the 2026/27 Equalities Action Plan, ensuring mainstreaming of equality duties and development of a calendar of training activity to support equalities	Q1
7.8	Sustainable workforce.	Develop capacity and capability to support robust 'partnering' model focused on value and solutions	2026/27
7.9	Data focused	Continue to review and develop Performance and Health Dashboards to enable utilisation of metrics to support effective monitoring and decision making.	Q3
7.10	Organisational Health	Develop bespoke Wellbeing Action Plans for each Service	Q2

Risks
Risks emerging from the above actions will be reviewed regularly. If required risks will be added to either Local Risk Registers or escalation to the Corporate Risk Register to manage risks and mitigate potential impacts. Specific Directorate Risks and Issues will be escalated and reported through the quarterly Directorate Performance Meetings.

10 VALUE FOR MONEY AND ACHIEVING FINANCIAL BALANCE

10.1 Financial Balance

The Scottish Government continues to highlight the challenging national financial position for NHS Scotland. The Scottish Government published the Scottish Spending Review 2026[6] which sets out the indicative spending plans up to 2028/29 for capital spending. The spending review highlights that NHS Boards are expected to deliver more with constrained growth, align with the priorities of the SRF including modernising. The spending review emphasises that:

- Stable funding growth is provided, but accompanied by significant pressure to deliver efficiencies, redesign services, and reduce the cost base through productivity, digital transformation, and collaborative planning.

[6] Scottish Spending Review 2026 - gov.scot

- Boards are expected to reorient services away from acute care toward prevention and community-based models, redesign pathways, and collaborate regionally to reduce long-term demand and improve population health outcomes.
- Boards should prepare for a period of substantial capital change, upgraded infrastructure, and integration of digital tools—aligning estate decisions with climate goals, service redesign, and long-term sustainability.

As in previous years, Boards have been instructed to achieve breakeven, with no brokerage option available and the Support and Intervention Framework continues to be in operation. The requirement for recurring savings on baseline budgets is increasingly challenging given the ongoing national financial position.

The State Hospital has developed its three year finance plan to outline the high-level Revenue and Capital budget spending plans with known budget pressures outlined. The State Hospital Finance Plan is subject to review and approval by the Scottish Government and will align with both the Delivery and Workforce plans.

The State Hospital has consistently achieved financial balance, however this has become increasingly challenging and forecast to remain so with the requirement to achieve recurring savings. It is noteworthy that only 14% of the State Hospital's budget of costs are non-pay related.

The State Hospital has in place a range of approaches to support managers to have oversight and management of budgets. A consistent pressure for the State Hospital has been costs associated with staffing. A review of the requirements for staffing within nursing, which has the biggest pressure, has been carried out and high-level oversight in place to better understand and deploy resource for this budget.

Digital and e-health

There has been significant focus on developing the organisations digital and e-health function over the last few years. The State Hospital remains fully committed to digital development and enablement, however the NHS's financially challenging position has impact on the State Hospital ability to deliver its digital inclusion ambitions. The hospital aims to make the best use of digital technologies in the design and delivery of services delivering greater access, better insight and improved outcomes for patients.

The State Hospital Business Intelligence Team continues to develop dashboards to support clinical and managerial decisions by providing accessible data. For 2026/27, the team will focus on financial dashboards for clinical staff to aid financial planning.

The State Hospital is dedicated to making relevant data easily accessible. E-health teams focus on training staff to use data-driven tools effectively, involving them in tool design to enhance patient outcomes and confidence in handling data responsibly. The State Hospital will continue to develop the digital workforce with the right leadership and skills, improve infrastructure, and maintain strong standards and governance for secure operations. The State Hospital aim to transition all records to a digital system.

Cyber security continues to be recognised as a high risk and concern for all Boards, with significant focus for the State Hospital. The Network Information and Security Regulations (NIS) guides priorities. The State Hospital was audited against the NIS standards in 2023 and 2024 with the next audit cycle due in 2026.

The State Hospital has engaged with the adoption and implementation of national digital programmes including M365, SharePoint and e-roster. The State Hospital will continue to link in with the national programmes as they develop with the requirement to ensure preparatory work is on track for these systems.

10.2 Digital Inclusion

The State Hospital is keen to progress digital inclusion for patients, both to improve the patients' experience and to support care and treatment. Presently, patients within the State Hospital are at a disadvantage in terms of digital inclusion compared to patients being cared for within other forensic settings across NHSScotland. In November 2018, the Forensic Network produced a key report "Supporting Communication and Technology Use in Mental Health Settings", and post pandemic this was updated in May 2021.
In January 2024, the Scottish Government indicated that they would engage with the Forensic Network to develop a Delivery Plan based on the recommendations from the above reports.

The State Hospital developed a Digital Inclusion Strategy in 2023/24. Progress has been stymied due to financial constraints. However, the State Hospital sourced funding in 2025/26 to carry out a 'proof of concept' test on an electronic platform, Made Purple Operating System. The aim of this test was to evaluate the systems effectiveness in enhancing patient engagement and digital inclusion and contribute to strengthening the business case for consideration for future funding opportunities. The business case for the Made Purple Operating System will be developed over 2026/27 and funding sought to fully implement this system across the State Hospital.

The State Hospital will deliver the 2026/27 Information Governance and Records Management workplan, including a refreshed retention schedule, mandatory information governance training, and enhanced audit processes, with monitoring through Audit & Risk Committee.

The State Hospital Board action 2026/27 for Finance and e-health/digital developments

No	Planning Commitment	The State Hospital Board action	2026/27 Delivery timescale
8.1	3 year finance plan 2025 - 2028.	Action plan associated with 3 year finance plan.	2025-2028
8.2	Financial management.	Development of local dashboards to support financial analysis and management of nursing and non-clinical areas. Security, HR, Finance, Nursing and other areas	Q4
8.3	Patient finance system.	Patient funds. Finance system that is currently used will not be supported past March 2027 – work will be taken forward to progress a new finance system	Q4
8.4	Digital Inclusion.	Develop business case for embedding Made Purple Operating System across the hospital	Q1
8.5	Digital Infrastructure.	Ensuring that regulations, standards and governance are in place to ensure robust and secure delivery.	2025-2028
8.6	Business Service Transformation.	Development and support implementation of systems for HR, payroll, Finance and Procurement.	2026/27-2027/28
8.7	Business Service Transformation.	Support implementation of the public contracts tender portal and any new DI system.	2026/27

No	Planning Commitment	The State Hospital Board actions	2026/27 Delivery timescale
8.8	National digital programmes.	The State Hospital will continue to link in with the national programmes (M365, Sharepoint, Allocate, Loop, co-pilot) as they develop. The State Hospital will move from a centralised resource management approach to a ward based approach, giving the SCN overview and management of rosters via allocate.	2025-2028 Q2 - Q4
8.9	Network security.	NIS audit – preparation for next audit scheduled in 2026.	2026/27

Risks
Risks emerging from the above actions will be reviewed regularly. Specific Directorate Risks and Issues will be escalated and reported through the quarterly Directorate Performance Meetings.

11. CLIMATE AND SUSTAINABILITY

The State Hospital recognises the role it plays in NHS Scotland's approach to the climate emergency as set out in DL (2021) 38. The State Hospital operates from 15 buildings including patient accommodation, off ward therapy areas, offices, carers' facilities, security buildings and estates buildings. The State Hospital also manages land and buildings covering an area of 63 hectares.

As a relatively modern hospital, the State Hospital does not require an extensive plan of works to reach national targets on climate change. However, the State Hospital continues to develop and implement work to reduce the hospital's impact on climate and improve sustainability. The State Hospital's buildings will also need lifecycle maintenance. Maintenance costs will inevitably increase as the facility ages. These costs now need to be planned for to maintain standards of building quality for patients and staff to enable a level of care. The State Hospital will require to develop a planned maintenance programme to ensure that buildings continue to be fit for purpose.

The State Hospital is obliged to meet decarbonisation targets set by NHS Scotland Assure. The most critical targets are:

- 75% reduction in emissions by 2030.
- Decarbonised heat by 2038.
- Net Zero by 2040.

The State Hospital has already reduced emissions by 83.7% against the baseline year 1993/94, which is within the five year 1990 Kyoto window. Therefore, the State Hospital is well-ahead of the 2030 target. However, without targeted decarbonisation measures the health board would not meet the other two key targets. The State Hospital continues to focus on reducing use of fossil fuels. In the medium term a feasibility study will be commissioned to explore use of new technologies to meet the decarbonisation target.

Recent development has included changing many the State Hospital's fleet vehicles to Electric Vehicles (EV). EV charging points have now been extended to the Car Park for staff use and additional points have been added internally for EV's. The State Hospital are transitioning to a new EV charging partner as required by the national NHS Framework, since Charge Place Scotland (current, government-sponsored supplier) will end by March 2026. For staff welfare, a salary sacrifice scheme for private electric vehicles is progressing and has received preliminary approval

from GGC. It will be presented through governance channels for final sign-off and aims to support workforce wellbeing

The State Hospital has reviewed improvements to support waste management, with the State Hospital's Waste Management Route Map developed in 2025/26. Implementation of this is now progressing with priorities including development of food waste management. A mini tender was carried out under the new National Framework for General Waste and Recyclates and contracts awarded to two different companies, and new equipment ordered.

New LED lighting is also being introduced across non-clinical areas with plans being developed to address clinical areas within 2026/28. High-level decarbonisation plan submitted to the Scottish Government with a more detailed funding request to support transition to LED lighting submitted to the Scottish Government in early 2026, budget allocation likely to be based on NRAC formula (NHS Scotland Resource Allocation Committee Formula).

The State Hospital Board action 2026/27 for climate

No	Planning Commitment	The State Hospital Board action	2026/27 Delivery timescale
9.1	Net zero target.	• Progress an active travel agenda. • Increase biodiversity/greenspace awareness. • Fully implement an EMS for the State Hospital.	2026/27
9.2	Planned maintenance programme.	The State Hospital has a planned maintenance programme to ensure that buildings continue to be fit for purpose. Proactive monitoring and delivery of planned maintenance system to be carried out to ensure that the State Hospital meets maintenance targets.	Q2

Governance for the Climate Change and Sustainability agenda is through the newly established Climate Change and Sustainability Group which has the lead responsibility and is accountable to the Security, Resilience, Health and Safety Oversight Group. The Group ensures an integrated approach to sustainable development, harmonising environmental, social and economic issues.