

**NHS Education for Scotland**

NES/23/27

**AGENDA FOR THE ONE HUNDRED AND SEVENTY FOURTH BOARD MEETING**

**Date:** Thursday 25 May 2023

**Time:** 10:15 – 12:10

**Venue:** Hybrid meeting: MS Teams / Room 3/4 Westport, Edinburgh.

1. **10:15 Chair's introductory remarks**
2. **10:16 Apologies for absence**
3. **10:17 Declarations of interest**
4. **10:18 Minutes of the One Hundred and Seventy Third Board Meeting 23 March 2023** NES/23/28  
For Approval
5. **10:20 Matters arising from the Minutes and notification of Any Other Business**
6. **10:21 Actions from previous Board Meetings** NES/23/29  
For Review and Approval
7. **Chair and Chief Executive reports**
  - a. **10:25 Chair's Report** NES/23/30  
For Information and Assurance
  - b. **10:35 Chief Executive's Report** NES/23/31  
For Review and Assurance
8. **Strategic Items**
  - a. **10:55 Draft 2023/26 Strategy** NES/23/32  
For Approval (K. Reid and C. Bichan)
  - b. **11:05 Draft Strategic Key Performance Indicators** NES/23/33

For Approval (C. Bichan)

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|----|---|-----------|
| c. | <b>11:15</b> Draft Communication and Engagement Strategy<br>For Approval (J. MacEachen) | NES/23/34 |
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## 9. Annual Items

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|----|--|-----------|
| a. | <b>11:25</b> Annual Whistleblowing Executive Report 2022/23<br>For Approval (C. Bichan)                    | NES/23/35 |
| b. | <b>11:35</b> Annual Whistleblowing Non-Executive Champion<br>Report 2022/23<br>For Assurance (G. Mawdsley) | NES/23/36 |

## 10. Performance Items

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|----|--|-----------|
| a. | <b>11:40</b> 2022/23 Quarter 4 Risk Register Report<br>For Approval (J. Boyle) | NES/23/37 |
| b. | <b>11:50</b> 2022/23 Quarter 4 Performance Report<br>For Approval (C. Bichan)  | NES/23/38 |

## 11. Governance Items

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|------|---|--|
| a.   | Significant issues to report from Standing Committees:  |  |
| i.   | <b>12:00</b> Audit and Risk Committee held on 27 April<br>2023<br>(J. Ford, verbal update)          |  |
| ii.  | <b>12:03</b> Staff Governance Committee held on 4 May<br>2023<br>(A. Currie, verbal update)         |  |
| iii. | <b>12:06</b> Education and Quality Committee held on 11<br>May 2023<br>(D. Hutchens, verbal update) |  |

## 12. Items for Homologation or Noting

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|-----|---|-----------|
| a.  | <b>12:09</b> Committee membership changes<br>For Homologation (D. Thomas) | NES/23/39 |
| b.  | <b>12:09</b> NES Standing Committee Minutes:                              |           |
| i.  | Audit and Risk Committee, 19 January 2023                                 | NES/23/40 |
| ii. | Staff Governance Committee, 2 February 2023                               | NES/23/41 |

**13. 12:10 Any Other Business**

**14. 12:10 Date and Time of Next Meetings**

- **Private Formal Board:** 25 May 2023 at 12:20
- **Private Formal Board:** 29 June 2023 at 09:30 -12:00
- **Board Development:** 29 June at 13:00- 15:30

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## NHS Education for Scotland

### DRAFT MINUTES OF THE ONE HUNDRED AND SEVENTY-THIRD BOARD MEETING HELD ON 23 MARCH 2023, 10:15 – 11:20.

\*\*\*As a result of NES moving into a hybrid approach to work from March 2022, this meeting was held via Microsoft Teams and as an in-person meeting opportunity at the NES Westport office in Edinburgh.\*\*\*

**Present:** David Garbutt (DG) (Chair)  
Jim Boyle (JB), Executive Director of Finance  
Anne Currie (AC), Non-Executive Director / Equality, Diversity and Human Rights Champion  
Annie Gunner Logan (AGL), Non-Executive Director  
Douglas Hutchens (DH), Non-Executive Director (Vice Chair)  
Gillian Mawdsley (GM), Non-Executive Director / Whistleblowing Champion and Climate Emergency and Sustainability Champion  
Karen Reid (KR), Chief Executive & Accountable Officer  
Karen Wilson (KW), Executive Director of Nursing / Deputy Chief Executive (Clinical)

**In attendance:** Tracey Ashworth-Davies (TAD), Director of Workforce / Deputy Chief Executive (Corporate)  
Ameet Bellad (AB), Senior Specialist Lead (joined the meeting at 11.00am for item 9a only)  
Christina Bichan (CBi), Director of Planning & Performance  
Colin Brown (CBR), Head of Strategic Development, Chief Executive's Office  
Lindsay Donaldson (LD), Deputy Medical Director  
David Felix (DF), Postgraduate Dental Dean / Director of Dentistry  
Katy Hetherington (KH), Principal Lead – Equality, Diversity & Human Rights (joined the meeting at 11.00am for item 9a only)  
Jill Kyle (JK), Senior Admin Officer (to observe)  
Claire Neary (CN), Policy & Briefings Manager (to observe)  
Gordon Paterson (GP), Director of Social Care  
Della Thomas (DT), Board Secretary / Principal Lead, Corporate Governance  
Anne Watson (AW), Postgraduate Pharmacy Dean / Director of Pharmacy  
Christopher Wroath (CW), Director of NES Technology Service ((left the meeting at 10.58am, during item 8b)  
Alison Shiell (AS), Manager, Chair & Chief Executive's Office (Minute Taker)

#### 1. Chair's Introductory Remarks

- 1.1. The Chair welcomed everyone to the meeting. The Chair extended particular welcomes to Lindsay Donaldson (Deputy Medical Director) who was deputising for Emma Watson and Jill Kyle (Senior Admin Officer, Planning & Corporate Resources) who was observing the meeting as part of her induction into NES.

## **2. Apologies for absence**

- 2.1. Apologies for absence were received from the following Board members: Jean Ford, Lynnette Grieve and Emma Watson.
- 2.2. Apologies were also received from the following regular Board meeting attendees: Kevin Kelman, John MacEachen and Judy Thomson.

## **3. Declarations of interest**

- 3.1. There were no declarations of interest in relation to any of the items of business on the agenda for this Board meeting.

## **4. Minutes of the One Hundred and Seventy-Second Board Meeting (NES/23/17)**

- 4.1. The minutes of the Board meeting held on 16 February 2023 were approved.

## **5. Matters arising from the Minutes and notification of Any Other Business**

- 5.1. There were no matters arising in relation to the minutes of the last Board meeting. There were also no notifications of any other business requiring consideration by the Board.

## **6. Actions from previous Board Meetings (NES/23/18)**

- 6.1. The Board received the rolling Board action list for review and agreement. The Board noted that two of the three actions had been completed and one had been paused.
- 6.2. The Board noted the update on the paused action which related to the Board's discussion of the 2022-23 Quarter 3 financial report at the 16 February 2023 Board meeting. The Board had agreed that Karen Reid should write a letter to Scottish Government (SG) highlighting potential risks for NES as a result of delays in receiving previously agreed funding allocations, however following a subsequent meeting with SG, Jim Boyle received strong assurance that NES would receive all its 2022-23 funding allocations. Karen Reid and Jim Boyle advised that the sending of the letter should be paused, and Karen Reid sought agreement from the Board Chair to confirm this.
- 6.3. The Board agreed this action should remain open until further information is received from SG in relation to NES's 2022-23 financial year-end position. The action list was agreed.

## **7. Chair & Chief Executive Updates**

### **a. Chair's Report (NES/23/19)**

- 7.1. The Chair presented a paper outlining his recent meetings and activity since the February 2023 Board in his roles as Chair of the NES Board and a member of the NHSS Board Chairs Group (BCG).
- 7.2. The Chair invited questions from the Board, and the following point was discussed:
  - a. The Board noted the establishment of a new Scottish Government (SG) strategy board focusing on improving wellbeing and workforce cultures. The Chair will be joining this group as a representative of the NHSS BCG. In response to a query asking for further information, the Chair advised that the group has a wide remit and will include reference to leadership and talent management. Karen Reid will also be a member of this group as a representative of the NHSS Board Chief Executives Group and highlighted the link to the Leading to Change development programme which is being jointly delivered by NES and SG.

7.3. The Chair thanked Board members for their discussion and moved onto the next item on the agenda.

b. Chief Executive's Report (NES/23/20)

7.4. Karen Reid introduced this report and began by highlighting the following items within the report for the Board's information:

- a. In advance of the Board receiving a Public Sector Duties two-year progress report under item 9a of this agenda, Karen Reid highlighted a recent Audit Scotland web report on public sector gender pay that cited NES as an example of good practice. Karen Reid commended the steps that have been taken to reduce the organisation's gender pay gap from 19% (2017) to 5.4% (2022). The Board noted that the current Scottish public sector gender pay gap average is 12.5%.
- b. Three NES Postgraduate Deans (Alastair McLellan, Amjad Khan and Clare McKenzie) will retire from NES during May – June 2023. Karen Reid thanked each of them for their significant contributions to medical education and training and wished them well in their retirements.
- c. Karen Reid congratulated Rob Farley (Associate Director, Healthcare Science) on his recent conferral as a Fellow of the Academy of Healthcare Science for his contributions to the development and support of scientist training in Scotland.
- d. Karen Reid also congratulated Jan Clarkson (Associate Postgraduate Dental Dean) on her very recent conferral as a Fellow of the Royal Society of Edinburgh (RSE). The RSE comprises approximately 1800 people recognised as being some of the greatest thinkers, researchers and practitioners in their field working in or with organisations in Scotland today.
- e. NES, Scottish Government (SG) officials, advisers and key partners continue to progress plans for the establishment of the National Centre for Remote and Rural Health and Social Care (the Centre). A revised plan has been developed to enable the Centre to progress via a phased approach over the next three years in response to challenging fiscal environment.
- f. A formal consultation process has now commenced on the draft NES Strategy for 2023-26. Karen Reid advised that early feedback from stakeholders has been positive. The consultation process will close on 1 May 2023. The Board noted that the final version of the strategy will be submitted to the 25 May Board meeting for approval.
- g. NES received its formal Annual Delivery Plan (ADP) guidance from SG on 14 March 2023. In line with SG requirements, NES will develop a Medium Term Plan (MTP) for 2023-26 alongside the development of the ADP. The draft ADP must be submitted to SG by 8 June 2023, with the draft MTP due by 7 July 2023. The Board will receive draft versions for approval as per the 2023-24 Board Schedule of Business which is submitted under item 10b of this Board agenda.

7.6. Karen Reid commended the extensive work that continues to be delivered across all areas of NES and the NHSS Scotland Academy (NHSSA). During discussion, the following points were raised:

- a. The Board noted the Healthcare Science update including the concerns from the service and professions regarding planned clinical scientist numbers for 2023 and the subsequent statement that has been published on the new Healthcare Science training website. In response to a query from the Board, Karen Reid recognised the contribution of the Healthcare Science workforce and acknowledged that the challenging fiscal environment has had an impact on the potential for further Healthcare Science investment. Karen Reid will meet with the Diagnostics in Scotland Strategic Group to discuss the current situation and NES will continue to explore creative solutions with SG in relation to Healthcare Science within the context of the current financial environment. The Chair and Karen Reid agreed to discuss the current Healthcare Science funding situation outwith the Board

meeting in advance of a joint NHSS Chairs and Chief Executives meeting on 27 March 2023.

**Action: KR / DG**

- b. The Board welcomed the Values Based Reflective Practice (VBRP©) event that was due to be held on 23 March 2023 within the Nursing Midwifery Allied Health Professionals (NMAHP) directorate. The Board asked if the content from this event could be shared with the wider service, as it is recognised that VBRP© has a positive impact on staff wellbeing. Karen Wilson confirmed that the session was due to be recorded and will explore how this could be shared more widely. An update will be provided to the Board after today's meeting. **Action: KW**
- c. The Board welcomed the updates on the development of NES's draft strategy and the commencement of the formal consultation process. A number of Non-Executive Board Members have joined the individual meetings held with social care stakeholders and spoke positively about the format and content of the meeting discussions.
- d. The Board welcomed the update on the National Endoscopy Training Programme (NETP) which is being delivered via the NHSSA. In response to a query, Karen Reid confirmed that updates have been issued regarding the success of the programme and further communications will highlight how the upskilling / reskilling courses have the potential to reduce current NHSS waiting lists.
- e. In response to a request from the Board, the online Healthcare Science game delivered during Healthcare Science Week (13 – 19 March 2023) will be shared with Board Members for their information. **Action: Chair & CE Office**
- f. The Board noted the announcement regarding the upcoming retirements of three Postgraduate Deans and thanked them for their significant contributions to NES and medical education and training. In response to a query, Karen Reid confirmed that recruitment to these posts is underway, and one Dean is likely to return to NES via a 'retire and return' arrangement. Lindsay Donaldson highlighted that the Executive Medical Director is taking the opportunity to review and realign workstreams and workloads across the senior Medical team as a result of upcoming changes and any potential risks will be mitigated. Tracey Ashworth-Davies advised that colleagues within the Workforce directorate are preparing to take forward a refreshed approach to succession planning as part of the national Leading to Change programme of work. Consideration will also be given to succession planning in NES and an update paper will shortly be submitted to the NES Executive Team.
- g. The Board welcomed the Climate Change Emergency and Sustainability update which highlighted that NHSS Boards had recently received a letter from the Cabinet Secretary for Health and Social Care thanking them for the efforts to date in advancing climate emergency and sustainability work. Karen Reid noted the differences between Territorial and National Boards in relation to the climate change emergency, however the refreshed NES Sustainability Group will consider what can be achieved within the context of NES's way of working. Jim Boyle highlighted the need for NES to embed climate change and sustainability into future education and training delivery and the renewed membership of the NES Sustainability Group will be considering this. Jim Boyle also noted that SG's 2023-24 Annual Delivery Plan templates include a specific section on how Boards will deliver climate change emergency and sustainability actions.

7.7. The Chair thanked Karen Reid for her report and the Board moved onto the next agenda item.

## **8. Strategic Items**

a. Draft Strategic Risks and Risk Appetite (NES/23/21)

8.1 Jim Boyle presented the revised schedule of Strategic Risks and Risk Appetite Matrix to the Board for approval.

- 8.2 As part of his introductory comments, Jim Boyle highlighted that NES's strategic risks and risk appetite matrix had been updated following detailed discussion and constructive feedback at the Board development session on 20 February 2023 and a further review by the Audit and Risk Committee (ARC) via correspondence. As outlined in Recommendation 1 of the cover paper, Jim Boyle advised that the Chair of the ARC has asked the Board to consider a change to risk appetite for Concept and Pilot / Test of Change stages to be changed to 'Minimalist' for Finance risks and Accountability.
- 8.3 The paper was taken as read and the following points were raised in discussion:
- a. The Board welcomed the updates to NES's Strategic Risks and agreed the revised risk register was a significant improvement on previous iterations in both content and format.
  - b. In relation to Risk SR-14 specifically, the Board agreed that the wording of the last sentence should be amended slightly for clarity. The Board agreed that the sentence 'This could result in a loss of credibility by the Board...' should be amended to 'This could result in a loss of credibility **towards** the Board, **from** the Scottish Government as a well as a range of audit and scrutiny bodies, which could a threat to the general credibility and future of NES. **Action: JB**
  - c. In response to a query regarding risk escalation within Directorates, Jim Boyle advised that two escalation routes are in place. The NES Risk Management Group (RMG), which is chaired by Jim Boyle, comprises representatives from all directorates. The RMG meets monthly and risk escalation is a standing item on the agenda. Any directorate risks that require further escalation are then submitted to the Executive Team for further discussion. A decision is then taken as to whether the risk should be formally escalated to the strategic risk register.
- 8.4 After discussion, the Board approved the proposed change to risk appetite as outlined in Recommendation 1 of the cover paper and the revised set of strategic risks and risk appetite matrix subject to the amendment states in minute 8.3b. The Chair thanked Jim Boyle and his team for their work.
- b. Draft Strategy Consultation: Update on Progress
- 8.5 Christina Bichan gave a verbal progress update on the consultation process that has been developed for the draft NES 2023-26 Strategic Plan. The update highlighted the following developments:
- a. Karen Reid, Tracey Ashworth-Davies, Karen Wilson and Christina Bichan led an all-staff webinar on 6 March 2023 to highlight the content of the strategy and respond to staff questions. 177 staff were in attendance and a summary of the session is available via the NES intranet.
  - b. Karen Reid will attend directorate team meetings during April / May 2023 to engage with staff in relation to the strategy and listen to their feedback.
  - c. Stakeholder engagement has already commenced with social care stakeholders and a number of follow up meetings are in the process of being arranged. These include meetings with Health and Social Care Partnership organisations, the Health and Social Care Alliance Scotland (the ALLIANCE) and COSLA (Convention of Scottish Local Authorities). Letters from Karen Reid have also been sent to the Chief Executives of the Territorial Health Boards to advise that the draft strategy has been published and invite senior colleagues to meet with members of the Executive Team to discuss how NES could support them going forward.
  - d. An online survey has been developed to capture stakeholder feedback. A final stakeholder session will be held during the NES Annual Virtual conference on 27-28 April 2023. The formal consultation process will close on 1 May.



8.6 The following points were raised during discussion:

- a. Christina Bichan advised that a large amount of positive feedback has already been received from stakeholders regarding the content of the strategy and how NES is planning to support the health and social care workforce.
- b. Gordon Paterson thanked the Board for their engagement in the social care stakeholder meetings and noted that stakeholders had welcomed the opportunity to meet with NES and hear about the organisation's plans to support the social care workforce. Stakeholders were pleased to hear how NES plans to take a preventative and proactive approach to supporting the health and social care and the establishment of a NES Social Care directorate has been welcomed.

8.7 After discussion, the Chair thanked Christina Bichan for her progress update and moved onto the next agenda item.

## 9. Performance Items

a. Public Sector Duties: Two-year progress report (April 2021 – April 2023) (NES/23/22)

9.1 Katy Hetherington and Ameet Bellad presented a two-year progress report on the Public Sector Equality Duty (Annex A) to the Board for approval. The paper also included NES's annual workforce equality and diversity report (Annex B) and a three-year report on Children's Rights. In terms of governance sequencing, the different elements of the report have been submitted to the Staff Governance Committee, Technology and Information Committee and Education and Quality Committee in advance of the full report being submitted for Board approval.

9.2 During her introductory comments, Katy Hetherington highlighted that NES's equality outcomes will be reviewed to ensure alignment with the NES's new strategy for 2023-26.

9.3 The paper was taken as read and the following points were raised in discussion:

- a. As part of the Employment Equality and Diversity Monitoring report (Annex B), the Board noted that only 3.1% of NES staff have disclosed that they have a disability. The Board asked what action could be taken to increase staff disclosure in this area. Katy Hetherington commented that similar disability disclosure rates are seen across the public sector and recognised the need for NES to do more in this area. Further work will be undertaken via the informal staff networks to encourage increased disclosure rates. Karen Reid noted that disclosure rates can have an impact on staff retention and welcomed an increased focus from Katy Hetherington's team in this area.
- b. The Board discussed the impact of hybrid working and estates strategies on organisational recruitment, particularly in relation to the recruitment of disabled people. The work of Dr Sally Witcher in relation to post-pandemic inclusivity and the importance of accessibility, ventilation and infection control could be aligned to work taken forward in NES. The Board asked Katy Hetherington to consider how improvements in staff disclosure and recruitment strategies could be taken forward.

**Action: KH**

- c. The Board commended the three reports that been presented for approval. The Chair of the Staff Governance Committee highlighted the work of Katy Hetherington and her team and noted that the informal staff networks provide a positive forum for discussion and feedback which can then be taken forward by the Equality, Diversity and Human Rights team.

9.4 After discussion the Board approved the Public Sector Duties two year progress report and the Chair thanked Katy Hetherington, Ameet Bellad and their teams for their work. Following the Board's approval, the report will be published on the NES corporate website in April 2023 to meet statutory reporting requirements.

## 10. Governance Items

### a. Significant issues to report from Standing Committees

#### i. Education and Quality Committee held on 22 March 2023

10.1 Douglas Hutchens gave a brief overview of the key issues discussed at the most recent meeting of the Education and Quality Committee (EQC):

- a. The Committee received a report on future ambitions to address the low rankings of the Scottish Foundation School in the 2022 General Medical Council (GMC) trainee survey. The EQC noted the report and agreed that an improvement action plan would be developed and come to the next EQC meeting for review and assurance.
- b. The Committee approved the annual Medicine Deanery Quality Report and discussed ways in which aspects of this report might be improved going forward.
- c. The Committee commended the quality of the Education and Quality Executive Lead report and the work it showcased from across the directorates.

#### ii. Technology and Information Committee held on 15 March 2023

10.2 David Garbutt gave a brief overview of the key issues discussed at the most recent meeting of the Technology and Information Committee (TIC):

- a. The Committee gained assurance from progress updates on the delivery and outcomes of digital work in NES.
- b. The Committee reviewed the NES Technology Service (NTS) delivery programme risk register. Christopher Wroath will take forward work to ensure that NTS risk registers align to the revised schedule of NES strategic risks.
- c. The Committee received an update paper on the Digital Front Door (DFD) programme and received assurance that the programme is currently on track whilst noting the risks associated with the proposed delivery timelines. NES have been commissioned by SG to be the delivery partner for this programme. The Committee agreed that NES's Caldicott Guardian responsibilities will need to be reviewed in the context of DFD work as it is likely involve additional management of patient data.

### b. 2023/24 Draft Board Schedule of Business (NES/23/23)

10.3 Della Thomas presented the draft 2023-24 Board Schedule of Business (SoB) to the Board for review and approval.

10.4 During her introductory comments, Della Thomas highlighted that the draft 2023/24 NES Annual Operational Plan would be submitted to the May 2023 Private Board and the draft 2023-26 Medium-Term Plan would be submitted to the June 2023 Private Board. Della Thomas also advised that consideration would be given in relation to future draft Financial Plans being submitted to Public, rather than Private, Board meetings to improve transparency as appropriate. Della Thomas also noted that the TIC have recently agreed that the annual Cyber Security report should be submitted to the Board. The Board SoB will be amended to reflect this addition.

10.5 There were no questions on the draft 2023/24 Board SoB. The Board approved the draft 2023/24 Board SoB and the Chair thanked Della Thomas and her team for their work.

## **11. Items for Noting or Homologation**

### **a. NES Standing Committee Minutes**

#### **i. Digital and Information Committee 31 October 2022 (NES/23/24)**

11.1 The minutes of this meeting were homologated by the Board.

#### **ii. Education and Quality Committee 8 December 2022 (NES/23/25)**

11.3 As the Education and Quality Committee only met on 22 March 2023, the minutes of the 8 December 2022 meeting will follow by correspondence after today's Board meeting.  
**Action: Chair & CE Office.**

### **b. iMatter Report (NES/23/26)**

11.4 The Board noted an update on NES's results from the 2022 iMatter Staff Experience tool and welcomed the positive messaging within the paper. The Chair thanked the Executive Team and staff for their work. In terms of governance sequencing, the paper has already been submitted to the Partnership Forum and Staff Governance Committee and is presented to this Board meeting for noting as part of the public record.

## **12. Any Other Business**

12.1 There was no other business requiring consideration at this meeting.

## **13. Date and Time of Next Meeting**

13.1 The next Public Board meeting will take place on 25 May 2023 at 10.15am.

13.2 The Chair thanked everyone for their attendance and closed the meeting at 11.20am.

NES  
March 2023  
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**Actions arising from Board meetings: Rolling list**

Minute	Title	Action	Responsibility	Date required	Status and date of completion
<b>Actions agreed at Board meeting on 23 March 2023</b>					
7.6a	Chief Executive's Report	The NES Board Chair and Chief Executive will discuss the current Healthcare Science funding situation in advance of the joint NHSS Chairs & Chief Executive's meeting on 27 March 2023.	Karen Reid / David Garbutt	March 2023	<b>Complete</b>
7.6b		Explore how the recording of the Values Based Reflective Practice (VBRP©) event can be shared more widely with the service and provide an update note to the Board in due course.	Karen Wilson	May 2023	<b>Complete</b> Event summary shared with Board Members via email on 12 May 2023.
7.6e		Share the online Healthcare Science game delivered during Healthcare Science Week with Board Members for their information.	Chair & Chief Executive's Office	May 2023	<b>Complete</b> Shared with Board Members via email on 4 May 2023.
8.6b	Draft Strategic Risks and Risk Appetite	Update Strategic Risk 14 (SR-14) as per amend agreed at Board meeting and set out within the minutes.	Jim Boyle	May 2023	<b>Complete</b>
9.3b	Public Sector Duties: Two-year progress report (April 2021 – April 2023)	Further to the Board's discussion of staff disclosure rates and recruitment strategies, consider how improvements could be taken forward in NES	Katy Hetherington	May 2023	<b>Complete</b> This is being progressed and will be further reported in mid-year and end of year equality and diversity reports to Committees as appropriate and to Board. Some examples in progress

Minute	Title	Action	Responsibility	Date required	Status and date of completion
					include a campaign in partnership with staff, to encourage employees to update their equality and diversity monitoring and encourage disclosure of disability embracing the principles of an inclusive workplace environment; the Senior Specialist Advisor on Disability working with Training Programme Directors to support trainees with disabilities, promoting early discussion about disclosure and available support and the development of a video for staff induction to encourage early disclosure and highlight available support.
<b>Actions agreed at Board meeting on 16 February 2023</b>					
8.3c	2022/23 Quarter 3 Financial Report	Following the Board's discussion of the 2022-23 Quarter 3 financial report, write to Scottish Government to highlight the risks for NES as a result of delays in receiving previously agreed funding allocations.	Karen Reid / Jim Boyle	March 2023	<p><b>Action Closed</b> Due to movement on allocations following the Board meeting in March, brought through pressure from the NES Executive Team and the Scottish Government sponsorship team, the issue of a letter was not necessary. The action can be closed for 2022/23 and the situation will be kept under review for 2023/24.</p> <p><b>Action paused (update for 23 March 2023 Board)</b> Jim Boyle and Karen Reid spoke on 24 February 2023 and agreed to pause on the sending of this letter as Jim Boyle had spoken to Scottish</p>

Minute	Title	Action	Responsibility	Date required	Status and date of completion
					Government and received strong assurances that NES would receive all its 2022/23 individual allocations. The outstanding £13.6m figure relates to the 2022/23 NHSS pay award and all NHS Scotland Boards are awaiting this.

## **CHAIR'S REPORT**

David Garbutt, Chair of NES Board

25 May 2023

Since the last Board meeting I have attended the following meetings and events in addition to internal NES meetings, Board and Standing Committees.

### **March 2023**

1. I attended the Board Chairs Group where the main points of discussion were in relation to the importance of spiritual care to staff wellbeing together with confirmation that a national strategy around spiritual care would not be produced but Boards were asked to look at provision on a local basis. Another major issue was that of health inequalities and Boards all doing more to improve population health and make community interventions in a more preventative way. The Chairs met with the Cabinet Secretary for Health and Social Care in the afternoon to discuss future planning and Horizon 3.
2. I spoke to several candidates for the role of NES Lead GP Dean and held a final mentoring meeting with my NHS mentee.

### **April 2023**

1. I had a catch up session following leave and then commenced Non-Executive members annual appraisals.
2. I attended the National Board Chairs fortnightly meeting where we had further discussions on the population health issue and how National Boards could help support this programme. Further discussions will be held with Scottish Government (SG) colleagues.
3. I attended an in person Board Chairs Group meeting at NHS Golden Jubilee (NHS GJ). The main item on the agenda was Workforce Strategic Priorities presented by Gillian Russell (Director of Workforce, SG). Gillian highlighted the fact that current data projects there will be a 23% increase in age-related disease by 2043 and a decline in population by 2% in the same timescale. We have 155,927 WTE (Whole Time Equivalent) in the NHS at present which is more per head than any other part of the UK. Recent pay agreements mean that our Agenda for Change (AfC) workforce will be reducing to 26 hours per week with the addition of more protected time for training. Gillian suggested that Chairs had a leadership role in this, with their Executive teams, particularly in challenging the status quo with vested interests. There was a lengthy discussion about Executive and Senior Management (ESM) grades and challenges associated with attracting candidates to these roles.
4. The Board Chairs Group met in person with the new Cabinet Secretary for NHS Recovery, Health and Social Care at his request at NHS GJ and held a lengthy discussion on ways forward and the leadership role he felt Chairs could take on during recovery and in shaping the future for the NHS. He made it clear that he welcomed proposals for improvement and where there were challenges he asked that responses included potential solutions.



5. I joined the NHS Global Citizenship Conference planning meeting for part of the day and discussed the future engagement model to be adopted for global citizenship joint working.
6. Together with the NES Chief Executive I joined a meeting with the Scottish Social Services Council (SSSC) counterparts to discuss the future relationships between the two bodies and with the care sector.
7. I attended a meeting at the Convention of Scottish Local Authorities (COSLA) offices on 'Understanding the Blueprint for Good Governance' presented by John Brown, Chair of NHS Greater Glasgow & Clyde. There was an extensive audience with additional people joining online.
8. I gave a speech of welcome to delegates at the two-day NES Virtual Conference, which is an annual event, and which is well received by the various attendees. The Conference covered a wide range of subjects and I would commend this conference to all non-executives members, as there will be something in the conference for everyone. Over 2,000 people were registered to attend and I was able to deliver some remarks to the attendees at the close. I am grateful to the organisers and all members of NES who made the whole event proceed very smoothly. They deserve our thanks for a job well done.

## **May 2023**

1. I met with the four new Non-Executive Board members, together with Della Thomas (Board Secretary & Principal Lead, Corporate Governance) as part of their induction. We had an interesting session; everyone introduced themselves and we had useful discussions about the role and remit of the Board and at Committee level and discussed potential opportunities and challenges.
2. I had a meeting with Claire Sweeney (Board Development Lead, NES and Associate at The Promise, Scotland) about The Promise Scotland, and how we could develop an NHS response to support Boards with this work. This has resulted in an outline proposal which will continue to be developed over the next few weeks.
3. I attended the Ministerial launch of 'Trauma Informed Justice: A Knowledge and Skills Framework for Working with Witnesses and Victims' which was held in Edinburgh. I gave a speech on behalf of NES, following the opening remarks by Cabinet Secretary for Justice. This is a phenomenal piece of work, led by Dr Caroline Bruce (Psychology Directorate). The work was highly praised by the Cabinet Secretary and several other high level speakers including the Lord Advocate, and was covered on national television and in the media. I am extremely grateful to Caroline for the quality of the work and the dedication she has shown in taking it to its conclusion.

4. I attended a meeting of the NHS Global Citizenship Advisory Board where we discussed the future strategy for Global citizenship and the forthcoming Global Citizenship Virtual Conference.

**David Garbutt**  
**Chair**



## **CHIEF EXECUTIVE'S REPORT**

Professor Karen Reid, Chief Executive

**May 2023**

## 1. INTRODUCTION

- 1.1. The agenda for our May Board meeting includes key strategic items that clearly demonstrate NES's future direction of travel as an organisation. The draft NES Strategy for 2023-26 is presented to the Board for approval, along with our draft strategic key performance indicators (KPIs) and draft Communication and Engagement strategy. NES's purpose is to be a collaborative, innovative and inclusive learning organisation that provides high quality education, training, workforce development, workforce data and technology for Scotland's health and social care workforce. NES is at an exciting phase of its development as we look to increase the impact and difference we make to the health and social care workforce and in turn, people across Scotland. I look forward to working with the NES Board, Executive Team and all our staff to take this very significant work forward.
- 1.2. The Board will also receive a number of annual, performance and governance items for review and approval including the Non-Executive and Executive annual reports as per the NHS Scotland's national Whistleblowing standards, the 2022-23 Quarter 4 Risk Register and Performance reports and an update on NES standing committee membership.
- 1.3. Along with the Board Chair, I am very pleased to welcome our four new Non-Executive Directors: Ally Boyle, Olga Clayton, Shona Cowan and Nigel Henderson. Ally, Olga and Nigel have joined the NES Board from 1 May 2023 and Shona will join from 1 September. Their combined knowledge and experience will be invaluable in helping to lead our organisation forward and I look forward to working with them.
- 1.4. This Board also marks Professor Anne Watson's final meeting as NES's Postgraduate Pharmacy Dean / Director of Pharmacy before her retiral on 30 June 2023. Anne joined NES in 2004 as an Assistant Director and was appointed to her current role in 2016. Anne's leadership of the Pharmacy workforce in Scotland has led to transformational change and growth for the profession, including responding to large scale reforms of Pharmacy education and training across the UK.
- 1.5. Anne was the very first Postgraduate Dean to be appointed in the UK. She was instrumental in setting up the UK Conference of Pharmacy Education Deans (CoPED) and was the group's first Chair from 2019-21. Anne is also a recognised expert within her field and has had several other external appointments including as a Visiting Professor at both Scottish Schools of Pharmacy (University of Strathclyde and Robert Gordon University), the General Pharmaceutical Council on their Board of Assessors (2001-11) and their Accreditation and Recognition Panel (2012-21). Anne has also been appointed as a member of the Royal Pharmaceutical Society Education Standards Committee. Anne's contribution, both within NES and the wider Pharmacy profession, cannot be underestimated and her wisdom, leadership and professional expertise will be hugely missed. I would like to thank Anne for her very significant contribution to NES and wish her a happy and fulfilling retirement.

## **2. ANNOUNCEMENTS**

### **2.1 Kevin Kelman (Director of NHSS Academy, Learning & Innovation)**

I am very pleased to confirm that Kevin Kelman has been appointed as NES's first Director of NHSS Academy, Learning & Innovation. This role will support NES to work learners, educators, partners and stakeholders to improve education and learning, using technology and innovation to create a better future for health and social care in Scotland. Previously employed as the NHSS Academy Director, Kevin now takes on a broader role which includes leading the development and implementation areas of NES's learning strategy, as well as enhancing NES's role within Scotland's health and social care innovation ecosystem.

### **2.2 Anne Watson (Postgraduate Pharmacy Dean / Director of Pharmacy)**

I am delighted to announce that Professor Anne Watson was honoured with the highest accolade of 'Outstanding Contribution to Pharmacy Practice' at the recent Scottish Pharmacist Awards held on 29 April 2023. This highly prestigious award was presented to Anne in recognition of her outstanding contribution to pharmacy practice in Scotland and she is only the 13<sup>th</sup> person to ever receive the award. I am aware that Anne acknowledged the work of the entire NES Pharmacy team during her acceptance speech which is testament to her inclusive leadership.

### **2.3 Lead Dean Director Appointment – Medical Directorate**

I am pleased to announce the appointment of Dr Nitin Gambhir as a Lead Dean Director. Following a very competitive and high calibre recruitment process Dr Gambhir, who is one of our current GP Associate Directors, will join the Medical Directorate senior team in July 2023.

### **2.4 NES Annual Virtual Conference, 27 & 28 April 2023**

Following on from the success of last year's conference, the 2023 NES Annual Education conference was again held entirely online. The conference theme was 'Collaboration for Improvement' and the programme included a number of joint sessions highlighting interprofessional learning. Session speakers included Professors Gregor Smith (Chief Medical Officer) and Michael West (Senior Visiting Fellow, The King's Fund, Professor of Organisational Psychology, Lancaster University and Emeritus Professor, Aston University). I would like to thank everyone involved in the organisation of the conference, especially the NES Events team.

## **3. STRATEGIC UPDATES**

- 3.1. The health and social care system continues to remain under significant pressure, both in the context of frontline service delivery and the challenging fiscal environment. Board Chief Executives (BCEs) meet frequently with Scottish Government (SG) to discuss future planning and service priorities in relation to the NHS recovery plan and recently met with the new Cabinet Secretary for NHS Recovery, Health and Social Care. NHSS Board Chairs and Chief Executives held a joint session with SG on 27 March 2023 to discuss the delivery of a number of Ministerial priorities including the Care and Wellbeing Portfolio, improved population health and reducing health inequalities.

### **3.2. NHSS Academy – collaboration with Health Education and Improvement Wales (HEIW)**

In his role as the NHSS Academy Director, Kevin Kelman has been meeting with colleagues from HEIW to discuss the scoping of a similar academy approach in Wales. Kevin has been asked to give a presentation to the HEIW leadership team at the end of May. Further information will be provided in future Chief Executive's reports.

### **3.3. Converge International Rural Health Symposium – NES Remote & Rural**

- a. Colleagues from the NES Remote & Rural team within the Medical Directorate have been successful in a project grant application to the Converge International Rural Health Symposium, which is a multidisciplinary conference created to encourage joint rural health research between four universities (Augusta University, the University of Aberdeen, Robert Gordon University and the University of Georgia).
- b. NES colleagues will be collaborating with colleagues from the Medical College of Georgia (Augusta University) and the Centre for Healthcare Education Research and Innovation (CHERI) at the University of Aberdeen to undertake an exciting research project looking at how hybrid healthcare education can drive change in remote, rural and island practice.

### **3.4. National Centre of Excellence in Remote and Rural Health and Social Care**

- a. NES, Scottish Government (SG) officials, advisers and key partners are progressing plans for the establishment of the National Centre for Remote and Rural Health and Social Care (the Centre). NES and SG Primary Care and Workforce colleagues have worked together to establish a revised plan to develop the Centre in a phased approach over the next three years in response to ongoing SG budget pressures. The revised plan was submitted by NES in February 2023 for consideration by the Cabinet Secretary for Health and Social Care. NES is currently waiting for confirmation from SG regarding the funding required to establish the Centre in 2023.
- b. The Centre will support the delivery of improved care for remote, rural and island communities across Scotland and reduce remote, rural and island health and wellbeing inequalities through focused work to improve the sustainability, capacity, and capability of the remote, rural and island primary care and community-based workforce and service delivery.
- c. The development of the Centre is both an ambitious and large-scale undertaking and will require adequate resources and capacity to deliver for Scotland. NES and partner agencies across Scotland already have a significant amount of remote and rural healthcare expertise and resource that the Centre will coordinate to better effect and maximise the return on existing investment, staffing and economies of scale.

### 3.5. **A National Care Service (NCS) for Scotland**

On 18 April 2023, the new First Minister confirmed in a statement to the Scottish Parliament that the proposed National Care Service (Scotland) Bill will be delayed to enable further scrutiny of the proposed legislation and build consensus.

### 3.6. **Sponsorship**

NES and the SG Sponsor team continued engagement during April /May 2023. A Strategic Sponsorship meeting took place with senior NES and SG Sponsor representatives on 25 April and the following items were discussed: new Ministerial priorities, funding arrangements, TURAS and engagement with NHS Scotland Directors of HR / Workforce. Regular informal meetings continue to take place on a fortnightly basis, focusing on commissioning, planning, medium term priorities, as well as ad hoc topics. The SG Sponsor team will be sent an updated version of the 2023-26 NES Draft Strategy in May 2023 for review and information. They have already contributed to the consultation.

### 3.7. **COVID-19 Public Inquiry**

- a. Since the March 2023 Board meeting, NES is in the process of preparing evidence for the UK COVID-19 Public Inquiry module 6, relating to procurement (a newly added module). NES has not received any further requests for evidence from the Scottish COVID-19 Public Inquiry at the time of writing.
- b. The Scottish COVID-19 Public Inquiry has now published information about the inquiry's planned hearing structure and sequencing<sup>1</sup>. The inquiry has adopted a thematic approach to its investigations and hearings and will give priority to evidence from people most impacted by the pandemic in Scotland. The themes are: health and social care, education and young people and finance, business and welfare.

### 3.8. **Climate Change Emergency and Sustainability**

- a. Membership of the NES Climate Change Emergency (CCE) and Sustainability Group has been expanded to include more clinical education and training colleagues and less property and facilities management colleagues, in line with the agreement that NES should focus on embedding climate emergency and sustainability mitigation measures into our education and training programmes as the most effective way of combatting the effects of the crisis. Boards have been asked to nominate a clinical lead for this area, and the Executive Team will make that nomination shortly.
- b. NES received a formal feedback letter from Scottish Government on our CCE and Sustainability 2021/22 report that was submitted last November. The feedback was very positive, although there was a call to include a fuller analysis of all of our carbon emissions in future reports, as there are currently gaps for energy emissions for some of our buildings. The letter was shared with the Audit & Risk Committee at its April 2023 meeting.

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<sup>1</sup> [Inquiry announces hearing structure and sequence | Scottish COVID-19 Inquiry \(covid19inquiry.scot\)](https://www.scottishinquiry.co.uk/news/inquiry-announces-hearing-structure-and-sequence/)

- c. NHS Board Chairs and Chief Executives, and their equivalents from local government, universities and Regional Transport Partnerships were invited to attend a Sustainable Scotland Network conference on 24 May. The Executive Director of Finance attended the event on behalf of NES.
- d. The NHS Scotland Climate Emergency and Sustainability national report for 2021/22 will be published very shortly. The report will be shared with the Board as soon as it becomes available.

### 3.9. **NHS Scotland Academy (NHSSA)**

- a. NHSSA Annual Delivery Planning for 2023/24 is complete and continues to focus on immediate workforce needs, whilst also considering the addition of new programmes to help solve longer-term workforce requirements.
- b. As we continue to establish ways of working for the NHSSA, the first NHSSA Education and Quality Governance Annual Report was recently reviewed and well received by the NES Education & Quality Committee.

#### c. **National Workforce Programmes**

##### i. **National Clinical Skills for Pharmacists Programme**

Four days of Clinical Skills, using the University of Dundee curricula, are delivered most months and dates are now scheduled for the remainder of 2023. We usually deliver a minimum of 60 learner-places each month and have now delivered over 1,200 learner places to 520 learners.

##### ii. **National Ultrasound Training Programme (NUTP)**

The programme commenced with nine learners, who have delivered over 1,500 ultrasound supervised procedures as part of training lists whilst participating in immersion training in at NHS Golden Jubilee (GJ). Each learner is able to access five weeks of immersion training through this programme.

Boards with the longest waiting times have been prioritised to be offered an ultrasound at NHS GJ and this is already having a positive impact across NHS Scotland.

#### d. **National Treatment Centres' Programme**

##### i. **Perioperative Workforce Programme**

We are providing up to 12 places per cohort across the programmes of Foundations in Perioperative Practice, Surgical First Assistant, and Anaesthetic Practitioner.

- ii. The business case for the related workstream to support staff to move from band 2 to band 4 roles in the perioperative environment has been approved and content is being developed.



e. **National Endoscopy Training Programme (NETP)**

- i. Following on from the update provided in the Chief Executive's report to the March 2023 Board confirming that NHS Golden Jubilee (NHS GJ) has achieved JAG (Joint Advisory Group on GI Endoscopy) accreditation, we are now pleased to advise that NHS GJ has recently been approved as a JAG-approved training centre. This will support our hub and spoke model within the NETP and we would like to thank everyone involved for their ongoing commitment and dedication.
- ii. Upskilling for colonoscopy courses have been delivered in NHS Grampian and NHS Tayside, with 40 learners. 32 Trainers have attended Train the Colonoscopy Trainer Courses as we build faculty.
- iii. Immersion Training is going well with 21 learners having completed and 29 more signed up. New Consultants and Trainees closest to CCT (Certificate of Completion of Training) are prioritised for this training.
- iv. ENTS (Endoscopy Non-Technical Skills) Training is meeting a clear need with 21 people having attended the first courses and 63 on the waiting list.
- v. National Faculty - all Boards have completed Service Level Agreements (SLAs) for round one of recruitment, and appointments have been made for round two, with SLAs being put in place for all Boards except NHS Greater Glasgow & Clyde) who have asked for a different approach that we are supporting.
- vi. National Assistant Practitioner Programme (Endoscopy) – the first cohort of eight learners is complete and the impact will be evaluated in due course. Cohort two has commenced in April 2023.

f. **Nursing & Midwifery Council (NMC) OSCE Preparation (Digital learning programme)**

The adult nursing resources have been used by 307 learners and 207 educators in 16 Boards (both Territorial and National). Feedback from users has been very positive. Resources to support midwives and mental health nurses have recently been launched and well-received.

g. **Introduction to roles in in health and social care (Digital learning programme)**

This resource remains in use with positive feedback and an average of 200 new learners each month (over 3,600 in total).

h. **NHS Scotland Youth Academy**

The Skills Development Scotland Healthcare Pathway pilot qualification for senior phase school students has been developed and recruitment has recently begun. The qualification focuses on three challenge projects: spaces and places, community and wellbeing and creativity. The pilot will run in five regions, with 100 students taking part.

### 3.10. NES Corporate Improvement Programme

- a. The NES Executive Team (ET) has approved two further projects into delivery within the Corporate Improvement Programme (CIP) since the March 2023 Chief Executive's report. These are:

- Accrediting Body Status
  - Continuing Professional Development
- b. Two more detailed projects are being worked up at present. These project areas are expected to be presented for consideration and approval in June 2023. They are:
- Turas Refresh
  - Quality Management
- c. A Transformation Group has been established, reporting directly into Executive Team, to oversee all change activity in NES. The first meeting will take place on 18 May 2023

### **3.11. Whistleblowing – Delegated Executive Lead Report**

- a. Between 01 January 2023 and 31 March 2023, NHS Education for Scotland received one whistleblowing concern. The concern, which related to the education and training requirements of a senior position within NES, was received by the Chief Executive on 30 January 2023 and was investigated by a small team, led by the Director of Planning and Performance. The concern was acknowledged within three working days and responded to on 17 February 2023 (14 working days). The investigation reviewed the points raised within the initial correspondence and concluded that the concern was not substantiated with no further action necessary. The concern has afforded us the opportunity to review the processes involved, including information sharing and communication.
- b. With respect to other activities, we continue to review the intelligence obtained from the recent staff survey. Plans are in place to deliver a series of actions that continue to support the requirements of the National Whistleblowing Standards. These include promoting and monitoring essential learning compliance, promoting an open culture of raising any concerns at an early stage, and a short video communication.
- c. Finally, during quarter four of 2022-23, the Director of Planning and Performance participated in the focus group tasked with developing the whistleblowing questions. These questions will be used in this year's 'iMatter' survey.

## **4. DIRECTORATE UPDATES**

### **4.1. Dental (including Healthcare Science)**

- a. Jennifer (Jennie) Knights, Specialist Research Lead in the Dental Clinical Effectiveness workstream, has been selected to join a visit to The University of Maryland for a week in May. This opportunity has come about in the course of undertaking her PhD in Health Services Management at the University of Birmingham. A busy schedule is planned, including a session themed 'Health System challenges in the US, UK, and Ireland' where Jennie will be presenting on work led by NES around mental health and wellbeing in dental teams in Scotland during the COVID-19 pandemic.

- b. Jennie will also be involved in delivering seminars, discussions with faculty about developing joint teaching programmes, a panel talk for PhD students and early career researchers and visits to healthcare facilities. We are proud that a member of NES staff was selected from the cohort of PhD students at the University of Birmingham. Jennie will represent both NES and the University during her visit.

**c. Healthcare Science**

- i. Following concerns from service and the professions about the low clinical scientist training numbers commencing in September 2023, we are currently asking the service about demand for 2024 training posts<sup>2</sup>. Ordinarily, this ask would have been completed in Autumn 2023 (in the year prior to intake) however this year we will complete the exercise by the end of May 2023. This demand information will be compared to NES Finance's best estimate of what is likely to be possible in terms of fundable training posts for 2024 in the absence of any change to investment.
- ii. We have completed assessing our annual round of postgraduate scientist bursary applicants for 2023 and we expect to contribute support to 27 in-service staff who are undertaking masters-level specialisation. 41 applications in total were submitted. All the staff due to be supported are biomedical scientists from the laboratory service. We are also finalising a short impact study for SG on the progress of 20 consultant scientist trainees, all of whom commenced in 2020. Higher specialist training for consultant scientists is a gap in the support offered in Scotland and the 2020 cohort was a single initiative sponsored by SG.
- iii. The NES Healthcare Science Core Team has undergone a redesign with two Programme Director posts (created from the existing establishment) to lead on our training quality and Continuing Professional Development (CPD) workstreams.

## **4.2 NES Technology Service (NTS)**

**a. NTS Organisational Change**

Workshops continue to be held around the scope and approach to phase 2b of the NTS organisational change programme.

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<sup>2</sup> [Current opportunities | Health Care Science \(nhs.scot\)](https://www.nhs.uk/health-care-science/current-opportunities/)

b. **National Digital Platform (NDP)**

- i. **EMPI (Enterprise Master Patient Index)** – The EMPI is currently stable using existing infrastructure. A Short Life Working Group in collaboration with NSS (National Shared Services) and Digital Health and Care colleagues at Scottish Government (SG) has been set up to identify whether the data service can be used as the primary gateway to NewCHI (Community Health Index) in late 2023.
- ii. **NDP Routing Service** – The routing service continues to pass messages between the National Integration Platform (NIP) and cloud-based patient applications. One new request from NHS Lothian has been received since the March 2023 Board meeting. The completion of the transfer of service from Azure to Amazon Web Services (AWS) has also been completed.
- iii. **Media Store** – The NDP media store proof of concept is available and includes a feature to upload large CHI-linked files in multiple parts. The media store uses the AWS FHIR Works open source solutions product however we have recently learned the product is being deprecated. A new technology appraisal is needed to understand the requirements for a long-term media storage solution within the NDP.
- iv. **COVID-19 & Vaccination support** – NTS continue to develop the National Clinical Data Store (NCDS) which is the single point of truth for all vaccination data. The NCDS continues to support workloads provided by the vaccinations management tool. Two read replicas are now in place to support reporting requirements for Public Health Scotland (PHS) and NSS as well as integration demands from health boards.
- v. **Accelerated National Innovation Adoption (ANIA) Pathway programme** – A Senior Product Manager is now in post to understand the NDP needs for the programme's first deliverable project (Digital Dermatology).
- vi. **Digital Prescribing & Dispensing Programme** – A Clinical Lead continues to take part in the programme's leadership activities. NTS are now involved in the Solution Design Authority that has been setup to oversee the architecture and design of the new solution. There is an expectation that the programme will be using NDP Services to deliver. A new Senior Technical Product Manager is now in post and has started work outlining the programme's next steps for NDP delivery.

c. **Education, Training & Workforce**

- i. **Turas Learn** – Updates have been made to improve user experience when viewing completed / 'requires renewal' training modules. The development of a new model for reporting will improve our robustness and increase the quality of reports.

- ii. **Turas Training Programme Management** - Migration work to a new database is progressing well. The FY1 (Junior Doctor Foundation Year 1) post upload was completed within required timelines.
- iii. **Turas Training Portfolio** – The Discovery work in relation to the new ePad portfolio is now complete and development work is underway to deliver identified requirements. Updates to the Orthodontic Therapy portfolio are now complete.

d. **Health & Social Care**

- i. **Digital Front Door** – Scottish Government (SG) have confirmed the launch of Digital Front Door is no longer expected this year. Further discussions will take place with SG to agree the revised scope, roadmap and funding.
- ii. **Real Time Staffing** - now live in Adult In Patients, Critical Care and Mental Health. The Real Time Staffing tool is vital in supporting the implementation of the Health and Social Care Safe Staffing (Scotland) Act 2019 and is a key workstream for SG's Digital Health and Care directorate.
- iii. **OpenEyes** – The rollout of OpenEyes (electronic patient record application for ophthalmology) within NHS Greater Glasgow and Clyde (GGC) continues to progress well. Version 6 of the application is scheduled to go live in early June 2023. A roadmap for 2023/24 was submitted to the OpenEyes Programme Board and the following direction of travel has been agreed: an enhanced version 6 minimum viable product will be released within GGC and a national rollout of OpenEyes within NHS Golden Jubilee, NHS Lanarkshire and other Boards will then be considered.
- iv. **SCI Diabetes (Scottish Care Information – Diabetes Collaboration)** – User Acceptance Testing (UAT) for a new SCI-Diabetes Release is now underway. This UAT will include work relating to Phase 1 of the iDiabetes (intelligent Diabetes) clinical platform, which is a joint initiative between NHS Tayside and the University of Dundee in partnership with the University of Aberdeen and NES NTS. iDiabetes will enable enhanced testing and more advanced analysis of patients' health data.
- v. SCI-Diabetes is supporting the recording of the Scottish National Inpatient Audit (NaDIA) which began on 9 May 2023.
- vi. **SCI Diabetes Weight Management Tool** – This tool is now live across all NHS Boards except NHS GGC who have taken the decision to retain their own solution. Historical data from Boards using the application has now been imported. Costs for product support during 2023/24 have been submitted to SG and confirmation of funding is currently awaited. SG is currently exploring the requirements to allow the commissioning of SCI-Prevent.

- vii. **Recommended Summary Plan for Emergency Care and Treatment (ReSPECT)** - The policy underpinning the programme is being refocussed during the first half of 2023/24. As a result of this there will be no development work undertaken until the future direction is confirmed. NTS will work closely with NMAHP colleagues to develop national education resources to support any future national rollout. The programme remains unfunded; a funding proposal has been submitted to SG and conversations are ongoing.
- viii. **Turas Care Management (TCM)** – NTS continue to await a policy decision from SG regarding the future direction of TCM. As a result no further work is planned until further SG funding is confirmed. As mentioned in the March 2023 CE report, improvements to data linkages are required to enable the future expansion of this application. This potential risk has been raised with SG.

### 4.3 Medicine

- a. **Industrial Action – Junior Doctors**  
Junior Doctors in England went on strike during March and April 2023. On 5 May the ballot result was announced for junior doctors working in Scotland. 5,000 junior doctors were balloted and with a turnout of 71% almost 97% voted for strike action. At the time of writing a notification for strike action has not yet been received.
- b. In the event of any strike action the impact from an educational perspective will be around the Annual Review of Competence Progression (ARCP) process. Mitigation is in place to avoid a significant impact to trainee progression if industrial action is undertaken during the ARCP season.
- c. **Medical Directorate Senior Structure and Governance arrangements**  
The new NES strategy for 2023-26, a change in Executive Medical Director and Deputy Medical Director and three Lead Dean Director retirements has provided an opportunity to review the Medical directorate senior team structure and governance arrangements. Following consultation with and approval from the NES Executive Team, the senior team structure will change from five to three Lead Dean Directors (LDDs), with the three LDDs supported by three Deputy LDDs. This change aims to allow a more strategic role for the LDDs going forward and to support succession planning. A governance review is in progress focussing mainly on the Medical directorate meeting structure at present. This is to ensure that there are appropriate lines of sight for those accountable and that there is awareness for all on key workstreams and areas of risk. In time we will develop our governance framework further and will update as we progress.
- d. **General Practice Training Post expansion**  
From August 2023 there will be an additional 35 training posts within General Practice. Professor Amjad Khan (Postgraduate GP Dean / GP Director) and the team have been developing innovative placements for these additional posts.

## 4.4 Pharmacy

### a. **NES Annual Virtual Conference – 27 & 28 April 2023**

As part of the NES Annual Virtual Conference, NES Pharmacy ran a series of plenaries and seminars, linking with the themes of 'collaboration' and 'workforce transformation'. There were a range of presenters who supported the events including the Chief Pharmaceutical Officer and representatives from the Directors of Pharmacy in Scotland, the General Pharmaceutical Council, the Schools of Pharmacy in Scotland and colleagues from a number of Health Boards. Approximately 100 pharmacy delegates attended the conference on each day. Initial overall feedback has been very positive with great engagement for all sessions.

### b. **Pharmacy Additional Cost of Teaching (ACTp)**

The General Pharmaceutical Council (GPhC) Initial Education and Training Standards (2021) mean that pharmacists will join the register from 2026 as prescribers. In preparation for this, NES has been working with the Schools of Pharmacy in Scotland and stakeholders to increase appropriate Experiential Learning (EL). Despite ongoing challenges, the pharmacy workforce has been able to meet the increased demand from seven to nine weeks of EL for student pharmacists in 2023-24. The very early stages of planning for the 2024-25 academic year has begun to facilitate the next increase from nine weeks of EL to 11 weeks. NES Pharmacy looks forward to continuing to work with student pharmacists to deliver another successful year of EL.

## 4.5 Nursing, Midwifery & Allied Health Professions (NMAHP)

### a. **Education Framework for Levels 2-4 NMAHP Healthcare Support Workers (HCSWs)**

The new NES Development and Education Framework for levels 2-4 NMAHP HCSWs (available [here](#)) describes the core knowledge and skills expected of HCSW at each career level and the education requirements that enable them to develop in their current roles and progress in their careers. Using the framework aims to promote consistency, make best use of the skills and competencies of the HCSW and help teams to define their scope of practice within specific clinical settings to ensure that safe and appropriate delegation and supervision takes place. Delegating activities appropriately and as defined for each level in the framework will enable registered staff to maximise their role in managing and delivering more complex and specialised care.

### b. **NES ARHAI (Antimicrobial Resistance and Healthcare Associated Infection) - Facilitated national stakeholder workshop to co-design and co-produce national role descriptors for Infection Prevention and Control staff in Scotland**

- i. As part of a large Scottish Government commission regarding building capacity and capability amongst the infection prevention and control specialist (IPC) workforce, the NES ARHAI Team facilitated a national stakeholder workshop on 25 April to co-design and co-produce national role descriptors for IPC staff in Scotland. These role descriptors were developed

by the NES ARHAI team in collaboration with IPC stakeholders and include the addition of a new IPC Clinical Lead which was a recommendation from the Queen Elizabeth University Hospitals Oversight Board Final Report in 2020 and included within the Scottish Government's [‘Infection Prevention Workforce: Strategic Plan 2022 – 2024’](#) which was published in December 2022.

- ii. NES have three key recommendations within this strategic plan. We are currently working on Recommendation 15 which includes a review of existing IPC specialist career frameworks and the creation of a new Scottish IPC Specialist Framework. Additionally, and considering the global public health threat around antimicrobial resistance (AMR), the NES ARHAI team are also working on an antimicrobial stewardship (AMS) Generalist Framework in collaboration with key stakeholders including pharmacy (internal NES and external), IPC, the Scottish Antimicrobial Pharmacy Group (SAPG), the Care Inspectorate, Coalition of Care Providers Scotland (CCPS) , and medical, dental and nursing higher education institutions. Both pieces of work reflect the need to assess current and future workforce needs to ensure capacity and capability around IPC and AMS across health and social care for the future.

c. **The Draft Clinical Supervision - Nursing & Midwifery National framework for NHS Scotland**

- i. Key workforce issues affecting Health and Social Care service delivery include the quality of staff experience, wellbeing, and staff retention. As the NHS strives to improve patient outcomes alongside increasing pressures on services and staff, it is vital the workplace experience of staff reflects the person-centred and compassionate approach they are expected to espouse with service users. Not only will this promote the delivery of high-quality care but will serve to increase the resilience of staff, helping to minimise the negative feedback loop that results from increased work burden associated with high staff absence and attrition.
- ii. In line with the Chief Nursing Officer for Scotland's Nursing [2030 Vision](#), the aspiration is for all nurses and midwives to participate in clinical supervision appropriate to their role by 2030. To help achieve this ambition we are working with a wide range of key stakeholders to develop a national framework for the nursing and midwifery workforce. Clinical supervision is a formal process of regular, guided reflection which uses a process of discussion and supportive challenge to support individual development. The framework is based on a restorative model of clinical supervision, focussing on three key functions identified by Brigid Proctor (1987):
  - Normative – focus on professional practice and standards
  - Formative – focus on development of knowledge and skills
  - Restorative – focus on health and well-being, including job satisfaction



- iii. The aim of the NES framework is to transform nurses, midwives and HCSWs (Healthcare Support Worker) experience of clinical supervision in the workplace, to help them to develop and thrive in their role and be better able to provide compassionate, high-quality care. The framework aims to achieve this by putting the individual practitioner's well-being and development at the centre of work-based learning and support. The purpose of the framework is to set out a national benchmark to inform local policy, provision, and practice, promoting a consistent, evidence-based approach for the nursing and midwifery workforce, wherever they work and whatever their role.
  - iv. In tandem with the development of the framework, we are also developing several education resources which will support implementation of the framework including preparation of clinical supervisors. The intention is to use an outcome measure based on supervisee experience to evaluate provision, quality, and improvement of clinical supervision. This will be monitored through the Care Assurance and Improvement Resource (CAIR) dashboard by Healthcare Improvement Scotland.
- d. **Mental Health Improvement and prevention of Self-Harm and Suicide (MHI&SP) Masterclass 'What can we do prevent Suicide within our roles?'**  
Building on our previous successful delivery of the masterclasses within the MHI&SP programme we launched the first masterclass of 2023/24 which was held on 20 April 2023 and attended by 300 participants. The masterclass asked the following question: 'What can we do to prevent Suicide within our roles?' for the health, social care, and wider public sector workforce. The session included a successful question and answer session with Professor Rory O'Connor, Chair of Health Psychology / Lead of the Suicide Behaviour Research Laboratory, the University of Glasgow and Professor Steve Platt, Emeritus Professor of Health Policy Research, the University of Edinburgh.

## 4.6 Planning and Performance

- a. **NES Strategy Development**  
Consultation on the draft NES Strategy for 2023-26 closed on 1 May 2023 and work to prepare the final draft has progressed. The response from the consultation exercise was positive with views from a range of internal and external stakeholders obtained. The final document is presented to the Board for approval at the 25 May Public Board meeting.
- b. **Planning for 2023/24 and beyond**  
In line with Scottish Government requirements and the planning approach for 23-24, the development of a Medium-Term Plan (MTP) covering the period 2023-26 as well as an Annual Delivery Plan (ADP) for 23-24 has progressed in recent weeks. These plans will operationalise delivery of the Board's strategy (once approved) and articulate how NES will contribute to meeting the goals set out in the NHS Scotland Plan and support progress in delivering the key ambitions in the NHS Recovery Plan. The draft ADP is due for submission to Scottish Government by 8 June 2023 and the draft MTP by 7<sup>th</sup> July 2023. Consideration of both documents by the Board has been timetabled into the

Board's 2023-24 schedule of business. Delivery progress against the final plans will be reviewed and reported on a quarterly basis. The draft ADP will be presented to the Board in private ahead of being submitted to Scottish Government.

c. **Communication and Engagement**

A draft NES Communication and Engagement Strategy has been developed and is presented to the Board for approval alongside the draft 2023-26 Strategy. The document outlines the organisation's communications and engagement intent and high-level approach to support the delivery of the new NES Strategy, helping NES staff to understand how their work contributes to our strategic outcomes, supporting internal communications around priorities and organisational change, promoting NES externally and helping external stakeholders to understand and participate in our work and improving the way we communicate. The Communications and Engagement Strategy will be supplemented by refreshed corporate narrative and an internal communications plan which will align with our developing organisational development plan and support corporate change activities.

d. **Monitoring and Management of Performance**

Alongside the development of the NES Strategy, work has progressed on the development of a new approach to performance management centred around a set of Key Performance Indicators (KPIs) which will support the Board in monitoring progress against delivery of its strategic intent and priorities. Moving to this new approach will require a period of transition given that some of the measures require new ways of working to gather and report on the required data and to clarify a baseline position. The final draft of the KPIs is presented to the 25 May Board meeting for approval ahead of commencing reporting in August 2023 with the first tranche of available data.

## **4.7 Psychology**

a. **Trauma Informed Justice: A Knowledge and Skills Framework for Working with Victims and Witnesses - launched 3 May 2023**

[Link to Framework and Executive Summary](#)

- i. Recent reports and the recommendations of the Lord Justice Clerk's review group on the management of sexual offences highlighted ways in which witnesses' experiences of trauma can be exacerbated by the justice process, and the need for a justice system designed to respond in ways that understand and adapt to the impact of trauma on witnesses and support their recovery. The recommendations recognised the critical importance of staff across all organisations having a shared understanding about the impact of trauma, and consistently having the additional knowledge and skills appropriate to their role in order to do no harm, minimise re-traumatisation, support recovery, and maintains their engagement to gain and interpret best evidence for those affected by trauma.

- ii. In response, the Victims Taskforce, chaired by the then Cabinet Secretary for Justice (now First Minister) and the Lord Advocate commissioned NES to construct a framework that identifies the knowledge and skills that staff across all stages of the justice journey would need to have in order to be able to achieve the aims above.
- iii. Over the course of the past two years the trauma workstream in the Psychology directorate have constructed the framework, in partnership with leaders of 15 justice organisations, and with 12 victims and witnesses, and from a wide range of evidence and literature reviews, and in consultation across the justice sector.
- iv. The framework was formally launched in Edinburgh on 3 May 2023 by the Cabinet Secretary for Justice and Home Affairs and The Lord Advocate. NES Chair David Garbutt and Dr Caroline Bruce (Head of Programme for Trauma) also gave a keynote on behalf of NES. There were 150 attendees from across the justice sector, with plenary contributions from leadership within COPFS (Crown Office and Procurator Fiscal Service), Police Scotland, SCTS (Scottish Courts and Tribunals Service), Judicial Institute, and the Law Society of Scotland with their implementation plans. The recently published Victims Witness and Justice Reform (Scotland) Bill includes legislation that will place trauma informed practice across all criminal and civil procedures on a statutory footing, and the framework was also the subject of a debate in the Scottish Parliament on 9 May 2023.
- v. **Future implications**  
We anticipate that NES will receive further commissions to start to develop and deliver training resources and events to support the implementation of the framework in practice. Of note over the past year NES already developed and delivered a programme of training and resources to all high court judges in partnership with the Judicial Institute, in line with Recommendation 2 of the Lord Justice Clerk Review Group Recommendations for the Management of Sexual Offences Cases.

#### **4.8 Social Care**

- a. Following a commission from Scottish Government, the Social Care Directorate has been partnering with the Centre for Workforce Supply (CWS) to recruit staff to support a pilot to recruit social care workers from overseas. While the preferred candidates are going through pre-employment checks, the Associate Director has worked with the Programme Lead for the CWS and with colleagues from the Scottish Government and COSLA (Convention of Scottish Local Authorities) to advance the work.
- b. The Social Care Directorate have continued to engage with relevant stakeholders on the draft NES strategy. As well as meeting the Chief Executive of CCPS, we participated in a session with member organisations from the Health and Social Care Alliance. We are also exploring with the Alliance how they might support NES to ensure our activity is informed by the voices of people with lived experience.

- c. We have secured support and a commitment for funding from the Scottish Government to deliver a programme that will 'Repurpose Turas Learn' content for the social care workforce. We intend that this will be a joint initiative with COSLA, Scottish Care and CCPS. This initiative recognises that there is a great deal of content that is currently on Turas that could benefit the social care workforce in Scotland. Our intention is to scope this out, prioritise content and look to develop it to ensure that it reflects the language, ambitions and operating conditions of social care. Working with the Scottish Social Services Council (SSSC), the Social Care Directorate will look to ensure that revised content enables the registered workforce to meet and demonstrate competence in respect of professional and regulatory standards, where possible with accreditation through 'Open Badges'.
- d. To deliver on actions within the National Workforce Strategy, we have secured a further commission to work with the SSSC on developing the national induction framework and a model of Continuous Professional Learning (CPL) for the social care workforce in Scotland.
- e. The Social Care Directorate continues to work with NMAHP colleagues to support the Discharge without Delay workstream. This programme aims to prevent delay through early and effective planning, limiting hospital stays to what is clinically and functionally essential, and getting people home at the earliest and safest opportunity. We have developed a proposal for developing education and learning on effective discharge practice which includes simulation as a learning method, to improve staff confidence and competence to hold effective discharge conversations. Scoping this work has been informed by effective engagements with colleagues in NES and Healthcare Improvement Scotland (HIS) who are developing and delivering resources to identify and support unpaid carers.
- f. The Director of Social Care is again shortly to commence chairing the selection panel for the second cohort on the 'Developing Senior Systems Leadership' Programme, as part of the wider Leading2Change Programme. The approach being taken this year is informed by our experience in year one and on feedback from candidates. In promoting this opportunity, the faculty has delivered a range of further actions to seek to secure more applications from system leaders in social work and social care services.

## 4.9 Workforce

### a. **NES Workforce Planning**

The Strategic Workforce Plan 2022-2025 was published on the NES website in October 2022. Scottish Government will require an annual update on progress of actions and assumptions made in the original plan. The first update is due in October 2023.

**b. Equality, Diversity & Inclusion**

These remain strong focus areas for NES, across the breadth of NES activities and in how we attract, engage, develop and retain our workforce. This year we will have an added focus on anti-racism with the NES Executive Team having a performance objective to further embed anti-racism measures across the organisation and all staff having a learning objective to deepen their understanding on this important subject. The Equality, Diversity and Human Rights Team hosted an event by the Coalition for Racial Equality and Rights (CRER) to raise awareness about an anti-racist approach and resources that CRER has been commissioned to develop for health and social care staff.

**c. Recruitment Activity**

Year on year recruitment in the last quarter of 2022-23 showed a slight decrease following a year of growth. Robust establishment control processes are in place with proposed recruitment reviewed fortnightly by the Executive Team following directorate approval. Ongoing Scottish Government temporary funding arrangements continue to lead to a high number of fixed term contract recruits and temporary agency workers - as of 31 December 2022, the percentage of staff in fixed term/agency contracts was 23.5%. The volumes of agency workers remain high (62) with NTS having the greatest reliance.

- d. The final phase of transitioning NES recruitment activity into the East Region Recruitment Service (ERRS) is underway with key components being speciality recruitment for NTS and agency recruitment. A Performance Oversight Group continues to meet monthly to monitor performance against the SLA and deal with issues.

- e. An internal audit of recruitment processes has resulted in an amber-green rating with one moderate and a small number of minor recommendations. The moderate outcome related to identification of business-critical roles as part of workforce planning processes. This will be addressed in the annual update of the NES Workforce Plan.

**f. Lead Employer**

The Lead Employer Project officially closed on 31 March 2023 having created the processes, systems and communications to support the Lead Employer Programme for all Doctors and Dentists in Training. The project has been a significant success, improving the employment experience of these staff across the health sector

- g. In 2022 there was a significant, UK-wide increase in the number of international Doctors in Training (DiTs) requiring a visa in order to be eligible to work in the UK. This number is projected to rise further in August 2023 with a further 17% increase being forecast. This is expected to put considerable pressure on staff achieving the necessary documentation by their due start dates. Several measures have been put in place by NES HR to maximise the probability of achieving that goal, including an additional 'booster' team of staff, automation and other process changes. However, Home Office queues remain a clear risk. PVG and sponsorship processes are underway for 968 Foundation Year Trainees with Core and Speciality Trainees to follow.

**h. Industrial Relations**

The national pay related ballot of Junior Doctors closed on 5 May 2023 with NES, and other Lead Employers, notified of the numbers indicating they would be prepared to take strike action. Formal notification of the intention to take strike action is awaited. Central guidance has been prepared by Lead Employers for all Placement Boards so that local arrangements can be planned to mitigate risk. NES has weekly business continuity planning in place given the impact on 'business as usual' processes such as assessment of DDiT (Doctors and Dentists in Training) competence, the impact on Placement Boards of NES employed DDiTs potentially taking industrial action and the impact on NES DDiT employees themselves. The NES CEO is chairing the Employers Reference Group to provide advice in the junior doctor pay negotiations.

**i. Widening Access/ Employability/Careers**

The NES Widening Access Team is working with directorate representatives from across NES to develop a 'Widening Access Framework', which will provide high level oversight and governance for widening access programmes and activities across NES, and assist future planning and prioritisation of work. This work also supports NES equality and diversity commitments. NES Widening Access programmes and activities will align with policy and direction emerging from the Scottish Government (SG) Workforce Directorate notably the workforce elements of the national Place and Wellbeing Programme and the Anchor Institutions model. A national group has been established by SG to steer and coordinate the development of Apprenticeships and other pathways into employment.

- j. Exploratory conversations with SG are underway regarding proposals to develop an NHSS Finance Academy, led by the NES Executive Director of Finance. Work is also taking place to develop initiatives supporting the development of those in Business and Administration and Estates and Facilities roles.

**k. Succession Planning & Talent Management**

Work will commence during the next three months on succession planning related to executive / senior management roles in NES. This will result in an analysis of potential candidates for roles and their perceived readiness. The Executive Team will lead the process supported by the Workforce Directorate, providing materials and guidance. An analysis of succession risk, together with mitigating actions will be produced for consideration by the relevant NES standing committees. Individual development plans will be an output for all those in the succession plan, owned by the individual and their line manager and centrally monitored and supported.

- l. The Graduate Management Training Scheme appointment process for 2023 has concluded with 8 applicants offered roles on behalf of NHSS Boards. Work to redesign the programme is underway ahead of the 2024 intake.

**m. NES Internal Learning & Development**

Essential learning compliance has increased from 69% to 87% in the last financial year (based on data as at 4 April) across NES. The improvement reflects a focused improvement plan which included refreshing content, widening accessibility, and actively monitoring and encouraging managers to work with their teams to ensure completion.

**n. Leadership Development**

Leading to Change, the programme of work supporting development of leaders across health, social care and social work sectors, for which NES is the strategic delivery partner, is providing a range of opportunities to leaders including those in NES. This programme will evolve over the next five years and will include support to succession planning, initially in the health sector, at senior executive level. Cohort one of the Developing Senior Systems Leadership has recently completed with early feedback indicating that it has been very successful. A formal evaluation is being undertaken.

**o. Building Digital Skills and Leadership Programme**

NES is the strategic delivery partner for Scottish Government in improving digital skills and leadership across the health and social care sector. 'Leading Digital Transformation in Health & Care for Scotland', a flexible certificate, diploma or full MSc programme, has recently been designed and launched in conjunction with the University of Edinburgh, with 50 participants from across a wide range of organisations across the health and care sector. NES staff are among the participants. Work is well underway to design a Board Workshop: Leading in a Digital Age targeted at Executive and Non-Executive Board members and offering the opportunity to support digital transformation across the health and care sector.

**p. Centre for Workforce Supply (CWS)**

The CWS continues to support NHSS Boards on a wide range of activities essential to international recruitment of a range of clinical staff including nurses, AHPs and radiographers. Working with the NES Medical Directorate, options to support international medical recruitment have been mapped with further detail into NHSS Board gaps being gathered. This will allow appropriate international recruitment strategies to be pursued. A pilot has been co-developed by the CWS, NES Social Care Directorate, Scottish Government and COSLA to pilot a support model for the international recruitment of social care staff. An international recruitment hub has been developed on the NHSS Careers Website to attract and support potential applicants.

**q. Supporting Armed Forces Employment Programme (SAFE)**

SAFE will be launched in June 2023 to align with the annual Armed Forces week. Focus areas of work for the programme include increasing awareness of routes into health and social care for veterans, service leavers and their families as well as working with employers to increase awareness of armed forces communities.

## **CALENDAR**

This section of the report provides an overview of the meetings I have attended since 16 March 2023. Rather than list every date individually, where possible meetings have been grouped and additional context provided.

### **NES Executive Team (ET) and Strategic Implementation Group (SIG)**

The NES Executive Team (direct reports to the Chief Executive) meets formally on a twice-monthly basis to focus on and consider strategic matters, collective strategic decision-making, strategic scrutiny and cross-organisational leadership.

The Strategic Implementation Group (SIG) meets for a business meeting once a month. SIG meetings are chaired by Karen Wilson (Executive Director of Nursing / Deputy Chief Executive (Clinical)) and Tracey Ashworth-Davies (Director of Workforce / Deputy Chief Executive (Corporate)).

### **NHS National Board Chief Executives (BCEs)**

BCEs of the national Boards and Public Health Scotland meet fortnightly via Microsoft Teams.

### **NHS BCEs + Scottish Government**

NHS Board CEs meet monthly for Private, Strategy and Business meetings. All Accountable Officers also meet monthly with Caroline Lamb (Director-General of Health and Social Care and Chief Executive of NHS Scotland). These meetings are held in a hybrid format.

NHS Scotland Board Chairs and Chief Executives meet monthly for a System Pressures and Recovery Meeting with the Cabinet Secretary NHS Recovery, Health and Social Care.

## **Meetings between 16 March – 17 May 2023**

### **NES meetings**

I continue to enjoy meeting with a range of NES staff either to discuss key NES programmes and initiatives or as part of their induction. In recent weeks I have attended directorate team meetings to discuss the ongoing development of the NES strategic plan and listen to colleagues' feedback. I have also met with colleagues at various times to discuss the follow: funding for Pharmacist training, corporate improvement, Turas and strategic performance measures and Board reporting.

I always welcome the opportunity to meet with trainees and colleagues who are participating in NES education and training events. Since the last Board meeting I joined a Scottish Clinical Leadership Fellow (SCLF) event to talk about leadership and I also gave a guest lecture on leadership and management to a group of Dental Specialty Registrars (StRs). The NES Learning at Work Week ran from 15 – 19 May 2023 and I led a session with other senior colleagues discussing NES and the year ahead.



**NHS Scotland**

I have met with a wide range of colleagues across NHS Scotland since the last Board meeting including Chief Executives and other senior colleagues at NHS Grampian, Highland, Fife, Forth Valley, Golden Jubilee, Healthcare Improvement Scotland, the Scottish Ambulance Service, National Shared Services (NSS), NHS 24 and Public Health Scotland.

**External Stakeholders**

I continue to meet with a wide range of key stakeholders across health and social care. Since the last Board meeting I have met with Chief Executives and senior representatives from the Scottish Funding Council, British Medical Association, University of Dundee, Scottish Social Services Council and the General Medical Council (GMC).

**Scottish Government (SG)**

I have met with a number of SG colleagues since the last Board meeting including Gillian Russell (Director of Health Workforce), Prof. Dame Anna Dominiczak (Chief Scientist), Catherine McMeeken (Deputy Director, Director of Leadership, Culture and Wellbeing), John Burns (NHS Scotland Chief Operating Officer) and Prof. Sir Gregor Smith (Chief Medical Officer).

In terms of wider SG meetings I have attended the regular NES/SG sponsorship meeting, the Improving Wellbeing and Workforce Cultures Strategy Board, a joint meeting of the National Strategy for Economic Transformation Board and the Care and Wellbeing Programme Board, the Management Steering Group, the Diagnostic Strategic Network Oversight Board and the Innovation Design Authority.

I have also chaired the Employers Reference Group meetings that are providing advice in the junior doctor pay negotiations and I chaired a meeting of the Mental Health and Wellbeing Workforce Education and Training Strategic Advisory Group. I also attended an SG / NHSS event on the implementation of the 2<sup>nd</sup> edition of the Blueprint for Good Governance and have attended meetings with SG colleagues to discuss the Dementia Strategy, the Suicide Prevention Strategy, leadership development, Leading to Change and mental health.

**NHS Education for Scotland**  
**Item 8a**  
**25 May 2023**

**NES/23/32**

## **Board Paper**

### **1. Title of Paper**

Draft Strategy 2023-26

### **2. Author(s) of Paper**

Christina Bichan, Director of Planning and Performance

### **3. Lead Director(s)**

Karen Reid, Chief Executive & Accountable Officer  
Christina Bichan, Director of Planning and Performance

### **4. Situation/Purpose of paper**

The Board are asked to review and approve the new NES strategy 2023-26 which is accessible online at [Corporate Strategy 2023-26 updated version | NHS Education for Scotland \(nes.digital\)](#) and attached as a PDF version.

### **5. Background and Route to Meeting**

- 5.1 Development of a new Strategy for NES has been progressing since last winter with initial thinking presented to the Board for feedback at a Board Development session in October 2022 and the Strategic Implementation Group in November 2022. This work has been taken forward through a Strategy Development Group established in July 2022 comprising of the Chief Executive, Deputy Chief Executives, Head of Corporate Communications, Head of Strategy Development (Chief Executive's Office) and Director of Planning and Performance. Figure 1 on the following page shows the output of a Board development session held in late 2021 as part of initial Strategy engagement and scoping activities.

Figure 1: Output of Initial Board Engagement Activity



5.2 Through our draft strategy we articulate how our vision will shape our direction, intent and priorities over the next 3 years. The strategy is an outcome focussed document and seeks to articulate the difference we want to make for our staff, citizens, the health and social care workforce and our partners. Alongside development of our Strategy we have worked with our Scottish Government Sponsor team to agree the medium term delivery priorities for NES which are woven into our strategic commitments.

5.3 The draft NES Strategy was presented to the Board at the February 2023 Board Development Session, ahead of being issued for public consultation. Our consultation and engagement activities ran through March and April 2023 and the final draft has now been prepared, informed and shaped by the feedback received from stakeholders.

## 6. Assessment / Key Issues

6.1 The draft NES Strategy is the result of a rigorous process that has included a formal public consultation, the outcome of which is summarised in Appendix 1 and an equality impact assessment (EQIA) which is presented in Appendix 2.

6.2 Delivery of the NES Strategy will be supported by the Communication and Engagement Strategy and Key Performance Indicators also put forward for Board consideration at the May 2023 Board meeting and enabled by the Medium Term Plan which is currently under development.

## 7. Recommendations

Board members are asked to review and approve the new NES strategy 2023-26.

**Author to complete**

**a) Have Educational implications been considered?**

- ☒ Yes  
☐ No

**b) Is there a budget allocated for this work?**

- ☒ Yes  
☐ No

**c) Alignment with [NES Strategy 2019-2024](#)**

- ☒ 1. A high-quality learning and employment environment  
☒ 2. National infrastructure to improve attraction, recruitment, training and retention  
☒ 3. Education and training for a skilled, adaptable and compassionate workforce  
☒ 4. A national digital platform, analysis, intelligence and modelling  
☒ 5. A high performing organisation (NES)

**d) Have key risks and mitigation measures been identified?**

- ☒ Yes  
☐ No

**e) Have Equality and Diversity and health inequality issues been considered?**

- ☒ Yes  
☐ No

**f) Have you considered a staff and external stakeholder engagement plan?**

- ☒ Yes  
☐ No

Christina Bichan, Director of Planning and Performance  
NES  
15/05/2023



# OUR STRATEGY 2023-26

People, Partnerships, Performance



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## Introduction from the Chair & Chief Executive

NHS Education for Scotland (NES) helps people who work in health and social care to get the education and skills they need to provide good quality care for people in Scotland.

It doesn't matter whether you work in health or social care or what your life experience is - we are here to support you. We provide education, training, workforce development, data and technology for health and social care in Scotland. Our goal is to create a workforce that meets people's needs, as well as the needs of staff, carers, and the people of Scotland by working in partnership with our staff, learners and stakeholders.

This document describes the purpose, vision and functions of NES before setting out our areas of focus for the period to 2026, framed around the themes of people, partnership and performance. Our strategy is deliberately concise, to provide clarity on our strategic intent and the difference we are seeking to make but allowing space for the detail of how we deliver to be developed in partnership and articulated in our Medium Term Plan and Annual Delivery Plans.

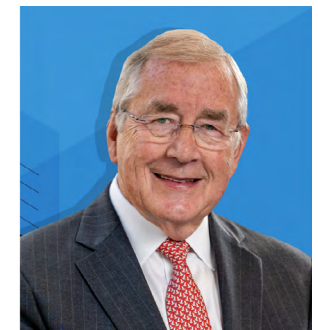
*The heart of this strategy is centred on our fundamental belief in being adaptable, creative and responsive to the needs of the workforce and the communities they serve.*

We are firmly committed to improving population health, reducing health inequalities and working nationally and locally with partners to make a positive and lasting impact to improving the wellbeing of the people of Scotland.

Over the next three years we will work with our learners, educators, partners and stakeholders to improve education and learning, using technology and innovation to create a better future for health and social care. Our focus is, and will remain, improving people's health and care outcomes through a competent, confident and skilled workforce while supporting Scottish Government's policies.



**Karen Reid**  
Chief Executive



**David Garbutt**  
Board Chair





## Our purpose and vision

### Purpose

To be a collaborative, innovative and inclusive learning organisation that provides high quality education, training, workforce development, workforce data and technology for Scotland's health and social care workforce.

### Vision

Supporting better rights-based quality care and outcomes for every person in Scotland through a skilled, capable and resilient health and social care workforce.

## What we do

NES plays an important role in improving the health of the population and reducing health inequalities in our communities.

By attracting people to careers in health and social care, we can create jobs and boost the economy. Our work programmes ensure that those who work in health, social care and social work are skilled, confident, and motivated to continually improve outcomes for people. We promote and uphold human rights through our education and training and provide challenge where these are not being upheld.

*We listen to the people who use our services and design our activities in partnership with them.*

We recognise the challenges being experienced across the health and social care sector as Scotland's population ages and we recover from the impact of the pandemic. The need to balance increased and changing health and social care needs alongside the availability of workforce and finance means it has never been more important to find new ways of supporting staff wellbeing, working in local communities, and to innovate, using technology, data, information and intelligence to find better solutions.



*To meet these challenges, we will work in partnership, demonstrating curiosity, agility and a focus on the future and what we can do collectively to support the health and social care sector in developing a workforce with the right skills, education, knowledge, and wellbeing to reduce health inequalities and deliver improved outcomes for the people of Scotland.*





## The difference we make

The work we do affects everyone who works in and with health and social care services, as well as every person in every community in Scotland.

We design and deliver education, ensure quality and standards, and use technology to enable staff to be skilled, confident, and motivated to provide better outcomes.

*We are focused on preparing and shaping the workforce for the future and the changes in health and social care necessary to improve outcomes.*

We work with the Scottish Government, local government, NHS, Health and Social Care Partnerships, social care providers, academia, regulators, and other strategic partners to create new roles and services and develop new and exciting career pathways for future generations. We recognise the scale and complexity of the health and social care landscape and the challenge this creates in terms of reach and impact. Understanding the difference we make and using measurement to monitor and drive our progress is central to this Strategy alongside operating with creativity and responsiveness to meet the needs of partners and those they serve.

## The policy context in which we work

We work closely with the Scottish Government to help shape health and social care policies.

During these unprecedented times, demands on our colleagues, the people of Scotland and communities have never been greater.

That is why we are using our expertise to help improve care and reduce inequalities through supporting health and social care reform programmes, such as the Scottish Government's Care and Wellbeing Portfolio, and the Scottish Government's commitment to Human Rights and the delivery of a National Care Service.

*Over the past five years, especially during the pandemic, there has been an even greater focus on workforce skills, education, and wellbeing to create a more joined-up and sustainable approach to the health and social care system for Scotland.*



We are taking lessons from the COVID-19 pandemic, including from the COVID inquiries, and working to deliver national priorities like those in the Scottish Government's National Workforce Strategy for Health and Care.



## Our strategic approach

### Education, Training and Workforce Development

Our main responsibility is to develop and deliver education and training for the NHS in Scotland and we play a similarly important role in relation to social care and social work. This includes undergraduate, postgraduate, and continuing professional development. We extend our offer and reach to support other public bodies through activities such as the National Trauma Training Programme.

*In the next three years, we will work with Scottish Government, the health and social care sector, academia, and regulators to develop new leadership and innovation programs, support succession planning and talent management, and create new education and training routes that meet the needs of our population.*

We will explore new models of education and training, in collaboration with partners, across health and social care disciplines. We will also support acceleration of skills development in areas key to service transformation including leadership, digital and data.

### Data, Intelligence and Workforce Supply

Our role as the official provider of workforce statistics and strategic delivery partner of Scottish Government on technology and information resources is growing to meet the workforce pressures faced by health and social care and societal need. Over the next three years, we will target skills development in digital and seek to improve the range, quality, detail, analysis, and reporting of workforce data. Building on the role of the Centre for Workforce Supply, we will work collaboratively with health, social care and academic partners to utilise population health and workforce data. This will enable data informed workforce planning, service redesign, new models of care and creation of new roles and qualifications.

### Educational Research

Our ambition is to be a world class organisation for education, training and learning, working with the Office of the Chief Scientist to the Scottish Government, as well as other partners, to build research capacity within the health and social care system. We will focus on educational research and knowledge services, including the use of artificial intelligence (AI) in education, to shape the future of learning within health and social care and ensure best practice can be adopted across the sector. We will also research how technology can improve the education and training of the health and social care workforce, encompassing both paid and volunteer roles.

### Digital Innovation & Delivery

To support delivery of the Scotland's Digital Health and Care Strategy (a joint initiative between Scottish Government and COSLA), we will use technology to improve health and social care services in Scotland, working collaboratively with partners. This includes building digital solutions and using cloud-based services to support better outcomes for the people of Scotland and address inequalities.

**Digital Innovation & Delivery (continued...)**

We will develop a national digital platform that integrates data, intelligence and applications, and deliver a Digital Front Door to make it easier for people to access services and information. Our aim is to help health and social care staff work more efficiently and effectively by providing them with the information they need. We will also work collaboratively as part of Accelerated National Innovation Adoption to assess and scale innovation, supporting the sustainability of NHS Scotland.



## Our focus for 2023-26

Our focus is to build careers, lives and the future sustainability of the health and social care workforce through a focus on people, partnerships and performance. We will deliver our strategic ambition through our medium term plan and annual delivery plans, measuring and managing our performance against Key Performance Indicators.

### People

#### Objectives

We will:

- › Support NES staff to be the best they can be through developing new career pathways and ways of working, well being initiatives and enabling their professional development.

- › Seek to eliminate the gender pay gap across all protected characteristics and engage younger people in the NES Workforce.
- › Support role re-design and transformation to enable early intervention and prevention, optimise care pathways, address workforce shortages and complement wider service reform and transformation activity across the health and social care system.
- › Scope, design and deliver a programme of workforce development activity to increase the capacity and capability of the social care workforce working collaboratively with the Scottish Social Services Council.
- › Increase capacity and capability to deliver psychological interventions and therapies to support the people of Scotland including the health and social care workforce.
- › Lead and deliver high-quality education, training and continuous professional development across all health and social care disciplines.
- › Develop the education, training and tools required to support health and care professionals in meeting the Health and Social Care standards, practising Realistic Medicine and delivering value-based health and care in a way which is meaningful to their roles and those they support.

- Support the health and social care workforce including children, young people and justice services to become trauma informed and trauma responsive.
- Support professionalism in education by educating educators across health and social care, with a particular focus on digitally enabled learning.
- Deliver the NES Workforce Plan and Organisational Development Plan.

## Outcomes

### Our Staff

I feel part of an inclusive organisation which cares about my wellbeing, supports me to achieve my career aspirations and values me for my contribution.

### People of Scotland

I am confident that the people providing my care have the right skills to support my needs.

### Health & Social Care Workforce

I am confident NES understands the needs of my role and the community that I work in. I feel supported to develop the skills that I need to work in an integrated and person-centred way.

### Partners

I am confident that the views of my organisation and those we represent are sought, understood and supported through the education, training, workforce development and technology opportunities NES provide.

## Commitments, contribution and collaborations

- We are committed to 'The Promise,' which is Scotland's goal to be the best place in the world for children to grow up. We want children to be loved, safe, respected, and realise their full potential. As a corporate parent, we are dedicated to achieving this goal.
- We will increase our focus on developing education and training for the health and social care sector and particularly for the children and young people and justice workforce so that they are equipped with the right skills to enable good outcomes and experiences.
- We will increase education, training and promote apprenticeships for young people, supporting them to be better prepared for the world of work and to understand the opportunities available through a career in health and social care.
- We will care for the wellbeing, health, and safety of our staff and those who access our education and training, providing opportunities for them to achieve their full potential.
- We will support the values of care and compassion, dignity and respect, openness, honesty, responsibility, quality and teamwork, by encouraging positive behaviours and workplace practices so staff across the health and social care workforce experience a workplace culture which is aligned to those values.

- › We will enable a diverse range of people to flourish by widening access to careers in health and social care so that, whatever a person's life experience, they have access to education and training to support them with their role and career aspirations.
- 
- › We will support transformation in roles and ways of working across health and social care to improve the care and wellbeing of people in Scotland by making careers in health and social care more accessible and attractive and enhancing our reach and approach to educational research, innovation, and technology.

## Partnerships

### Objectives

We will:

- › Improve the range, quality, detail, analysis, and reporting of workforce data linked to population health and care needs, working in collaboration with partners.
- 
- › Work in partnership to scope the skills and training required to deliver and implement health care research, development and innovation.
- 
- › Build our capability around workforce supply to develop resourcing strategies which address supply shortages and provide centralised co-ordination and recruitment expertise.
- 
- › Develop and deliver accelerated training in areas of need through the NHS Scotland Academy.
- 
- › Act as the strategic delivery partner to Scottish Government on activities which target skills development in areas such as leadership, digital and data.
- 
- › Scope and develop a National Centre for Remote and Rural Health and Social Care.
- 

- › Develop and implement engagement and participation activities in partnership with people with lived experience to inform our work.
- 
- › Work with partners and staff to provide high quality and relevant equality and human rights education and learning resources.
- 
- › Support development of a portable passport of learning – to support professional development, which will be portable across employers and aid career development.

### Outcomes

#### Our Staff

I am empowered to reach out to others in partnership and make connections to support me in understanding the outcomes that matter most to people from the work that I do.

#### People of Scotland

I know that my voice is being heard, either through my direct involvement, or through the involvement of others. This ensures that the education of the health and social care workforce is guided and aligned to my needs.



### Health & Social Care Workforce

I am confident that the education, training and workforce development I receive from NES is co-designed and shaped by the voice and needs of people with lived experience as well as the needs of health and social care staff.

### Partners

I can deliver shared priorities which improve outcomes and create sustainability and value across the health and social care system because of my work with NES.

### Commitments, contribution and collaborations

- › We will actively involve partners and those with lived or living experience of health and social care in the design of our education, learning, workforce, and technology development, to support achievement of the outcomes that matter most to people.

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- › We will understand and articulate national and local workforce needs through our work with a diverse range of stakeholders and the combined analysis of a range of data sources to build a picture of national and local workforce needs to inform planning and service delivery.

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- › We will contribute to community wealth-building and improving population health through employability and skills. We will do this by codesigning and delivering the highest quality education, training, and workforce development, to support the creation and retention of good quality local employment opportunities in health and social care.

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- › We will work with partners and the health and social care workforce to encourage proactive and preventative care approaches supporting improved outcomes and the sustainability of health and social care services.

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- › We will work collaboratively to widen access to careers in health and social care so that, whatever a person's life experience, they have better access to job opportunities, learning and development.

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- › We will work with the health and social care sector to identify the barriers to delivering improved outcomes and shape solutions, acknowledging the differences in terms and conditions, accessibility, connectivity as well as the aspirations of the Fair Work agenda.

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- › We will broaden our reach and form new alliances and partnerships, at home and abroad, to share learning and develop new ways of working that meet the needs of our communities.

## Performance

### Objectives

We will:

- › Develop and deliver the National Digital Platform, Digital Front Door and Digitally Enabled Workforce Programme in collaboration with partners such as Scottish Government, COSLA, NHS National Services Scotland and the Digital Health and Care Innovation Centre.
- › Maximise the efficiency of our organisation, clearly demonstrating best value in our work.
- › Refresh and redesign our learning experience platforms and user interfaces to reduce duplication, promote quality, consistency and best value as well as responding to Board, Health and Social Care Partnership/Third and Independent sector needs.
- › Scope and deliver a range of national leadership and quality improvement programmes and resources for the health and social care workforce.
- › Develop education and training products that encompass sustainability and climate change learning materials to develop the knowledge and skills of the workforce in protecting our environment and tackling the climate emergency.
- › Strengthen our organisational focus on sustainability and climate change to achieve carbon efficiency.

### Outcomes

#### Our Staff

I collaborate with colleagues across NES to develop new and innovative ways of working which build on our shared learning and continuously improve the services we provide.

#### People of Scotland

I know that the health and social care services in my community are delivered by staff who have the knowledge and skills to deliver high quality, safe and compassionate care.

#### Health & Social Care Workforce

I am confident NES influences and enables change in the way services are delivered across the health and social care sector, supporting us to make a positive difference to people and communities.

#### Partners

I know that NES's work improves outcomes for people and supports Scottish Government's vision to improve the care and wellbeing of people in Scotland.

### Commitments, contribution and collaborations

- › We will achieve best value in the delivery of our long-term plan through transforming our business systems, governance, and operating model and maximising the opportunity to transform pathways and service delivery supporting longer term national ambitions of public sector reform.
- › We will support the delivery of more sustainable care and help tackle the climate emergency by ensuring these are key areas within our education, training and workforce development.
- › We will strive for continual improvement in our organisational sustainability and carbon performance.
- › We will support "Once for Scotland" principles by proactively sharing our resources, learning and experience with partners to maximise value and impact.
- › We will work collaboratively to measure the impact of our activities, enabling us to demonstrate the difference we make through our work.
- › We will achieve the status of a credit-rating body, conferring multiple benefits for learners, employers and the wider system as well as enhancing our credibility as the leader of education and training in the health and social care sector.



## Measuring and Monitoring Performance

To enable us to deliver our strategic priorities, it is important that we operate as a high-performing public body.

This means being able to demonstrate that our work contributes to the Scottish Government's National Performance Framework and budget priorities, that we are efficient and provide value for money, and that we comply with the legal obligations that govern our ways of working and ensure accountability.

We will work in sustainable ways that promote fairness, efficient use of resources, and risk management. We will measure our progress and impact using key performance indicators and report publicly on it.

We will ensure this is done through a strong governance model.

We will test our progress by asking the following questions on an iterative basis:

### How well do we support our Staff?

- › Employee satisfaction
- › Staff wellbeing
- › Employee diversity and inclusion

### How well do we support our learners/trainees?

- › Quality of clinical training environment
- › Funded trainee placements (fill rate) Learner scale and reach
- › Learner engagement / satisfaction experience
- › Attraction, reach and accessibility
- › Educating the health and social care workforce in delivering sustainable integrated care and protecting the environment.

### How well do we meet the needs of our partners?

- › Utilisation of NES workforce data and developing digital skills
- › Stakeholder satisfaction
- › Involvement of our staff, partners and people with lived/living experience
- › Education, research and strategic collaborations
- › Supporting young people to be better prepared for the world of work and developing local employment opportunities.
- › Delivery of Credit rated programmes.

### How well do we perform as an organisation?

- › Financial performance
- › Delivery of value and sustainability efficiency targets
- › Climate / sustainability
- › Delivery performance
- › Feedback (compliments, complaints, concerns, whistleblowing)





# OUR STRATEGY 2023-26

People, Partnership, Performance

## ALTERNATIVE FORMATS

This resource may be made available, in full or summary form, in alternative formats and community languages. Please contact us on **0131 656 3200** or email **[altformats@nes.scot.nhs.uk](mailto:altformats@nes.scot.nhs.uk)** to discuss how we can best meet your requirements.

## **Appendix 1: NES Draft Strategy Consultation Summary**

### **Purpose:**

This document provides a summary of the consultation process for NES's 'Draft Strategy for 2023-2026: People, Partnerships, Performance'. It describes:

- who we consulted
- the channels used
- actions following the consultation feedback.

### **Consultation Channels:**

On 21<sup>st</sup> December 2022, NES sent letters to a select number of key social care and third sector stakeholders, requesting engagement on the new Draft Strategy. Face to face meetings with nine stakeholder organisations took place between 21<sup>st</sup> February and 19<sup>th</sup> April 2023. The following organisations were consulted:

- COSLA (Convention of Scottish Local Authorities)
- CCPS (Coalition of Care and Support Providers in Scotland)
- Scottish Care
- The Alliance
- Social Work Scotland
- Health and Social Care Scotland
- Care Inspectorate
- SSSC
- IRISS

These sessions were extremely useful in providing feedback which then contributed to further iterations of the Draft Strategy.

Prior to the formal consultation period, NES also engaged with the Scottish Government Sponsor Team and policy colleagues, who also provided further feedback on the draft.

Internally, a 'NES All Staff Webinar' took place on 6<sup>th</sup> March, in which Karen Reid, Tracey Ashworth Davies, Karen Wilson and Christina Bichan engaged with NES staff in an online Question and Answer session.

Staff feedback was then incorporated into a version of the Draft Strategy sent to both NES staff and external stakeholders via two online consultation surveys on 17<sup>th</sup> March 2023. NES's Chief Executive Office and NES Communications team sent emails to internal staff and a select number of external stakeholders, using a modified version of the external stakeholder list from NES's Stakeholder Survey 2022, including key public sector organisations, the third sector and social care organisations.

The online consultation surveys ran from 17<sup>th</sup> March to 1<sup>st</sup> May 2023.

**The following questions were asked in the internal survey:**

1. Does the strategy make sense to you?
2. What excites/ interests you most about the new strategy?
3. What are the implications for your role?
4. Where do you see the opportunities for your role/team?
5. What does it mean for your priorities?
6. What if anything needs to change in your work?
7. How can your team help make the vision a reality?
8. What are the challenges in putting the vision into practice?
9. How can it be linked to your personal objectives?
10. Is there anything missing in the strategy?
11. General comments

**The following questions were asked in the external survey:**

1. What do you think of 'Our Purpose and Vision'?
2. What do you think about 'What We Do'?
3. What do you think about 'Our Strategic Approach'?
4. What do you think about 'Our Focus for 2023-26'?
5. What are the implications for your organisation?
6. General Comments

An online engagement session at NES's Annual Conference on 28<sup>th</sup> April was also used to gather feedback with key stakeholders and the NES Chief Executive met with all Directorates to discuss the strategy and gather staff views.

Concurrently, a series of engagement sessions with NHS Board Chief Executives has been organised with eleven NHS Boards to take place during this quarter.

**Feedback:**

The consultation period ended on 1<sup>st</sup> May, garnering just under sixty responses in total. Since then, the Planning and Performance Directorate has met to consolidate the feedback, identifying key themes and core messages which have informed the current version which was sent to the Board on 18<sup>th</sup> May 2023. Themes from the feedback are outlined below:

- General support for, and positive feedback in respect of, the direction of travel
- The importance of supporting staff wellbeing
- The sustainability of the health and social care workforce
- The role of NES in reducing inequalities
- The need to innovate in the face of challenging circumstances
- Supporting recruitment and retention of staff
- The need to collaborate to succeed
- NES's role in supporting new career pathways
- The scale of the challenge in delivering equitable health and care

A “you said, we did” summary of the key changes made following stakeholder feedback is provided in Table 1.

Table 1: Summary of changes made following consultation on the draft NES Strategy

<b>You Said- Feedback</b>	<b>We Did – Changes Made</b>
1. Include reference to widening access	Included as an additional commitment under "Partnerships"
2. Include focus on measuring our impact	Included in an additional commitment under "Performance" and referenced in "Measuring and Monitoring Performance"
3. Expand purpose to more fully reflect our work areas	Purpose amended to include "data and technology"
4. Include reference to working internationally	Referenced in "Chair and Chief Executive's Introduction" and additional commitment added in "Partnerships"
5. Strengthen future focus	"we are focussed on the future" added in "What we do"
6. Strengthen focus on children, young people and justice services	Additional commitments added under "People".
7. Include reference to staff wellbeing	Included reference to staff wellbeing under 'What we do'
8. Can we have more focus on how we contribute to reducing health inequalities?	Strengthened the focus on health inequalities under 'What we do' and supporting rights based quality of care.
9. Can we have specific objectives under People that set out how we will support NES staff – professional development, career pathways, wellbeing initiatives; ways of working?	Added an objective of 'Supporting NES staff to be the best they can be through developing new career pathways and ways of working, wellbeing initiatives and enabling their professional development' under 'Our focus for 2023-26'.
10. Can we strengthen the research focus as it is not coming through strongly?	Strengthened the educational research wording under 'The policy context in which we work'.
11. Can we say something about engaging younger people in the NES workforce?	Added an objective on eliminating the gender pay gap across all protected characteristics and engaging younger people in the NES Workforce under 'Our focus for 2023-26'.
12. Can we have a focus on Realistic Education to support Realistic Medicine and Values Based Health and Care	Added an objective on meeting the Health and Social Care standards, practicing Realistic Medicine and delivering value-based health and care in a way which is meaningful to their roles and those they support under 'Our focus for 2023-26'.
13. There was a concern that we did not mention social work in the previous draft.	We have now specified social care and social work under 'Our Strategic approach'.
14. Important that there is reference to working with COSLA, SSSC and national care organisations.	We have specified how we will 'Work collaboratively with the Scottish Social Services Council' under 'Our Objectives for 2023-26' and included COSLA in the objective: 'Develop and deliver the National Digital Platform, Digital Front Door and Digitally Enabled Workforce Programme in collaboration with partners

	such as Scottish Government, COSLA, NHS National Services Scotland and the Digital Health and Care Innovation Centre’.
15. Clarity was sought on how the National Digital Platform, Digital Front Door and Digitally Enabled Workforce Programme fit with the key components of NES role.	Added an objective around ‘Supporting professionalism in education across health and social care, with a particular focus on digitally enabled learning’, under ‘Our Focus for 2023-26’.
16. Scottish Care stressed the importance of standardised training – core skills that are transferable, accredited and portable between different organisations. This would increase the professionalism of the sector, as well as allowing staff to move more easily between providers.	Added an objective on ‘Supporting the development of a portable passport of learning – to support professional development, which will be portable across employers and aid career development’ under ‘Partnerships’.
17. There have been minimal efforts to reach staff in social care - they don’t have easy access to NHS platforms and communications seem to be limited to only those working in care homes.	Under ‘Performance’, we added ‘Refresh and redesign our learning experience platforms and user interfaces to reduce duplication, promote quality, consistency and best value as well as responding to Board, Health and Social Care Partnership/Third and Independent sector needs’.
18. An additional reference to helping to support sustainability in a broad sense (having a supply of skilled staff and education and awareness around the impacts of climate etc.)	We added ‘Develop education and training products that encompass sustainability and climate change to develop the knowledge and skills of the workforce in protecting our environment and tackling the climate emergency’ under ‘Performance’. Under Supporting our learners/trainees, we also added ‘Educating the health and social care workforce in delivering sustainable integrated care and protecting the environment’.
19. Strengthen prominence of wellbeing of the workforce.	Strengthened in “What we do” section and resilience focus added to Vision.
20. Enhance focus on people’s rights.	“Rights-based” added to Vision.
21. NES needs to reach more of the health and social care through its products workforce to be able to better support the system.	Section added acknowledging the challenge of scale and complexity under “the difference we make” and measure developed under performance to take account of reach.

The consultation findings also informed an Equality Impact Assessment (EQIA) of the Draft Strategy, considering among others, how the purpose, vision and areas of focus for NES will impact on the Public Sector Equality Duty and meet the Fairer Scotland Duty. The EQIA has informed a range of actions to help us to better advance equality through the delivery of our strategy over the next 3 years.

Nick Hay  
15 May 2023  
NES

## Appendix 2: Equality Impact Assessment Report

Title: **NHS Education for Scotland Strategy 2023-2026**

NES directorate or department: **Chief Executive Office**

Date Report Completed: 15<sup>th</sup> May 2023

### Introduction

Equality Impact Assessment (EQIA) is a process that helps us to consider how our work will meet the 3 parts of the Public Sector Equality Duty. It is a way to mainstream equality into our work at NES and to help us:

- Take effective action on equality
- Develop better policy, technology, education and learning and workforce planning solutions for health, social care and a wide range of our partners, stakeholders and employees
- Demonstrate how we have considered equality in making our decisions.

NHS Education for Scotland's (NES) Corporate Strategy sets out the direction for the organisation for the next 3-year period (2023-2026). It sets out the purpose and vision for the organisation, our strategic approach and what our focus will be over the next 3-year period. It also sets out how we will measure and monitor performance.

The strategy is centred around the themes of:

- People
- Partnerships
- Performance

The new strategy has been developed alongside the EQIA, with the EQIA shaping its development. We considered how the proposed purpose, vision and areas of focus can help us progress equality and meet the Public Sector Equality Duty and Fairer Scotland Duty. There has been close collaboration, and an overlap in personnel, between those working on the strategy, on the development of performance measures and on the EQIA. Stakeholder engagement with our partners and staff has informed the strategy and the EQIA. We recognise the need to strengthen our engagement with all of Scotland's diverse communities and have set out our intention to do so in our strategy.

NHS Education for Scotland published how it will meet the Public Sector Equality Duty and a set of Equality Outcomes for the organisation in April 2020. We published our [2-year progress report](#) in April 2023 and have committed to reviewing our equality outcomes to align with the new strategy. We want to make sure we are focused on the areas of inequality that NES can make the most difference to through our role.

The new strategy sets out for NHS Education for Scotland:

**Our Purpose:**

To be a collaborative, innovative and inclusive learning organisation that provides high quality education, training, workforce development, workforce data and technology for Scotland's health and social care workforce.

**Our Vision:**

Supporting better quality care and outcomes for every person in Scotland through a knowledgeable and skilled health and social care workforce.

Our main responsibility is to develop and deliver education and training for the NHS in Scotland, as well as for the social care sector. This includes undergraduate, postgraduate, and continuing professional development.



Other areas of focus for us over the next 2 years include:

- Data, Intelligence and Workforce Supply
- Educational Research
- Digital Innovation and Delivery

Our focus is to build careers, lives and the future sustainability of the health and social care workforce through a focus on people, partnerships and performance.

## **Evidence**

We have looked at a wide range of data, research, and surveys to inform our impact assessment. This is set out in Annex A.

Evidence in relation to the health and social care workforce is an important source of evidence given the purpose of our strategy.

We also consulted with our partners, stakeholders and staff on the draft strategy. The consultation findings have informed the impact assessment and the final strategy.

## **1. The Health and Social Care Workforce**

We recognise inequality in opportunities to enter, sustain and progress careers in the labour market. The health and social care sector and NES's role within it have an important contribution to make to:

- the ambition for Scotland to be a [Fair Work nation](#)
- widening access to careers in health and social care so that, whatever a person's life experience, they have better access to job opportunities, learning and development.
- educating and training staff to provide high quality health and social care to meet population needs.

- creating an attractive, diverse, equitable and inclusive workplace in NES

Institutional racism was recognised as an issue for employers in Scotland by the Scottish Parliament's Equality and Human Rights Committee's report in 2020. The Scottish Government's Anti-Racism Employment Strategy, published in December 2023, aims to serve as a call to action to employers to review structural barriers that may exist and take an anti-racist approach.

The Office for National Statistics reported a disability employment gap to be 53.2% in 2019, which increases for older people. Disabled people are more likely to work part-time and are less likely to be employed as managers, directors, senior managers or in professional occupations. Neurodivergent staff and learners are increasingly being recognised in the workplace.

There is a lack of diversity at senior levels in NHS Scotland. The Expert Reference Group on Covid-19 and Ethnicity highlights the lack of racial diversity at senior levels in NHS Scotland and the need to improve workforce data. It recommended that NES should report on the quality of workforce ethnicity data to monitor gaps in the data. NHS Scotland workforce statistics are available at [All official statistics publications | Turas Data Intelligence \(nhs.scot\)](#)

Scotland's health and social care workforce are increasingly diverse. For example, just under half (46%) of all medical trainees in the UK are from an ethnic minority according to GMC data. The Centre for Workforce Supply in NES has been tasked to support international recruitment for both the NHS and more recently for the social care sector. As we continue to attract and recruit a more diverse and international workforce to meet the health and care needs of the population, we need to retain and value diversity. An inclusive workplace culture is an important contribution to staff retention and to meeting employer responsibilities.

The Scottish Social Services Workforce Report for 2021 show that 15% of the workforce is male and 53% work full-time. Apart from the 3 Island authorities, the private sector is the main employer.

We have developed a Widening Access Framework as a guide for NES to put this strategic priority at the heart of our work. Widening Access recognises that explicit action may be required to ensure this equity is in place across the country, in all job families and at all levels.

### **Involving people in shaping our services**

There is inequity in opportunity to influence and shape services. Factors that can impact on this and which can negatively impact on people with protected characteristics and in low socio-economic circumstances include

- previous poor experience in consultation and involvement activities
- lack of capacity in communities and in representative forums
- feeling unsafe in expressing views
- lack of resources to contribute (time, money)
- limited strategies in organisations to seek out those less visible

We will ensure that our approach will engage with all of Scotland's diverse communities, following the EHRC's guidance on effective engagement.

## **2. Education and Training for health and social care workforce**

Our main responsibility is to develop and deliver education and training for the NHS in Scotland, as well as for the social care sector. This includes undergraduate, postgraduate, and continuing professional development. We therefore have an important role in ensuring that our education and training is inclusive, accessible and reflects

the issues of inequality, both in the workforce and in population health. We set this out in our Inclusive Education and Learning Policy, which includes a literature review on inclusive education approaches.

### **3. Scotland's population health**

Our strategy has been informed by Scotland's population health and what we know about health inequalities in Scotland. They are caused largely by the impact of differences in people's living conditions, and life experiences, including discrimination. For example, opportunities and access to education and learning, housing, digital exclusion, health services, employment are related to our opportunities to live a long and healthy life. Reducing poverty and inequalities in income and wealth is important in reducing health inequalities.

#### **Assessment**

We have considered how the purpose, vision and areas of focus for NES will impact on the Public Sector Equality Duty and meet the Fairer Scotland Duty. This includes how it might affect people differently, taking account of protected characteristics and how these intersect, including with poverty and low income. Progressing equality, tackling inequalities, supporting diversity and inclusion are central to NES's purpose.

We have also considered children's rights where appropriate and our role as a corporate parent.

We have given due regard to the Fairer Scotland Duty as part of our equality impact assessment on our Strategy and in the development of our proposed recommendations. This requires public bodies to consider how they can reduce inequalities of outcome caused by socio-economic disadvantage when making strategic decisions.

We have provided a summary of the assessment of impact, including on any protected characteristics, in Annex B. There are intersections across people's identities and experiences. We have considered this in the impact assessment, recognising that an intersectional approach will advance equality for all groups that face discrimination.

## Next Steps

The Equality Impact Assessment has informed the following actions:

- Develop and implement engagement and participation plan in partnership with people with lived experience to inform our work. This will follow good practice for involvement and equip our staff, our Board and those we seek to involve in our work with the capacity to shape our priorities, technology and education and training.
- Share approaches to engagement and involvement in NES, for example, how we engage with learners, our trainees, health and care service users in the development of our educational resources.
- Review the branding and communication style for NES corporate publications to ensure there are not language barriers and we are reaching diverse audiences.
- Review our approach to recruitment and implement the Widening Access Framework to ensure we have an inclusive recruitment and talent management approach.
- Review 'NES Our Way' to ensure the values and behaviours align with our ambitions as an inclusive employer, reflecting an anti-racism approach and consider how it is being used in NES.
- Introduce a corporate objective for all staff to undertake a learning activity to increase understanding and self-reflection on anti-racism, equality, diversity and inclusion for 2023-24.
- Strengthen our approach to learning and development for staff in NES on equality, diversity and human rights by requiring annual renewal of essential learning and providing specific resources relevant to roles e.g. line managers, educators, leaders, allies and staff network members.
- Ask members of the Staff Equality Network what they need from senior leaders in NES to further support the development of the staff network for staff and NES trainees.
- We have identified a corporate priority to develop 'New ways of working' for NES given hybrid working and as we review our property requirements. We will build in an equality impact assessment into the work of the sub-groups to inform our decision-making.

- Support senior leaders in NES to progress actions on equality, diversity and inclusion. This includes a specific performance objective for the Executive Team to contribute to NES's anti-racism approach.
- Review our Equality Outcomes to ensure they align with our new strategy and are focused on the areas where NES can make the most difference to inequalities.
- Develop Key Performance Indicators for our Strategy, including indicators to measure our progress on equality, diversity and inclusion.

The actions identified above will help us to better advance equality through the delivery of our strategy over the next 3 years. We will integrate these actions into the appropriate team work plans and relevant corporate action plans to monitor progress with delivery. We will continue to support EQIA across the organisation, building capacity to continuously improve our products, services and decisions.

The evidence shows that there is no potential for unlawful discrimination, and we have built in actions to advance equality of opportunity and foster good relations through our strategy.

## **Evaluation**

Key Performance Indicators (KPIs) have been designed to measure progress towards the outcomes in our new strategy. These will be reported to the Executive Team and our Board at appropriate periods. This includes specific KPIs on equality, diversity and inclusion.

The EQIA and action plan will be reviewed in 12 months.

## **Sign-off**

Director: Christina Bichan, Director of Planning and Performance

Date: 15<sup>th</sup> May 2023

## Annex A: Key Evidence Sources

- The Scottish Parliament's Equality and Human Rights Committee report in 2020, [Race Equality, Employment and Skills – Making Progress?](#)
- [Fair Work action plan: becoming a leading Fair Work nation by 2025 - gov.scot \(www.gov.scot\)](#)
- [Executive Summary - Anti-racist employment strategy - A Fairer Scotland for All - gov.scot \(www.gov.scot\)](#)
- [EHRC Inquiry into experiences of lower paid Black and Ethnic Minority workers](#)
- [Delivering racial equality in medicine – BMA](#)
- [Elusive inclusivity \(bma.org.uk\)](#)
- [Expert Reference Group on Covid-19 and Ethnicity](#)
- [Coalition for Racial Equality and Rights – Anti-racist policy making review](#)
- [Leadership for a collaborative and inclusive future – Independent Report published by Department for Health and Social Care](#)
- [Shattered hopes: Black and Minority Ethnic leaders' experiences of breaking the glass ceiling in the NHS](#)
- [Experiences of racial harassment and discrimination in London Primary Care](#)
- Close the Gap – Employer [guidance](#) on anti-racist gender equality at work
- [ONS Disability and Employment Report.](#)
- [Tackling disadvantage in medical education \(gmc-uk.org\)](#)
- [Health and social care - Planning with People: community engagement and participation guidance - gov.scot \(www.gov.scot\)](#)
- [Public sector gender pay gap reporting | Audit Scotland \(audit-scotland.gov.uk\)](#)
- [Improving access for Gypsy/Travellers to the NHS and Health and social Care in Scotland, Public Health Scotland](#)
- [Health inequalities in Scotland: An independent review - The Health Foundation](#)

- [National-LGBT-HNA-Infographic-Summary-Final-June-2022.pdf \(scotphn.net\)](#)
- [What are health inequalities? - Health inequalities - Public Health Scotland](#)
- [Women's health plan - gov.scot \(www.gov.scot\)](#)



## Annex B – Summary of Assessment

Protected Characteristic / Population Group	Positive / Negative / Neutral Impact	Links to our strategy
<b>Age</b>  Children/Young People – including consideration of children’s rights. Adults Older age groups	<p>Positive</p> <p>We have identified workforce development activity for the social care workforce.</p> <p>We have specific areas of work to support the workforce who work with children and young people, particularly those affected by trauma.</p> <p>We have identified areas of work aimed at increasing young people’s access and widening access into the workforce.</p> <p>We have established a sub-group on children’s rights to progress work across NES. We published our 3 year report and actions to progress our work to uphold children’s rights in our <a href="#">Public</a></p>	<p>Our strategy aims to deliver the following for the people of Scotland:</p> <p>I am confident that the people providing my care have the right skills to support my needs.</p> <p>We aim to deliver the following for our staff:</p> <p>I feel part of an inclusive organisation which cares about my wellbeing, supports me to achieve my career aspirations and values me for my contribution.</p> <p>We will</p> <ul style="list-style-type: none"> <li>• Scope, design and deliver a programme of workforce development activity to increase the capacity and</li> </ul>

Protected Characteristic / Population Group	Positive / Negative / Neutral Impact	Links to our strategy
	<a href="#">Sector Equality Duty Report</a> in April 2023,	<p>capability of the social care workforce.</p> <ul style="list-style-type: none"> <li>• Support the health and social care workforce including children, young people and justice services to become trauma informed and trauma responsive.</li> <li>• We will increase education, training and promote apprenticeships for young people, supporting them to be better prepared for the world of work and to understand the opportunities available through a career in health and social care.</li> <li>• We will enable a diverse range of people to flourish by widening access to careers in health and social care so that, whatever a person's life experience, they have access to education and training to</li> </ul>

Protected Characteristic / Population Group	Positive / Negative / Neutral Impact	Links to our strategy
		<p>support them with their role and career aspirations.</p> <ul style="list-style-type: none"> <li>• We will support the values of care and compassion, dignity and respect, openness, honesty, responsibility, quality and teamwork, by encouraging positive behaviours and workplace practices so staff across the health and social care workforce experience a workplace culture which is aligned to those values.</li> <li>• We will develop and implement engagement and participation activities in partnership with people with lived experience to inform our work.</li> </ul> <p>See Care Experience</p>

Protected Characteristic / Population Group	Positive / Negative / Neutral Impact	Links to our strategy
<p><b>Disability</b> (incl. physical/ sensory/ learning disabilities, neurodiversity, communication needs; mental health)</p>	<p>Positive</p> <p>We have a Disability Specialist in our HR team supporting NES staff and trainees with reasonable adjustments and early intervention to ensure we have an inclusive training and education and employment environment.</p> <p>We adopt values-based approach to recruitment and are a Disability Confident employer, focused on the recruitment and development of disabled people for their skills and talent. This includes the Guaranteed Interview Scheme for candidates who meet the minimum requirements and disclose a disability.</p>	<p>Our strategy aims to deliver the following for the people of Scotland:</p> <p>I am confident that the people providing my care have the right skills to support my needs.</p> <p>We aim to deliver the following for our staff:</p> <p>I feel part of an inclusive organisation which cares about my wellbeing, supports me to achieve my career aspirations and values me for my contribution.</p> <p>We will</p> <ul style="list-style-type: none"> <li>• Scope, design and deliver a programme of workforce development activity to increase the capacity and capability of the social care workforce.</li> </ul>

Protected Characteristic / Population Group	Positive / Negative / Neutral Impact	Links to our strategy
		<ul style="list-style-type: none"> <li>• Support the health and social care workforce including children, young people and justice services to become trauma informed and trauma responsive.</li> <li>• We will increase education, training and promote apprenticeships for young people, supporting them to be better prepared for the world of work and to understand the opportunities available through a career in health and social care.</li> <li>• We will enable a diverse range of people to flourish by widening access to careers in health and social care so that, whatever a person's life experience, they have access to education and training to support them with their role and career aspirations.</li> </ul>

Protected Characteristic / Population Group	Positive / Negative / Neutral Impact	Links to our strategy
		<ul style="list-style-type: none"> <li>• We will support the values of care and compassion, dignity and respect, openness, honesty, responsibility, quality and teamwork, by encouraging positive behaviours and workplace practices so staff across the health and social care workforce experience a workplace culture which is aligned to those values.</li> <li>• We will develop and implement engagement and participation activities in partnership with people with lived experience to inform our work.</li> </ul>
<b>Pregnancy and Maternity</b>	<p>Positive</p> <p>We have HR policies in place to support pregnant staff and staff on maternity leave. This includes supporting members of staff who have a still birth or miscarriage.</p>	<p>We aim to deliver the following outcomes through our strategy:</p> <p>I feel part of an inclusive organisation which cares about my wellbeing, supports me to achieve</p>

Protected Characteristic / Population Group	Positive / Negative / Neutral Impact	Links to our strategy
	<p>Staff can access counselling support through the Occupational Health Service. We also promoted the <a href="#">Women's Health Platform</a> as part of spotlight on women's health from the Healthy Working Lives Group, developed by NHS Inform.</p> <p>We have a cross-organisational Women, Children and Young People and Families Health Group which co-ordinates NES's contribution to the Women's Health Plan.</p>	<p>my career aspirations and values me for my contribution.</p> <p>I am confident that the people providing my care have the right skills to support my needs.</p> <p>We will:</p> <ul style="list-style-type: none"> <li>• Support the health and social care workforce including children, young people and justice services to become trauma informed and trauma responsive.</li> <li>• We will enable a diverse range of people to flourish by widening access to careers in health and social care so that, whatever a person's life experience, they have access to education and training to support them with their role and career aspirations.</li> </ul>

Protected Characteristic / Population Group	Positive / Negative / Neutral Impact	Links to our strategy
		<ul style="list-style-type: none"> <li>• We will support the values of care and compassion, dignity and respect, openness, honesty, responsibility, quality and teamwork, by encouraging positive behaviours and workplace practices so staff across the health and social care workforce experience a workplace culture which is aligned to those values.</li> <li>• We will develop and implement engagement and participation activities in partnership with people with lived experience to inform our work.</li> </ul>
<b>Gender Reassignment</b>	<p>Positive</p> <p>We are developing a Knowledge and Skills Framework on Transgender Health to support the health and care workforce in</p>	<p>We aim to deliver the following outcomes through our strategy:</p> <p>I feel part of an inclusive organisation which cares about my wellbeing, supports me to achieve</p>



Protected Characteristic / Population Group	Positive / Negative / Neutral Impact	Links to our strategy
	<p>learning and development on transgender health.</p> <p>We have a staff LGBTQ+ network for peer support.</p> <p>We celebrate and promote Pride month both in NES and through the NHS Careers website which we manage.</p>	<p>my career aspirations and values me for my contribution.</p> <p>I am confident that the people providing my care have the right skills to support my needs.</p> <p>We will:</p> <ul style="list-style-type: none"> <li>• Support the health and social care workforce including children, young people and justice services to become trauma informed and trauma responsive.</li> <li>• We will enable a diverse range of people to flourish by widening access to careers in health and social care so that, whatever a person's life experience, they have access to education and training to support them with their role and career aspirations.</li> <li>• We will support the values of care and compassion, dignity</li> </ul>

Protected Characteristic / Population Group	Positive / Negative / Neutral Impact	Links to our strategy
		<p>and respect, openness, honesty, responsibility, quality and teamwork, by encouraging positive behaviours and workplace practices so staff across the health and social care workforce experience a workplace culture which is aligned to those values.</p> <ul style="list-style-type: none"> <li>• We will develop and implement engagement and participation activities in partnership with people with lived experience to inform our work.</li> </ul>
<b>Race/Ethnicity</b>	<p>Positive</p> <p>We are taking an anti-racist approach in NES.</p>	<p>Our strategy aims to deliver the following for the people of Scotland:</p> <p>I am confident that the people providing my care have the right skills to support my needs.</p>

Protected Characteristic / Population Group	Positive / Negative / Neutral Impact	Links to our strategy
		<p>We aim to deliver the following for our staff:</p> <p>I feel part of an inclusive organisation which cares about my wellbeing, supports me to achieve my career aspirations and values me for my contribution.</p> <p>We will:</p> <ul style="list-style-type: none"> <li>• Support the health and social care workforce including children, young people and justice services to become trauma informed and trauma responsive.</li> <li>• We will enable a diverse range of people to flourish by widening access to careers in health and social care so that, whatever a person's life experience, they have access to education and training to</li> </ul>

Protected Characteristic / Population Group	Positive / Negative / Neutral Impact	Links to our strategy
		<p>support them with their role and career aspirations.</p> <ul style="list-style-type: none"> <li>• We will support the values of care and compassion, dignity and respect, openness, honesty, responsibility, quality and teamwork, by encouraging positive behaviours and workplace practices so staff across the health and social care workforce experience a workplace culture which is aligned to those values.</li> <li>• We will develop and implement engagement and participation activities in partnership with people with lived experience to inform our work.</li> </ul> <p>In addition:</p> <ul style="list-style-type: none"> <li>• We have identified an anti-racism objective for our Executive Team for 2023/24.</li> </ul>

Protected Characteristic / Population Group	Positive / Negative / Neutral Impact	Links to our strategy
		<ul style="list-style-type: none"> <li>• Our role as a delivery partner in Leading to Change – a suite of learning and development opportunities for health, social work and social care staff – is focused on anti-racism during 2023/24. This includes the development of allyship programme and a development programme for under-represented ethnic minority groups. An EQIA is being undertaken on our work on Leading to Change.</li> <li>• We have a specific Equality Outcome to address the inequalities in medical education due to ethnicity/race and other protected characteristics.</li> <li>• We are involved in the Gypsy/Traveller Health Steering Group and will timetable a review of the</li> </ul>

Protected Characteristic / Population Group	Positive / Negative / Neutral Impact	Links to our strategy
		<p>Turas resource on Gypsy/Traveller health given persistent health inequalities and prejudice the community face</p>
<p><b>Religion/Faith</b></p>	<p>Positive</p>	<p>Our strategy aims to deliver the following for the people of Scotland:</p> <p>I am confident that the people providing my care have the right skills to support my needs.</p> <p>We aim to deliver the following for our staff:</p> <p>I feel part of an inclusive organisation which cares about my wellbeing, supports me to achieve my career aspirations and values me for my contribution.</p> <p>We will:</p>

Protected Characteristic / Population Group	Positive / Negative / Neutral Impact	Links to our strategy
		<ul style="list-style-type: none"> <li>• Support the health and social care workforce including children, young people and justice services to become trauma informed and trauma responsive.</li> <li>• We will enable a diverse range of people to flourish by widening access to careers in health and social care so that, whatever a person's life experience, they have access to education and training to support them with their role and career aspirations.</li> <li>• We will support the values of care and compassion, dignity and respect, openness, honesty, responsibility, quality and teamwork, by encouraging positive behaviours and workplace practices so staff across the health and social care workforce experience a</li> </ul>

Protected Characteristic / Population Group	Positive / Negative / Neutral Impact	Links to our strategy
		<p>workplace culture which is aligned to those values.</p> <ul style="list-style-type: none"> <li>We will develop and implement engagement and participation activities in partnership with people with lived experience to inform our work.</li> </ul>
<b>Sex</b>	<p>Positive</p> <p>We have a Women, Children, Young People and Families cross-directorate Group to deliver improvements to health for women, including NES's contribution to the Women's Health Plan.</p> <p>We have actions in place to tackle the Gender Pay Gap and this was identified as good practice in a recent Audit Scotland Report on the Public Sector and the Gender Pay Gap.</p>	<p>Our strategy aims to deliver the following for the people of Scotland:</p> <p>I am confident that the people providing my care have the right skills to support my needs.</p> <p>We aim to deliver the following for our staff:</p> <p>I feel part of an inclusive organisation which cares about my wellbeing, supports me to achieve my career aspirations and values me for my contribution.</p>



Protected Characteristic / Population Group	Positive / Negative / Neutral Impact	Links to our strategy
	<p>NES has developed a menopause guide for line managers. There is also a Menopause Café which meets regularly to provide peer support to staff experiencing the menopause.</p>	<p>We will:</p> <ul style="list-style-type: none"> <li>• Support the health and social care workforce including children, young people and justice services to become trauma informed and trauma responsive.</li> <li>• We will enable a diverse range of people to flourish by widening access to careers in health and social care so that, whatever a person's life experience, they have access to education and training to support them with their role and career aspirations.</li> <li>• We will support the values of care and compassion, dignity and respect, openness, honesty, responsibility, quality and teamwork, by encouraging positive behaviours and workplace</li> </ul>

Protected Characteristic / Population Group	Positive / Negative / Neutral Impact	Links to our strategy
		<p>practices so staff across the health and social care workforce experience a workplace culture which is aligned to those values.</p> <ul style="list-style-type: none"> <li>• We will develop and implement engagement and participation activities in partnership with people with lived experience to inform our work.</li> </ul>
<p><b>Sexual Orientation</b> Consider LGBTQ+</p>	<p>Positive</p> <p>We have a staff LGBTQ+ network for peer support.</p> <p>We celebrate and promote Pride month both in NES and through the NHS Careers website which we manage.</p>	<p>Our strategy aims to deliver the following for the people of Scotland:</p> <p>I am confident that the people providing my care have the right skills to support my needs.</p> <p>We aim to deliver the following for our staff:</p>

Protected Characteristic / Population Group	Positive / Negative / Neutral Impact	Links to our strategy
		<p>I feel part of an inclusive organisation which cares about my wellbeing, supports me to achieve my career aspirations and values me for my contribution.</p> <p>We will:</p> <ul style="list-style-type: none"> <li>• Support the health and social care workforce including children, young people and justice services to become trauma informed and trauma responsive.</li> <li>• We will enable a diverse range of people to flourish by widening access to careers in health and social care so that, whatever a person's life experience, they have access to education and training to support them with their role and career aspirations.</li> <li>• We will support the values of care and compassion, dignity</li> </ul>

Protected Characteristic / Population Group	Positive / Negative / Neutral Impact	Links to our strategy
		<p>and respect, openness, honesty, responsibility, quality and teamwork, by encouraging positive behaviours and workplace practices so staff across the health and social care workforce experience a workplace culture which is aligned to those values.</p> <ul style="list-style-type: none"> <li>• We will develop and implement engagement and participation activities in partnership with people with lived experience to inform our work.</li> </ul>
<b>Staff</b>	<p>See above in relation to our work as an employer, including our equality staff networks, policies and practices to progress equality for our workforce.</p> <p>We have considered our actions to contribute to the Fair Work agenda.</p>	<p>We aim to deliver the following for our staff:</p> <p>I feel part of an inclusive organisation which cares about my wellbeing, supports me to achieve my career aspirations and values me for my contribution.</p>

Protected Characteristic / Population Group	Positive / Negative / Neutral Impact	Links to our strategy
		<p>I am empowered to reach out to others in partnership and make connections to support me in understanding the outcomes that matter most to people from the work that I do.</p> <p>I collaborate with colleagues across NES to develop new and innovative ways of working which build on our shared learning and continuously improve the services we provide.</p> <p>We aim to deliver the following for the Health and Social Care Workforce:</p> <p>I am confident that the education, training and workforce development I receive from NES is co-designed and shaped by the voice and needs of people with lived experience as well as the</p>

Protected Characteristic / Population Group	Positive / Negative / Neutral Impact	Links to our strategy
		<p>needs of health and social care staff.</p> <p>I am confident NES influences and enables change in the way services are delivered across the health and social care sector, supporting us to make a positive difference to people and communities.</p>
<b>Socio-economic status</b>	<p>Positive</p> <p>Inequalities in health and education are associated with poverty. Our Inclusive Education and Learning Policy sets out our ambitions to deliver equity in access to learning and education and our role in recognising the causes of health inequalities in our education and learning material.</p> <p>See Inclusive Education and Learning Policy and EQIA.</p>	<p>Our strategy aims to deliver the following for the people of Scotland:</p> <p>I am confident that the people providing my care have the right skills to support my needs.</p> <p>We aim to deliver the following for our staff:</p> <p>I feel part of an inclusive organisation which cares about my wellbeing, supports me to achieve</p>

Protected Characteristic / Population Group	Positive / Negative / Neutral Impact	Links to our strategy
	<p>We will continue to support NES staff and trainees with information on financial wellbeing issues.</p> <p>This is an issue which cuts across all protected characteristics.</p>	<p>my career aspirations and values me for my contribution.</p> <p>We will:</p> <ul style="list-style-type: none"> <li>• Support the health and social care workforce including children, young people and justice services to become trauma informed and trauma responsive.</li> <li>• We will enable a diverse range of people to flourish by widening access to careers in health and social care so that, whatever a person's life experience, they have access to education and training to support them with their role and career aspirations.</li> <li>• We will support the values of care and compassion, dignity and respect, openness, honesty, responsibility, quality and teamwork, by</li> </ul>

Protected Characteristic / Population Group	Positive / Negative / Neutral Impact	Links to our strategy
		<p>encouraging positive behaviours and workplace practices so staff across the health and social care workforce experience a workplace culture which is aligned to those values.</p> <ul style="list-style-type: none"> <li>• We will develop and implement engagement and participation activities in partnership with people with lived experience to inform our work.</li> </ul> <p>See actions in relation to staff.</p>
<b>Marriage/civil partnership (Protected characteristic in relation to employment)</b>	Positive	<p>We aim to deliver the following for our staff:</p> <p>I feel part of an inclusive organisation which cares about my wellbeing, supports me to achieve my career aspirations and values me for my contribution.</p>



Protected Characteristic / Population Group	Positive / Negative / Neutral Impact	Links to our strategy
<b>Care Experience</b>	<p>Positive</p> <p>We include care experience in our EQIA guidance and reporting template to embed it across the organisation.</p>	<p>Our strategy aims to deliver the following for the people of Scotland:</p> <p>I am confident that the people providing my care have the right skills to support my needs.</p> <p>We aim to deliver the following for our staff:</p> <p>I feel part of an inclusive organisation which cares about my wellbeing, supports me to achieve my career aspirations and values me for my contribution.</p> <p>Our strategy sets out the following which is specifically relevant to improving outcomes for people with care experience:</p> <ul style="list-style-type: none"> <li>• We are committed to 'The Promise,' which is Scotland's goal to be the best place in the world for children to grow</li> </ul>

Protected Characteristic / Population Group	Positive / Negative / Neutral Impact	Links to our strategy
		<p>up. We want children to be loved, safe, respected, and realise their full potential. As a corporate parent, we are dedicated to achieving this goal.</p> <ul style="list-style-type: none"> <li>• We will increase our focus on developing education and training for the health and social care sector and particularly for the children and young people and justice workforce so that they are equipped with the rights skills to enable good outcomes and experiences.</li> <li>• We will increase education, training and promote apprenticeships for young people, supporting them to be better prepared for the world of work and to understand the opportunities available through a career in health and social care.</li> </ul>

Protected Characteristic / Population Group	Positive / Negative / Neutral Impact	Links to our strategy
		<ul style="list-style-type: none"> <li>We will enable a diverse range of people to flourish by widening access to careers in health and social care so that, whatever a person's life experience, they have access to education and training to support them with their role and career aspirations.</li> </ul>
Other population groups who experience inequality	<p>People experiencing homelessness and housing insecurity.</p> <p>People with low literacy levels.</p> <p>People who are or have been affected by traumatic events in early life.</p> <p>Remote and Rural communities</p>	<p>Our strategy aims to deliver the following for the people of Scotland:</p> <p>I am confident that the people providing my care have the right skills to support my needs.</p> <p>We will</p> <ul style="list-style-type: none"> <li>scope and develop a National Centre for Remote and Rural Health and Social Care.</li> <li>Support the health and social care workforce including</li> </ul>

Protected Characteristic / Population Group	Positive / Negative / Neutral Impact	Links to our strategy
		<p>children, young people and justice services to become trauma informed and trauma responsive.</p> <p>See actions in relation to staff.</p>

**NHS Education for Scotland**  
**Item 8b**  
**25 May 2023**

**NES/23/33**

## **Board Paper**

### **1. Title of Paper**

Draft Strategic Key Performance Indicators (KPIs)

### **2. Author(s) of Paper**

Christina Bichan, Director of Planning & Performance  
Joe Hands, Principal Lead – Quality Improvement  
Simon Williams, Principal Educator – Planning & Corporate Resources

### **3. Lead Director**

Christina Bichan, Director of Planning & Performance

### **4. Situation/Purpose of paper**

- 4.1 Draft KPIs were presented to the Board at the Board Development session in February 2023. Following feedback from the Executive Team and Board, and consideration of feedback from the public consultation of the new strategy, these KPIs have been revisited and further refined.
- 4.2 The Board are asked to consider the KPIs presented in Appendix 1 and approve their use to monitor NES's progress towards achieving the outcomes listed in the new NES strategy 2023-26.

### **5. Background and Route to Meeting**

- 5.1 Everything NES does in education, training, workforce development, workforce planning, data and technology improves the skills and knowledge of the health and social care workforce and makes a difference to the lives of every single person in Scotland. Our contribution to delivery of the outcomes articulate in Scotland's National Performance Framework is wide-ranging and articulated at a high level in Figure 1 on the following page.

Figure 1: The NES Contribution to Scotland's National Performance Framework



- 5.2 In 2021 the NES Board agreed that the organisation needed to enhance its approach to performance management by developing a suite of Key Performance Indicators (KPIs) aligned to the development of a new NES Corporate Strategy for the period 2023-26.
- 5.3 The scope of the initiative was to develop strategic KPIs, which, once implemented, would drive the development of operational indicators across the organisation supporting a tiered approach to performance management and ensuring a line of sight between the NES strategy, directorate and team outcomes and activities.
- 5.4 The NES strategy 2023-26 has now been developed and will be presented to the Board for approval in May 2023. In order for the Board to have assurance that the strategy is having the intended impact, and for the Executive Team to ensure that appropriate initiatives and actions are in place, progress needs to be monitored. This will be done through regular reporting against Key Performance Indicators (KPIs) as part of a refreshed approach to performance management across the organisation.
- 5.5 To progress development of the KPIs a Performance Measurement & Reporting KPIs Programme Advisory Group (Advisory Group) was established, chaired by the Deputy Chief Executive (Corporate) and comprised of a Non-Executive Director, the Directors of Finance and of Planning and Performance, an Associate Director, Quality Improvement and an Associate Director Product & Delivery in the NES Technology Service.
- 5.6 The purpose of the Advisory Group was to provide leadership and direction to a core Project Team comprised of staff from the Corporate Improvement and Planning and Corporate Governance teams.

- 5.7 Staff from across the organisation were involved in the initial exploration of themes and drafting of measures, using the PuMP methodology. More recently, there has been close collaboration between the Advisory Group, the Project Team and the Strategy Development Group. Presentations have been given to the Board, the Executive Team and other cross-organisation groups.

## **6. Assessment / Key Issues**

### **6.1 Themes and measures**

Structured around the 3 themes of People, Partnership, Performance, our new NES strategy makes a commitment to testing our progress in delivering on our strategic intent by regularly answering 4 key questions:

- How well do we support our staff?
- How well do we support our learners / trainees?
- How well do we meet the needs of our partners?
- How well do we perform as an organisation?

- 6.2 To meet this commitment, a set of KPIs are proposed using a balanced scorecard approach in Appendix 1 which will support the Board in understanding how NES is performing in each of these areas and enable governance and executive groups to understand progress against objectives and guide future actions. Table 1 provides an overview of the number of measures in respect of each question area.

**Table 1: Summary of number of measures by performance question.**

<b>Performance Question</b>	<b>Number of measures</b>
How well do we support our staff?	8
How well do we support our learners / trainees?	13
How well do we meet the needs of our partners?	9
How well do we perform as an organisation?	11

- 6.3 As shown in Table 1, there are 41 measures proposed, across 18 concepts. The spread of measures as set out provides a high level overview of key elements of NES business and the wide range of commitments made within the NES Strategy 2023-26. As the new reporting process and KPIs mature in their use, the number of measures may change as necessary to meet Board requirements.

### **6.4 Timescales for introduction and target setting**

As the introduction of the KPIs signals a new approach to performance management for NES, a period of transition will be required while data collection and analysis mechanisms are developed and implemented, baseline data is gathered and analysed and targets are set. Appendix 1 provides an overview of the timescales for data availability and the setting of targets for all KPIs. Reporting of the first quarterly performance report in this new format will take place for Quarter 1 of 23/24 at the August 2023 Board meeting.

## 6.5 Governance and engagement

The NHS Scotland, Blueprint for Good Governance sets out the importance of Board members being provided with a clear and accurate picture of current and past delivery of services and a picture of performance over time which can be monitored, scrutinised and challenged. Through adoption of the KPIs presented, as part of a broader Planning and Performance environment (Figure 2) this will support NES to deliver its corporate Strategy over the next 3 years. The Board will therefore be better supported in its governance role and provided with appropriate information to exercise its scrutiny duties. This will be further strengthened by the alignment of each KPI to a governance Committee to support performance management in respect of individual Committee's areas of delegated authority.

Figure 2: NES Planning and Performance Environment



## 7. Recommendations

It is recommended that members of the Board consider the KPIs presented in Appendix 1 and approve their use to monitor NES's progress towards achieving the outcomes articulated in the new NES strategy 2023-26.

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### Author to complete

#### a) Have Educational implications been considered?

- ☒ Yes  
☐ No

#### b) Is there a budget allocated for this work?

- ☒ Yes  
☐ No



**c) Alignment with [NES Strategy 2019-2024](#)**

- ☒ 1. A high-quality learning and employment environment
- ☒ 2. National infrastructure to improve attraction, recruitment, training and retention
- ☒ 3. Education and training for a skilled, adaptable and compassionate workforce
- ☒ 4. A national digital platform, analysis, intelligence and modelling
- ☒ 5. A high performing organisation (NES)

**d) Have key risks and mitigation measures been identified?**

- ☒ Yes
- ☐ No

**e) Have Equality and Diversity and health inequality issues been considered?**

- ☒ Yes
- ☐ No

**f) Have you considered a staff and external stakeholder engagement plan?**

- ☒ Yes
- ☐ No

Christina Bichan, Joe Hands, Simon Williams  
15/05/2023  
NES

**Measuring and Monitoring Performance – Board Balanced Scorecard**



## People

### How well do we support our staff?

<b>Intent</b> <i>(the purpose or goal of using a particular measure to <b>assess</b> a concept)</i>	<b>Concept</b> <i>(abstract idea or notion that represents a set of related objects, or events)</i>	<b>Measure</b> <i>(a tool or instrument used to <b>quantify</b> or <b>assess</b> a specific aspect of a concept, that you are most interested in moving or improving)</i>	<b>Timescale for data availability</b>	<b>Target</b>	<b>Aligned Governance Committee</b>
Supporting our staff to achieve their full potential.	Employee satisfaction	1. Employee Engagement Index (iMatter)	Currently available	Target set August 2023	Staff Governance Committee
		2. Proportion of staff who report having the time and resources to support their learning and growth (iMatter)	Currently available	Target set August 2023	
		3. Staff retention rate (voluntary leavers)	Currently available	Target set August 2023	
Caring for our staff and the quality of their work environment.	Staff wellbeing	4. Vacancy Rate	Currently available	Target set August 2023	
		5. Sickness Absence Rate	Currently available	Target set August 2023	
Equality & diversity of our workforce.	Employee Diversity and Inclusion	6. Gender, disability and ethnicity pay equality.	Currently available	Target set August 2023	
		7. % of staff in protected characteristic groups.	Currently available	Target set August 2023	
		8. % of staff who experience NES as an inclusive organisation?	Within 1 year	Target set May 2024	

## How well do we support our learners and trainees?

Intent	Concept	Measure	Timescale for data availability	Target	Aligned Governance Committee
Supporting those who access our education and training to achieve their full potential.	Learner scale and reach	9. Total number of accesses to NES learning products.	Within 1 year	Target set May 2024	Education & Quality Committee
		10. Number of health and social care staff accessing NES learning products as a % of the health and social care workforce.	Within 1 year	Target set May 2024	
	Learner experience	11. % of learners that tell us their education & training will improve their practice.	Within 1 year	Target set May 2024	
		12. % of learners who score their learning experience as 80% or above.	Within 1 year	Target set May 2024	
		13. Funded trainee placements – Fill rate.	Currently available	Target set August 2023	
		14. Funded trainee placements – Completion rate.	Currently available	Target set August 2023	
		15. Experience of Doctors & Dentists in Training	Currently available	Target set August 2023	
	Quality of clinical training environment	16. <i>Under development</i>	<i>To be confirmed</i>		
Health and social care careers are more attractive and accessible.	Attraction, reach and accessibility	17. Total accesses of the NHS Scotland Careers Website	Currently available	Target set August 2023	Staff Governance Committee
		18. Uptake of learning products by sector as % of total reach (10)?	Within 1 year	Target set May 2024	Education & Quality Committee

		19. % of learners and trainees from the 20% most deprived data zones in Scotland (SIMD).	Within 1 year	Target set May 2024	Education & Quality Committee
		20. % of learners and trainees by protected characteristics as compared to population of Scotland.	Within 1 year	Target set May 2024	
Sustainable, integrated care and tackling the climate emergency is supported through our education and training.	Educating the health and social care workforce in delivering sustainable integrated care and protecting the environment.	21. % of learning products which include a focus on sustainability, climate, Net Zero and value based health and social care.	Within 1 year	Target set May 2024	

## **Partnerships**

**How well do we meet the needs of our partners?**

<b>Intent</b>	<b>Concept</b>	<b>Measure</b>	<b>Timescale for data availability</b>	<b>Target</b>	<b>Aligned Governance Committee</b>
Meeting the needs of our stakeholders.	Stakeholder satisfaction	22. % of stakeholders who rate themselves likely to recommend NES to colleagues and associates.	Currently available	Target set August 2023	Audit & Risk Committee
Broadening our reach and forming new	Education, Research and	23. Number of education, research and strategic collaborations.	Within 6 months	Target Set December 2023	Education & Quality Committee

alliances and partnerships to share learning and develop new ways of working that meet the needs of our communities.	Strategic Collaborations	24. Number of innovation initiatives invested in, including in collaboration with other stakeholder organisations.	Within 6 months	Target Set December 2023	Education & Quality Committee
Workforce planning and service delivery is shaped by improved workforce data and digital skills as well as the knowledge and understanding of our partners.	Utilisation of NES workforce data and developing digital skills.	25. % of Service Providers who report utilising NES provided workforce data.	Within 6 months	Target Set December 2023	Staff Governance Committee
		26. % of health and social care workforce who report being confident in using digital ways of working.	Currently available	Target set August 2023	
Our education, learning, workforce, and technology development is informed by our staff, partners and those with lived or living experience.	Involvement of our staff, partners and people with lived/living experience	27. Number of NES programmes that can demonstrate active engagement of people with lived or living experience in the development of educational resources designed to support interaction with those who use health and social care services.	Within 1 year	Target set May 2024	Education & Quality Committee
		28. % of staff, learner and partner feedback that states technology, data and digital developments meet their needs.	Within 1 year	Target set May 2024	
Community wealth-building and improved	Supporting young people to be better prepared for the	29. Number of young people participating on a school-based pilot pathway.*	Within 6 months	Target Set December 2023	

population health is supported through enhancing employability, skills and employment opportunities.	world of work and developing local employment opportunities.	<i>*Intent to work with patterns to identify care experienced individuals participating in school based pilot pathways as part of future measure development.</i>			
Achievement of credit-rating body status to deliver benefits for learners, employers and the wider system.	Developing Credit rated programmes.	30. Number of NES programmes of education and training which are credit rated.	Currently available	Target set August 2023	Education & Quality Committee

## **Performance**

### **How well do we perform as an organisation?**

<b>Intent</b>	<b>Concept</b>	<b>Measure</b>	<b>Timescale for data availability</b>	<b>Target</b>	<b>Aligned Governance Committee</b>
Our ways of working are transformed to maximise efficiency and deliver our objectives.	Efficiency, best value and continuous corporate improvement	31. Achievement of agreed savings % against annual budget.	Currently available	Target set August 2023	Audit & Risk Committee
		32. % of audit actions which are completed within agreed timescale.	Within 3 months	Target set October 2023	
		33. Benefits realisation/ ROI from corporate change activities.	Within 1 year	Target set May 2024	
Sustainable, integrated care and tackling the	Climate sustainability and	34. CO2 emissions (estates)	Currently available	Target set August 2023	

climate emergency is supported through how we work.	achieving Net Zero by 2040	35. CO2 emissions (staff and business travel)	Currently available	Target set August 2023	
NES is a high performing organisation.	Financial performance	36. Projected variance of budgeting within 0.5% at year end.	Currently available	Target set August 2023	Audit & Risk Committee
	Delivery performance	37. Number of complaints or concerns upheld and partially upheld.	Currently available	Target set August 2023	
		38. Availability of NES systems (internal and external).	Currently available	Target set August 2023	
		39. % NIS Audit Compliance Score for Cybersecurity.	Currently available	Target set August 2023	
		40. % of Annual Delivery Plan deliverables not on track and number delayed 0-3 months and 4-6 months.	Currently available	Target set August 2023	
		41. Adverse events: Number of Category 1 Information Governance events or events requiring reporting under RIDDOR?	Currently available	Target set August 2023	



**NHS Education for Scotland**  
**Item 8c**  
**25 May 2023**

**NES/23/34**

## **Board Paper**

### **1. Title of Paper**

Draft Communication and Engagement Strategy

### **2. Author(s) of Paper**

John MacEachen, Head of Corporate Communications

### **3. Lead Director(s)**

Christina Bichan, Director of Planning & Performance

### **4. Situation/Purpose of paper**

- 4.1 This Communications & Engagement Strategy sets out how we will use communications and engagement to support the NHS Education for Scotland (NES) Corporate Strategy 2023-2026.

### **5. Background and Route to Meeting**

- 5.1 The Corporate Strategy emphasises reaching out beyond traditional NHS stakeholders, to social care providers, and to public, private and voluntary bodies more generally. It focuses on the overall societal impact that we make and how we can support improved health and wellbeing for individuals, whilst contributing to local careers and communities, and making a positive impact on our environment.
- 5.2 Together, these in turn requires a shift in our communications and engagement approach. This strategy sets out a broad framework and principles for how we work. It will inform more detailed 'local' action plans for specific programmes, e.g. by Directorate, or for specific programmes.
- 5.3 This paper has developed including feedback from the Executive Team and external communications professionals.

## 6. Assessment/Key Issues

- 6.1 The Board is invited to consider whether we have accurately captured the key objectives of a communications and engagement strategy.
- 6.2 While this is intended as a framework document, key actions are highlighted at the end of the document. Should the overall Corporate Strategy be approved, one of the first of these will be to work up an agreed 'narrative' for the organisation.

## 7. Recommendations

- 7.1 The Board is invited to approve this paper.

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Author to complete **checklist**.

**a) Have Educational implications been considered?**

- ☐ Yes  
☒ No

**b) Is there a budget allocated for this work?**

- ☒ Yes  
☐ No

**c) Alignment with [NES Strategy 2019-2024](#)**

- ☐ 1. A high-quality learning and employment environment  
☐ 2. National infrastructure to improve attraction, recruitment, training and retention  
☐ 3. Education and training for a skilled, adaptable and compassionate workforce  
☐ 4. A national digital platform, analysis, intelligence and modelling  
☒ 5. A high performing organisation (NES)

**d) Have key strategic risks and mitigation measures been identified?**

- ☐ Yes  
☒ No

**e) Have Equality, Diversity, Human Rights and health inequality issues been considered as per [Fairer Scotland Duty: Guidance for Public Bodies](#) and Corporate Parenting as per the [Children and Young People \(Scotland\) Act 2014](#)?**

- ☒ Yes  
☐ No

**f) Have you considered Emergency Climate Change and Sustainability implications as per [DL \(2021\) 38](#)?**

- ☒ Yes  
☐ No

**g) Have you considered a staff and external stakeholder engagement plan?**

- ☒ Yes  
☐ No

John MacEachen  
15 May 2023  
NES

NHS Education for Scotland (NES)

Communications and Engagement Strategy 2023-2026:

People, Partnership, Performance

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# 1. Introduction

This Communications & Engagement Strategy sets out how we will use communications and engagement to support the NHS Education for Scotland (NES) Corporate Strategy 2023-2026.

The Corporate Strategy emphasises reaching out beyond traditional NHS stakeholders, to social care providers, and to public, private and voluntary bodies more generally. We are focussed on the overall societal impact that we make and how we can support improved health and wellbeing for individuals, whilst contributing to local careers and communities, and making a positive impact on our environment.

Together, these constitute a new focus, broadening out from individual educational products towards the overall impact of NES as an organisation and its role in building careers, lives and the future sustainability of the health and social care workforce through a focus on people, partnerships and performance.

This in turn requires a shift in our communications approach. We need to look at our relationships, the human impact of our work and the stories that we create. We need to look at the overall brand that we are promoting: how we look, sound and present ourselves. It requires a re-assessment of priority stakeholder groups, and a greater emphasis on strategic engagement. It requires looking at the content that we create, seeking ways to better communicate our new direction. All this needs to be done within existing and limited resources, so we need to maximise efficiency from our processes.

## **Objectives of this Communications & Engagement Strategy:**

- to support delivery of the NES strategic outcomes
- to articulate NES activities in terms of our three areas of focus: People, Partnerships and Performance
- to help NES staff to understand how their work contributes to our strategic outcomes
- to support internal communications around priorities and organisational change
- to promote NES externally and help external stakeholders to understand and participate in our work
- to support wider NHS objectives
- to help improve the way we communicate, with more emphasis on human stories, relationships and links to our overall direction.

## 2. How should we communicate?

Effective communications is about building relationships. This applies whether we are talking about face-to-face communications, educational resources or marketing communications. It applies whether we are talking about written, visual or video communications.

We want to engage stakeholders, including people with lived experience and carers, in the planning and building of our products. Good engagement is essential to good service planning. Greater participation brings better outcomes for communities all round.

We need to work to understand our audiences, and their needs. We need to capture and communicate what NES means to people. We need to communicate less about the functional qualities of our products, and more about the human stories:

- What's the effect of our work on delivering good quality care?
- How have we contributed to improving the work or careers of colleagues across health and social care
- How have we contributed to improving population health through employability and skills development

We need to plan, thinking about not only an individual product, but how we will communicate it, and how it will support the relationships we are building.

We also need to think, and communicate, about what our work means – where does it sit in relation to our corporate priorities? How does our story communicate something about all of NES, not just one product?

Building effective relationships is not simply about what we say. It's also about how we listen as well. When we are working with colleagues inside or outside NES, we will strive to:

<b>See:</b>	Set out the issues, challenges and opportunities
<b>Feel:</b>	Listen effectively: be present
<b>Taste:</b>	Live our colleagues' reality
<b>Share:</b>	Be authentic and curious – bring our best self
<b>Name:</b>	Set out what gets in the way – have courageous conversations
<b>Face:</b>	Respectfully address challenges and get to win-win
<b>Care:</b>	To agree what our colleagues need from us and what we need from them

## 3. The NES brand

Branding is a question of how we want to present ourselves. It incorporates how we look, our ‘tone of voice’ and what we say about ourselves. It is also about our culture. In our NES Corporate Strategy 2023-26 we outlined our commitment to the values of NHS Scotland. These will continue to be at the heart of all we do as we refresh NES “Our Way” to connect our values, behaviours and ways of working to deliver the NES Strategy.

### 3.1 Visual branding

As an NHS Board, NES is part of the family of NHS Scotland organisations. This means we are governed by national guidelines on logos, colour palettes, fonts and so on. This has advantages for each NHS Scotland organisation – it builds trust in NHS Scotland products and communications, and indicates appropriate governance and quality.

The challenge faced by NES is that we are looking to serve a wider audience across health and social care as well as other third and public sector bodies. It is therefore important that our brand and identity is inclusive and attractive to all.

Working within the NHS guidelines, we will seek enough flexibility to develop a NES-specific suite of branded resources. While NHS imagery and colour palettes will remain entirely appropriate for some purposes, overall we will prioritise imagery and visual approaches that reflect our wider health and social care system. As we move into new areas and new relationships, we will commission imagery and develop resources that create a deeper engagement with our audiences.

### 3.2 Tone

The way we write and speak about NES shapes perceptions of us. In the same way as our visual branding, our tone of voice has to reflect the fact that we are informed, professional and caring. Tone is also influenced by the medium we are using – for example, educational publications will require an appropriately professional tone, while social media activity works better with a more informal style.

When considering tone, we should also take audience differences into account. In line with our Corporate Strategy, we want to break down barriers as much as possible, and to reach out to people who may have not found our material engaging or relevant in the past. With the Corporate Strategy focus on ‘People’ and ‘Partnerships’, we need to consider how best to engage with a range of stakeholders. Our language choices should avoid jargon and be appropriate to both health and social care sectors. Our tone should be:

- focussed on the public and our impact
- approachable
- informal but not frivolous
- well-informed
- sector-appropriate
- inclusive

### 3.3 Narrative

Narrative is the ‘story’ we tell about our organisation, internally and externally. It is our shared understanding of who we are and where we are going, and it is a resource that we can return to when we describe ourselves. While individual workstreams or products will each have their own specific messages, these should reflect the wider narrative/context as far as possible.

We will promote an updated narrative across NES. This includes creating a core presentation, and refreshed induction materials for staff and Board members.

## 4. Engagement

'Partnerships' is one of our three areas of focus. Engagement is the process by which we strengthen existing partnerships, and build new ones, to support joint working and our strategic priorities. This work is a shared responsibility across NES.

### Audience Insight

We have a broad range of stakeholders, including but not limited to:

- National and local government
- Health sector
- Social care sector
- Private and voluntary sectors
- Educational and academic bodies
- Workforce representative bodies
- Scrutiny bodies
- People with lived experience and carers
- Health and social care workforce
- Young people

Our insights into our stakeholders' needs come from joint working with them and regular engagement at all levels, plus media and parliamentary monitoring, backed up by periodic Stakeholder surveys. As we move forward with implementation of our corporate strategy, we will track these perceptions on an ongoing basis, to identify issues and opportunities as they arise.

### Stakeholder survey insights

We conducted stakeholder surveys in 2020 and 2022. These showed that awareness of NES was high, and had improved over the period. Respondents said they were impressed with the quality of programmes of work, speed of delivery and degree of collaboration. However, while they were aware of our educational work, they were less aware of our work in other areas, principally our work on digital infrastructure and products.

### Strengthening Engagement

Over the period of this Strategy, NES will:

- Foster, build and maintain effective relationships with key stakeholders. We will engage with existing networks, as well as reach out and proactively engage with new networks and stakeholders.
- Strategically coordinate our public affairs and high-level stakeholder engagement activities, including the coordination of external consultations and Parliamentary Questions, thereby promoting NES's vision and purpose.
- Build and maintain an overview of NES's high-level stakeholder engagements, through the development of a forward planner, giving us an understanding of opportunities to promote the work of NES and its strategic messages.
- Monitor research, analyse and gather intelligence within the policy and public affairs sphere to share knowledge, promote NES and identify opportunities to share its purpose and vision. We will also further develop the horizon-scanning function to help the organisation understand and analyse potential opportunities and challenges, linked to our Corporate Strategy.



## 5. Creating content

Across NES, we create a high volume of content, written and visual. We need to consider how we prioritise limited resource to highlight and invest in material that promotes corporate priorities. We will pursue the following approach to choosing and creating content.

Our content, in any format, needs to meet five requirements. It should:

- i. communicate our priorities and key messages
- ii. be presented in an attractive and accessible way – using imagery and plain English as much as possible
- iii. be relevant and interesting to the audience
- iv. be digitally accessible, so that we can link to it using our various channels and to give it a longer shelf-life
- v. be communicated as efficiently as possible, proportionate to the task in hand and resources available

We will seek and try to describe content in ways which demonstrate/align to the organisational areas of focus:



## 6. Channels

NES operates a highly devolved communications approach – we encourage our colleagues to communicate about their work, and to experiment with new methods of doing so. This open approach extends to the channels used: webinars, social media channels, podcasts and so on. By doing this, we empower our colleagues to engage about their work, and take advantage of their creativity and specialist insights. We are able to generate greater innovation, cross-team learning and higher volumes of communications activity than if this was centrally directed.

However, we sometimes miss opportunities to reflect the wider organisational strategic context. This reinforces a gap in external perception, where NES products or workstreams are better known than NES itself or its strategic priorities. This approach has implications for efficiency too: we have a proliferation of channels. Each communications channel requires resource to maintain.

As part of this strategy, we will:

- better coordinate and influence local communications to improve the strategic context
- review the communications channels that we use in NES, with a view to improving efficiency

## 7. Measurement

In line with the measurement approach outlined in our Corporate Strategy we will measure our effectiveness in this area through Key Performance Indicators at a strategic and operational level. We will utilise:

- Stakeholder surveys
- Staff surveys
- Metrics on corporate channels, e.g. social media or website traffic.
- Metrics for individual campaigns, projects and workstreams

We will use all these to monitor our performance and progress, reporting quarterly to our Board and Executive Team.

## 8. Summary

To support our communication and engagement objectives, we will:

Branding:

- i. refresh the NES branding to balance latest NHS guidelines and our requirements to a wider audience
- ii. promote a unified approach to branding and communications planning
- iii. review the communications channels that we use in NES, with a view to improving efficiency and audience impact

Audiences:

- iv. build on our understanding of our audiences across the health and social care system

Outputs:

- v. create a suite of materials that articulate NES's overall strategic aims
- vi. coordinate our external engagement activity for Directors and Board members
- vii. better coordinate and influence Directorate communications to improve their alignment with the Corporate Strategy
- viii. prioritise communications and engagement activity that support our strategic priorities and the transformation of our organisation
- ix. use corporate channels to give extra push for priority initiatives

[ends]

**NES Board**

**1. Title of Paper**

Annual Whistleblowing Executive Report 2022/23

**2. Author(s) of Paper**

Nancy El-Farargy, Planning and Corporate Governance

**3. Lead Director(s)**

Christina Bichan, Director of Planning and Performance

**4. Situation / Purpose of Paper**

- 4.1. In line with the requirements of the National Whistleblowing Standards<sup>1</sup> (the Standards), the accompanying paper presents the Annual Whistleblowing Report 2022-2023 (covering the period 01 April 2022 to 31 March 2023).

**5. Background and Route to Meeting**

- 5.1. The Public Services Reform (The Scottish Public Services Ombudsman) (Healthcare Whistleblowing) Order 2020<sup>2</sup> created a new route for whistle-blowers in the healthcare sector to bring escalated complaints to the Scottish Public Services Ombudsman (via the Independent National Whistleblowing Officer). Subsequently, the 2021 National Whistleblowing Standards<sup>3</sup> set out a national procedure for all NHS Scotland providers to handle whistleblowing concerns. In turn, all NHS Scotland boards have legal requirements to report on any whistleblowing concerns on a quarterly basis. Throughout 2022-2023, quarterly updates were therefore provided to the Staff Governance Committee and the NES Board.

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<sup>1</sup> Independent National Whistleblowing Officer (2021) 'The National Whistleblowing Standards - April 2021'. Edinburgh: Scottish Public Services Ombudsman. Available at: <https://inwo.spsso.org.uk/sites/inwo/files/Standards/NationalWhistleblowingStandards-AllParts.pdf> (Accessed: 24 January 2022).

<sup>2</sup> Crown Copyright (2020) 'Scottish Statutory Instruments. 2020 No. 5. The Public Services Reform (The Scottish Public Services Ombudsman) (Healthcare Whistleblowing) Order 2020'. Available at: <https://www.legislation.gov.uk/ssi/2020/5/made> (Accessed: 22 October 2020).

<sup>3</sup> Independent National Whistleblowing Officer (2021) 'The National Whistleblowing Standards - April 2021'. Edinburgh: Scottish Public Services Ombudsman. Available at: <https://inwo.spsso.org.uk/sites/inwo/files/Standards/NationalWhistleblowingStandards-AllParts.pdf> (Accessed: 24 January 2022).

- 5.2. As per the requirements of the Standards, all NHS Scotland boards are required to publish an Annual Whistleblowing Report, setting out performance in handling any whistleblowing concerns.
- 5.3. During the first year of the Standards, an internal audit was undertaken by KPMG. The first Annual Whistleblowing Report 2021-2022 was published in June 2022. In July 2022, Christina Bichan took up the post of Director of Planning and Performance.
- 5.4. The current Annual Whistleblowing Report (attached) builds on the quarterly updates that were provided to the Staff Governance Committee and NES Board throughout 2022-2023. A chronological overview of whistleblowing-related activities is also provided.
- 5.5. During the reporting period, the NES Whistleblowing Steering Group met formally on two occasions and corresponded informally on other occasions (e.g., via three meetings and email correspondence).
- 5.6. The attached report was tabled at the Executive Team (20 April 2023) and at the Staff Governance Committee (04 May 2023).

## **6. Assessment / Key Issues**

- 6.1. In March 2022 an “unnamed concern” was raised and was concluded in June 2022. Between 01 April 2022 and 31 March 2023, one formal whistleblowing concern was received (January 2023). This was concluded in 14 working days.
- 6.2. Hosted by the Independent National Whistleblowing Officer (Scottish Public Services Ombudsman), we contributed to the very first NHS Scotland ‘Speak up’ week (03-07 October 2022).
- 6.3. Within NES, all line managers are required to complete the line manager-led training (which is embedded within a suite of ‘essential learning’). As of 31 March 2023 (and 04 April 2023), 270 line managers (76%) completed the mandatory level e-Learning, with 84 yet to complete (24%).

## **7. Recommendations**

- 7.1. The attached Annual Whistleblowing Report 2022-2023 is for noting and assurance.
-

**8. Author to complete checklist.**

**Author to include any narrative by exception in section 6 of the cover paper.**

**a) Have educational implications been considered?**

- ☒ Yes  
☐ No

**b) Is there a budget allocated for this work?**

- ☒ Yes  
☐ No

**c) Alignment with [NES Strategy 2019-2024](#).**

- ☒ 1. A high-quality learning and employment environment.  
☒ 2. National infrastructure go improve attraction, recruitment, training and retention.  
☒ 3. Education and training for a skilled, adaptable and compassionate workforce.  
☒ 4. A national digital platform, analysis, intelligence and modelling.  
☒ 5. A high performing organisation (NES).

**d) Have key strategic risks and mitigation measures been identified?**

- ☒ Yes  
☐ No

**e) Have Equality, Diversity, Human Rights and health inequality issues been considered as per [Fairer Scotland Duty: Guidance for Public Bodies](#) and Corporate Parenting as per the [Children and Young People \(Scotland\) Act 2014](#)?**

- ☒ Yes  
☐ No

**f) Have you considered Emergency Climate Change and Sustainability implications as per [DL \(2021\) 38](#)?**

- ☒ Yes  
☐ No

**g) Have you considered a staff and external stakeholder engagement plan?**

- ☒ Yes  
☐ No

Nancy El-Farargy  
May 2023  
NHS Education for Scotland

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## **Annual Whistleblowing Report 2022-2023**

**NHS Education for Scotland**



## 1. Introduction

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- 1.1. The Public Services Reform (The Scottish Public Services Ombudsman) (Healthcare Whistleblowing) Order 2020<sup>1</sup> created a new route for whistle-blowers in the healthcare sector to bring escalated complaints to the Scottish Public Services Ombudsman (SPSO) (via the Independent National Whistleblowing Officer (INWO)). Subsequently, the April 2021 National Whistleblowing Standards<sup>2</sup> (the Standards) set out a national procedure for all NHS Scotland providers to handle whistleblowing concerns. In turn, all NHS Scotland boards are required to report on any whistleblowing concerns on a quarterly basis. Throughout 2022-2023, quarterly updates were therefore provided to the NHS Education for Scotland (NES) Staff Governance Committee and the NES Board.
- 1.2. As per the requirements of the Standards, all NHS Scotland boards are required to publish an Annual Whistleblowing Report, setting out performance in handling any whistleblowing concerns. Our first Annual Whistleblowing Report (2021-2022) was published in June 2022. This included an overview of the background and legislation surrounding the Standards. The definition of whistleblowing and an overview of the stages involved in the whistleblowing procedure were also provided.
- 1.3. This is our second Annual Whistleblowing Report, covering the period 01 April 2022 to 31 March 2023.
- 1.4. In this report, we provide an overview of our performance and a chronological summary of activities delivered over the year.
- 1.5. This report is presented as follows:
  - A chronological summary of activities throughout 2022-2023.
  - The whistleblowing annual return and key performance indicators.
  - A conclusion to the report.

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<sup>1</sup> Crown Copyright (2020) 'Scottish Statutory Instruments. 2020 No. 5. The Public Services Reform (The Scottish Public Services Ombudsman) (Healthcare Whistleblowing) Order 2020'. Available at: <https://www.legislation.gov.uk/ssi/2020/5/made> (Accessed: 22 October 2020).

<sup>2</sup> Independent National Whistleblowing Officer (2021) 'The National Whistleblowing Standards - April 2021'. Edinburgh: Scottish Public Services Ombudsman. Available at: <https://inwo.spsso.org.uk/sites/inwo/files/Standards/NationalWhistleblowingStandards-AllParts.pdf> (Accessed: 24 January 2022).

## **2. Chronological summary of activities**

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- 2.1. Throughout 2022-2023 we delivered a series of actions to meet the requirements of the Standards.
- 2.2. Towards the start of the reporting period, three levels of online training were made available by the Scottish Public Services Ombudsman (hosted on TURAS Learn).
- 2.3. Numerous communications regarding the suite of essential learning modules were issued to all our staff throughout the reporting period. Workforce Directorate colleagues led this work.
- 2.4. In May 2022, we provided the NES Board with our first Annual Whistleblowing Report (2021-2022). The Non-Executive Director and whistleblowing champion (Gillian Mawdsley) also provided the Board with an annual assurance statement.
- 2.5. Christina Bichan, Director of Planning and Performance took up post in July 2022.
- 2.6. In line with the requirements of the Standards, Karen Wilson (Director of Nursing, Midwifery and Allied Health Professions (NMAHP) and Deputy Chief Executive – Clinical) and Graham Paxton (Head of Programme) were appointed as Confidential Contacts.
- 2.7. The intranet and internet whistleblowing webpages have been updated in an ongoing manner, where required.
- 2.8. Hosted by the Independent National Whistleblowing Officer, the first NHS Scotland 'Speak-up Week' was held between 03 and 07 October 2022. The approach was based on the 'speak-up month' previously delivered by the National Guardian's Office in England. We used the week to give all staff further opportunities to learn more about the Standards and the arrangements for raising a concern. Our activities included:
  - An intranet news-feed and all-staff email that introduced 'speak-up week'.
  - A video presentation by the Director of Planning and Performance (Christina Bichan) and the Non-Executive Director and Whistleblowing Champion (Gillian Mawdsley).
  - The introduction of the two Confidential Contacts, their role and how they can be contacted.
  - Awareness of the training available on TURAS Learn.
  - The distribution of an all-staff survey, which aimed to solicit staff views on their experiences to date and on whistleblowing in general, as well as to inform further developments in the area.

2.9. The Independent National Whistleblowing Officer intimated their intention to hold speak up again during 02-06 October 2023.

2.10. Intelligence from the all-staff survey is outlined in Appendix A. In summary the results indicated that:

- Further promotion of the confidential contacts is welcome.
- Staff were most comfortable raising any concerns with their line manager, followed by the confidential contacts and peers. Other approaches included a close confidante, someone external to their team, an anonymous mailbox, and/or that it simply depended on the issue involved.
- Whilst most respondents did not feel the need to raise a 'business-as-usual' concern, there were some queries regarding its definition. Clarity is required around the definition of business-as-usual concerns and how to progress them (as precursors to the formal process). Other commentary included previous experiences in raising concerns and the perceived risks in doing so.
- Most respondents felt no need to raise a whistleblowing concern. Other commentary included lack of confidence in the process, previous negative experiences, and the wider connotations around whistleblowing in general.
- Finally, there were a range of positively and negatively framed perceptions towards the whistleblowing process and whistleblowing in general. These included:
  - The acknowledgement of a useful procedure in place.
  - The useful opportunity to feedback opinions via the survey.
  - The creation of safe spaces and processes to trust that concerns will be heard without prejudice.
  - The need to create a culture of psychological safety.
  - There was some fear expressed around any repercussions when raising concerns.
  - The e-Learning available and the need to increase knowledge and awareness around whistleblowing.
  - The needs for anonymity, impartiality, independence, and clear protections in place for anyone raising concerns.

- 2.11. A NES Whistleblowing Steering Group was established<sup>3</sup> and met formally on two occasions (as well as on three informal occasions). Discussions included:
- Actioning the intelligence from the all-staff survey.
  - Further promotion and communication of the Confidential Contacts.
  - The development of learning resources to support the Confidential Contacts (in collaboration with the Independent National Whistleblowing Officer).
  - Ongoing engagement with the Independent National Whistleblowing Officer.
  - A schedule of future activities for 2023-2024.
  - Communications regarding induction, the Line Manager's Forum, and students.
- 2.12. Developed by the Scottish Public Services Ombudsman, there are three levels of training available on [TURAS Learn](#): (1) an overview level; (2) a resource for line managers; and (3) a resource for senior managers. A review of compliance in this area identified opportunity for creating greater clarity in respect of requirements for completing (2) and (3), and this has been actioned by the Organisational Development and Learning Team.
- 2.13. For additional context, the Scottish Public Services Ombudsman developed other learning resources. These included a quick reference guide for managers and people receiving concerns, a guide for HR teams, and a suite of learning resources for confidential contacts (recently launched in April 2023 – for the next reporting period). NES supported the development of this work through the involvement of the Director of Planning and Performance. Access to the resources has also been facilitated by its inclusion in the relevant pages of TURAS Learn.
- 2.14. During quarter four, the Director of Planning and Performance also participated in the focus group tasked with developing the Whistleblowing questions, which will be used in this year's 'iMatter' survey. The outcome of these questions will be used to assess the impact of our recent whistleblowing activities and to further shape our work plan for 2023-2024.

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<sup>3</sup> A previous group was in place in advance of the launch of the Standards.

### **3. Whistleblowing annual return and key performance indicators**

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- 3.1. In March 2022, NES received one “unnamed concern”, in which investigation of the case was carried over into quarter one of 2022-2023. At the request of the whistle-blower, this was an unnamed concern (and hence there was no obligation to follow the Standards regarding it<sup>4</sup>). However, the concern was investigated as per good practice guidelines, where applicable. Communication with the whistle-blower was ongoing during the investigation stage, with the final report being issued in early June 2022.
- 3.2. The case involved another NHS Scotland board (territorial), in which communication with them was ongoing during the reporting period. The concerns were in relation to the educational and clinical supervision of NES doctors in training and the out-of-hours supervision of trainees at night.
- 3.3. It was noted that earlier concerns about staffing and training had been received via another route. In response to those, NES Medical Directorate representatives met with the Director of Medical Education of the board concerned, in which solutions were explored. It was agreed that a fact-finding quality management visit would be arranged (by the Quality Management Group of the NES Medical Directorate). The required standards for medical education were reviewed against the General Medical Council’s (GMC’s) ‘Promoting excellence: standards for medical education and training’<sup>5</sup>. The final concluding report highlighted concerns about the training environment, and a remediating action plan was therefore produced.
- 3.4. The report was shared with the territorial board concerned and other interested parties. Based on the board’s commitment to address the concerns, it was agreed that enhanced monitoring would not be required. The Scottish Government was advised of potential concerns regarding patient safety and training at the hospital concerned, and the risk of potential future escalation to enhanced monitoring if not resolved.
- 3.5. In January 2023, NES received one formal whistleblowing concern, which was initially received by the Chief Executive on 30 January 2023. The concern was related to the education and training requirements of a senior position within NES. The investigation was led by the Director of Planning and Performance through a small team. The concern was acknowledged within three working days and responded to on 17 February 2023 (14 working days), meeting the Standards in respect of both elements.

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<sup>4</sup> The National Whistleblowing Standards (April 2021), part two, paragraphs 66-73.

<sup>5</sup> General Medical Council (2015) ‘Promoting excellence: standards for medical education and training’. Manchester: General Medical Council. Available at: [www.gmc-uk.org/education/standards.asp](http://www.gmc-uk.org/education/standards.asp). (Accessed: 1 July 2022).

- 3.6. The investigation reviewed the points raised within the initial correspondence and concluded that the concern was not substantiated with no further action necessary. Explanation of the investigation findings was provided to the individual who raised the concern as part of the written response, which has since been acknowledged. A review of the process undertaken in respect of the handling of this concern was supported by the NES Whistleblowing Champion, and the learning from this has been adopted into future practice.
- 3.7. In summary, one formal whistleblowing concern was raised in 2022-2023 which was closed at stage two of the whistleblowing process. This was not upheld and the response was issued in 14 working days.
- 3.8. We continue to learn from the experiences of those involved in whistleblowing.
- 3.9. Within NES, all line managers are required to complete the line manager training (which is embedded within a suite of 'essential learning'). As of 31 March 2023 (and 04 April 2023), 270 line managers (76%) completed the mandatory level e-Learning, with 84 yet to complete (24%)<sup>6</sup>. There has been a steady increase, however, we acknowledge that these figures could be improved. The Workforce Directorate has continued to promote and monitor compliance of essential learning completions. Communications included an entry within the 'NES Matters!' newsletter and email correspondence to all staff.

---

<sup>6</sup> Note: compliance and exclusion criteria (e.g., those on maternity leave and students, etc) were reviewed in 2022-2023.

## 4. Conclusion

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- 4.1. In line with the National Whistleblowing Standards, we reiterate our commitments to dealing responsibly, openly and professionally regarding any whistleblowing concern. We also encourage all those involved to raise any concerns as early as possible.
- 4.2. Throughout 2022-2023, the Staff Governance Committee and the NES Board were kept informed of developments. The NES Whistleblowing Steering Group also met formally and informally to progress the work (chaired by the Director of Planning and Performance).
- 4.3. The first NHS Scotland speak up week afforded us the opportunity to further promote the whistleblowing process, the confidential contacts and the training available. We also solicited staff perspectives into the process, in which valuable actionable insights were obtained. We have developed an onward action plan for 2023-2024 and look forward to the next speak up week in October 2023.

Nancy El-Farargy  
NHS Education for Scotland  
Westport 102  
West Port  
Edinburgh  
EH3 9DN

12 May 2023

## 5. Appendix A: Whistleblowing – insights and perspectives

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The survey was distributed to core NES staff during the very first NHS Scotland speak up week (03-07 October 2022):

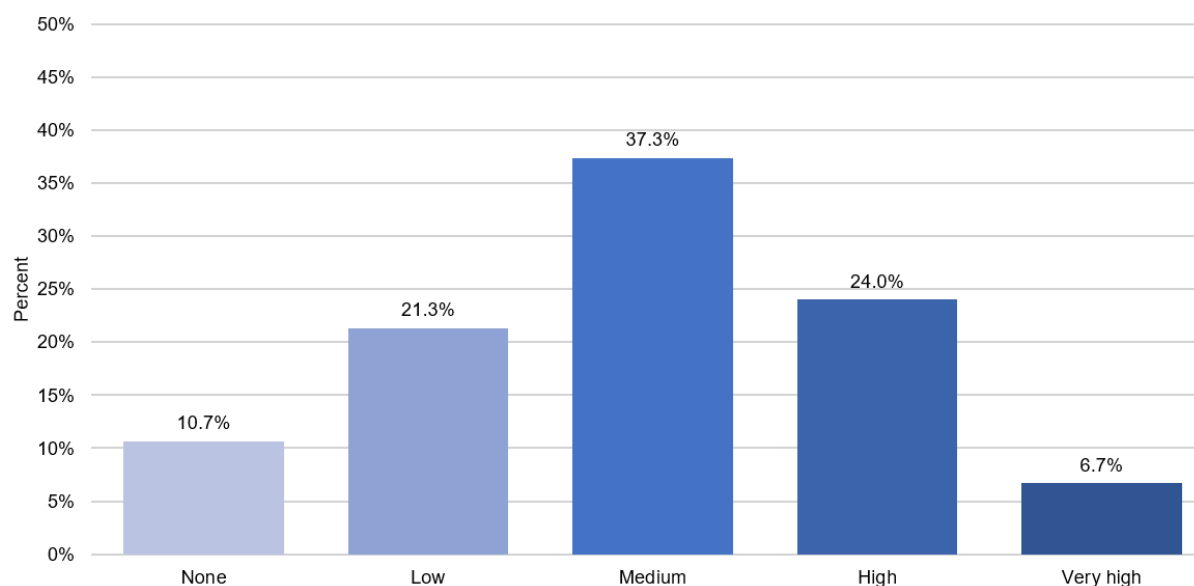
- Email (03 October 2022).
- Intranet newsfeed article (03 October 2022).
- Reminder email (07 November 2022).

None of the questions were mandatory and no identifiable information was requested.

Responses varied from 23 to 75.

### 5.1. Knowledge of the National Whistleblowing Standards

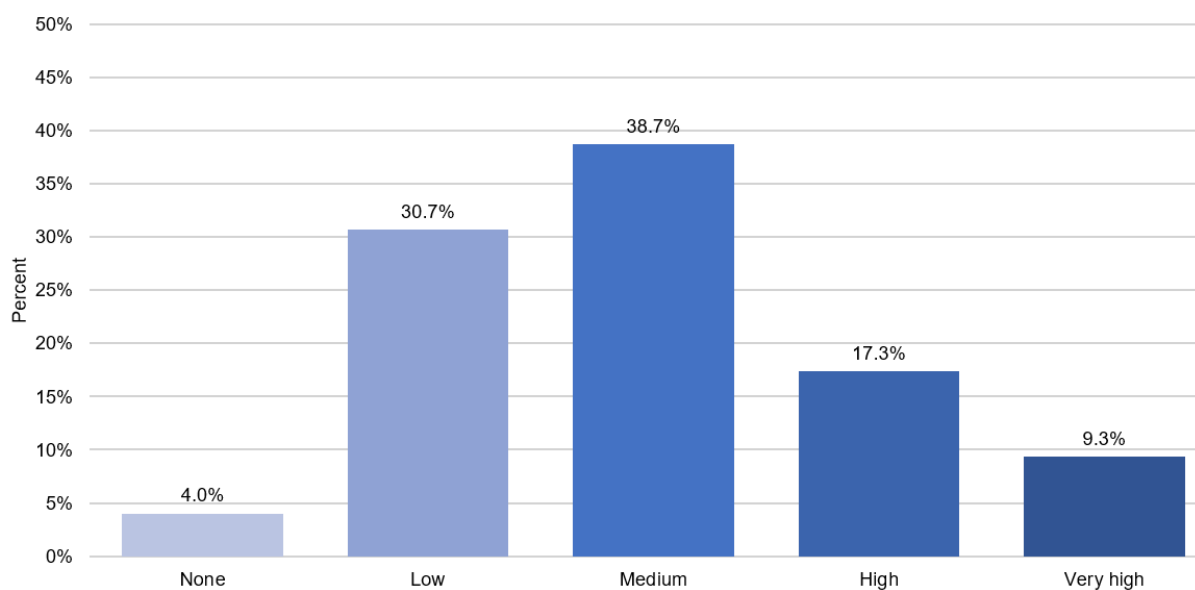
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**Figure 1:** Respondents' knowledge of the National Whistleblowing Standards (N=75).

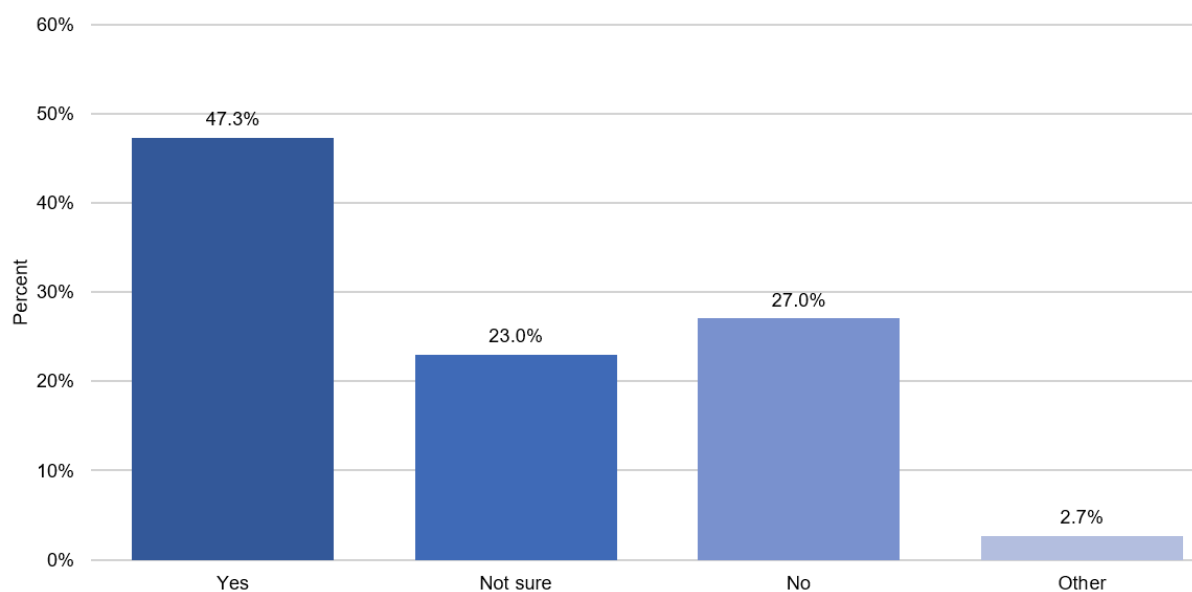


## 5.2. Confidence in raising a whistleblowing concern



**Figure 2:** Respondents' confidence in raising a whistleblowing concern (N=75).

## 5.3. Familiarity of the stages involved

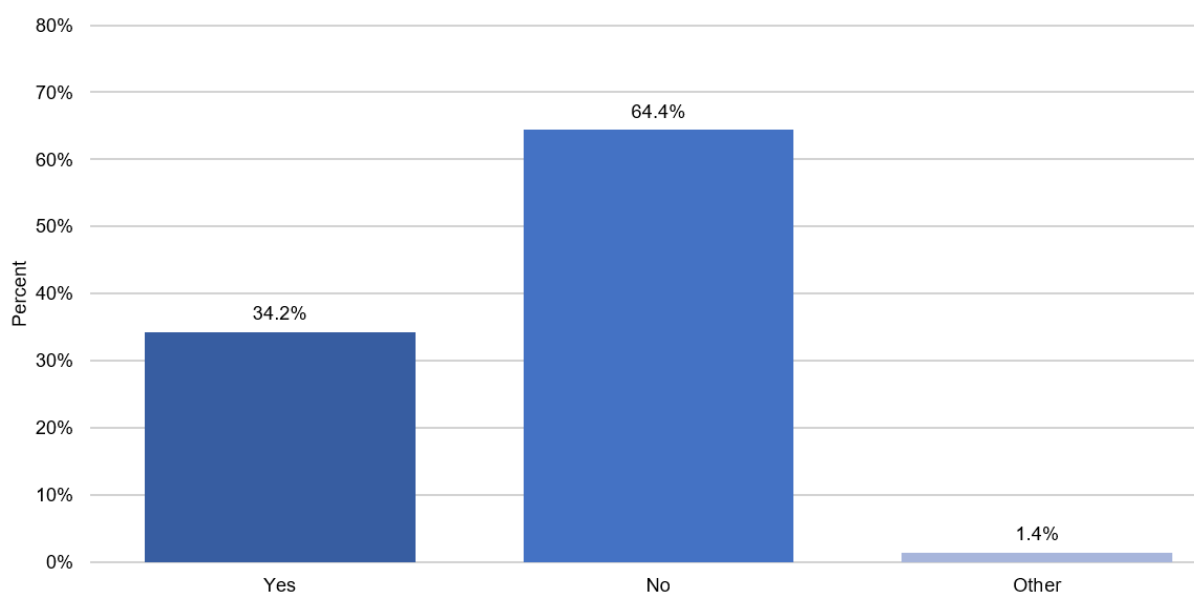


**Figure 3:** Respondents' answers to "Are you familiar with the stages involved for raising a whistleblowing concern?" (N=74).

### Other comments:

- *"Only from the training overview modules"*
- *"I am aware but could not talk anyone through it without the policy"*

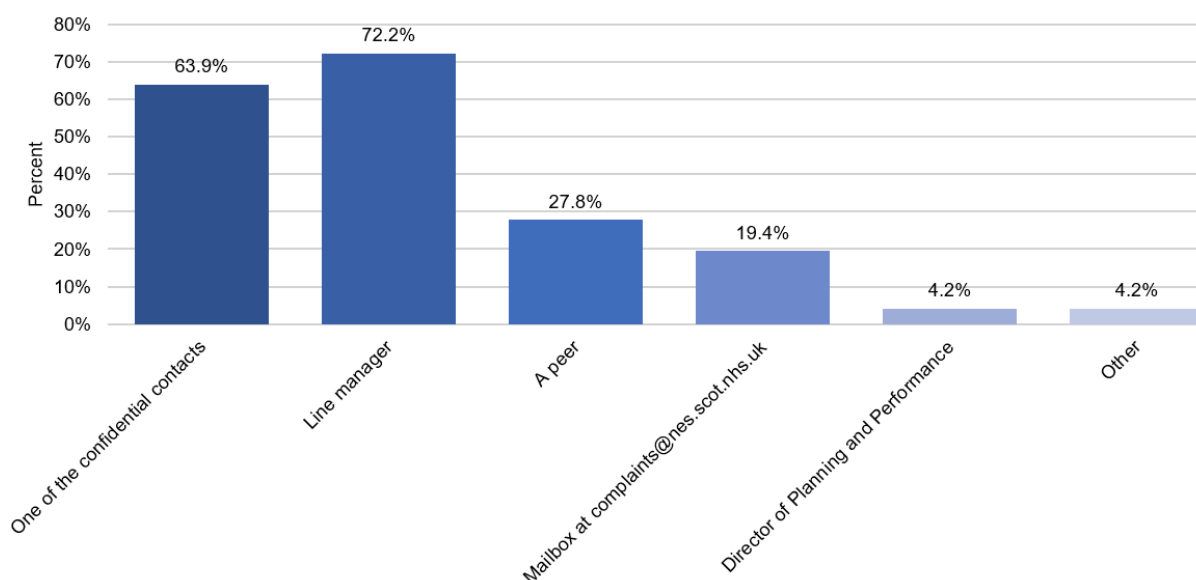
## 5.4. NES Confidential Contacts



**Figure 4:** Respondents' answers to "Do you know who the NES Confidential Contacts are?" (N=73).

Other comment: *"Would look to find out"*

## 5.5. Approach to raise a whistleblowing concern



**Figure 5:** Respondents' answers to "Who would you approach to raise a whistleblowing concern? Please check all or any that apply to you" (N=72).

Other comments:

- *"Depends on concern"*

- *Confidential / anonymous mailbox*
- *don't know*"

#### 5.6. Person most comfortable raising a whistleblowing concern with

There were 69 responses to the question: "If you had a whistleblowing concern, who would you be most comfortable raising it with in the first instance? This can be anyone of your choosing.)."

Most respondents highlighted their line manager as their preferred person to approach. Other preferred people included the confidential contacts or a peer. Others highlighted that it simply depended on the issue.

There were a few outliers, and some comments included:

- *"A close confidante and then possibly a mailbox where I would remain anonymous.*
- *I wouldn't. I think it's widely known that doing so is career limiting within the NHS and that every effort will be attempted to find out what the individual's identity is. If someone wants to take that step, they should be supported rather than outed.*
- *I have full trust in my line manager, and would, I suspect, appreciate their consideration of my concerns - so probably my line manager. That said, I would have greater confidence in procedural awareness of the confidential contacts. I guess it depends.*
- *This would depend on the situation and what the whistleblowing concern was. On some occasions I would initially refer the concern to an Adviser to determine this was actually a whistleblowing concern but only if appropriate"*

#### 5.7. Business as usual concerns

There were 62 responses to the question: "Have you ever felt the need to raise a business-as-usual concern? If so, what were your experiences?". The majority of respondents didn't feel any need to raise a business-as-usual concern.

A number of respondents highlighted that they did not know what a business-as-usual concern was, for instance, as exemplified by the following selected comments:

- *"I wouldn't know what constituted a valid business concern*
- *Not familiar with what a business-as-usual concern is*
- *Don't know what this term means."*

Other comments included:

- *"I feel safe to raise concerns in my current team. In previous Health Board I had varying experiences of raising concerns.*
- *No, and I wouldn't feel confident in doing so. If there was a risk to patient safety absolutely I would, but in doing so would have to accept that my career was likely over as there would be attempts to discover identity and, no doubt, ramifications from the highest level for doing so. I think all staff feel this way and anyone who prioritises*

*patient safety concerns over their own progress or career is an absolute hero and should be treated as such - they're exactly the people we want within the NHS.*

- *Not within NES but within my previous organisation. This was not a good experience and required escalation beyond my line manager, this was a more positive outcome initially, but I continued to see fragility and ruptures within the system, I did consider using formal whistleblowing procedures."*

## 5.8. Formal whistleblowing concerns

Potential respondents were invited to respond to the following question: "Have you ever felt the need to raise a formal whistleblowing concern? If so, what were your experiences?". There were 61 responses.

The vast majority felt no need to raise a formal whistleblowing concern.

There were a few negative outliers, which may be related to the wider connotations around whistleblowing, perhaps. Examples included:

- *"Yes, poor experience my concerns were not explored, and actions taken on word of mouth of other member of staff without consultation with me at all.*
- *Am considering a whistleblowing concern regarding NES but don't want the stress...Considering the history of whistleblowing out in the wider world it seems that whistle-blowers destroy their own lives and prospects while organisations cover things up and get away with things."*

## 5.9. Additional comments

Staff were invited to add any additional comments, in which 23 responded.

A number of responses were positively framed, in which examples included:

- *"Good that there is something in place in case you need to refer to it. Shows that NES isn't just prepared to brush things under the carpet if an employee feels there is a need to bring something to the attention of those higher up.*
- *Thanks for this survey - I appreciate the effort that is going into supporting whistleblowing and, in my view, there needs to continue to be concerted effort to support the creation of safe spaces and safe processes to enable us all to be able to trust that concerns will be heard without prejudice*
- *Thanks for promoting this as an option. It's great to have this and if we can create a culture with psychological safety we can minimise the requirement for formal complaints."*

Conversely (as with any survey), a number of negatively framed comments were received. Commentary included:

- *"Not enough info or confidence in the process.*
- *Worried about repercussions if the situation ever arose.*
- *I feel there are concerns to whistleblowing for fear they are being raised inappropriately and should be dealt with in a less formal manner or via another route.*

*This is a mindset we need to make people feel comfortable to do as without fear of repercussions.”*

There were a few comments in relation to the online training (available on [TURAS Learn](#)):

- *“e-learning is good, a follow up workshop/session to consolidate would be beneficial or guidance to develop knowledge further as a team.*
- *I recognise the need to complete the Turas learn module to increase knowledge and awareness.*
- *Training very long”*

Other comments included:

- *“I think there has to be clear protection in place for staff for raising concerns including absolutely anonymity. It would be easy for someone senior to put pressure on the investigating team to reveal the details, and it requires those on the whistleblowing team to demonstrate absolute integrity in their actions around whistleblowing as it would be easy for pressure to be applied even on them to reveal sources or other that would give away the identity of those involved. Anyone who attempts to violate that process should be dealt with as a disciplinary matter in the strictest of terms.*
- *Whistleblowing is a very difficult thing to do, there is a very real fear of not being supported, or listened to, and being labelled as a troublemaker. In my experience managers and those in power don't like to hear bad news. Speaking truth to power is difficult and can be career limiting.*
- *In principle it is a good policy, but we should work towards a culture where people feel safe and supported to highlight concerns - I don't feel this is the case.”*

#### 5.10. Suggested Implications and recommendations

- Knowledge and awareness raising of the confidential contacts would be beneficial.
- Evidence regarding the critical roles of line managers and the confidential contacts is noted.
- Clarity is required around the definition of business-as-usual concerns and how to progress them (as pre-cursors to any formal processes).
- Additional communication to enable confidence around the whistleblowing process is suggested.
- In addition, further communication around confidentiality, anonymity (where applicable) and the general working culture around raising any business-as-usual concerns is suggested.

Whistleblowing insights and perspectives: Staff survey results  
Nancy El-Faragy  
NHS Education for Scotland  
12 April 2023

**NHS Education for Scotland**  
**Item 09b**  
**Date 25 May 2023**

**NES/23/36**

## **Board Paper**

### **1. Title of Paper**

Non-Executive Whistleblowing Champion 2022/23 Annual Report

### **2. Author of Paper**

Gillian Mawdsley, Non-Executive Director and Whistleblowing Champion

### **3. Lead Director(s)**

N/A

### **4. Situation/Purpose of paper**

4.1 This paper brings the Non-Executive Director and Whistleblowing Champion 2022/23 Annual Report to the Board for assurance.

### **5. Background and Route to Meeting**

- 5.1 As per the Whistleblowing Champion role an annual report is prepared for the Staff Governance Committee as the delegated Committee for whistleblowing governance and scrutiny by the Board.
- 5.2 This report was reviewed by the Staff Governance Committee at the 4 May 2023 meeting. The Committee confirmed that it provided satisfactory assurance.
- 5.3 A letter is sent to the Cabinet Secretary for Health and Social Care annually providing an update on the assurance role from each of the NHS whistleblowing champions (following the practices adopted in 2021 and 2022.) The key issues identified below formed part of the content of that 2023 letter. That letter was shared internally with NES to support the necessary transparency that is central to the successful interaction and relationship on which assurance on whistleblowing can be provided to the Board.

## **6. Assessment/Key Issues**

- 6.1 There is a need to acknowledge at the outset that NES staff have faced another challenging year. The pandemic may have concluded but its results, including any recommendations to be made from the UK and Scottish Government COVID-19 inquiries, may identify matters pertinent to whistleblowing. All these issues take time and commitment from NES staff as well as prioritisation of their work. There are personal pressures to be recognised too resulting from the cost-of-living crisis which affect everyone. The full implications that may arise from all these issues surfacing and their relationship with whistleblowing concerns are still to be seen. Ensuring that NES has an effective system with well trained staff to recognise and deal with whistleblowing concerns at all levels within the organisation if and when they arise is essential.
- 6.2 The commitment, work, and contribution of all NES staff regarding whistleblowing continues to be substantial. That work is led effectively by the Executive lead, the Director of Planning and Performance and her team to which credit must be given. Since her arrival, during this reporting year, there has been high level of pro-active engagement, building on NES's earlier commitment to the introduction of the Whistleblowing Standards. Structures in NES were in place, and that refresh/re-invigoration undertaken is now successfully completed.
- 6.3 Appropriate governance routes exist to provide the necessary assurances embedded at various Committee and Board levels. Reporting quarterly to the Staff Governance Committee, is well embedded and working well as demonstrated in effect by two whistleblowing concerns having been identified and dealt with over the year with necessary learning put in place. Though not seeking out such whistleblowing concerns arising it is recognised that being able to test the system in place and find it working effectively provides good assurance and confidence to the Board.
- 6.4 The overall aim is the creation of a more holistic environment within NHS Boards, and the development towards an evolving culture promoting whistleblowing and supporting whistle-blowers in which NES plays an important role.
- 6.5 A regular Whistleblowing Group is now well- established which allows effective monitoring and evaluation to take place, it also undertakes wider activities that feed into national events such as Speak Up Week highlighted below. The successful appointment of two confidential contacts who can provide informal advice where required was much welcomed. Their work included a staff survey where staff were canvassed for their views on their

experiences of whistleblowing in general. This provides an evidence base for planning of awareness raising activities in future and identification and commitment to other areas of work.

- 6.6 Speak Up Week presented a great opportunity to ensure that NES along with other NHS Boards identified actions to support the promotion of knowledge and understanding of the Standards. That Week provided an impetus and a focus to the work for NES. It has also allowed NES to expand its scope of national activities regarding whistleblowing to help in the development of learning resources to support confidential contacts which work is being progressed with the Independent National Whistleblowing Officer. What is essential is to receive learning from other organisations to attain common standards, and to contribute as NES is doing to the sharing of good practice, experience, and information.
- 6.7 Training of all staff on the Standards has been undertaken throughout the reporting year. The NES management team at senior levels support the need for training to be completed and continue to be actively engaged in activities to improve and increase the compliance with the mandatory training available on TURAS. Regular reports to Committee and Board address these issues and continues to be a topic on which attention is fully focused.
- 6.8 Assurance can be provided regarding whistleblowing that there are clear signposts/systems in place supporting NES's work in relation to whistleblowing along with the provision of resources at all levels. There is a clear commitment to achieving the necessary awareness of whistleblowing and access to advice as and when required.

## **7. Recommendations**

- 7.1 The Board is invited to review this report and confirm if provides satisfactory assurance.

---

Author to complete **checklist**.

**a) Have Educational implications been considered?**

- ☒ Yes  
☐ No

**b) Is there a budget allocated for this work?**

- ☒ Yes  
☐ No



**c) Alignment with [NES Strategy 2019-2024](#)**

- ☒ 1. A high-quality learning and employment environment
- ☒ 2. National infrastructure to improve attraction, recruitment, training and retention
- ☒ 3. Education and training for a skilled, adaptable and compassionate workforce
- ☒ 4. A national digital platform, analysis, intelligence and modelling
- ☒ 5. A high performing organisation (NES)

**d) Have key strategic risks and mitigation measures been identified?**

- ☒ Yes
- ☐ No

**e) Have Equality, Diversity, Human Rights and health inequality issues been considered as per [Fairer Scotland Duty: Guidance for Public Bodies](#) and Corporate Parenting as per the [Children and Young People \(Scotland\) Act 2014](#)?**

- ☒ Yes
- ☐ No

**f) Have you considered Emergency Climate Change and Sustainability implications as per [DL \(2021\) 38](#)?**

- ☒ Yes
- ☐ No

**g) Have you considered a staff and external stakeholder engagement plan?**

- ☒ Yes
- ☐ No

Gillian Mawdsley  
May 2023  
NES

**NHS Education for Scotland**  
**Item 10a**  
**25 May 2023**

**NES/23/37**

## **Board Paper**

### **1. Title of Paper**

2022-23 Quarter 4 Risk Register Report

### **2. Author(s) of Paper**

Jim Boyle, Executive Director of Finance

### **3. Lead Director(s)**

Jim Boyle, Executive Director of Finance

### **4. Situation/Purpose of paper**

- 4.1 To present the Board with an update on the Strategic Risk Register, in the new reporting format, and with the Strategic Risks as approved by the Board on 23 March 2023.

### **5. Background and Route to Meeting**

- 5.1 The Audit and Risk Committee has strategic oversight of risk assurance within NES and receives regular updates on the Strategic Risk Register, as well as other reports on risk matters. The Board approves the Risk Strategy, the list of strategic risks, the Risk Appetite Matrix, and it also receives regular reports on strategic risks. A recent Board Development Session received a preview of a revised reporting format for strategic risks, and this report contains the strategic risks in that new format. The Audit and Risk Committee considered this update at its meeting on 27 April 2023 and noted the contents, particularly the scoring of risks, pre- and post-mitigation, and the effectiveness of controls. The Committee also provided comment on the new reporting format.

### **6. Assessment/Key Issues**

- 6.1 The fourteen strategic risks approved by the Board in March have now been revised and rationalised further following consideration by the Executive Team. These are set out for consideration in summarised form in Appendix 1 and the individual strategic risks are detailed in Appendix 2. For reference, Appendix 3 sets out the NES risk appetite definitions and individual risk category definitions, as approved by the Board.

6.2 The revised layout will enable the Board to more easily focus on the key issues highlighted for each risk, including:-

- The gross and net risk scores
- The position of each net risk score against the risk appetite set by the Board
- The effectiveness of the controls put in place to reduce risk exposure

6.3 This layout will continue to be refined until it is in a form that the Executive Team and the Audit and Risk Committee are happy to adopt for future reports. This will also be the format that will be used for reporting to the Board.

6.4 The individual reports have also been revised, with gross and net scorings revised according to prevailing conditions to produce a revised net score that has been compared to the Risk Appetite Matrix that was approved by the Board. This then produces a comparison of Net Score v Appetite and clearly demonstrates if the risk is **Within** or **Outwith** appetite.

6.5 An assessment of control effectiveness is also shown for each strategic risk, although it will be for the Board to express a view on the effectiveness of the controls.

6.6 Net Risk scores have then been assessed according to the following matrix:

I M P A C T	5	Cont	P2	P1	P1	P1		Low
	4	Cont	Cont	P2	P1	P1		BAU
	3	Low	Cont	Cont	P2	P1		Contingency
	2	Low	BAU	BAU	BAU	P2		Primary 2
	1	Low	Low	Low	BAU	BAU		Primary 1
		1	2	3	4	5		
		LIKELIHOOD						

6.7 The new reporting format will continue to be developed and refined, and additional analysis will be provided in relation to strategic risks, as well as on operational risks, to give the Board further assurance that operational risks are being managed appropriately by the Executive Team and the Risk Management Group.

6.8 The Board should note that the same format of reporting will be used for reporting of operational risks within Directorates, and the Risk Management Group and the Executive Team will oversee that process, with summary reporting being brought forward to the Audit and Risk Committee and the Board for assurance.

- 6.9 The Board should note that the Risk Management Group have reviewed all of the risks that were previously contained within the Covid risk register. The individual members of the Risk Management Group have confirmed that all risks are either no longer relevant and can be closed, or have been included within other risks in directorate operational risk registers and are being managed there. Appendix 4 sets out the detail for Board assurance.

## 7. Recommendations

That the Board:

1. Note and comment on the individual risks in the Strategic Risk Register as set out in this report at Appendices 1 (summary) and 2 (detail).
2. Note that all risks previously on the Covid risk register have been either closed or are being managed in directorate risk registers, as set out in Appendix 4.
3. Provide comment on the new format of reporting of strategic risk in Appendices 1 and 2, for subsequent amendment of future reports to the Audit and Risk Committee and to the Board.

---

Author to complete **checklist**.

**Author to include any narrative by exception** in Section 6 of the cover paper.

**a) Have Educational implications been considered?**

☒ Yes

☐ No

**b) Is there a budget allocated for this work?**

☒ Yes

☐ No

**c) Alignment with [NES Strategy 2019-2024](#)**

☐ 1. A high-quality learning and employment environment

☐ 2. National infrastructure to improve attraction, recruitment, training and retention

☐ 3. Education and training for a skilled, adaptable and compassionate workforce

☐ 4. A national digital platform, analysis, intelligence and modelling

☒ 5. A high performing organisation (NES)

**d) Have key strategic risks and mitigation measures been identified?**

☒ Yes

☐ No

e) Have Equality, Diversity, Human Rights and health inequality issues been considered as per [Fairer Scotland Duty: Guidance for Public Bodies](#) and Corporate Parenting as per the [Children and Young People \(Scotland\) Act 2014](#)?

☐ Yes

☒ No

f) Have you considered Emergency Climate Change and Sustainability implications as per [DL \(2021\) 38](#)?

☒ Yes

☐ No

g) Have you considered a staff and external stakeholder engagement plan?

☐ Yes

☒ No

Jim Boyle  
16 May 2023  
NES



## Summary of Risk Log

Risk No.		Risk Date	Gross Total	Net Total	Risk appetite vs net score
SR1	NES Strategic Plan does not align with the needs and expectations of stakeholders	19 April 2023	15	12	
SR2	Disproportionate amount of non-recurrent funding, without conversion to recurrent funding	19 April 2023	16	12	
SR3	Failure to recruit and retain sufficiently experienced and knowledgeable people to the Board, Executive Team and senior management establishment	19 April 2023	16	8	
SR4	NES does not adequately engage with its employees	19 April 2023	16	9	
SR5	NES does not put in place an adequate corporate support establishment	19 April 2023	16	12	
SR6	Failure to develop and maintain adequate Business Continuity arrangements to deal with the risk of adverse events and threats	19 April 2023	16	9	
SR7	Failure to put in place measures to adequately protect against breaches of cyber security	19 April 2023	20	15	
SR8	Failure to put sufficient employee training and other operational controls in place to minimise the risk of breaches of Information Governance	19 April 2023	20	12	
SR9	NES does not put sufficient measures in place to address ongoing cost and funding pressures	19 April 2023	25	12	
SR10	Failure to adequately anticipate and mitigate the impacts of policy, legislative, economic and societal change	19 April 2023	12	8	
SR11	Poor learning outcomes and learning experience for our stakeholders	19 April 2023	16	9	
SR12	Insufficient investment in TURAS Learn and other NES learning platforms	19 April 2023	12	12	
SR13	Failure to recruit and retain sufficient number of appropriately skilled and experienced staff within the NES Technology Service	19 April 2023	12	8	
SR14	Inadequate Board governance, systems, processes and scrutiny of them	19 April 2023	25	4	

## STRATEGIC RISK 1

<b>Risk no:</b>	<b>SR1</b>		
<b>Risk Short Title:</b>	NES Strategic Plan does not align with the needs and expectations of stakeholders		
<b>Risk Owner:</b>	Karen Reid	<b>Date Added to Register:</b>	19 April 2023
		<b>Review Date:</b>	
		<b>Frequency of Review:</b>	
<b>Risk Category(s)</b>	Strategic	Reputational	
<b>Risk impacts on NES Strategy Key Area of Focus :</b>			
<b>Current Net Risk Rating: (Priority 1, 2, 3 or 4)</b>		<b>Risk Movement: (↑,↔,↓)</b>	
<b>Primary 2</b>			

Gross Impact (1-5)	Gross Likelihood (1-5)
5	3
<b>Gross Total:</b>	<b>15</b>

Net Impact (1-5)	Net Likelihood (1-5)
4	3
<b>Net Total:</b>	<b>12</b>

Board Risk Appetite v Net Total	
Open	10-12
Primary 2	12
	Within

<b>Existing control rating:</b>	<b>Partially controlled</b>
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<b>Cause:</b>		<b>Effect:</b>	
NES Strategic Plan does not align with the needs and expectations of stakeholders		This could lead to a failure of the NHS and social care workforce's ability to respond to the existing and changing health and social care needs of Scotland's population	
		<b>Result:</b>	
		This could result in high levels of dissatisfaction with the role of NES and loss of credibility as the statutory education, training, workforce development, data and technology provider in health and social care in Scotland. It could also mean that the health and social care workforce do not have the necessary skills and knowledge to meet the needs of the population.	
<b>Control:</b>		<b>Actions:</b>	
1	Revised NES Strategic Plan clearly articulates the importance of education and training to a sustainable workforce and has been widely consulted upon	1	
2	Annual Operating Plan, incorporating desired outcomes, forms the baseline for organisational activities	2	
3	Development of focused communications to support management of stakeholder expectation in relation to NES capacity to deliver and support new systems development.	3	
4	Work has been undertaken with NHS Boards, statutory education bodies in the four nations, and professional regulators, to mitigate disruption and allow trainees/learners to progress where possible.	4	
5	The implications for NES from the Adult Social Care Review and the establishment of the National Care Service are discussed with our Sponsor Directorate and Mental Health & Social Care Directorate to allow for forward Planning	5	



## STRATEGIC RISK 2

<b>Risk no:</b>	SR2		
<b>Risk Title:</b>	Disproportionate amount of non-recurrent funding, without conversion to recurrent funding		
<b>Risk Owner:</b>	Jim Boyle	<b>Date Added to Register:</b>	19 April 2023
		<b>Review Date:</b>	
		<b>Frequency of Review:</b>	
<b>Risk Category(s)</b>	Operational		
<b>Risk impacts on NES Strategy Key Area of Focus :</b>			
<b>Current Net Risk Rating: (Priority 1, 2, 3 or 4)</b>		<b>Risk Movement: (↑,↔,↓)</b>	
Primary 2			

Gross Impact (1-5)	Gross Likelihood (1-5)
4	4
<b>Gross Total:</b>	<b>16</b>

Net Impact (1-5)	Net Likelihood (1-5)
3	4
<b>Net Total:</b>	<b>12</b>

Board Risk Appetite v Net Total	
Open	10-12
Primary 2	12
	Within

<b>Existing control rating:</b>	Partially controlled
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<b>Cause:</b>		<b>Effect:</b>	
NES continues to experience a disproportionate amount of non-recurrent funding, without conversion to recurrent funding		We will have to rely on a high number of short-term and fixed-term contracts of employment in NES	
		<b>Result:</b>	
		This will result in continued workforce instability and could also result in failure to adequately deliver the NES Strategic Plan and respond to the commission requirements of Scottish Government. This situation seriously compromises our ability to maintain a workforce that has the right capacity and capability	
<b>Control:</b>		<b>Actions:</b>	
1	NES Exec Team maintain strong engagement with relevant leads at Scottish Government.	1	
2	Maintain clarity in relation to NES's role and influence - through regular engagement with SG sponsor team, and relevant executive director groups, including SAMD, SEND, DoFs and HRDs.	2	
3	Executive Team has approved an approach to career development and succession planning. This includes mapping of key roles; a process to identify potential successors; work with potential successors on individual development plans.	3	
4	Chief Executive and NES Directors to maintain links with other UK organisations	4	
5	Executive Team actively and regularly consider risk in extending posts and in converting posts to permanent. Funding is carefully considered as part of these decisions	5	

## STRATEGIC RISK 3

<b>Risk no:</b>	<b>SR3</b>		
<b>Risk Title:</b>	Failure to recruit and retain sufficiently experienced and knowledgeable people to the Board, Executive Team and senior management establishment		
<b>Risk Owner:</b>	Tracey Ashworth Davies	<b>Date Added to Register:</b>	19 April 2023
		<b>Review Date:</b>	
		<b>Frequency of Review:</b>	
<b>Risk Category(s)</b>	Operational		
<b>Risk impacts on NES Strategy Key Area of Focus :</b>			
<b>Current Net Risk Rating: (Priority 1, 2, 3 or 4)</b>		<b>Risk Movement: (↑,↔,↓)</b>	
<b>Contingency</b>			

Gross Impact (1-5)	Gross Likelihood (1-5)
4	4
<b>Gross Total:</b>	<b>16</b>

Net Impact (1-5)	Net Likelihood (1-5)
4	2
<b>Net Total:</b>	<b>8</b>

Board Risk Appetite v Net Total	
Open	10-12
Contingency	8
	Within

<b>Existing control rating:</b>	<b>Controlled</b>
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<b>Cause:</b>		<b>Effect:</b>	
NES fails to recruit and retain sufficiently experienced and knowledgeable people to the Board, Executive Team and senior management establishment due to insufficient recruitment and succession planning		This would impact the continuity of effective leadership, management and governance of NES	
		<b>Result:</b>	
		This would result in a deterioration of NES performance and credibility at all levels and would increase the risk of serious failures in governance	
<b>Control:</b>		<b>Actions:</b>	
1	NES has access to a wide pool of nationwide talent in terms of non-executive recruitment, and has a robust process and a good track record for attracting high quality candidates when Board vacancies occur	1	
2	NES recruits executives and senior managers from across the public and private sectors to ensure a wide spread of skills and experience in its senior leadership	2	
3	A programme of executive and senior manager development is in place to make sure that those in post are given the opportunity to develop in the role, and to acquire new professional skills and experience	3	
4	Senior leaders are encouraged to participate in a wide range of national professional networking groups to make sure they have access to best practice across the sector.	4	
5		5	

## STRATEGIC RISK 4

<b>Risk no:</b>	<b>SR4</b>		
<b>Risk Title:</b>	NES does not adequately engage with its employees		
<b>Risk Owner:</b>	Tracey Ashworth-Davies	<b>Date Added to Register:</b>	19 April 2023
		<b>Review Date:</b>	
		<b>Frequency of Review:</b>	
<b>Risk Category(s)</b>	Operational		
<b>Risk impacts on NES Strategy Key Area of Focus :</b>			
<b>Current Net Risk Rating: (Priority 1, 2, 3 or 4)</b>		<b>Risk Movement: (↑,↔,↓)</b>	
<b>Contingency</b>			

Gross Impact (1-5)	Gross Likelihood (1-5)
4	4
<b>Gross Total:</b>	<b>16</b>

Net Impact (1-5)	Net Likelihood (1-5)
3	3
<b>Net Total:</b>	<b>9</b>

Board Risk Appetite v Net Total	
Open	10-12
Contingency	9
	Within

<b>Existing control rating:</b>	<b>Controlled</b>
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<b>Cause:</b>		<b>Effect:</b>	
NES does not adequately engage with its employees		There could be a breakdown in understanding of the roles that employees play and the contributions that are expected of them in the delivery of the Strategic Plan and the individual	
		<b>Result:</b>	
		That could result in a significant deterioration in NES' ability to deliver on those plans	
<b>Control:</b>		<b>Actions:</b>	
1	Strong partnership working arrangements in place and maintained through regular contact with the Employee Director and via the Change Management Programme Board.	1	
2	Communication plan to be a key focus on all organisational change projects.	2	
3	Strong focus on communication and visibility, both at a corporate and directorate level through, for example, weekly executive led corporate videos.	3	
4	Use of employee voice tools, for example Trickle to monitor the pulse on organisational sentiment. Further focus needed on the implementation of Trickle if license is to be extended.	4	
5	Participation in annual iMatter NHS Scotland employee survey exercise	5	

## STRATEGIC RISK 5

<b>Risk no:</b>	SR5		
<b>Risk Title:</b>	NES does not put in place an adequate corporate support establishment		
<b>Risk Owner:</b>	Jim Boyle/Tracey Ashworth-Davies	<b>Date Added to Register:</b>	19 April 2023
		<b>Review Date:</b>	
		<b>Frequency of Review:</b>	
<b>Risk Category(s)</b>	Operational	Reputational	
<b>Risk impacts on NES Strategy Key Area of Focus :</b>			
<b>Current Net Risk Rating: (Priority 1, 2, 3 or 4)</b>		<b>Risk Movement: (↑,↔,↓)</b>	
Primary 2			

Gross Impact (1-5)	Gross Likelihood (1-5)
4	4
<b>Gross Total:</b>	<b>16</b>

Net Impact (1-5)	Net Likelihood (1-5)
3	4
<b>Net Total:</b>	<b>12</b>

Board Risk Appetite v Net Total	
Open	10-12
Primary 2	12
	Within

<b>Existing control rating:</b>	Partially controlled
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<b>Cause:</b>		<b>Effect:</b>	
NES does not put in place a corporate support establishment of which has the right number of people, suitably skilled, as well as having the right systems and other resources to drive improvements in transformation and best value		The Board might not adequately deliver the aims of its own Strategic Plan or the external commissions agreed with the Scottish Government	
		<b>Result:</b>	
<b>Control:</b>		<b>Actions:</b>	
1	Assessment of resource required to support pipeline commissions is being made, informed by information provided by SG sponsorship team.	1	
2	Some additional HR resource has already been provided in the 2022/23 budget.	2	
3	Further assessment of any additional resource in all support areas will be made based on emerging commissions, as well as NES baseline activity.	3	
4	Recruitment authorisation and other recruitment processes are being reviewed with the aim of achieving a more efficient, risk-based approach reducing time across NES and, all things being equal, reducing the time to recruit new staff. This could include how to bundle recruitment into groups	4	
5	Discussions on the implications of continued non-recurrent funding have been and will continue to be held with the Scottish Government, although no significant movement in the Scottish Government's position has been achieved at this point. Corporate process to ensure centralised view of commissions and impact on infrastructure in place by Dec 22.	5	

## STRATEGIC RISK 6

<b>Risk no:</b>	SR6		
<b>Risk Title:</b>	Failure to develop and maintain adequate Business Continuity arrangements to deal with the risk of adverse events and threats		
<b>Risk Owner:</b>	Christopher Wroath/Jim Boyle	<b>Date Added to Register:</b>	19 April 2023
		<b>Review Date:</b>	
		<b>Frequency of Review:</b>	
<b>Risk Category(s)</b>	Governance	Operational	
<b>Risk impacts on NES Strategy Key Area of Focus :</b>			
<b>Current Net Risk Rating: (Priority 1, 2, 3 or 4)</b>		<b>Risk Movement: (↑,↔,↓)</b>	
<b>Contingency</b>			

Gross Impact (1-5)	Gross Likelihood (1-5)
4	4
<b>Gross Total:</b>	<b>16</b>

Net Impact (1-5)	Net Likelihood (1-5)
3	3
<b>Net Total:</b>	<b>9</b>

Board Risk Appetite v Net Total	
Averse	1-3
Contingency	9
	Outwith

<b>Existing control rating:</b>	<b>Partially controlled</b>
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<b>Cause:</b>		<b>Effect:</b>	
NES does not put in place and maintain adequate Business Continuity arrangements to deal with the risk of adverse events and threats, both internal and external threats, e.g. national or global pandemics, power supply outages, and other events		There may be an inability to deliver normal levels of service, or even an inability to deliver services at all in extreme circumstances.	
		<b>Result:</b>	
<b>Control:</b>		<b>Actions:</b>	
1	Disaster Recovery Plan and Business Continuity Plans have been approved by the Executive Team.	1	
2	The plans were robustly tested in a desktop exercise and recommendations were considered by the ET and incorporated into the current version of the plans.	2	
3		3	
4		4	
5		5	

## STRATEGIC RISK 7

<b>Risk no:</b>	<b>SR7</b>		
<b>Risk Title:</b>	Failure to put in place measures to adequately protect against breaches of cyber security		
<b>Risk Owner:</b>	Christopher Wroath	<b>Date Added to Register:</b>	19 April 2023
		<b>Review Date:</b>	
		<b>Frequency of Review:</b>	
<b>Risk Category(s)</b>	Governance	Operational	
<b>Risk impacts on NES Strategy Key Area of Focus :</b>			
<b>Current Net Risk Rating: (Priority 1, 2, 3 or 4)</b>		<b>Risk Movement: (↑,↔,↓)</b>	
<b>Primary 1</b>			

Gross Impact (1-5)	Gross Likelihood (1-5)
5	4
<b>Gross Total:</b>	<b>20</b>

Net Impact (1-5)	Net Likelihood (1-5)
5	3
<b>Net Total:</b>	<b>15</b>

Board Risk Appetite v Net Total	
Averse	1-3
Primary 1	15
	Outwith

<b>Existing control rating:</b>	<b>Partially controlled</b>
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<b>Cause:</b>		<b>Effect:</b>	
NES does not put in place measures to adequately protect itself against breaches of cyber security		This could lead to unauthorised access to NES digital systems and data	
		<b>Result:</b>	
		This could significantly affect our ability to continue normal business operations and would risk reputational damage and the imposition of punitive financial fines by regulatory authorities	
<b>Control:</b>		<b>Actions:</b>	
1	Digital team ensures firewall logs, including changes to the firewall rule base, are added to the (Security Information and Event Management) SIEM tool in use and continue to be monitored frequently	1	
2	Senior Management and Executive level involvement and oversight of Cyber security related risk through updates in the Digital and Information Committee and Audit Committee meetings.	2	
3	Staff awareness of Cyber security matters is raised through information security webinars provided by the Information Security Manager, which includes phishing emails and security regarding the use of public Wi-fi, reporting security breaches and determining key NES contacts, password	3	
4		4	
5		5	

## STRATEGIC RISK 8

<b>Risk no:</b>	<b>SR8</b>		
<b>Risk Title:</b>	Failure to put sufficient employee training and other operational controls in place to minimise the risk of breaches of Information Governance		
<b>Risk Owner:</b>	Christopher Wroath	<b>Date Added to Register:</b>	19 April 2023
		<b>Review Date:</b>	
		<b>Frequency of Review:</b>	
<b>Risk Category(s)</b>	Governance	Reputational	
<b>Risk impacts on NES Strategy Key Area of Focus :</b>			
<b>Current Net Risk Rating: (Priority 1, 2, 3 or 4)</b>		<b>Risk Movement: (↑,↔,↓)</b>	
<b>Primary 2</b>			

Gross Impact (1-5)	Gross Likelihood (1-5)
4	5
<b>Gross Total:</b>	<b>20</b>

Net Impact (1-5)	Net Likelihood (1-5)
4	3
<b>Net Total:</b>	<b>12</b>

Board Risk Appetite v Net Total	
Averse	1-3
Primary 2	12
	Outwith

<b>Existing control rating:</b>	<b>Partially controlled</b>
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<b>Cause:</b>		<b>Effect:</b>	
NES does not put sufficient employee training and other operational controls in place to minimise the risk of breaches of Information Governance		There could be instances of significant loss of data	
		<b>Result:</b>	
		This could result in serious reputational damage and the imposition of punitive financial fines by regulatory authorities.	
<b>Control:</b>		<b>Actions:</b>	
1	Statutory and relevant data security processes in place, with specific reference to the new General Data Protection Regulations.	1	
2	Specific additional policies, procedures and practices (based on ISO27001) have been put in place to ensure robust security applies to the TURAS platform and the being developed National Digital Platform.	2	
3	Whistleblowing arrangements are in place with information and resources available to staff via the Intranet including Whistleblowing standards, policy and process. These resources include reference to whistleblowing in relation to loss or misuse of data and are part of the essential learning	3	
4	Safe Information Handling features as an element of the NES essential learning programme, and the Executive Team regularly review compliance	4	
5		5	

## STRATEGIC RISK 9

<b>Risk no:</b>	<b>SR9</b>		
<b>Risk Title:</b>	NES does not put sufficient measures in place to address ongoing cost and funding pressures		
<b>Risk Owner:</b>	Jim Boyle	<b>Date Added to Register:</b>	19 April 2023
		<b>Review Date:</b>	
		<b>Frequency of Review:</b>	
<b>Risk Category(s)</b>	Finance		
<b>Risk impacts on NES Strategy Key Area of Focus :</b>			
<b>Current Net Risk Rating: (Priority 1, 2, 3 or 4)</b>		<b>Risk Movement: (↑,↔,↓)</b>	
<b>Primary 2</b>			

Gross Impact (1-5)	Gross Likelihood (1-5)
5	5
<b>Gross Total:</b>	<b>25</b>

Net Impact (1-5)	Net Likelihood (1-5)
3	4
<b>Net Total:</b>	<b>12</b>

Board Risk Appetite v Net Total	
Averse	1-3
Primary 2	12
	Outwith

<b>Existing control rating:</b>	<b>Partially controlled</b>
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<b>Cause:</b>		<b>Effect:</b>	
NES does not put sufficient measures in place to address ongoing cost and funding pressures as well as a high level of non-recurrent funding from SG		The Board will experience financial constraints and will risk the inability to set sustainable financial plans and to take remedial actions necessary to remain in financial balance	
		<b>Result:</b>	
		This could then result in failure to meet the aspirations set out in the Strategic Plan as well as having an increased risk of not being able to control the finances of NES	
<b>Control:</b>		<b>Actions:</b>	
1	The Annual Operational Planning process within NES gives Directorates indicative budgets to plan their own activities and expenditure and identifies cost pressures and potential savings across NES.	1	
2	The Senior Operational Leadership Group, chaired by the Director of Planning reviews budget submissions from across NES to ensure congruence, no duplication and identify opportunities for collaboration and efficiency savings.	2	
3	This process enables decisions to be taken by the ET on prioritisation measures needed to deliver a balanced budget to the Board to be based on the impact of the planned activities.	3	
4	NES Board considers measures and makes approvals to balance the annual budget, including the measures suggested by the ET to reach a balanced position.	4	
5	Close working with SG to address the underlying deficit resulting from the expansion of TGs and uplifts that have been less than cost pressures in this area. SG have agreed to underwrite the in-year deficit position on MTG's.	5	



# STRATEGIC RISK 10

<b>Risk no:</b>	<b>SR10</b>		
<b>Risk Title:</b>	Failure to adequately anticipate and mitigate the impacts of policy, legislative, economic and societal change		
<b>Risk Owner:</b>	Karen Reid	<b>Date Added to Register:</b>	19 April 2023
		<b>Review Date:</b>	
		<b>Frequency of Review:</b>	
<b>Risk Category(s)</b>	Strategic		
<b>Risk impacts on NES Strategy Key Area of Focus :</b>			
<b>Current Net Risk Rating: (Priority 1, 2, 3 or 4)</b>		<b>Risk Movement: (↑,↔,↓)</b>	
<b>Contingency</b>			

Gross Impact (1-5)	Gross Likelihood (1-5)
4	3
<b>Gross Total:</b>	<b>12</b>

Net Impact (1-5)	Net Likelihood (1-5)
4	2
<b>Net Total:</b>	<b>8</b>

Board Risk Appetite v Net Total	
Open	10-12
Contingency	8
	Within

<b>Existing control rating:</b>	<b>Controlled</b>
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<b>Cause:</b>		<b>Effect:</b>	
NES is not able to adequately anticipate and mitigate the impacts of policy, legislative, economic and societal change		We may be unable to attract, educate and train sufficient workforce supply, across the health and social care workforce, and in particular trainees and employees in specialist professional	
		<b>Result:</b>	
		This could result in a compromise in our ability to deliver on our Strategic Plan or significant parts of it, or to deliver Directorate Operational Plans	
<b>Control:</b>		<b>Actions:</b>	
1	There are many regular engagements with a wide range of stakeholders - governmental, professional, peer Boards - to ensure that NES is aware of changes to policy, demographic trends, technological change, which will feed into the NES Strategic Plan	1	
2	Scottish Government Priorities are fully discussed with the NES/SG Sponsorship Team and are then incorporated into the Annual Delivery Plans that drive the core activity of the Board	2	
3		3	
4		4	
5		5	

# STRATEGIC RISK 11

<b>Risk no:</b>	<b>SR11</b>		
<b>Risk Title:</b>	Poor learning outcomes and learning experience for our stakeholders		
<b>Risk Owner:</b>	Karen Wilson	<b>Date Added to Register:</b>	19 April 2023
		<b>Review Date:</b>	
		<b>Frequency of Review:</b>	
<b>Risk Category(s)</b>	Operational	Reputational	
<b>Risk impacts on NES Strategy Key Area of Focus :</b>			
<b>Current Net Risk Rating: (Priority 1, 2, 3 or 4)</b>		<b>Risk Movement: (↑,↔,↓)</b>	
<b>Contingency</b>			

Gross Impact (1-5)	Gross Likelihood (1-5)
4	4
<b>Gross Total:</b>	<b>16</b>

Net Impact (1-5)	Net Likelihood (1-5)
3	3
<b>Net Total:</b>	<b>9</b>

Board Risk Appetite v Net Total	
Open	10-12
Contingency	9
	Within

<b>Existing control rating:</b>	<b>Controlled</b>
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<b>Cause:</b>		<b>Effect:</b>	
NES delivers poor learning outcomes or a poor quality learning experience to our stakeholders, or if we are inflexible in evolving the methods of delivery of training and education		This could lead to the Health and Social Care workforce not having the necessary knowledge and skills to deliver good quality care	
		<b>Result:</b>	
		This could result in NES becoming disconnected from the needs of the wider workforce and failing to meet the needs of staff, trainees, learners and stakeholders, leading to serious reputational damage and reassessment of the Board's role in delivering education and training	
<b>Control:</b>		<b>Actions:</b>	
1	Chief Executive and/or NES Directors maintain open and collaborative relationships/arrangements with counterparts in partner organisations	1	
2	Ensure Chair is well briefed to manage relationships with other Board/organisational Chairs	2	
3	Parliamentary monitoring service provides daily briefing to NES Executives and senior managers. Board papers and minutes made available on NES corporate website. Discussions about pressures and national developments at ET are communicated to staff through regular staff video and Intranet	3	
4		4	
5		5	

## STRATEGIC RISK 12

<b>Risk no:</b>	<b>SR12</b>		
<b>Risk Title:</b>	Insufficient investment in TURAS Learn and other NES learning platforms.		
<b>Risk Owner:</b>	Christopher Wroath	<b>Date Added to Register:</b>	19 April 2023
		<b>Review Date:</b>	
		<b>Frequency of Review:</b>	
<b>Risk Category(s)</b>	Operational		Reputational
<b>Risk impacts on NES Strategy Key Area of Focus :</b>			
<b>Current Net Risk Rating: (Priority 1, 2, 3 or 4)</b>		<b>Risk Movement: (↑,↔,↓)</b>	
<b>Primary 2</b>			

Gross Impact (1-5)	Gross Likelihood (1-5)
4	3
<b>Gross Total:</b>	<b>12</b>

Net Impact (1-5)	Net Likelihood (1-5)
4	3
<b>Net Total:</b>	<b>12</b>

Board Risk Appetite v Net Total	
Open	10-12
Primary 2	12
	Within

<b>Existing control rating:</b>	<b>Uncontrolled</b>
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<b>Cause:</b>		<b>Effect:</b>	
NES do not sufficiently invest in the TURAS learning platform as well as other learning platforms provided by NES		This would lead to the Board being unable to meet the learning needs and expectations of all stakeholders	
		<b>Result:</b>	
		This could result in NES becoming disconnected from the needs of the wider workforce and failing to meet the needs of staff, trainees, learners and stakeholders, leading to serious reputational damage and reassessment of the Board's role in delivering education and training	
<b>Control:</b>		<b>Actions:</b>	
1	A significant amount of time and resource is invested to establish the learning needs of a very wide stakeholder group	1	
2	Strategic case for investment has been prepared for discussion with the Scottish Government	2	
3	Initial discussions held with SG about funding for the TURAS platform refresh	3	
4		4	
5		5	

## STRATEGIC RISK 13

<b>Risk no:</b>	<b>SR13</b>		
<b>Risk Title:</b>	Failure to recruit and retain sufficient number of appropriately skilled and experienced staff within the NES Technology Service		
<b>Risk Owner:</b>	Christopher Wroath	<b>Date Added to Register:</b>	19 April 2023
		<b>Review Date:</b>	
		<b>Frequency of Review:</b>	
<b>Risk Category(s)</b>	Operational		
<b>Risk impacts on NES Strategy Key Area of Focus :</b>			
<b>Current Net Risk Rating: (Priority 1, 2, 3 or 4)</b>		<b>Risk Movement: (↑,↔,↓)</b>	
<b>Contingency</b>			

Gross Impact (1-5)	Gross Likelihood (1-5)
4	3
<b>Gross Total:</b>	<b>12</b>

Net Impact (1-5)	Net Likelihood (1-5)
4	2
<b>Net Total:</b>	<b>8</b>

Board Risk Appetite v Net Total	
Open	10-12
Contingency	8
	Within

<b>Existing control rating:</b>	<b>Controlled</b>
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<b>Cause:</b>		<b>Effect:</b>	
NES does not recruit and retain sufficient number of appropriately skilled and experienced staff within the NES Technology Service		This might lead to an inability to meet the delivery requirements of the Digital Health and Care Strategy and regulatory and professional needs	
		<b>Result:</b>	
		This could result in significant risk to NES's position as a key delivery partner of the Scottish Government in the area of IT and digital development and service provision	
<b>Control:</b>		<b>Actions:</b>	
1	Decisions already taken to stabilise the NES Technology workforce by augmenting the senior management and professional leadership cohort.	1	
2	Decisions taken to convert some temporary posts to permanent contracts of employment, to reduce the likelihood of loss of skills and experience	2	
3	Continued status of NES as the preferred delivery partner for the SG for IT and digital provides an attractive experience for prospective employees, as well as those already employed within the Board	3	
4		4	
5		5	

# STRATEGIC RISK 14

<b>Risk no:</b>	<b>SR14</b>		
<b>Risk Title:</b>	Inadequate Board governance, systems, processes and scrutiny of them		
<b>Risk Owner:</b>	Karen Reid	<b>Date Added to Register:</b>	19 April 2023
		<b>Review Date:</b>	
		<b>Frequency of Review:</b>	
<b>Risk Category(s)</b>	Governance		
<b>Risk impacts on NES Strategy Key Area of Focus :</b>			
<b>Current Net Risk Rating: (Priority 1, 2, 3 or 4)</b>		<b>Risk Movement: (↑,↔,↓)</b>	
<b>Business as Usual</b>			

Gross Impact (1-5)	Gross Likelihood (1-5)
5	5
<b>Gross Total:</b>	<b>25</b>

Net Impact (1-5)	Net Likelihood (1-5)
2	2
<b>Net Total:</b>	<b>4</b>

Board Risk Appetite v Net Total	
<b>Averse</b>	<b>1-3</b>
<b>Business as Usual</b>	<b>4</b>
	<b>Outwith</b>

<b>Existing control rating:</b>	<b>Partially controlled</b>
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<b>Cause:</b>		<b>Effect:</b>	
NES does not put sufficient arrangements in place in relation to Board governance, systems, processes and scrutiny of them		This could lead to corporate non-compliance and failure to comply with statutory, legislative and climate emergency/sustainability requirements	
		<b>Result:</b>	
		This could result in a loss of credibility towards the Board, from the Scottish Government as well as a range of audit and scrutiny bodies, which could pose a threat to the general credibility and future of NES	
<b>Control:</b>		<b>Actions:</b>	
1	Standing committees responsible for each governance domain supported by Executive Groups.	1	
2	Each committee provides an annual report to Audit Committee detailing how it has discharged its remit.	2	
3	Comprehensive programme of internal audit	3	
4	An Assurance framework has been developed in line with the 'Blue Print for Governance' and the Assurance and Audit Committee Handbook	4	
5	Ensure corporate awareness of relevant statutory regulatory oversight, and maintain close working with relevant professional and other regulatory bodies	5	

# NES Board Risk Appetite

March 2023



Classification	Description	Residual Score Range: Likelihood x Impact
<b>Averse</b>	Avoidance of risk and uncertainty is a key organisational objective	1 - 3 (Low Priority)
<b>Minimalist</b>	Preference for safe options where the inherent risk has low impact and there is a potential for limited reward	4 - 8 (Housekeeping Priority)
<b>Cautious</b>	Preference for safe options where the inherent risk has relatively low likelihood and there is limited potential for reward	4 - 9 (Contingency Priority)
<b>Open</b>	Willing to consider all options and choose the one that that is most likely to result in success, despite a relatively high level of risk	10 - 12 (Primary 2 Priority)
<b>Hungry</b>	Eager to be innovative and to chose options offering the highest potential rewards or transformation, despite a high level of residual risk	15 - 25 (Primary 1 Priority)

# NES Board Risk Appetite

March 2023



Type of Risk	Concept	Pilot / Test of Change	Business as Usual (Net Risk)
Strategic / Policy Risks	Hungry	Hungry	Open
Operational / Service Delivery Risks	Hungry	Hungry	Open
Finance Risks	Minimalist	Minimalist	Averse
Reputational / Credibility Risks	Open	Cautious	Cautious
Accountability / Governance Risks	Minimalist	Minimalist	Averse
Technology Risks (new category added by Executive Team)	Hungry	Hungry	Open

## APPENDIX 4

Risk No.	Directorate	Risk Title	Cause	Effect	Inherent Priority I x L	Residual Priority I x L	Mitigation Measures (Controls/Actions)	April 2023 status (Closed, Directorate register, Escalated)
1.	<b>NES Clinical Directorates:</b> <ul style="list-style-type: none"> <li>Medical</li> <li>NMAHP</li> <li>Dental</li> <li>Pharmacy</li> <li>Optometry</li> <li>Healthcare Science</li> <li>Psychology</li> </ul>	<p>Interruption/delay/adverse impact to training programme delivery including Scottish Government mandated training.</p> <p><b>Risk Owner:</b> NES Executive Team (Emma Watson, David Felix, Karen Wilson)</p>	<ul style="list-style-type: none"> <li>Cancellation of required courses or programmes</li> <li>Cancellation of required professional examinations</li> <li>Reduced clinical experience and training capacity due to: cancellation of routine clinical activities; redeployment of trainees to different clinical duties; absence from work due to self-isolation or illness</li> <li>Cancellation of study leave due to COVID pressures</li> </ul>	<ul style="list-style-type: none"> <li>Disruption to training leading to delays in training progression</li> <li>Slippage to recruitment and training plans</li> <li>Financial implications as a result of extensions to training and support</li> <li>Training capacity issues</li> <li>Negative impact on service delivery</li> <li>Potential future workforce supply issues/gaps</li> <li>Uncertainty around non-recurrent funding</li> <li>Several essential Medical Royal College examination diets continue to be postponed. Hopefully, many will be rescheduled within this training year, but this will introduce further lag into the system.</li> <li>Ongoing concern about the significant impact of reduction in elective clinical activity in many craft specialties (Surgical, some Medical, Pathology).</li> <li>Likely that significant numbers of trainees, especially in some specialties (Surgery) will not achieve expected curricular requirements in order to achieve satisfactory ARCP (Annual Review of Competence Progression) outcomes and therefore will need extensions to training in August. The impact may affect CCT (Certificate of Completion of Training) output and</li> </ul>	<b>Primary 1</b> <b>4 x 4</b>	<b>Contingency</b> <b>3 x 3</b>	<p><b>Medical: Possibility of redeployment of trainees:</b> <b>Control (1)</b> In discussion with Directors of Medical Education (DMEs), trainees have previously received communication to confirm that redeployment was likely to be limited and related to local and regional service pressures. Increasing service pressures are now being highlighted and redeployment will need to be closely considered to ensure that trainees do not lose further time in training wherever possible. Any requests for redeployment will be carefully considered and managed under former guidance. All redeployment will be recorded and reported to the Deanery as per our consensus document. Update 11/5/22: Unless there is another significant wave of Covid it is highly unlikely that we will need to redeploy trainees.</p> <p><b>Delays to progression</b> <b>Control (1)</b> The vast majority of trainees achieved training competencies and progress as expected in 2021 so despite the challenges of the pandemic progression has been maintained in the majority of specialties. Some specialties have seen a greater impact on progression (e.g. obstetrics &amp; gynaecology, some surgical and diagnostic programmes) due to reduction in training opportunities following on from the cancellation of elective work and the challenges in reducing the backlog in this due to ongoing significant staff absence. The speed of clinical service recovery will impact on the availability of training opportunities. There remains concern that the current service pressures identified by our senior medical educators throughout Scotland, are continuing to have an adverse effect on trainees gaining certain competences. Although curricula requirements have been derogated to support progression and will continue to be so for 2022, the criteria for the award of the Certificate of Completion of Training (CCT) have not. This could result in a significant accrual of unmet competencies and delays to CCT in the coming years. There are differences between specialties and variation across regions. Specialty Training Boards will review this data and consider if there is a need for enhanced training approaches to mitigate training gaps (e.g. simulation-based education). <b>Control (2)</b> Simulation will be a significant vehicle to provide educational resilience. Support is in place to deliver simulation for trainees in Core Psychiatry, IMT, IST and Higher surgical training with further support being put in place for Diagnostics, O&amp;G and Paediatrics with the appointment of additional APGD's for simulation and appointment of administrative staff within the CSMEN team to deliver and commission training. All STB Chairs have been asked to consider their requirements over the next 2 years. Additional funding to support Simulation training will be required to roll out new training <b>Control (3)</b> Work with DME colleagues to ensure trainees can attend essential/ mandatory training and professional examinations. <b>Control (4)</b> Continue to monitor progression to identify any specialty groups that continue to be affected and to report back to SG on a regular basis.</p> <p><b>Pharmacy: Potential workforce gaps and extended training support required for the 2019/20 200 PRPS (Pre-registration Pharmacist Scheme) trainees</b> <b>Control (1)</b> Continuing to support the 2019/20 Prov-Registrant Trainee group until the registration assessment re-arranged GPhC examination with one resit option (currently the June 2022 assessment, with results known in July 2022). This group (known as Prov-registrant or</p>	<p><b>Medical confirms closure</b></p> <p><b>Psychology confirms closure</b></p> <p><b>NMAHP confirms closure</b></p>
1. / Cont'd	<b>NES Clinical Directorates:</b> <ul style="list-style-type: none"> <li>Medical</li> </ul>	<p>Interruption/delay /adverse impact to training programme</p>	<ul style="list-style-type: none"> <li>Cancellation of required courses or programmes</li> </ul>		<b>Primary 1</b>	<b>Contingency</b>		<b>Pharmacy confirms closure</b>



## APPENDIX 4

Risk No.	Directorate	Risk Title	Cause	Effect	Inherent Priority I x L	Residual Priority I x L	Mitigation Measures (Controls/Actions)	April 2023 status (Closed, Directorate register, Escalated)
1. cont.	<ul style="list-style-type: none"> <li>NMAHP</li> <li>Dental</li> <li>Pharmacy</li> <li>Optometry</li> <li>Healthcare Science</li> <li>Psychology</li> </ul>	<p>delivery including Scottish Government mandated training.</p> <p><b>Risk Owner:</b> NES Executive Team (Emma Watson, David Felix, Karen Wilson)</p>	<ul style="list-style-type: none"> <li>Cancellation of required professional examinations</li> <li>Reduced clinical experience and training capacity due to: cancellation of routine clinical activities; redeployment of trainees to different clinical duties; absence from work due to self-isolation or illness</li> </ul>	<p>completion of core training programmes.</p> <p><b>Cont'd over/</b></p> <ul style="list-style-type: none"> <li>Disruption to training leading to delays in training progression.</li> <li>Slippage to recruitment and training plans.</li> <li>Financial implications as a result of extensions to training and support.</li> <li>Training capacity issues</li> <li>Negative impact on service delivery</li> <li>Potential future workforce supply issues/gaps</li> <li>Uncertainty around non-recurrent funding</li> <li>Several essential Medical Royal College examination diets continue to be postponed. Hopefully, many will be rescheduled within this training year, but this will introduce further lag into the system.</li> <li>Ongoing concern about the significant impact of reduction in elective clinical activity in many craft specialties (Surgical, some Medical, Pathology).</li> <li>Likely that significant numbers of trainees, especially in some specialties (Surgery) will not achieve expected curricular requirements in order to achieve satisfactory ARCP (Annual Review of Competence Progression) outcomes and therefore will need extensions to training in August. The impact may affect CCT</li> </ul>	4 x 4	3 x 3	<p>provisionally registered pharmacist) were offered a range of supports to be ready for assessment.</p> <p><b>Control (2)</b> There was a financial impact 2020/21 with additional SG funding. NES Covid Funding secured for this group for budget year 2021/2022.</p> <p><b>Optometry: Service delivery impact due to reduction in training and support</b> <b>Control (1)</b> Sourcing/using as many online and/or simulation skills training resources as possible. <b>Control (2)</b> Regular touching base with the team, with a focus on staff well-being and team support.</p> <p><b>Healthcare Science: Slippage to recruitment</b> <b>Action (1):</b> Measures being put in place to facilitate virtual recruitment selection for September 2021 Clinical Science trainee intake <b>Completed.</b></p> <p><b>Healthcare Science: Slippage to Training Plans</b> <b>Action (1):</b> Discussions with training leads to be progressed. <b>Completed</b> <b>Action (1):</b> Financial implication for employment/SLA (Service Level Agreement) extensions - worst case scenario modelled and submitted to Finance. <b>Completed</b> <b>Control (2)</b> Ongoing monitoring of training plans as routine (business as usual).</p> <p><b>Psychology: Interruption to Workforce Supply of Clinical and Applied Psychologists</b> <b>Control (1)</b> NES Psychology, Higher Education Institutes (HEIs) and Health Boards to continue to meet regularly as part of wider Psychology Services meetings. Regular discussions to discuss COVID-19 impact on training placements. <b>Control (2)</b> Adjustment made to training plans to take account of COVID-19. <b>Control (3)</b> Systemic review and summary of evidence base for technology enabled delivery of psychological services to support Boards being able to continue delivery and ensure continuity of training places.</p>	<p><b>Optometry confirms closure</b></p> <p><b>Healthcare Science confirms closure</b></p> <p><b>Psychology confirms closure</b></p>

## APPENDIX 4

Risk No.	Directorate	Risk Title	Cause	Effect	Inherent Priority I x L	Residual Priority I x L	Mitigation Measures (Controls/Actions)	April 2023 status (Closed, Directorate register, Escalated)
				<p>(Certificate of Completion of Training) output and completion of core training programmes.</p> <ul style="list-style-type: none"> <li>Negative impact on Dental Training across the undergraduate postgraduate continuum.</li> <li>Potential impact on Dental workforce pipeline.</li> <li>Pharmacy PRPS 2019/20 cohort re-arranged GPhC Assessment (currently the June 2022 option, with results due in July 2022). This overall delay has an ongoing impact on workforce pipeline.</li> </ul>				
2.	<b>NES Clinical Directorates:</b> <ul style="list-style-type: none"> <li>Medical</li> <li>Dental</li> <li>Optometry</li> <li>Psychology</li> <li>NMAHP</li> </ul>	<p>Reduced capacity (human and financial) to deliver appropriate education and training once clinical services are re-established</p> <p><b>Risk Owner:</b> NES Executive Team (Emma Watson, David Felix, Karen Wilson)</p>	<ul style="list-style-type: none"> <li>Significant backlog of clinical work</li> <li>Service delivery may not resume in line with previous mode of delivery</li> <li>Pressure to regain lost ground</li> <li>Surge in clinical demand</li> </ul>	<ul style="list-style-type: none"> <li>Reduced capacity to deliver upskilling for roles in certain areas to maintain and improve the quality of patient care</li> <li>Methods of workplace education and training may need to be revised</li> <li>Potential implications from adapting to online delivery</li> <li>Training environment is compromised</li> <li>Significant requirement to release clinical trainers to deliver mandatory training/courses and professional examinations to remediate critical missed elements required for training progression, including Certificate of Completion of Training (CCT)</li> <li>Impact on availability of clinical placements</li> </ul>	Primary 1 4 x 4	Contingency 3 x 3	<p><b>Medical: Ability to deliver education and training due to backlog of clinical work</b>  <b>Control (1)</b> Medical Directorate Senior Team (MDST) continues to review the position regularly with Health Board Directors of Medical Education (DMEs).  <b>Control (2)</b> Regular discussions at UK level with all stakeholders including other Statutory Education Bodies, the GMC (General Medical Council), Royal Colleges and others, to address this risk.  <b>Control (3)</b> Additional Simulation training is being implemented for a number of specialties to ensure trainees can get relevant experience to meet clinical competencies. Associate Postgraduate Deans have been appointed to lead on this activity  <b>Control (4)</b> Medical Directorate has commenced a wide-ranging Business Recovery Programme that will also tackle this risk in all its aspects, including the availability of clinical placements for undergraduate teaching.</p> <p><b>Dental: Reduced Capacity to Deliver Upskilling of Existing Dental Workforce</b>  <b>Action (1)</b> Prioritise the delivery of specific programmes depending on workforce demands and access to relevant practical cases required for assessment. (On-going).  <b>Action (2)</b> Adapt teaching and assessment approaches utilising online technologies in line with awarding bodies requirements. (On-going).  <b>Control (1)</b> Delivery of most CPD is currently online, which has enabled greater access to key CPD topics by a larger proportion of the dental team.  <b>Control (2)</b> Recent discussion with SG to re-establish training for Enhanced Practitioners for Domiciliary Care. Currently assessing demand in Health Boards. This will also be dependent on the capacity of the Public Dental Service (PDS) to provide the PDS mentors.</p>	<p>Medical – controls are still in place as full recovery not yet achieved – To be included in Medical Directorate Risk Register</p> <p>NMAHP confirms closure of risk</p> <p>Psychology – moved to Psychology Risk Register</p> <p>Dental Directorate confirm completion of actions and closure of the risk</p>

## APPENDIX 4

Risk No.	Directorate	Risk Title	Cause	Effect	Inherent Priority I x L	Residual Priority I x L	Mitigation Measures (Controls/Actions)	April 2023 status (Closed, Directorate register, Escalated)
2. cont.			Cont'd over/	for undergraduate teaching across disciplines.			<p><b>Optometry: Reduced Capacity to Deliver Upskilling of Existing Optometric Workforce</b>  <b>Control (1):</b> The risk around failure to deliver NES Glaucoma Award Training (NESGAT) in 2021/22 is mitigated by increased use of remote supervision and recovery related community work. <b>CLOSE</b>  <b>Control (2):</b> Tackling IP placement bottleneck to ensure we can support additional optometrists into therapeutics modules at GCU – as per operational plan. <b>CLOSE</b></p> <p><b>Psychology: Training and education delivery compromised</b>  <b>Control (1)</b> Continue to adjust method of delivery to Digital webinars and virtual training environments where practical.  <b>Control (2)</b> Work closely with Board colleagues and offer flexible support to mitigate effect.  <b>Control (3)</b> Through regular contact with stakeholders, ensure that our work is aligned with their priorities.</p> <p><b>NMAHP: Training and education delivery compromised</b>  <b>Control (1)</b> Adapt delivery methods as far as possible towards technology enabled learning.  <b>Control (2)</b> Ongoing contact with key stakeholders to ensure training &amp; education meeting needs.  <b>Control (3)</b> continue face to face teaching methods where absolutely necessary (e.g. SMMDP) to meet service demands.  <b>Action (1)</b> Establish the Rapid Action Placement Oversight Group to ensure progression of recommendations from the NES report “Provision of Nursing, Midwifery and Allied Health Professions (NMAHP) placements in the 2020-21 Academic Session”. <b>Now stood down September 2021.</b>  <b>Control (4)</b> Recognising that COVID has, by necessity, impacted the way training will be delivered in the future. NES has a Technology Enhanced Learning Programme underway which aims to create a strategy for the future technology education and learning delivery for all Directorates.</p>	<p>Optometry confirm that the risk now moved to directorate risk register and controls business as usual</p> <p>Psychology Team confirms closure</p> <p>NMAHP confirms closure of risk</p>
3.	NES Technology Service	<p>Delivery and development of COVID-19 related work primarily now related to the COVID-19 vaccination programme.</p> <p><b>Risk Owner (Lead Director):</b> Christopher Wroath</p>	<ul style="list-style-type: none"> <li>Rapid and fast changing requirements from the Scottish Government Workforce initiative to develop/redevelop Turas based applications and related data support services in support of the COVID-19 mass vaccination programme.</li> <li>Associated outcomes (Management reporting data to SG).</li> </ul>	<ul style="list-style-type: none"> <li>COVID-19 vaccination programme not able to deliver to ‘expectation’ through misunderstanding of what the current systems landscape can deliver, poor communication of timetables and changing Scottish Government priorities</li> <li>Data breaches</li> <li>Reputational risk</li> </ul>	Primary 2 4 x 3	Contingency 4 x 2	<p><b>Control (1)</b> Daily communications with Scottish Government to manage expectations and check and cross check requirements, expected deliverables and timeframes.  <b>Owner: Director NES Technology Service</b></p> <p><b>Control (2)</b> Daily meetings with key NES and external stakeholders to identify, discuss and co-author responses to Scottish Government, Board and COVID-19 Vaccination Programme members’ expectation.  <b>Owner: Director NES Technology Service</b></p> <p><b>Action (1)</b> Co-ordinate NES staff across all Directorates to bring to bear increased, appropriate and targeted resources to increase available resource to assist timely delivery at expected quality, mainly but not exclusively supporting Vaccinations.  <b>Action Owner: Director NES Technology Service</b></p> <p><b>Action (2)</b> Introduce as much technology support as practicable in an iterative manner, to reduce/remove manual processes as understanding of them matures and time is allowed to develop and implement.  <b>Action Owner: Associate Director, NES Technology Service – this work is ongoing</b></p>	NTS confirms risks to delivery and system pressures are incorporated into Directorate Risk Register
4.	NES Technology Service	National clinical data landscape is further fragmented by short-	<ul style="list-style-type: none"> <li>Responsiveness to a complex and ever-changing health and</li> </ul>	<ul style="list-style-type: none"> <li>Short term digital solutions further exacerbate the</li> </ul>	Primary 2 3 x 4	House-keeping 2 x 3	<p><b>Control (1)</b> Through meetings with the Scottish Government and eHealth leads and by feeding into national policy work, continue to make</p>	NTS confirms closure – Covid specific risk

## APPENDIX 4

Risk No.	Directorate	Risk Title	Cause	Effect	Inherent Priority I x L	Residual Priority I x L	Mitigation Measures (Controls/Actions)	April 2023 status (Closed, Directorate register, Escalated)
		term COVID-19 digital solutions  <b>Risk Owner (Lead Director):</b> Christopher Wroath	social care landscape; serial development of short-term Minimum Viable Product digital solutions that are adopted to address the pandemic.	fragmentation of clinical data and make the objective of delivering national infrastructure more challenging, compromising ability of NES Technology Service to deliver agreed outputs. • Overall reduction in project impact.			the case for data integration and availability, with a view to the longer term, while understanding that there are some short-term requirements.  <b>Control (2)</b> Continual delivery monitoring to ensure emergency digital solutions are robust, with product lifespan agreed at initiation of project. e.g. will this be used post COVID-19?	<b>which is not now applicable</b>
8.	<b>Workforce</b>	Failure to recruit NES staff and trainees.  <b>Risk Owner (Lead Director):</b> Tracey Ashworth-Davies	Due to a lack of resource and/or systems support leading to a failure to recruit: • Trainees across NHSS through usual vocational training recruitment activity, and NES staff through usual recruitment processes.	<ul style="list-style-type: none"> <li>For the trainees any failure to recruit will affect frontline service provision, impacting of patient care.</li> <li>A failure to recruit vocational trainees will result in workforce supply issues.</li> <li>The impact of the inability to recruit staff to NES would impact on delivery of the NES operational plan.</li> </ul>	<b>Primary 1</b> <b>5 x 4</b>	<b>Primary 2</b> <b>3 x 4</b>	<p><b>Control (1)</b> Directorate leads are linked to national discussions on trainee recruitment across all relevant professional groups, including the suite of national systems such as Oriel, and work with HR in progressing vocational training recruitment for trainee groups in Scotland.</p> <p><b>Control (2)</b> Establishment control processes refined to enable more fluid response to Directorate demand for recruitment activity for NES staff.</p> <p><b>Control (3)</b> Guidance on remote interviews developed and available to hiring managers, including support from HR. Jobtrain recruitment management system now embedded into NES recruitment processes.</p> <p><b>Action (1)</b> HR and Finance work together to anticipate and mitigate issues relating to financial year end, working with directorates to identify posts needed beyond year end and to extend contracts where appropriate.</p> <p><b>Action (2)</b> Further review of establishment control processes to consider capacity for business processes, pace of organisational growth, agility in processes and proportionate management of risk.</p>	<b>Workforce confirms closure as a Covid specific risk and will form part of the Directorate Register.</b>
17.	<b>NMAHP</b>	Lack of NMAHP capacity and resource to meet all the fast-moving requests of the NHS Scotland Academy and associated winter pressure work within the context of the on-going pandemic.  <b>Risk Owner (Lead Director):</b> Karen Wilson  Cont'd over/	<ul style="list-style-type: none"> <li>National Treatment Centre (NTC) planning was paused in Spring 2020, which has subsequently delayed activity for staff development and education. There are now confirmed training needs in level 4 and 5 perioperative roles, recently agreed at March Elective Care Board.</li> <li>NHS Scotland Academy, governance routes and accompanying budget for priority role development is still to be finalised and effective collaboration developed with NTCs</li> </ul>	<ul style="list-style-type: none"> <li>Incomplete/low volume delivery of required priority educational programmes as the Academy gets underway.</li> <li>Inability to suitably engage with core stakeholders (NHS Boards) due to COVID- 19 related staff absence and surge capacity.</li> <li>Altered priorities and requirements to change track, at short notice as a result of COVID and winter pressures, could impact volume of output.</li> </ul>	<b>Primary 1</b> <b>4 x 4</b>	<b>Primary 1</b> <b>4 x 4</b>	<p><b>Control (1)</b> Mutually agreed prioritisation of required education.</p> <p><b>Control (2)</b> Strategic engagement with key partners regarding potential educational options to maximise flexibility for these urgent workforce needs</p> <p><b>Action (1)</b> Confirmation from Workforce Directorate regarding priority allocation and funding. <b>Action Owner:</b> Karen Wilson <b>Action Due Date:</b> August 2021. <b>Complete</b></p> <p><b>Action (2)</b> Recruitment of Senior Educator to support NES NMAHP post registration acute workstream objectives. <b>Action Owner:</b> Fiona Fraser <b>Action Due Date:</b> July 2021. <b>Complete</b></p> <p><b>Action (3)</b> Funding from NHS Scotland Academy in lieu of ongoing work carried out by NES Head of Programme who will be in post until at least 31 December 2021 – this will aid flexibility of approach and support additional capacity for the programme. <b>Action Owner:</b> Karen Wilson <b>Action Due Date:</b> October 2021. <b>Complete</b></p> <p><b>Action (4)</b> On-going involvement with National Treatment Centres Programme, Unscheduled Care Programme, Centre for Sustainable Delivery and Winter Pressures System Response Group to increase</p>	<b>NMAHP confirms closure – forms part of Directorate register</b>



## APPENDIX 4

Risk No.	Directorate	Risk Title	Cause	Effect	Inherent Priority I x L	Residual Priority I x L	Mitigation Measures (Controls/Actions)	April 2023 status (Closed, Directorate register, Escalated)
			and Scottish Access Collaborative <ul style="list-style-type: none"> <li>The Academy is being suggested by Scottish Government, Centre for Sustainable Delivery, territorial Boards to support new workforce developments – at pace and from different partners - to support winter planning</li> </ul>	<ul style="list-style-type: none"> <li>The extended loan period of the NMAHP Head of Programme role supporting educational leadership within the NHS Academy will have impact on progression of core NMAHP objectives without access to supplementary resource.</li> </ul>			awareness of priorities that will or may come to the Academy as requests/commissions. <b>Action Owner:</b> Karen Wilson <b>Action Due Date:</b> on going until March 2022.	
19.	NES Clinical Directorates	Reduced capacity to deliver NES core work due to Scottish Government vaccination programme support requirements  <b>Risk Owner:</b> NES Executive Team (Emma Watson, David Felix, Karen Wilson)	Scottish Government urgent requirement for volunteer registered healthcare staff to support vaccination programme from 29/11/21 for three weeks	<ul style="list-style-type: none"> <li>Disruption/delay to core work programmes</li> <li>Impaired ability to meet statutory obligations</li> <li>Adverse impact on service delivery</li> <li>Negative stakeholder perceptions</li> </ul>	Primary 2 4 x 3	Contingency 3 x 2	<b>Control (1):</b> Liaison with Scottish Government sponsor team to manage expectations in relation to the potential impact across a broad programme of work, and to agree work programmes that can be suspended and who can be trained and released if required.  <b>Control (2):</b> Non-essential work programmes from which staff can be released identified by Clinical Directorates.	<b>NMAHP confirms closure</b>  <b>Medical confirms closure</b>
20.	ALL	NES capacity to meet timescales for planned deliverables and programmes of work is compromised by the impact of the COVID pandemic  <b>Risk Owner:</b> NES Executive Team	<ul style="list-style-type: none"> <li>Revised priorities and requirements as a result of a surge in pandemic cases and winter pressures</li> <li>Resource capacity constrained due to staff illness or requirement to support vaccination programme</li> <li>Inability to maintain timely engagement with NHS Board stakeholders due to COVID related staff absence and surge capacity</li> </ul>	<ul style="list-style-type: none"> <li>Reduced capacity to deliver</li> <li>Delayed deliverables</li> <li>Backlog of work</li> <li>Operational plan targets missed/delayed</li> <li>Potential negative effect on forward planning</li> <li>Pressure to regain lost ground</li> <li>Negative reputational impact</li> </ul>	Primary 1 4 x 4	Contingency 3 x 3	<ul style="list-style-type: none"> <li>CEO representation on NHSS Chief Executives' Healthcare Planning Group enables day-to-day awareness of changing requirements</li> <li>Strong links maintained with SG to minimise uncertainty and maintain awareness of current and emerging priorities</li> <li>Management of stakeholder expectations in relation to capacity to deliver</li> <li>Fortnightly EET meeting enables joint review of resource demands and decision-making on prioritisation of activities</li> <li>Directorates contingency planning and arrangements for paused work</li> </ul>	<b>NMAHP confirms closure; but other system pressures require consideration for the Directorate Risk Register</b>  <b>NTS confirms closure of risk</b>

## APPENDIX 4

Finance Risks								
Risk No.	Directorate	Risk Title	Cause	Effect	Inherent Priority I x L	Residual Priority I x L	Mitigation Measures (Controls/Actions)	April 2023 status (Closed, Directorate register, Escalated)
9.	Finance	Payment of NES staff and suppliers is delayed or incorrect  <b>Risk Owner (Lead Director):</b> Jim Boyle	<ul style="list-style-type: none"> <li>Staff absence.</li> <li>Requirement to work from home.</li> <li>Increased fraud risk as business processes have been amended in response to the COVID-19 pandemic</li> </ul>	<ul style="list-style-type: none"> <li>Data not available in time to meet payroll deadlines</li> <li>Staff not available to approve business as usual processes for suppliers (Purchase orders/Goods received notes/ Invoice matching) resulting in payments issued incorrectly or not issued on a timely basis.</li> <li>Expenses not paid as the system needs to be accessed via the SWAN network</li> <li>Loss of funds due to fraudulent payments not being recovered</li> </ul>	Primary 2 4 x 3	House keeping 2 x 2	<p><b>Control (1.1)</b> Where a payroll deadline cannot be achieved a process is in place to enable an advance of salary to be made into the individuals bank account.</p> <p><b>Control (2.1)</b> All directorate staff have been provided with SWAN VPN access to support working from home and social distancing.  <b>Control (2.2)</b> Suppliers have been requested to email invoices.  <b>Control (2.4)</b> A member of staff is going into the office every two weeks to collect post and scan invoices.  <b>Control (2.5)</b> Currently there are three members of staff able to complete each part of the payment process, so can provide reduced capacity with one staff member for a short period of time in each of these areas.  <b>Control (2.6)</b> Procedure notes have been adapted to suit remote working to ensure teams have the necessary resources available to them. This will enable staff from other areas to be deployed into the payment function.  <b>Control (2.7)</b> System authority levels have been amended to enable more flexibility in the number of authorisers and their authority levels. The required amendments to the SFI's have been approved.</p> <p><b>Control (3):</b> A supplementary process has been agreed for the submission and approval of expenses where access to the SWAN network is not possible.</p> <p><b>Control (4.1)</b> Fraud alerts are being circulated to relevant staff.  <b>Control (4.2)</b> The same level of rigour to the controls is being applied before any supplier bank details are accepted and amended.  <b>Control (4.3)</b> NES Finance are now also verifying supplier details with Directorates and the Procurement Team to ensure Bank details are legitimate and from a trustworthy source  <b>Control (5)</b> Payroll services across Scotland have developed system reports to identify leavers/additional hours worked to be used as a tool by individual payroll teams. We are working closely with NSS to ensure payments are correctly processed.</p>	Finance confirms closure of risk (all activities now subsumed as business as usual)
10.	Finance	Unable to maintain financial governance / internal control mechanisms.  <b>Risk Owner (Lead Director):</b> Jim Boyle	<ul style="list-style-type: none"> <li>Any interim governance arrangements in place do not enable appropriate oversight of the Financial position</li> <li>Business as usual control mechanisms are ineffective.</li> <li>Staff absence due to illness or redeployment</li> </ul>	<ul style="list-style-type: none"> <li>Effective scrutiny and assurance will be compromised</li> </ul>	Primary 2 4 x 3	Contingency 3 x 2	<p><b>Control (1.1)</b> Any COVID specific contingency arrangements required to be put in place will ensure that financial reports are routed through the Audit &amp; Risk Committee, or presented directly to the Board depending on the dates of the meetings.  <b>Control (1.2)</b> Where required, Board committees have agreed to review the Annual Reports of committees remotely to enable the necessary assurance processes to be carried out in the development of the Governance Statement.  <b>Control (1.3)</b> The regular Extended Executive Team meetings enable a focus on key operational issues including financial decision-making and review of the current financial position.  <b>Control (1.4)</b> Standing Financial Instructions (SFIs) and desktop procedures have been reviewed and amended, where appropriate, to enable robust control measures in the current home working</p>	Finance confirms closure of risk (COVID related expenditure now incorporated into monthly reporting)

				<ul style="list-style-type: none"><li>Regular reporting and monitoring is impacted reducing the effectiveness of the internal control environment and Scottish Government reporting requirements.</li><li>It is not possible to produce a set of annual accounts within agreed timescales which is a statutory requirement.</li></ul>		<p>environment. Changes to the SFI's have been endorsed by the Audit &amp; Risk Committee and approved by the Board.</p> <p><b>Control (2.1)</b> We have robust reporting processes in place to capture the additional costs and savings resulting from the impact of COVID-19 on our operations. These arrangements have been reviewed by Internal Audit who reported that these controls reflect a strong governance structure.</p> <p><b>Control (2.2)</b> NES staff attend all Corporate Finance Network and Director of Finance meetings to ensure that we are aware of the latest requirements from SG in terms of monthly reporting and Annual Accounts.</p> <p><b>Control (3.1)</b> We have established a revised approach to the field work required for the audit of the annual accounts with External Auditors which worked well for both the 2019-20 and 2020-21 audit and will be repeated for 2021-22 Accounts.</p> <p><b>Control (3.2)</b> We have an agreed Annual Accounts process timetable which is based on completion of the accounts by the end of June. Progress against the timetable is monitored for early signs of potentials to delay the completion and audit of the accounts.</p> <p><b>Control (3.3)</b> working with the External Auditors, we will take advantage of any SG- provided extension should it not be possible to complete the audit by the end of June.</p>	
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Reputational/Credibility Risks								
Risk No.	Directorate	Risk Title	Cause	Effect	Inherent Priority I x L	Residual Priority I x L	Mitigation Measures (Controls/Actions)	April 2023 status (Closed, Directorate register, Escalated)
11.	NES Clinical Directorates: NMAHP	<p>Unable to respond to demands and needs of the service</p> <p>Unable to respond to the needs of students to catch-up on placements missed due to COVID as the responsibility for placements rests with the Education provider.</p> <p><b>Risk Owner (Lead Director):</b> Karen Wilson</p>	<p>Uncertainty in health and social care during the recovery phase from COVID-19.</p> <p>Unable to respond to the needs of students to catch-up on placements missed due to COVID as the responsibility for placements rests with the Education provider.</p>	<ul style="list-style-type: none"> <li>Potential negative effect on forward planning and ability to respond to, as yet, unknown demands/workload and potential broader impact on the health and wellbeing of staff due to the uncertainty for staff over a prolonged period of time.</li> <li>Lack of clarity in relation to future activity and workload and this may impact on visibility and perceived relevance of our work.</li> <li>SG have asked NES to take a leadership role working with education providers and placement providers to minimise the backlog of placements but this can only be a facilitation role as the Education providers, not NES, are directly responsible for the placements.</li> </ul>	Contingency 3 x 3	Contingency 3 x 3	<p><b>NMAHP: Ability to respond to service demands and needs</b></p> <p><b>Control (1)</b> Strong links with Scottish Government to minimise uncertainty.</p> <p><b>Control (2)</b> Reviewing remobilisation plans from Boards/Regions to understand plans and priorities.</p> <p><b>Control (3):</b> Ensuring strong networking with professional bodies, regulators and Scottish Government, Boards, and partners such as Scottish Funding Council, Scottish Social Services Council, etc.</p> <p><b>Control (4)</b> Good communication internally and externally.</p> <p><b>Control (5)</b> NMAHP have carried out a COVID-19 debrief process which will ensure learning is captured and informs flexibility, effectiveness and agility of response.</p> <p><b>Control (6)</b> NES Health and Wellbeing work for staff to reduce effect of uncertainty.</p> <p><b>Control (7)</b> Listening Service from Spiritual Care Service in NMAHP for staff.</p> <p><b>Control (8)</b> Commissioning template developed to record details of new work from Scottish Government including priorities, outcomes, timescales, and associated funding.</p> <p><b>Action (1)</b> On the 22 June 2020, Chief Nursing Officer Directorate commissioned NES to develop a detailed report setting out comprehensively the range of issues affecting placement provision for NMAHP students currently and future issues that will emerge in the new academic term 21/22. The report, entitled Provision of NMAHP Placements in the 2020-21 Academic Session, was submitted to Chief Nursing Officer Directorate on 17 July 2020.</p> <p><b>Completed</b></p> <p><b>Action (2)</b> The Scottish Government requested NHS Education for Scotland's leadership, through a Rapid Action Placement Oversight Group (RAPOG), to facilitate discussions, support the building of relationships locally, regionally and nationally across Scotland, and co-ordinate a range of measures to manage placement issues from now and throughout the coming academic session at a minimum. RAPOG met monthly, pressure is significant on placements particularly AHP placements but actions are being progressed to maximise placements with placement providers and Council of Deans for Health Scotland. RAPOG was stood down in September 2021.</p> <p><b>Action (3)</b> NMAHP are supporting alternative ways to provide practice learning experience, either through technology supported placements eg NearMe or through additional simulation in the HEI programmes to replace practice hours.</p>	NMAHP confirms closure of risk
12.	NES Technology	<p>(ii)Vaccination Programmes</p> <p><b>Risk Owner (Lead Director):</b> Christopher Wroath</p>	<ul style="list-style-type: none"> <li>The current Vaccination programmes require multiple stakeholders to agree and implement a solution. NES Technology Service involved in developing different aspects of the enabling technology to</li> </ul>	<ul style="list-style-type: none"> <li>Wider challenges in respect of this high-profile vaccination programmes may adversely impact the reputation of NES, given NES's role in supporting the technology.</li> </ul>	Primary 1 4 x 4	Primary 1 4 x 4	<p><b>Action (1)</b> Ensure clear communication about the contribution which NES is making and the elements which are completely within our control.</p> <p><b>Control (1)</b> NES engagement of SG Vaccination programme at Silver Command and via multiple operational level forums to lead understanding of programme outcomes and delivery roles.</p> <p><b>Control (2)</b> Significant resource applied to ensure clarity of requirement at business process and digital and data layers of the programme.</p>	NTS confirms closure of risk – ongoing support to VMT/Risks associated with delivery are incorporated into NTS business as usual risks



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			support this programme.				<b>Control (3)</b> NES Technology Service remain fully engaged in the delivery of tech to support the National Vacc programme	
18.	<b>NES Clinical Directorates</b>	Failure to meet health and safety obligations for trainees in NES employment  <b>Risk Owner:</b> NES Executive Team (Emma Watson, David Felix, Karen Wilson)	<ul style="list-style-type: none"><li>Pressures in the healthcare system, as boards continue to respond to the pandemic, impact on the workload of trainees, the time available to study, training and progression.</li></ul>	<ul style="list-style-type: none"><li>Excessive and sustained workload demands and career development anxieties adversely impact trainees physical and mental health and well-being</li><li>Stakeholders' perception of NES duty of care responsibility negatively impacted</li><li>Legal and reputational risk.</li></ul>	<b>Primary 2</b> <b>3 x 4</b>	<b>Contingency</b> <b>3 x 2</b>	<b>Control (1)</b> Directorates' ongoing monitoring of trainee health and well-being <b>Control (2)</b> Careful monitoring of trainee sickness with concerns followed up and documented timeously <b>Control (3)</b> Workload concerns raised with directorates followed up and documented timeously <b>Control (4)</b> Professional support and guidance provided to trainees through existing BAU channels	<b>Now included in directorate risk registers</b>

Accountability/Governance Risks								
Risk No.	Directorate	Risk Title	Cause	Effect	Inherent Priority I x L	Residual Priority I x L	Mitigation Measures (Controls/Actions)	April 2023 status (Closed, Directorate register, Escalated)
13.	Planning and Corporate Resources	Ability and Capacity to meet Board Governance Standards  <b>Risk Owner (Lead Director):</b> Christina Bichan	<ul style="list-style-type: none"> <li>The governance arrangements in place to respond to the different phases of the COVID-19 pandemic may fail to provide sufficient oversight of the emerging priorities and the on-going business of the Board and strategic decision making, effective scrutiny and assurance will be compromised.</li> <li>The Chief Executive and the Executive Team come under increasing pressure to meet reporting requirements when they are required to manage the NES response to the public health emergency.</li> <li>Meetings held without key stakeholders and public involvement.</li> </ul>	<ul style="list-style-type: none"> <li>NES as an organisation fails to meet some governance standards</li> </ul> <p><b>Cont'd over/</b></p>	Contingency 4 x 2	House-keeping 2 x 2	<p><b>Control (1).</b> The Board remain prepared to implement 'Governance Light' arrangements if and when required in accordance with interim governance arrangements, agreed with the Board, which were previously implemented in three phases:</p> <ul style="list-style-type: none"> <li>Phase one: 'Gold Command' and 'Core Board Governance' 26 March 2020 – 27 August 2020</li> <li>Phase two: 'Development of Board Governance: COVID-19 lessons Learnt and Remobilisation' 27 August 2020 – 5 January 2021</li> <li>Phase three: 'Governance Light' 5 January – 31 March 2021.</li> </ul> <p><b>Control (2)</b> The NES Executive Team met formally every two weeks during COVID-phase one governance and subsequently reverted to meeting every four weeks. This arrangement has now been further developed to focus on regular meetings of the Extended Executive Team (EET) for decision making enacted through the <b>COVID-19: NES Contingency Plan</b> which includes the EET meeting regularly (depending on the stage of the pandemic) and NES Internal Coordinating Group: COVID-19 (always on-call and incorporating 2 weekly meetings of People and Facilities Recovery groups and a Steering Group) using MS Teams for communication, incident management. Strategic decision making - all recorded and reported.</p> <p><b>Control (3)</b> Over the COVID-19 Governance period we have prepared NES Re-Mobilisation plans for the approval of the Board. The 2020-21 AOP went through the 23 March 2020 Board and was subsequently paused as per SG direction, the 30 July 2020 Board approved RMP2 and 11 February 2021 Board approved the RMP3 for submission to Scottish Government for their comment and approval. We reported all phases of COVID-19 governance arrangements to Scottish Government. In January 2021 we defined and agreed our approach to 'Governance Light' with the Board and remain prepared to implement this approach if and when required. RMP4 was submitted to the Scottish Government at the end of September 2021 and preparation of the 2022-25 Delivery Plan is underway.</p> <p><b>Action (1)</b> Review NES standing committees, management groups and planning/performance functions, considering the governance arrangements put in place for COVID-19, and re-start corporate governance with agreed changes where appropriate. Action Owners: Della Thomas and Donald Cameron</p> <p><b>10/12/21 Update:</b> New arrangements for NES Board standing committees and management groups based on best practice from wave 1 of COVID-19 are now well established and being kept under review for further improvement. In addition, and in response to the appearance of the Omicron variant in December 2021, we remain prepared to implement a 'Governance Light' approach if required.</p>	CEO's office confirms closure of this risk

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14.	Finance	<p>Current NES properties and facilities will not be fit for purpose in the 'post COVID-19' world in terms of training, meeting and office space</p> <p><b>Risk Owner (Lead Director):</b> Jim Boyle</p>	<ul style="list-style-type: none"> <li>NES will be unable to provide training, meeting and office facilities which comply with the requirements (still to be formulated) of a post COVID-19 world.</li> </ul>	<ul style="list-style-type: none"> <li>Ability to deliver NES activities, in line with our current modes of business delivery and workplace utilisation, is compromised.</li> </ul>	Primary 1 4 x 5	House-keeping 2 x 3	<p><b>Control (1)</b> The ability to work remotely using cloud-based systems and communications technology is already in place.</p> <p><b>Control (2)</b> The ability to reconfigure NES facilities in line with new guidance while NES staff continue to work remotely.</p> <p><b>Control (3)</b> The development of 'remote friendly' workstyles supported by a new 'cloud based' facilities management system to manage site capacity safely in line with ever changing national guidance for 'non-clinical' NHS sites.</p> <p><b>Action (1)</b> Maintain all NES property transactions 'on hold' and put in place a short-term extension to the Phase 1 lease at CfHS to coincide with the Phase 2 lease expiry. This is to give us time to consider post-COVID property requirements and ensure our total property needs in Inverness are considered together when it becomes clearer (post COVID-19). Action Owner: Nicola Todd  <b>10/12/21 Update:</b> The Phase 1 lease has now been extended (with full NES Board and SG approval) until the Phase 2 lease expiry in 2023. Property use during COVID is being monitored through the new 'Booker' facilities management system. Current data shows no space pressure and data will be collected once SG guidance changes from WfH (if you can) and remote friendly working has been fully implemented and in operation for 100 days. This will help indicate what changes are required to NES sites e.g. if more training space and less desk space is required when existing leases start to expire in 2023.</p> <p><b>Action (2)</b> Compile common standards for all NES sites in line with post COVID-19 national guidance/policy and for locally managed sites, PFM will support their reconfiguration as required working with local facilities management colleagues in dental and medical so that NES sites are prepared and signed off as COVID-19 secure in line with a Facilities Recovery Plan.</p> <p><b>Action Owner:</b> various –PFM, local site Facilities Managers (Medicine and Dentistry) and staff side.</p> <p><b>10/12/21 Update:</b> National NES 'Safe Office Working' guidance has been developed based on SG guidance along with local site guidance for those currently working in NES sites. This will be more formally rolled out when our new 'Remote Friendly' workstyles are launched (when SG WfH message changes). All NES sites are being maintained as COVID-19 secure in line with available national guidance.</p>	Finance confirms closure of this risk
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15.	<b>Workforce Directorate</b>	<p>The implementation of COVID-19 health protection measures could result in an unintended adverse impact on staff health and wellbeing</p> <p><b>Risk Owner (Lead Director):</b> Tracey Ashworth-Davies</p>	<ul style="list-style-type: none"> <li>Sustained home working as result of COVID-19 pandemic mitigation measures</li> </ul>	<ul style="list-style-type: none"> <li>Staff feel disconnected and/or isolated from organisation and workplace.</li> <li>Health and safety issues as a result of lack of suitable equipment/space or ergonomic workstation set-up.</li> </ul>	<b>Primary 2</b> <b>4 x 3</b>	<b>Contingency</b> <b>3 x 2</b>	<p><b>Control (1.1)</b> Regular communications from the Chief Executive are posted on the intranet. Regular corporate communications issued to all NES staff and a series of FAQs developed.</p> <p><b>Control (1.2)</b> Guidance issued to managers on the importance of keeping touch and regular virtual team and individual check-ins. Strong partnership links have been maintained to inform these communications.</p> <p><b>Control (1.3)</b> Management matters e-newsletters issued regularly to support managers to mitigate staff health and well-being challenges.</p> <p><b>Control (1.4)</b> Guidance and training resources on using Microsoft Teams and remote working are available on Turas Learn.</p> <p><b>Control (1.5)</b> The NES Healthy Working Lives Strategy Group promotes a focus on health and wellbeing in the current context.</p> <p><b>Control (1.6)</b> People Recovery Group in place to manage people risk and have implemented various staff engagement and wellbeing measures e.g. parent and carer groups, diversity networks, line manager webinars and Spaces for Listening.</p> <p><b>Control (1.7)</b> Trickle App launched to encourage communication, ideas, and a means of dynamically monitoring staff concerns.</p> <p><b>Control (2.1)</b> The Executive Team, through the Internal Coordinating Group, are supportive of staff health and wellbeing, and implementing reasonable adjustments in the home working environment, by taking steps to provide staff with the required or appropriate computing equipment, other elements of digital infrastructure (phones, access, etc) and also making available for their home workstations, customised chairs or other equipment previously purchased for them. Application of an Addendum to Homeworking Policy to cover homeworking arrangements during the pandemic.</p> <p><b>Control (2.2)</b> Support is available from Health and Safety Adviser including workstation ergonomics self-assessment support.</p> <p><b>Control (2.3)</b> Agile Working Health and Safety module available as part of staff essential learning.</p> <p><b>Control (2.4)</b> The majority of NES staff are working from home. All NES sites remain accessible for essential staff and those with extenuating circumstances who have the option to work in the office as their key workplace subject to completed risk assessments and return to the workplace approvals from their line manager and HR.</p>	<p>Covid health protection measures have been scaled back in line with national advice</p> <p>Ways of Working project is considering the detailed aspects of continued remote and hybrid working for staff</p>
16.	<b>Workforce Directorate</b>	<p>Failure to comply with legislative and statutory requirements</p> <p><b>Risk Owner (Lead Director):</b> Tracey Ashworth-Davies</p> <p>Failure to comply with legislative and statutory requirements.</p> <p><b>Risk Owner (Lead Director):</b></p>	<ul style="list-style-type: none"> <li>Failure to comply with legislative and statutory requirements these include employment legislation, Equality &amp; Diversity legislation and Health &amp; Safety reporting.</li> </ul>	<ul style="list-style-type: none"> <li>NES staff placed in danger due to NES failure to comply with and fulfil health and safety obligations.</li> <li>Employment Tribunal claims where NES has failed to fulfil employment obligations or is found to have discriminated against an employee.</li> <li>Inadequate staff governance and reporting.</li> <li>Failure to deliver the Directorate's operational plan.</li> </ul>	<b>Primary 2</b> <b>4 x 3</b>	<b>Contingency</b> <b>3 x 3</b>	<p><b>Control (1)</b> Ensuring robust health and safety arrangements are in place for all NES employees, including those who work in placement organisations.</p> <p><b>Control (2)</b> Continued access to sufficient HR expertise to support Directorates in any employee relations cases.</p> <p><b>Control (3)</b> Maintenance of data across systems including eESS, SSTS and Turas to inform reporting and performance dashboard.</p> <p><b>Control (4)</b> Ensuring compliance with Staff Governance Standard for NES employees across all settings: Well Informed: via regular Corporate, Directorate and line manager led communications, including Hub and intranet sites. Appropriately trained and developed: ensuring induction, essential learning and development activity continues to be managed through usual processes including PDP&amp;R activity. Updating materials to reflect new working arrangements.</p>	<p>Recommended for closure, all aspects now included as business as usual, not a Covid risk.</p>

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		Tracey Ashworth-Davies			Primary 2 4 x 3	Contingency 3 x 3	<p>Involved in decisions which affect them: continued strong working in partnership. Ensuring Directors and line managers have regular two-way communication across teams. Mechanisms to gather feedback from staff on impact of Covid19 on work life.</p> <p><u>Dignity and respect</u>: promotion of NES values across all communications. HR support to any formal and informal grievance or dignity at work issues.</p> <p><u>Health, safety and wellbeing</u>: updated policies to reflect new working arrangements, including refreshed risk assessments. Clear statements on responsibilities (employee, line manager, employer, placement). Healthy Working Lives Group Campaigns.</p> <p><b>Control (5)</b> Manage any compliance risk, by publishing a brief report by the statutory date of 30 April 2025 which describes equality progress; equality outcomes; workforce KPIs; workforce data statistics, including occupational segregation analysis; overview of existing equal pay statement, and plans for equality outcomes and equal pay statement review in the following year.</p> <p><b>Control (6)</b> Regular review and updating of progress against the operational plan, flagging any areas not being progressed for a further risk assessment.</p>	
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**NHS Education for Scotland**  
**Item 10b**  
**25 May 2023**

**NES/23/38**

## **Board Paper**

### **1. Title of Paper**

2022/23 Quarter 4 Performance Report

### **2. Author(s) of Paper**

Karen Howe, Planning and Corporate Governance Manager  
Christina Bichan, Director of Planning and Performance

### **3. Lead Director(s)**

Christina Bichan, Director of Planning and Performance

### **4. Situation/Purpose of paper**

- 4.1 This paper provides a summary of performance using RAG exception reporting against the NES 22/23 Detailed Operational Plan for Quarter 4 of 2022/23.

### **5. Background and Route to Meeting**

- 5.1 This paper was prepared for the purposes of the Board and was considered by the Executive Team en route to the 25 May 2023 Board meeting.

### **6. Assessment/Key Issues**

- 6.1 The 22/23 Detailed Operational Plan contains 549 targets, which at the end of Quarter 4 are: 27 red (5%), 46 amber (8%), 384 green (70%) and 92 blue (17%).
- 6.2 Of the 78 priority targets, there are: 2 red, 8 amber, 59 green and 9 blue.
- 6.3 When targets are reviewed by strategic theme, then strategic themes 1 (Quality Learning & Employment Environment), 2 (National Infrastructure for attraction, recruitment, training and retention), 3 (Education and training for a skilled, adaptable and compassionate workforce) and 5 (High Performing Organisation) are all on or over 87% on track or complete (88%, 87%, 88% and 88%).

respectively). While strategic theme 4 (National digital platform and analysis) is 79% on track or complete.

- 6.4 This year, a new RAG rating (blue) has been included, to clearly show which targets are fully completed, aligning with the approach utilised by Scottish Government in annual delivery planning. At the end of Quarter 4, there are 92 blue targets reported and 384 reporting green status, giving an overall achievement of delivery position at year end of 87%.
- 6.5 Of the 27 red targets, 13 are subject to ongoing mitigating actions. The majority of red targets are linked to challenges in relation to recruitment and capacity.
- 6.6 Fifteen out of the 27 red targets are due to funding or policy changes. The main impacts as a result of the delays being reported are:
- 23% of available Dental Core Training posts remain vacant.
  - Embedding of learning resources for Allied Health Professions (AHPs) at the Skilled level of the Autism Framework is not yet complete.
  - An implementation plan for AHPs in relation to the Effectives Decision Making Framework has not yet been developed.
  - A link between Turas Learn and Turas Appraisal has not been established.
  - Positive Behaviour Support Practitioner targets have not been met.
- 6.7 For all red targets, where there is a related corporate risk this has been highlighted. The majority of red targets are linked to corporate risk SR2 – Workforce Capacity and Capability and SR13 – Capacity and Skills of NES Technology Service.

## **7. Recommendations**

- 7.1 The Board is asked to note Quarter 4 performance against the 22/23 Detailed Operational Plan.

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Author to complete **checklist**.

**a) Have Educational implications been considered?**

- ☒ Yes  
☐ No

**b) Is there a budget allocated for this work?**

- ☐ Yes  
☒ No

**c) Alignment with [NES Strategy 2019-2024](#)**

- ☐ 1. A high-quality learning and employment environment
- ☐ 2. National infrastructure to improve attraction, recruitment, training and retention
- ☐ 3. Education and training for a skilled, adaptable and compassionate workforce
- ☐ 4. A national digital platform, analysis, intelligence and modelling
- ☒ 5. A high performing organisation (NES)

**d) Have key strategic risks and mitigation measures been identified?**

- ☒ Yes
- ☐ No

**e) Have Equality, Diversity, Human Rights and health inequality issues been considered as per [Fairer Scotland Duty: Guidance for Public Bodies](#) and **Corporate Parenting** as per the [Children and Young People \(Scotland\) Act 2014](#)?**

- ☐ Yes
- ☒ No

**f) Have you considered Emergency Climate Change and Sustainability implications as per [DL \(2021\) 38](#)?**

- ☐ Yes
- ☒ No

**g) Have you considered a staff and external stakeholder engagement plan?**

- ☐ Yes
- ☒ No

Karen Howe  
20/04/23  
NES



# NHS Education for Scotland – 2022/23 Quarter 4 Performance Report

## 1. Introduction

This 4<sup>th</sup> performance report of 2022-23, provides an update on progress in the delivery of the targets set in the 2022-23 Detailed Operational Plan, which continues to focus on delivery of our 2019-24 strategy.

Alongside delivery of this years Detailed Operational Plan, work has continued to develop a new NES Strategy and supporting performance management approach, which will better support the Board in monitoring progress against our strategic intent.

## 2. Summary of Performance

Progress against our strategy is based on the RAG (Red, Amber, Green) ratings, with an additional 'blue' category this year, to more clearly reflect the work that has been completed and align with the progress monitoring approach utilised by Scottish Government in Boards' quarterly delivery returns. Overall, there are 549 individual targets, which are distributed across our 5 strategic themes. Of those 549 targets, 78 (14%) have been identified as priority targets. In addition to the targets set out in the Detailed Operational Plan, within the NHS Scotland Academy there are 8 priority deliverables for 22/23 with performance at the end of quarter 4: 75% Green and 25% Amber. The 2 amber areas relate to: the establishment of the National Endoscopy Training Programme, which is progressing well, but behind schedule on the recruitment and appointment of national faculty across all health boards; and the Recruitment and Retention of the core Academy team, which is nearly complete.

RAG definitions used across the organisation are as follows:

- **Red** – progress unsatisfactory. The target is more than 10% off the stated goal and/or delayed by more than 3 months.
- **Amber** – progress partially unsatisfactory. The target is 10%, or less, off the stated goal AND/OR is delayed by 3 months or less.
- **Green** – progress against this target/outcome has been satisfactory and ongoing, with 100% of the target on track and within timescales.
- **Blue** – work fully completed.

When a target lacks a numerical indicator, the lead for that work uses their expertise to advise on the most appropriate RAG rating, based on the definitions above.

Following an audit recommendation, RAG ratings and updates are subject to a number of quality checks before they are finalised. Overall, 3 targets were followed up for further clarification, with 2 green targets moving to blue and the other target remaining unchanged.

### 3. Performance Measurement against the 2019-2024 NES Strategy Q4 22-23

Figure 1 shows a summary of performance across all 549 targets, with 384 green (70%), 46 amber (8%), 27 red (5%) and 92 blue (17%). Figure 2 shows a summary of performance across the 78 priority targets, 59 were green (76%), 7 amber (9%), 3 red (4%) and 9 blue (11%). A more detailed analysis of the performance in respect of red rated items is presented in section 3.1 with analysis of performance by strategic theme being presented in sections 3.2 onwards.

**Figure 1 – Summary of Q4 22/23 (all targets, n= 549)**



**Figure 2 – Summary of Q4 22/23 (priority targets, n= 78)**

### 3.1 All Red (priority and non-priority) targets Q4 2022/23



At the end of Q4, 27 targets are reporting as red, 14 of which were closed for no further action in year and presented to the Board in earlier performance reports. These continue to be reflected as red targets in Figures 1 and 2 due to MiTracker classifications. An overview of the status of the 13 remaining red targets is provided in Table 1 below. Of all targets reported as red at year end, 55% (15) were as a result of changes in funding or policy changes.

Of the 13 red targets presented in Table 1, 3 of the targets are reporting as red for the first time in Quarter 4. The remaining 10 items were escalated to a red position during the last quarter.

**Table 6: All 2022/23 targets reported as Red status at the end of Quarter 4**

Target	Q4 Update	Related Corporate Risk
<b>Dental</b> - Up to 90 Dental Core and up to 45 (40 NES-funded) Specialty and post Certificate of Completion of Specialist Training (CCST) trainees achieving the learning outcomes of the relevant curricula to the GDC (General Dental Council) standards. (TAR0004874)	Of the 90 Dental Core Training (DCT) posts available in national recruitment, 68 DCTs commenced in September. There are currently 70 in post (77% of available posts) following local recruitment. National recruitment is currently underway and some posts involving OMFS have been reconfigured to increase attractiveness and recruitment. The outcome of this will not be known until the recruitment process completes in June and the post holders commence in September.	No related corporate risk.

Target	Q4 Update	Related Corporate Risk
	We currently have 45 Specialty trainees in post (40 NES funded) across 10 of the 13 dental specialties. Recruitment is currently underway locally and nationally (dependent on specialty) for Specialty trainees in 5 dental specialties to commence in September 2023.	
<b>Finance</b> - Work with Digital to develop a process to enable approx. 200 Lecturers per month to submit their claims electronically and export the data to e-payroll. (TAR0005224)	The project has not been completed due to complexities that became apparent during the development phase and lack of resources to address them. It is in our operational plan for delivery in Q3 2023/24.	SR13 – Capacity & Skills of NES Technology Service
<b>NMAHP</b> - By March 2023 we will work with existing practice development and education infrastructures in a minimum of five NHS Boards and/or Health & Social Care Partnerships to embed the learning resources (developed in 2021) for Allied Health Professionals at the Skilled level of the Autism Framework that focus on the communication and functional aspects associated with autism. (TAR0005054)	The target as stated will not be delivered in this financial year but elements of them will be progressed as part of work planned for 2023/2024. The post has now been appointed to and person started in early February 2023. A review of the activity planned has been done; the new post holder is now progressing a scope of learning needs for Allied Health Professionals at the enhanced level of practice and has started to explore options with NES digital re the existing resources which are in draft format.	SR2 – Workforce Capacity & Capability
<b>NMAHP</b> - By March 2023 we will work in partnership with up to 20 Allied Health Professionals within Child and Adolescent Mental Health Services (CAMHS), and through educational activities, develop an implementation plan in relation to the Effective Decision Making Framework. (TAR0004978)	As per Q3 update this work has not progressed due to a delay in recruitment to lead the work and subsequent changes/developments within the AHP CAMHS workforce (significant increase in the numbers of new to CAMHS workforce). This resulted in a change in priority and limited capacity of the workforce to engage with the planned Effective Decision Making activity. Instead, work focused on the delivery of TAR0004977 to understand the learning needs of this newer CAMHS workforce.	SR2 – Workforce Capacity & Capability
<b>NMAHP</b> - We will scope the learning and development needs of Allied Health Professionals (AHP) at the Enhanced and	The target as stated will not be delivered in this financial year but elements of them will be progressed as part of work planned for 2023/2024. The post has now been appointed to	SR2 – Workforce Capacity & Capability

Target	Q4 Update	Related Corporate Risk
Specialist level of the Autism Framework in relation to new and emerging models of care and service delivery for autistic people (e.g. nurse/AHP lead primary care teams) and deliver 4 learning opportunities and/or resources to meet those needs by March 2023. (TAR0005053)	and person started in early February 2023. A review of the activity planned has been done; the new post holder is now progressing a scope of learning needs for Allied Health Professionals at the enhanced level of practice and has started to explore options with NES digital re the existing resources which are in draft format.	
<b>NTS</b> - Scope and cost a solution that allows NES Directorates to create and manage curriculums. (TAR0004925)	Build work paused in order that organisational decision can be made in respect of commercial and rationalisation of Portfolio products.	SR1 – Strategic Plan Misalignment
<b>NTS</b> - By March 2023 develop and implement a solution that enables the sharing of a single medication record in at least one NHS Board in Scotland. This will be achieved by ingesting medication data from various sources (e.g. GP-IT systems, HEPMA, ChemoCare) into a central repository (Clinical Data Repository, part of the National Digital Platform) and making this available for Health and Care workers when requested, resulting in improved access, safety, efficiency and smoother transitions of care and out of hours (TAR0005032)	This work is currently paused pending resource review and SG consideration - The strategic position is currently being discussed at the SG DHAC. There is potential for refined design work but realistically the scope for development will be decided by reprioritisation and funding constraints. The technical capability for consolidating medication information is delayed by the HEPMA vendor and their adoption of UK core FHIR standards until later this year (Q2/Q3). The A&A pilot has not been realised for similar funding and resource constraints. Viability for restarting this programme will be determined by further discussion with SG regarding due later this month.	SR13 – Capacity and Skills of NES Technology Service
<b>NTS</b> – Develop link between Turas Learn and Turas Appraisal allowing learning record to be viewed and created as part of the PDP by 31/03/2023 (TAR0004926)	Funding still to be identified for Appraisal. A bid was included to resource an enhanced team around Appraisal that could carry out any prioritised feature enhancements, an example being developing linkage between Learn and Appraisal. The Learn end of this linkage was developed as part of delivery of the	SR12 – Investment in TURAS and Other Learning Platforms

Target	Q4 Update	Related Corporate Risk
	<p>Learning Record Store in 2019-20, resourced by funding made available that year.</p> <p>Discussions are still ongoing in relation to funding for this particular linkage and wider Appraisal funding to cover other requested developments such as Board Chair Appraisals. Until funding is sourced, unless this work is prioritised in place of other work supporting NES core business, the work on this will not progress.</p>	
<b>Psychology</b> - Psychology Trainee survey - using reporting processes developed with NES Digital complete roll out of trainee survey to NHS Boards. (TAR0004833)	Capacity unavailable within NTS to progress this work within 22/23. However app under development which may be helpful.	SR13 – Capacity and Skills of NES Technology Service
<b>Psychology</b> - Over the course of 2022-23, continue to develop functionality in collaboration with NES Digital, future developments include: exploring the integration of BPS and HCPC curricula with existing activity tracker and evaluation processes and working with NES Digital to develop processes to gather 360 degree feedback from colleagues of supervisors on placements. (TAR0004835)	Capacity unavailable within NTS to progress this workstream within 22/23. Consideration being given to progression within 23/24 as part of broader prioritisation exercise.	SR13 – Capacity and Skills of NES Technology Service
<b>Psychology</b> - Continue to embed and consolidate Cognitive Rehabilitation (CR) approaches to improve access for people living with mild to moderate dementia by offering 2 remote delivery/face to face workshops for up to 50 health and social care staff by March 2023. Widely promote newly developed CR e-learning module, practice based video	In 2022/23 we delivered one Cognitive Rehabilitation training to 13 participants. One event earlier in the year was cancelled due to low uptake with boards reporting difficulty releasing staff over the autumn and winter period. Total trained in 22/23 = 13.	No related corporate risk.

Target	Q4 Update	Related Corporate Risk
content, and existing resources to support the use of CR techniques in routine clinical practice. (TAR0005282)		
<b>Psychology</b> - Learning Disabilities - Positively support people whose behaviour is perceived as challenging by: reviewing existing NES resources for Positive Behaviour Support (PBS) at Informed and Skilled levels; developing bitesize resources related to PBS at informed and skilled levels; collaborating with wider partners to support and maintain implementation of enhanced and specialist PBS training; developing pathways to provision of specific PBS clinical supervision and develop masterclass (30 participants initially) in collaboration with external colleagues to support skills of staff qualified as PBS practitioners.(TAR0004844)	<p>In 2022-3 we participated in three events for senior leaders and CEOs of LD third sector support organisations to develop PBS practice in their organisation.</p> <p>In 2022-3 we were key partners in producing and piloting an informed level, 12 chapter PBS eBook resource, in collaboration with the PBS Community of Practice and SSSC. The book and pilot are complete and will be launched for general use on 19th April 2023.</p> <p>In 2022-3 we aimed to support 30 PBS practitioners to access generic supervision training enabling them to supervise PBS practice in their local board. Demand for this resource was not identified. Scoping for future demand will take place in 2023-4</p>	No related corporate risk.
<b>Workforce</b> - Complete a review of Leadership & Management Zone and establish resource development plan by December 2022, supported by user feedback and partnership consultation. (TAR0005213)	Although the action identified at the start of the year has not progressed as previously planned, the resource continues to be maintained and updated as required. The position remains that until clarity comes in relation to both the Leading to Change and TURAS platform developments minimal work will be undertaken.	SR12 – Investment in TURAS and Other Learning Platforms

### 3.2 A high quality learning & employment environment

In total, 89 targets (17%) contribute to the delivery of this strategic theme, with 3 red, 8 amber, 59 green and 19 blue at Q4. Overall, 88% of targets under this strategic theme are on track or completed.

There are 12 priority targets under this strategic theme, all of which are green or blue.

### 3.2.1 Constraints

Progress at Q4 appears on track. Across this theme, 4 targets are delayed because of workload within NTS and/or technical issues.

### 3.2.2 Action required to improve performance

No action necessary.

### 3.3 National infrastructure to improve attraction, recruitment, training and retention

In total, 147 targets (27%) contribute to the delivery of this strategic theme, with 7 red, 12 amber, 110 green and 18 blue at Q4. Overall, 87% of targets under this strategic theme are on track or complete.

There are 24 priority targets under this strategic theme, with 3 amber and the remaining 21 green or blue. Table 2 shows the red and amber priority targets under this theme.

**Table 2 – Priority Red and Amber targets Q4 2022/23 under Strategic Theme 2 (National infrastructure to improve attraction, recruitment, training and retention)**

Target	RAG Rating	Update
<b>Psychology</b> - Support 3 trainee health psychologists to complete training by February 2023 and 1 trainee by April 2023. Support 5 trainee health psychologists to complete training by February 2024. Commission and recruit up to 4 trainee health psychologists to commence in February 2023. (TAR0004784)	Amber	3 trainee health psychologists from the 2021 intake completed training by February 2023, with a further 1 to complete by end of June 2023. 2 trainee health psychologists on track to complete training by February 2024, with a further 1 to complete in March 2024. 4 trainees commenced February 2023.
<b>Workforce</b> - In partnership with Scottish Government and national groups e.g. developing the Young Workforce, progress the implementation of the Young Person's Guarantee across participating Boards in NHS Scotland, with each participating Board committing to at least one of the Five Asks, supported by the development and publication of a digital toolkit by June 2022. (TAR0004749)	Amber	Due to changes at SG and the closure of Employability & Apprenticeship Network, replaced by NHSS Skills for Health & Social Care (chaired by SG) and the introduction of the Youth Academy, this work has been merged with the wider planning and initiatives of this group. The development and implementation of the proposed NES Widening Access Framework and the Careers Education Group will provide a forum within NES for these discussions.
<b>Workforce</b> - Develop baseline and targets (linked to Key Performance Indicators) on brand and attraction activity as a remote friendly organisation using insights from the People Recovery Group and Staff Networks to develop stories/ blogs/ case studies, measuring impact on recruitment pool. (TAR0004715)	Amber	Work is ongoing to revise the approach to enable qualitative information to be identified to support delivery of the workforce plan. Key activities are being established with the first phase of workforce planning anticipated by May 23.



### 3.3.1 Constraints

Progress at Q4 appears on track. Across this theme, targets are mainly not on track because of delays in securing funding.

### 3.3.2 Action required to improve performance

No action necessary.

### 3.4 Education & training for a skilled, adaptable and compassionate workforce

In total, 183 targets (33%) contribute to the delivery of this strategic theme, with 13 red, 9 amber, 131 green and 30 blue at Q4. Overall, 88% of targets under this strategic theme are on track or complete.

There are 22 priority targets under this strategic theme, with 1 red and 1 amber and 20 green. Table 3 shows the priority red and amber targets under this theme.

**Table 3 – Priority Red and Amber targets Q4 2022/23 under Strategic Theme 3 (Education & training for a skilled, adaptable and compassionate workforce)**

Target	RAG Rating	Update
<b>Optometry</b> - Subject to funding. By end of Q4, to accredit a minimum of 75% of Optometrists enrolled in the third cohort of NES accredited training, Scottish Qualifications Authority level 11 course, to manage ocular hypertension and glaucoma in the community. To include online learning, training sessions, reflective practice, clinical placement, theoretical and clinical assessment. (TAR0004695)	Red	External funding has not been secured to deliver the third cohort. This target was closed in Q1.
<b>Optometry</b> - To design, deliver and evaluate mentorship support for qualified NES Glaucoma Award Training (NESGAT) optometrists in the community. To deliver minimum 1 session face to face per NESGAT optometrist. To deliver minimum 4 interactive Continuing Professional Development online events/resources. To deliver report by end Q4 detailing quality improvement suggestions resultant from evaluation of delivery to end of Q3. (TAR0004696)	Amber	Community Glaucoma Service not yet active. The team has focused on planned conference for 26 March 2023 offering a range of workshops and lectures: attendance negatively impacted by continued delays in determination of third NESGAT cohort. Two clinical skills workshops have taken place in Q4.

### 3.4.1 Constraints

Most of the delays under this theme have been due to a reduction in or withdrawal of funding, with Optometry being particularly affected.

### 3.4.2 Action required to improve performance

No action required.

## 3.5 A national digital platform, analysis, intelligence and modelling

In total, 62 targets (11%) contribute to the delivery of this strategic theme, with 4 red, 9 amber, 39 green and 10 blue at Q4. Overall, 79% of targets under this strategic theme are on track or complete.

There are 7 priority targets under this strategic theme, 2 of which are amber, 1 is red and 4 are green or blue. Table 4 shows the priority amber and targets under this theme.

**Table 4 – Priority Red and Amber targets Q4 2022/23 under Strategic Theme 4 (A national digital platform, analysis, intelligence and modelling)**

Target	RAG Rating	Update
<b>NTS</b> - By March 2023 develop and implement a solution that enables the sharing of a single medication record in at least one NHS Board in Scotland. This will be achieved by ingesting medication data from various sources (e.g. GP-IT systems, HEPMA, ChemoCare) into a central repository (Clinical Data Repository, part of the National Digital Platform) and making this available for Health and Care workers when requested, resulting in improved access, safety, efficiency and smoother transitions of care and out of hours. (TAR0005032)	Red	This work is currently paused pending resource review and SG consideration. The strategic position is currently being discussed at the SG DHAC. There is potential for refined design work but realistically the scope for development will be decided by reprioritisation and funding constraints. The technical capability for consolidating medication information is delayed by the HEPMA vendor and their adoption of UK core FHIR standards until later this year (Q2/Q3). The A&A pilot has not been realised for similar funding and resource constraints. Viability for restarting this programme will be determined by further discussion with SG regarding due later this month.
<b>NTS</b> - By March 2023, to design and consolidate National Digital Platform databases into coherent relationships, structures, and migration plans, as applicable (TAR0005024)	Amber	No major change, with no major work on this outwith the developer portal. Strategy around data storage to be informed by upcoming DHAC decisions around hand-held social care record.
<b>NTS</b> - Platform Development - By March 2023, develop, maintain and operate a coherent Digital platform infrastructure core components, cloud environment, and offer platform services to support health and care for people across Scotland. (TAR0005022)	Amber	Onboarding of VMT to the NDP EMPI service is complete behind a feature flag. WMT and FNP next Products to onboard to the service. Migration of Nextgate paused so that NES and NSS and can work together on a shared strategy for the API.

### 3.5.1 Constraints

Progress at Q4 appears on track.

### 3.5.2 Action required to improve performance

No further action required.

### 3.6 A higher performing organisation (NES)

In total, 68 targets (12%) contribute to the delivery of this strategic theme, with 1 red, 7 amber, 45 green and 15 blue at Q4. Overall, 88% of targets under this strategic theme are on track or complete.

There are 13 priority targets under this strategic theme, with 2 amber, and the remainder blue or green. Table 5 shows the amber priority targets under this theme.

**Table 5 – Priority Amber priority targets Q4 2022/23 under Strategic Theme 5 (A higher performing organisation)**

Target	RAG Rating	Update
<b>PCR</b> - A published Annual Delivery Plan (ADP) with Board approval by the end of March, supported by a detailed operational plan based on individual directorate plans and aligned to our Strategy for 2019-24. (TAR0005269)	Amber	SG ADP guidance was provided to Boards on 14th March with return dates of early June for the Annual Delivery Plan and early July for the Medium Term Plan. Work is progressing on the development of both documents.
<b>Finance (Facilities)</b> - Prepare and implement a strategy to secure accommodation in both Glasgow and Inverness in advance of the lease events in 2023 using the data gathered from Directorates regarding technology enabled learning and workstyles during 2022 in order to ensure continuity of service provision in the 2022 – 2023 period and thereafter. (TAR0005276)	Amber	The preferred site for Glasgow remains identified and has been discussed in detail with the Scottish Government in order to ensure that this can be the subject of a formal business case to be submitted to the Cabinet Secretary for Finance and Health. The draft agreement currently sits with SG and once this has been received and the financial terms of this been provided, the Lead Advisor appointment documents can be put to tender, and the design of the new office be pulled together. The current lease at 2CQ is the subject of a proposed short-term extension in order that NES and another NHS Board can ensure security of accommodation until the new site is ready for a co-location in early 2024. Timescales are tight and the RAG status will be reviewed on a regular basis given the substantial operational and cost risks associated with this relocation.

### 3.6.1 Constraints

No clear constraints under this theme.

### **3.6.2 Action required to improve performance**

No further action required.

### **3.7 NHS Scotland Academy**

In addition to the targets set out in the Detailed Operational Plan, and in partnership with NHS Golden Jubilee, the NHS Scotland Academy has 8 priority deliverables for 22/23. Academy performance at the end of quarter 4 is: 75% Green and 25% Amber. The 2 amber areas relate to: the establishment of the National Endoscopy Training Programme, which is progressing well, but behind schedule on the recruitment and appointment of national faculty across all health boards; and the Recruitment and Retention of the core Academy team, which is almost complete.

**NHS Education for Scotland**  
**Item 12a**  
**25 May 2023**

**NES/23/39**

**Board Paper**

**1. Title of Paper**

Committee membership changes

**2. Author(s) of Paper**

Della Thomas, Board Secretary & Principal Lead, Corporate Governance

**3. Lead Director(s)**

Christina Bichan, Director of Planning and Performance

**4. Situation/Purpose of paper**

4.1 This paper outlines the changes to Board Committee membership and roles.

**5. Background and Route to Meeting**

5.1 Two of our non-executive directors, Linda Dunion and Sandra Walker have retired from our Board; one of our non-executives, Vicki Nairn, has stood down and our Vice Chair, Douglas Hutchens, will soon retire.

5.2 Four new non-executives have been appointed to the Board. Ally Boyle, Olga Clayton and Nigel Henderson joined the Board on 1 May 2023 and Shona Cowan will take up her Board membership on 1 September 2023.

5.3 Due to the changes in membership, the Board Chair has taken a strategic overview of the member numbers and the skills and experience required for each Committee and appointed Committee membership and roles accordingly.

5.4 These changes have been discussed with the Committee Chairs, the Chief Executive, the individual non-executive directors and the Board Secretary and communicated accordingly.

## 6. Assessment/Key Issues

(Include narrative relating to a-g checklist by exception)

6.1 The following Committee Changes will come into effect from 1 June 2023:

- Ally Boyle and Olga Clayton will become members of the Audit and Risk Committee (ARC).
- Nigel Henderson will become a member of the Staff Governance Committee (SGC).
- Olga Clayton and Nigel Henderson will become members of the Education and Quality Committee (EQC).
- Ally Boyle will become a member of the Technology and Information Committee (TIC).

6.2 The following Committee changes will come into effect from 1 June 2023:

- Jean Ford will no longer be a member of the Staff Governance Committee and will take up membership of the Remuneration Committee.

6.3 The following Committee Changes will take effect from 1 September 2023:

- Annie Gunner Logan will take on the role of EQC Chair and become a member of the Remuneration Committee.

6.4 The following Committee changes will take effect from 1 October 2023:

- Shona Cowan will take up membership of the EQC and TIC.

## 7. Recommendations

7.1 The Board is invited to homologate the changes to Committee membership and roles.

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Author to complete **checklist**.

**Author to include any narrative by exception** in Section 6 of the cover paper.

### a) Have Educational implications been considered?

- ☒ Yes  
☐ No

### b) Is there a budget allocated for this work?

- ☒ Yes  
☐ No

**c) Alignment with [NES Strategy 2019-2024](#)**

- ☒ 1. A high-quality learning and employment environment
- ☒ 2. National infrastructure to improve attraction, recruitment, training and retention
- ☒ 3. Education and training for a skilled, adaptable and compassionate workforce
- ☒ 4. A national digital platform, analysis, intelligence and modelling
- ☒ 5. A high performing organisation (NES)

**d) Have key strategic risks and mitigation measures been identified?**

- ☒ Yes
- ☐ No

**e) Have Equality, Diversity, Human Rights and health inequality issues been considered as per [Fairer Scotland Duty: Guidance for Public Bodies](#) and Corporate Parenting as per the [Children and Young People \(Scotland\) Act 2014](#)?**

- ☒ Yes
- ☐ No

**f) Have you considered Emergency Climate Change and Sustainability implications as per [DL \(2021\) 38](#)?**

- ☒ Yes
- ☐ No

**g) Have you considered a staff and external stakeholder engagement plan?**

- ☒ Yes
- ☐ No

Della Thomas  
May 2023  
NES

## **AUDIT AND RISK COMMITTEE**

**NES/AR/23/13**

### **Minutes of the Eleventh NES Audit and Risk Committee held on Thursday 19 January 2023 via Microsoft Teams.**

**Present:** Jean Ford, Non-Executive Director and Committee Chair  
Anne Currie, Non-Executive Director, Equality, Diversity and Human Rights Champion  
Gillian Mawdsley, Non-Executive Director, Whistleblowing Champion and Climate Emergency and Sustainability Champion

**In attendance:** Jenn Allison, Committee Secretary  
Jim Boyle, Executive Director of Finance  
David Garbutt, Chair of NES  
Carole Grant, External Audit, Audit Scotland  
Thomas Lamont, NES Dental Adviser and Senior Lecturer in Restorative Dentistry University of Dundee (observing)  
James Lucas, Internal Audit, KPMG  
Karen Reid, Chief Executive  
Syed Shah, Internal Audit, KPMG  
Janice Sinclair, Head of Finance  
Della Thomas, Board Secretary  
Lizzie Turner, Finance Principal Lead (until 11:00)

#### **1. Welcome and introductions**

- 1.1 The Chair welcomed everyone to the Audit and Risk Committee (ARC), particularly Syed Shah from Internal Auditors, KPMG, and Carole Grant from External Auditors, Audit Scotland, who were attending their first meeting.
- 1.2 The Committee noted that Audit Scotland have recently been appointed as NES' new External Auditors.
- 1.3 The Chair also welcomed Thomas Lamont, NES Dental Advisor and Senior Lecturer in Restorative Dentistry University of Dundee, who was shadowing Karen Reid on 19<sup>th</sup> January and was observing the Audit and Risk Committee.

#### **2. Apologies for absence**

- 2.1 Apologies were received from Helen Russel, External Audit, Audit Scotland.

#### **3. Declarations of interest**

- 3.1 There were no declarations of interest in relation to the items of business on the agenda of this meeting.



#### **4. Any Other Business**

- 4.1 The Chair requested that ARC meetings in financial year 2023/24 have an earlier start time and the Committee agreed to change the start time of future meetings to 09:30.

#### **5. Minutes of the Audit and Risk Committee 10 October 2022**

(NES/AR/23/02)

- 5.1 The minutes were approved as a correct record following minor corrections of a spelling mistake and a typographical error at paragraph 8.19. An amendment at 13.4 was also requested to clarify that the COVID19 risk register would be combined with the corporate risk register.

#### **6. Actions of the Audit and Risk Committee**

(NES/AR/23/03)

- 6.1 The Committee noted and agreed the completed actions.

#### **7. Matters arising**

- 7.1 A query was raised in relation to item 12 of the 06 of October 2023 ARC meeting, asking if the NHS Scotland Academy Ethical Sponsorship Policy has also been approved by Audit and Risk Committee at Golden Jubilee.
- 7.2 Karen Reid confirmed that Golden Jubilee's Audit and Risk Committee approved the Policy with no further requested changes.

#### **8. Internal Audit Reports**

##### **a) Awarding of Internal Audit Contract and scheduling of 2023/24 Internal Audit Plan**

- 8.1 The Chair invited Jim Boyle to provide a verbal update regarding awarding of the Internal Audit Contract and scheduling of 2023/24 Internal Audit Plan.
- 8.2 Jim Boyle informed the Committee that the National Board consortium have completed procurement for Internal Audit services for NES, National Services Scotland (NSS) and Health Improvement Scotland (HIS) and the contract has been awarded to KMPG, a re-appointment for NES.
- 8.3 The Committee noted that the draft Internal Audit plan, which would normally come to the January meeting, had been placed on hold due to the procurement process. Jim informed the Committee that KPMG colleagues conduct some reflection work prior to liaising with management to develop the 2023/24 draft Internal Audit Plan for submission to the April ARC meeting.

**b) Core Financial Controls – General Ledger**

(NES/AR/23/04)

- 8.4 The Chair invited James Lucas to introduce the report which reviewed general ledger controls as part of the annual core financial controls audit.
- 8.5 The Committee noted that the overall assessment of the general ledger controls in place at NES has been rated as one of 'Significant assurance' which is in line with management's expectations and three low rated findings were raised in relation to journal authorisation processes, standard operating procedure documentation and reconciliations.
- 8.6 A query was raised to clarify the meaning of 'payments on behalf of'. Janice Sinclair explained that this is in relation to a process that all Health Board use to transfer money as part of their allocation being made to other Boards. She advised that this is an efficient process that significantly reduces administration.
- 8.7 The Committee noted the report and the assurances provided.

**c) Progress Report**

(NES/AR/22/52)

- 8.8 The Chair invited James Lucas to introduce the report which updated the Committee on progress against the outstanding management actions.
- 8.9 The Committee noted that 3 of the 7 Internal Audit reports have been reported to the ARC and 2 are currently in progress, due to be submitted to the April meeting.
- 8.10 James Lucas informed the ARC that there have been no Property Transactions this year, therefore the Property Transaction Monitoring (PTM) audit will not be required and that in discussions with the Chief Executives and Chairs of NES and NHS Golden Jubilee it has also been decided to defer the NHS Scotland Academy governance audit. Karen Reid added that it may be more appropriate to conduct a consultancy style audit in relation to the NHS Scotland Academy.
- 8.11 The Committee asked if other audits may be conducted, in light of the PTM and NHS Scotland Academy Governance audits not taking place. James Lucas confirmed that NES would only be charged for hours provided.
- 8.12 The Committee noted the good progress by management in implementing outstanding actions, with 15 management actions closed, including a high-risk recommendation originally reported in 2019-20 relating to Cyber User

Entitlement. The Committee noted that 8 of the remaining 17 outstanding actions have requested new due dates.

8.13 The Committee raised concerns that some of the dates had slipped (especially some which were recently agreed and confirmed as achievable) and stressed the importance of management setting realistic due dates and ensuring that due dates are adhered to where possible. James Lucas informed the Committee that remaining open actions are being addressed and on track for completion for updated due dates.

8.14 The Committee also noted that open internal audit actions are being submitted to the relevant NES Sub-Committees of the Board for monitoring and area also discussed at EET meetings. The Chair of the ARC noted that she would write to the Chairs of the Staff Governance Committee and Education and Quality Committee regarding this. **Action: JF**

8.15 The Committee noted the report and progress of the internal audit plan and progress in implementing outstanding recommendations.

## **9. Audit Scotland Introduction** (NES/AR/23/06)

9.1 The Chair invited Jim Boyle to present the paper to update the Committee regarding the appointment of NES' new External Auditors, Audit Scotland.

9.2 Jim Boyle informed the Committee that the Auditor General has informed NES that their new external auditors, covering the audits of the financial years 2022/23 to 2026/27, is Audit's Scotland's Audit Services Group. Jim Boyle welcomed Carole Grant from Audit Scotland to her first meeting of the NES ARC.

9.3 Carole Grant informed the Committee that Consultation meetings for the External Audit Plan for the forthcoming financial year, will take place during January and early February, with a view to a Final External Audit Plan coming to the next meeting of the Committee in April.

9.4 Jim Boyle notified the Committee that he and the Chair of the ARC had met with Audit Scotland and discussed the possibility of arranging information sessions with new and existing non-executives and the NES Executive Team regarding the internal and external audit process. **Action: CE Office**

9.5 Discussion took place regarding the Equality, Diversity and Human Rights; Whistleblowing; and Climate Emergency and Sustainability Champion roles and it was agreed that introductory meetings would be arranged between external auditors and Champions. **Action: CE Office**

9.6 The Committee noted that a new Code of Audit Practice to support the Audits for 2022/23 has been published, with minor changes in relation to the key priorities which now includes more emphasis on Climate Change.

9.7 A query was raised about the code of practice in regard to best value and if the funding models would be taken account of as part of this. Carole Grant confirmed that the certainty of recurrent and non-recurrent funding and their impact this may have on Strategic planning will be taken into account.

9.8 The Committee noted the update and their satisfaction with progress.

## **10. Financial Planning Update**

(NES/AR/23/07)

10.1 The Chair invited Jim Boyle to introduce this item to update the Committee on the NES draft financial position for 2023/24, following the announcement of the Scottish Draft Budget on 15 December 2022 and the annual Operational Planning process within NES for 2023/24 onwards.

10.2 The Committee noted the indicative budget of £523.6m, for financial year 2023/34. This includes £10.6m related to non-recurrent savings and income largely due to the recycling of less than full time places and vacancies within Medical Training Grades. At present there is a provisional gap of £2.4m identified and Directorates have been asked to identify efficiencies.

10.3 The Committee noted a provisional list of additional funding requests of £5.5m for new work in the directorates and a planning assumption of a £9.6m requirement which would fund a pay award of 2% in 2023/24.

10.4 The Committee raised concerns that NES continue to rely on non-recurrent funding. A query was raised regarding the inflation expectation and if these are realistic. Jim Boyle agreed that they latest figures show slight reductions, and this will be monitored closely.

10.5 Discussion took place regarding the recycling of less than full time places and vacancies within Medical Training Grades and whether there have been any discussions with Scottish Government (SG) regarding this in relation to best value, given that this often results in Boards being required to fill gaps with locum support. Jim Boyle explained that this is a cyclical issue discussed by the Directors of Finance and NES do not have the capacity to cover the gaps, this would need to be addressed by SG.

10.6 The Committee noted that the Board will receive an updated report at the 16 February 2023 Board meeting, and a further report will be presented to the Board on 23 March 2023, seeking approval for the budget for 2023/24.

10.7 The Committee were content with the information in this report and noted that further iterations will occur before it is presented to the Board in February.

**11. Corporate Governance Package - Board Standing Orders, Standing Financial Instructions, Board Scheme of Delegation, Board Code of Conduct & Committee Terms of Reference** (NES/AR/23/08)

11.1 The Chair invited Della Thomas to introduce the Corporate Governance Package for Annual Review and due for submission to the Board for final approval on 16 February 2023.

- Della Thomas informed the Committee that this is the second year that we have prepared the documents as a complete Corporate Governance Package. She highlighted that the Committee were being asked to take a strategic overview of the whole package and approve the amendments, particularly to the Board Standing Orders; Standing Financial Instructions (SFIs) and the Board Scheme of Delegation. The Corporate Governance Package includes the following documents:
- Board Standing Orders
- Standing Financial Instructions (SFIs)
- Board Scheme of Delegation
- Board Code of Conduct (Website hyperlink) no changes recommended
- ARC Terms of Reference (ToRs)
- Education and Quality Committee (EQC) ToRs
- Technology and Information Committee (TIC) ToRs
- Remuneration Committee ToRs
- Staff Governance Committee (SGC) ToRs

11.2 The Committee noted that Committee Terms of Reference (ToRs) have been approved by each of the Standing Committees. A query was raised regarding why the NHS Scotland Academy (NHSSA) ToRs were not included in the package. Della Thomas informed the Committee that following discussion between the NES and NHS Golden Jubilee (NHSGJ) Board Chairs and Chief Executives, they concluded that as the work of the NHSSA is now much more developed, and the relationships between NES and NHSGJ well established, the original governance structure was disproportionate. Therefore, the NHS Scotland Academy Joint Strategic Programme Board is in the process of being dissolved. She added that this has been through the NES Education and Quality Committee and will come through the NES Board in February for final approval. It is also being taken through the NHSGJ governance meetings.

11.3 Jim Boyle informed the Committee that the Standing Financial Instructions (SFIs) and Scheme of Delegation (SoD) have been amended to clarify the financial delegation limits and thanked colleagues for their work in bringing the complete Governance Package together.

11.4 The Committee reviewed and approved the corporate governance package for onward progression to the 16 February 2023 Board for final approval.

## **12. Standing Committee Annual Self-Assessment of Effectiveness**

(NES/AR/23/09)

- 12.1 The Chair invited Della Thomas to introduce the paper to update the Committee regarding the proposed introduction of Standing Committee Annual Self-Assessment.
- 12.2 Della Thomas highlighted the steer from the NES Executive Team to ensure we were not duplicating effort between the Self-Assessment questions and the existing very comprehensive Committee Annual Reports and drew the Committees attention to the proposed Self-Assessment questions in the Appendix with the many duplicated questions highlighted. She remarked that she was in the process of benchmarking Annual Reports and Committee Self-Assessment processes with other NHS Boards. She also invited the Committee to note that most of the NES Committees have an ongoing process for self-assessing meeting effectiveness at the end of each meeting and suggested that this could be amended to “Committee Effectiveness” and standardised to incorporate the questions included in the proposed Self-Assessment.
- 12.3 Through discussion the Committee noted that there was an intention for the Corporate Governance Blueprint Group to develop Self-Assessment questions for the NHS Board's to use. It was decided that with this and the level of duplication in mind it would be appropriate to wait for this piece of work to conclude before implementing any NES Standing Committee Annual Self-Assessment.
- 12.4 The Committee agreed:
- all Standing Committee agendas should include an item at the end of the meeting to reflect on “Committee Effectiveness” in an on-going way
  - to await the review of the NHS Board Self-Assessment process currently under development at a national level as part of the Blueprint work
  - to continue with the existing comprehensive Committee Annual Reports, which already include many aspects of the proposed Self-Assessment questionnaire
  - the ARC will continue with their own Self-assessment of Committee effectiveness, as this is a requirement as part of the Audit Handbook.
- 12.5 This will be communicated to the Standing Committee Chairs and executive/director leads.

**Action DT**

## **13. ARC 2023/24 Schedule of Business**

(NES/AR/23/10)

- 13.1 The Chair invited Della Thomas to present the 2023/24 draft Schedule of Business (SoB) for Committee review and approval.
- 13.2 Della Thomas explained that the SoB is aligned to the ARC Terms of Reference (ToRs), which were approved at the October 2022 ARC meeting. The Committee noted this now includes quarterly reporting in relation to Climate emergency and sustainability to reflect the expanded Committee remit.

13.3 The Committee reviewed and approved the ARC SoB following agreed minor amendment to remove the External Audit ITARA item, which related to the previous External Auditors, Grant Thornton.

#### **14. Draft Strategy, draft KPIs and Board Assurance Framework Update**

14.1 The Chair invited Jim Boyle to provide a verbal update regarding progress of the draft NES Strategy, Key Performance Indicators (KPIs) and Board Assurance Framework.

14.2 Jim Boyle informed the Committee that the Executive would be reviewing the draft Strategy, KPI and Assurance Framework in the coming weeks and will be submitted to the Board for initial discussion at the Board Development Session on 20 February 2023 and on to the Public Board for approval on in March 2023.

14.3 Della Thomas added that risk appetite and the strategic risk will be brought through the ARC via correspondence before submission to the Board in March.

14.4 The Committee noted the update regarding progress on the NES Strategy, KPIs and Board Assurance Framework.

#### **15. Risk**

##### **a) Process for annual identification of strategic risk and setting of risk appetite**

15.1 The Chair invited Jim Boyle to provide a verbal update regarding the process for annual identification of strategic risk and setting of risk appetite.

15.2 The Committee noted that a revised set of strategic risks will be submitted to the Executive Team in February for onward discussion at the Board Development session on 20 February 2023 and approval at the March 2023 Board.

##### **b) Corporate Risk Update** (NES/AR/23/11)

15.3 The Chair invited Jim Boyle to introduce NES Corporate Risk Register as of January 2023.

15.4 The Committee noted that there have been no significant updates to the mitigations within the Corporate Risk Register since the NES Board last considered the Corporate Risk Register at its meeting on 24 November 2022.

15.5 It was suggested that risk 18 looks as though it could be reviewed as business as usual, and Jim Boyle agreed to raise this for discussion with the Executive Team. **Action: JB**

15.6 The Committee noted the updated risk register.

## **16. Climate Emergency & Sustainability**

- 16.1 The Chair invited Jim Boyle to provide a verbal update regarding climate emergency and sustainability.
- 16.2 Jim Boyle informed the Committee that Scottish Government (SG) have recently provided feedback on the NES climate change duty and annual climate change report, which was approved by the NES Board at the November 2022 meeting.
- 16.3 The Committee noted that all Boards have been asked to consider carbon emissions by staff commuting, however NES does not hold data on this at present. Jim Boyle informed the Committee that NES will be supporting the initiative to reduce carbon emissions via development of education and training.
- 16.4 The Committee noted the verbal update regarding climate emergency and sustainability and that from the new financial year onwards written reports will be submitted to the ARC meetings.

## **17. Review of Meeting Effectiveness**

- 17.1 The Chair invited the Committee to provide feedback regarding the effectiveness of the meeting.
- 17.2 It was agreed that more time should be given to discuss future Internal Audit reports. The Committee noted that the papers were of a high quality, and this facilitated the governance decision making. They particularly remarked on the cover paper for the corporate governance package as this provided a comprehensive overview in summary format of the changes made and the governance route the papers had taken. The Committee were content that a verbal update was provided in relation to Climate Change on this occasion and that future reports will be as a short paper. As an external observer the Committee invited Thomas Lamont to offer any observations. Thomas Lamont commented on how the indicative timed agenda was a useful approach and the standard cover paper using the SBAR very helpful in providing concise reports. Karen Reid remarked that the training on “writing excellent corporate papers” that supports the use of the SBAR format has been well received.

## **18. Audit Scotland Reports**

- 18.1 The Committee noted the following Audit Scotland Reports:
- Why best value matters now, more than ever
  - Scotland’s Public Finances: Challenges and Risks
  - Environment, Sustainability and Biodiversity Annual Report 2021/22
  - Auditing Climate Change



## **19. Date and time of next meeting**

19.1 The next meeting of the Audit and Risk Committee will be held on Thursday 27 April 2023 at the new start time of 09:30.

NES  
February 2023  
JA/DT

## **Approved Minute**

**NHS Education for Scotland**

**NES/SGC/23/19**

### **Minutes of the Seventy-ninth Meeting of the Staff Governance Committee held on Thursday 2<sup>nd</sup> February 2023 via Microsoft Teams**

**Present:** Anne Currie, Committee Chair, Non-Executive Director, Equality, Diversity, and Human Rights Champion  
Jean Ford, Non-Executive Director  
Lynnette Grieve, Non-Executive Director and Employee Director  
Gillian Mawdsley, Non-Executive Director, Whistleblowing Champion and Climate Emergency and Sustainability Champion  
James McCann, Ex-Officio member, Staff Side (Unison)

**In attendance:** Tracey Ashworth-Davies, Deputy Chief Executive (Corporate)/ Workforce Director  
Ameet Bellad, Senior Specialist Lead, Workforce (For items 13 - 15)  
Christina Bichan, Director of Performance and Planning (Observer and for item 11)  
Stuart Caulfield, Specialist Lead, Education and Management Development (For item 14)  
Chris Duffy, Senior Admin Officer / Committee Secretary (Minute-Taker)  
Nancy El-Farargy, Manager, Planning and Corporate Resources (For item 11)  
David Garbutt, Board Chair  
Janice Gibson, Associate Director, Organisational Development, Leadership and Learning (ODLL) (For item 14)  
Katy Hetherington, Principal Lead, Equality, Diversity and Human Rights (For item 13)  
Patricia Matheson, Associate Director HR/Workforce  
Della Thomas, Board Secretary and Principal Lead (Corporate Governance)

<b>1.</b>	<b>Chair's welcome and introduction</b>
1.1	The Committee Chair welcomed all to the meeting and highlighted that all papers would be taken as read.
<b>2.</b>	<b>Apologies for absence</b>
2.1	Apologies were received from Karen Reid, Chief Executive.
<b>3.</b>	<b>Notification of any other business</b>

3.1	There was no notification of any other business.
<b>4.</b>	<b>Declaration of interests</b>
4.1	As per the new Model Code of Conduct, the Committee Chair asked Committee members if there were any declarations of interest in relation to the business of today's meeting and if so, to clarify which item.
4.2	There were no declarations of interest.
<b>5.</b>	<b>Draft minutes of the Staff Governance Committee meeting held on 3<sup>rd</sup> November 2022</b>
5.1	The Committee Chair asked members if there were any comments or amendments in relation to the draft minutes of the last meeting. Tracey Ashworth-Davies highlighted that the last word in paragraph 7.4 should be "working".
5.2	With this one small amendment, the Committee confirmed the minutes were an accurate record of the meeting and approved the minutes.
<b>6.</b>	<b>Action Status Report and other matters arising</b>
6.1	The Committee discussed the action relating to the ratification of an ex-officio member. There has been confirmation from the British Medical Association (BMA) that a different person has been identified to become the BMA member of the Partnership Forum and to be nominated as an ex-officio member of the Staff Governance Committee (SGC). Communication will come back out to the Staff Governance Committee to request approval of this new individual. The Committee noted that they are pleased this is working towards getting the appropriate person in place.
6.2	The Committee approved the action status report.
6.3	There were no matters arising.
<b>7.</b>	<b>Director of Workforce Report</b>
7.1	The Committee Chair invited Tracey Ashworth-Davies to introduce the Director of Workforce Report.
7.2	Tracey Ashworth-Davies introduced the report and highlighted the following key topics to the Committee: strengthening the mechanisms to manage corporate change, a new line manager network, the review of recruitment processes, lead employer preparation for the August 2023 intake including trialling Home Office bulk updates, the proposal to develop a new informal joint consultative forum and widening access work.

7.3	The Committee Chair thanked Tracey Ashworth-Davies for the report and opened up the meeting for questions.
7.4	The Committee asked if the Strategic Workforce Plan could be outlined a little more. Tracey Ashworth-Davies did so, confirming that the plan had been brought through the Staff Governance Committee before it was submitted to Scottish Government. A new group is being set up to ensure the implementation of the plan.
7.5	The Committee asked for more information on the unspent workforce development fund which is currently sitting at £71k. Tracey Ashworth-Davies outlined that directorates were asked to align the budget in their areas with priorities in the Workforce Plan. Some directorates have asked for additional funding and some have required less than the budget allocated. In some cases, the budget has not been possible to spend before 31 March 2023 eg if courses are unavailable or cannot be completed. Overall, a 50k underspend is estimated by financial year end.
7.6	In relation to properties and the space required for training, the Committee asked how we are maximising and understanding training space requirements within our own properties? There have been recent discussions at Executive Team to clarify the expectation that NES training is delivered within NES properties or public sector buildings. A small group has been formed to project what space will be required for training in the future, staff space requirements and property footprint. It was also noted that during COVID-19, lots of information was gathered from individual directorates on space requirements and will be used to inform this work as appropriate.
7.7	The Committee asked if further detail could be provided on succession planning and talent management. Tracey Ashworth-Davies said that work planned on NES senior succession planning and talent management had been paused some months ago given that work of a similar nature was proceeding on a national basis, led by Scottish Government and supported by the Leading to Change team. However, dependent on the likely timeframe for the national work, a proposal to progress work within NES would be considered by the NES Executive Team within the context of the NES Workforce Plan, under the need for good governance. This proposal would take into consideration the national work in progress, including the mechanisms and resources being developed, and seek alignment.
7.8	Tracey Ashworth-Davies informed the Committee that the NHS Scotland Management Training Scheme report is now available and asked for it to be circulated to members. <b>Action: Ann Gallacher</b>
7.9	The Committee pointed out that the acronym used for the Military Access Programme (MAP) may be confusing as that acronym is already used for medical associate professionals. Janice Gibson acknowledged this issue and assured the Committee that this programme of work will be moving to the acronym SAFE – Supporting Armed Forces Employment.

7.10	Committee members thanked Tracey Ashworth-Davies and the NES team for the excellent work completed on Line Managers, Youth Academy and widening access. Members approved this very good report and confirmed that it provided assurance.
<b>8.</b>	<b>2023-2024 Draft Committee Schedule of Business</b>
8.1	Della Thomas introduced this item which is based on the revised SGC Terms of Reference (ToR) and any amendments requested by the Committee to the previous year's Schedule of Business (SoB). She asked the Committee to note that the reference to the Audit and Risk Committee in the cover paper was an error and confirmed that the Committee were presented with the SGC SoB. The Committee were asked to review and approve the schedule.
8.2	The Committee Chair thanked everyone involved for their work on this paper and the Committee approved the schedule of business.
<b>9.</b>	<b>Workforce Planning KPMG Internal Audit - Progress Update Report</b>
9.1	Patricia Matheson provided the Committee with an update on the improvements identified by the workforce planning audit. Two of the improvements identified are already complete. These were, 'Directorate workforce planning documents do not fully follow the Six Step Methodology (SSM) and can be improved to increase efficiency' and 'There is insufficient detailed training over the SSM'.
9.2	The remaining priority is 'Workforce planning roles and responsibilities are not formally defined in a widely accessible document'. A roles and responsibilities document is appended to the Strategic Workforce Plan and has since been shared on the Workforce Planning intranet page which is accessible to all employees within NES. The auditors are in receipt of supporting documentation to evidence the completion of this priority. NES await auditor confirmation of approval.
9.3	The Committee Chair thanked Patricia Matheson for the update and the update was noted by the Committee. There will now be an action to update the internal auditor on the status of the actions. <b>Action: Patricia Matheson/Fiona Glenesk</b>
<b>10.</b>	<b>Revised NES Partnership Agreement and Partnership Forum Terms of Reference (ToRs)</b>
10.1	The Committee Chair invited Della Thomas to make some opening remarks. Della Thomas informed the Committee that the Partnership Agreement (PA) and the PF ToRs have recently been revised and approved by the PF and will be reviewed on an annual basis, going forward. The PF agreed that the PA will require further socialisation and some of the underpinning aspects of

	partnership work are currently being developed, one of these being the Joint Consultative Forum (JCF).
10.2	The Committee Chair invited any further remarks from Lynnette Grieve who confirmed that the PA does require some socialisation. She highlighted the aim to further strengthen informal partnership working through the development of the JCF. Patricia Matheson added, the JCF is being created to respond to the changing needs of the organisation. It offers a forum to talk about organisational change matters at an operational level, strengthens engagement with partnership colleagues and facilitates conversations with trade unions and professional bodies.
10.3	The Committee asked if the creation of the JCF is consistent with the approach taken in other NHS boards and if all unions are represented at the Partnership Forum. Patricia Matheson responded, noting that other NHS boards do have similar arrangements to those being considered for NES, in that the PF was supported by other agreed mechanisms. She and Lynnette Grieve confirmed that all unions are invited to attend the Partnership Forum. She said that at Partnership Forum, discussions on organisational change would be at a strategic level, whilst the JCF would allow for more detail into specific organisational change projects to be discussed at an operational level. The revised arrangements would improve consistency and timeliness of discussions with trades unions and professional bodies, strengthening partnership working both in terms of organisational change and more broadly.
10.4	<p>The Committee discussed the potential duplication between the role of the PF and the new JCF and noted that a meeting of the JCF was scheduled to take place quite soon.</p> <p>It was confirmed that the JCF would be formed as a subgroup of the PF and would not duplicate or take decisions that are within the remit of the PF.</p> <p>In order to be provided with satisfactory assurance, of the full picture, the Committee asked to see how the Partnership Agreement, Partnership Forum ToRs and the JCF ToRs align and asked if this could be progressed by correspondence. <b>Action: Patricia Matheson</b></p> <p>It was noted that the JCF will become a sub-group of the Partnership Forum and so the ToRs for this Forum should go through PF first.</p>
10.5	The Committee Chair acknowledged the work on the revisions of the NES PA, PF ToRs and the PF membership and thanked everyone involved.
<b>11.</b>	<b>Quarter 3 Whistleblowing Report</b>
11.1	Christina Bichan introduced this report and highlighted that NES had received no whistleblowing concerns during quarter 3. The report included updates on current whistleblowing training figures, 'speak up week', all staff

	video communications, intelligence from the all-staff survey and an update from the NES Whistleblowing Steering Group.
11.2	The Committee were invited to ask any questions on the report. The Committee asked what more could be done to help staff complete the mandatory whistleblowing training. It was noted that targeted emails throughout December raised awareness and there was an option to repeat this again. Christina Bichan noted that the Essential Learning paper (item 14) prompted a good discussion at Executive Team and the range of activity required around Essential Learning. Whistleblowing training will take a similar approach to that being applied to all mandatory training.
11.3	<p>The Committee noted that a previous whistleblowing group was in place prior to the current format of the NES Whistleblowing Steering Group. It was suggested that it is always worth emphasising the reputational risk on not completing essential training and that the Q3 whistleblowing update should go to the Board as part of the CEO report.</p> <p style="text-align: right;"><b>Action: Christina Bichan</b></p>
11.4	The Committee Chair thanked Christina Bichan and Nancy El-Faragy for their work on the report and the Committee noted the report and confirmed it provided assurance.
<b>12.</b>	<b>Non-Executive Whistleblowing Champion Remarks</b>
12.1	The Non-Executive Whistleblowing Champion confirmed the initiation of the Whistleblowing Steering Group provides an excellent forum, from a NES perspective, to allow the whistleblowing work and data to go forward. It is now 2 years since the implementation of a whistleblowing champion and the work to date has been very positive.
12.2	NES is one of several boards working with the Independent National Whistleblowing Officer. Whistleblowing champions must submit a regular update report and an annual report. The report is on track for submission before the deadline at the end of February. The work of Christina Bichan, Nancy El-Faragy and the team was commended.
<b>13.</b>	<b>Public Sector Duties: Two-year progress Report (April 2021-April 2023)</b>
13.1	<p>Katy Hetherington was welcomed to the meeting and asked to introduce the report. The report circulated contains Employee Equality Monitoring Information and Gender Pay Gap data. The Progress on Equality Outcomes and Mainstreaming against NES' Public Sector Equality Outcomes was noted as a paper to follow.</p> <p>Katy Hetherington was pleased to update that Audit Scotland will be producing a report on gender pay gap and NES has been identified as an example of good practice.</p>

13.2	The Committee were asked to note the three identified actions: improving collection of data; rolling out training to staff involved in recruitment and selection; analysis of NES staff using Turas by protected characteristic to understand equity in access to training.
13.3	The Committee congratulated the team for an outstanding report and commented that this was comprehensive, clear and articulate. The Committee approved the report and noted that the April 2021 – 2023 Public Sector Equality Duty Progress Report would be circulated by correspondence for approval prior to it being taken forward to the Board for final approval. <b>Action: Katy Hetherington</b>
<b>14.</b>	<b>NES Essential Learning Update Report</b>
14.1	Janice Gibson introduced the Essential Learning update report. She said that whilst focus was continuing to be applied by the Executive Team and ODLL, further progress on achieving updating was proving challenging. Some modules eg Safe Information Handling had been revised meaning that staff needed to renew their training and this was impacting overall compliance against the target. Email reminders sent out to staff appeared to have been successful to some degree in encouraging uptake. The next milestone was financial year end when a further quarter of reporting would be available.
14.2	This report has also been to the Executive Team. The Executive Team were supportive of this Committee's previous discussions on introducing a personal objective to complete mandatory training as part of the PDP process.
14.3	It was also noted that the new line manager network can be used to ensure communication of the need to manage essential learning compliance. Work is underway to support line managers on the management of change across the organisation.
14.4	Committee members were pleased to hear of the agreement to include essential learning within personal objectives.
14.5	The Committee approved the report, the target recommendation and noted that the Executive Team have committed to including essential learning as a personal objective.
14.6	The Committee Chair thanked Janice Gibson and her team for their work on this report. It was agreed that Janice Gibson would bring an Essential Learning update to the SGC meeting in May. <b>Action: Janice Gibson</b>
<b>15.</b>	<b>People and OD Dashboard</b>
15.1	Ameet Bellad introduced this report which provides assurance that the staff governance standard is being applied in NES. The report provides a quarterly update to the Committee on organisational performance in relation



	to the current agreed key performance indicators and insights based on the data.
15.2	The Committee had no questions on this paper, noted the update on the dashboard and organisational performance and the Committee Chair thanked Ameet Ballard for his work on the report.
<b>16.</b>	<b>Identification of any new risks raised at this meeting</b>
16.1	No new risks were identified. It was noted that the Committee were content with the mitigation strategy provided against essential learning.
<b>17.</b>	<b>Employment Tribunals</b>
17.1	The Committee asked if they could be briefed on the second case on this paper. Tracey Ashworth-Davies highlighted that there is learning from the case which is being actively implemented and progressed by Patricia Matheson.
17.2	The Committee noted the Employment Tribunals update.
<b>18</b>	<b>Policy/Scottish Government Director Letters as appropriate to Staff Governance Committee</b>
18.1	The DL log was noted.
<b>19</b>	<b>Redacted Remuneration Committee business via correspondence</b>
19.1	The Remuneration Committee business was noted.
<b>20</b>	<b>Change Management Programme Board minutes</b>
20.1	The Change Management Programme Board minutes were noted.
<b>21</b>	<b>Managing Health, Safety and Wellbeing Committee minutes</b>
21.1	The Managing Health, Safety and Wellbeing Committee minutes were noted.
<b>22</b>	<b>Partnership Forum minutes</b>
22.1	The Partnership Forum minutes were noted.
<b>23</b>	<b>Any other business</b>
23.1	The Committee asked what sort of support might be needed as NES develops work with the care sector and how this might impact the work of the Committee. Tracey Ashworth-Davies responded that this falls into the same category as the commissions received from Scottish Government and this will be managed through the corporate radar process. Christina Bichan

	<p>agreed to take this question into the strategy development group meeting next week and will explore how well our funding and infrastructure support the work we are being asked to do that is beyond current.</p> <p style="text-align: right;"><b>Action: Christina Bichan</b></p>
<b>24</b>	<b>Committee Effectiveness</b>
24.1	The Committee Chair asked, do reports to the Committee communicate relevant information at the right frequency, time, and in a format that is effective? Has the Committee benefited from the right level of attendance from Lead Executive or Directors/Authors/Board Secretary/Others? Are there any areas where the Committee could improve upon its current level of effectiveness?
24.2	Committee members confirmed that the quality of the papers had been excellent. They had been easy to read and the hyperlinks very helpful. The papers and the Committee process also facilitated an opportunity for the Committee to underline the importance of early and effective communication and to gain deeper and further assurance around one item.
<b>25</b>	<b>Date and time of next meeting</b>
25.1	The next meeting of the Staff Governance Committee will be held on Thursday 04 <sup>th</sup> May 2023, 10:15a.m.

CD/DT/TAD/AC

v.02

April 2023

## **EDUCATION & QUALITY COMMITTEE**

**Approved minutes of the tenth meeting of the Educational & Quality Committee (EQC) (which is the forty-ninth meeting of the Educational and Research Governance Committee) held on Wednesday 22 March 2022 via Microsoft Teams**

- Present:** Douglas Hutchens, Chair, Non-Executive Director  
Annie Gunner Logan, Non-Executive Director  
David Garbutt, Board Chair (Non-Executive Director member for this meeting)
- In Attendance:** Karen Wilson, Executive Director of Nursing, Deputy Chief Executive (Clinical) and EQC Executive Lead  
Lindsay Donaldson, Deputy Medical Director  
Clair Graham, Head of Programme, NHSSA  
Rob Coward, Principal Educator/Executive Secretary  
Alastair McLellan, Postgraduate Dean (For Items 7 and 10)  
Janice Gibson, Associate Director, ODLL (For Item 7)  
Lynne Meekison, Lead – Medical (For Item 12)  
Della Thomas, Board Secretary and Principal Lead for Corporate Governance  
Jill Kyle, Senior Admin Officer, Credit Rating Team (observing)  
Chris Duffy, Senior Admin Officer/Committee Secretary

### **1. Welcome and introductions**

- 1.1 The Committee Chair welcomed everyone to the meeting. He particularly welcomed Lindsay Donaldson, deputising for Emma Watson and Clair Graham, deputising for Kevin Kelman. The Chair also welcomed Jill Kyle who had recently joined NES and was observing the meeting as part of her induction. As Sandra Walker has now retired from the Board and the Education and Quality Committee, section 9.4 of the Board Standing Orders allows for us to adopt a temporary member for this meeting and David Garbutt kindly agreed to take on a membership role to enable this meeting to go ahead and be quorate.
- 1.2 It was clarified to Committee members and attendees that although Karen Wilson and Emma Watson are Co-Executive leads for the Committee, the overall Executive Lead responsibility lies with Karen Wilson.

### **2. Apologies for absence**

- 2.1 Apologies were received from Karen Reid, Chief Executive, Emma Watson, Executive Medical Director, Kevin Kelman, Director of Learning, Innovation and NHS Scotland Academy and Gordon Paterson, Director of Social Care

**3. Notification of any other business**

- 3.1 There were no notifications of any other business.

**4. Declarations of interest**

- 4.1 There were no declarations of interest in relation to the items of business on the agenda.

**5. Minutes of the meeting held on 8<sup>th</sup> December 2022**

- 5.1 The Committee accepted the minutes as an accurate record of the meeting and the minutes were approved.

**6. Action Status Report and other matters arising**

- 6.1 The action status report was presented, and it contained 5 completed actions with 5 actions in progress. The Committee asked what was delaying the action to circulate the Scottish Government Leadership Profile. Janice Gibson reported that the official release is anticipated in a Directors Letter which will give a directive approach to using the leadership success profile in recruitment and appraisal.
- 6.2 The Committee were content with the completed actions and the timescales of the in-progress actions.
- 6.3 The Committee approved the action report.

**7. Education & Quality Executive Lead Report**

- 7.1 Karen Wilson asked the Committee to take the report as read, and highlighted four areas of the report to Committee members, these were:
1. A congratulations to Sandra Ferguson (Associate Director and lead for the National Trauma Training Programme (NTTP)) for the trauma presentation to Scottish Cabinet.
  2. The Allied Health Professions (AHP) Careers Fellowship Scheme has recruited its fifth cohort of Fellows and Karen Wilson remarked that this is a great opportunity for AHPs and the wider health service in Scotland.
  3. The inclusion of a more comprehensive TURAS Learn report.
  4. NHS Scotland Academy work continues to increase and have positive impacts for the people of Scotland. The National Endoscopy Training Programme is a great example of this.

The Chair opened the meeting to members for questions.

- 7.2 The Committee noted that the Clinical Scientists' report highlighted a reputational risk for NES in relation to a major shortage of training posts for clinical scientists in prospect for 2023 and they recognised that recent information about the number of clinical scientist supernumerary trainees in prospect for the 2023 intake had led to some misunderstanding about the funding position of NES and our ambitions for this workforce. The Committees asked if there are any other risks? Karen Wilson confirmed that the Chief Executive has been involved in discussions to clarify the position. Currently 132 trainees are being trained but a funding saturation point has

been reached. Conversations are ongoing with Territorial Boards to see if they can support funding alongside NES and there is also work being taken forward by the NHS Scotland Academy to help trainees reach completion more quickly.

- 7.3 The Committee noted that the report highlighted that Healthcare Science Training materials was not easily discoverable on the TURAS Learn System and asked how this was being addressed. Karen Wilson confirmed that the resources have been made more visible and are now easier to access.
- 7.4 The Committee moved on to the Enhanced Monitoring update and the Chair invited Alastair McLellan to provide any key points in relation to the report. Alastair McLellan confirmed that since the report was written two cases have been de-escalated from Enhanced Monitoring (Mental Health, Tayside and General Medicine, Inverclyde Royal). The Committee asked if the implementation of the improved approach was a reason for these de-escalations. Alastair McLellan confirmed that the most tangible experience of the support is the SMART objective setting process. It allows collaborative conversation and enables all partners to understand what has led to the problems, whilst identifying what additional help is required. Lindsay Donaldson agreed, noting the change in dynamic and the bringing of the various strengths together.
- 7.5 The Committee went on to ask if the use of these SMART approaches are being used with the cases that have been on enhanced monitoring for a significant lengthy period. Alastair McLellan confirmed the use of SMART objective setting is being used with all Enhanced Monitoring sites. He remarked that it would have been better to use this at the beginning of the process, but it is being retrospectively introduced for the longer standing cases quite successfully.
- 7.6 The Committee noted the Lead Executive Report and confirmed that it provided satisfactory assurance and thanked all who contributed to it.

## **8. Annual report on externally regulated programmes**

- 8.1 Rob Coward introduced this report which invited Committee members to consider the information summarising NES's education provision that is subject to external regulation and scrutiny.
- 8.2 The Committee noted that we are the first Dental Deanery in the UK to meet all the requirements of the external regular and commended this work.
- 8.3 The Committee also noted that there was no external regulation/scrutiny of the NHS Scotland Academy and asked what risks this presented. Karen Wilson confirmed that the internal governance processes are in place for all the individual programmes. Clair Graham explained that NHS Scotland Academy programmes go through a rigorous design process, and once approved past the initiation phases they then go through educational governance scrutiny in NES. Part of the review contains external panel members with education specific expertise. All programmes have internal

moderation and rigorous quality assurance. The Committee asked if NES were to become a credit rating body would this extend to the NHS Scotland Academy and it was confirmed that it would.

8.4 The Committee noted the report.

**9. Scottish Foundation School**

9.1 Lindsay Donaldson introduced this item provided to assure the Committee that steps were being taken to work collaboratively with Boards to improve training for foundation trainees and address the low ranking of the foundation programme in Scotland as noted in the 2022 GMC trainee survey.

9.2 The Committee thanked Lindsay Donaldson for the report. Through discussion the Committee concluded that currently the report provided broad ambitions but did not offer enough assurance in relation to the steps that would be taken to improve and address the low ranking. It was agreed that a structured action plan including outcomes and measurements would be brought to the May meeting. It was also agreed that a draft plan could be shared with members via correspondence for comment before the meeting, if this would be helpful.

**Action: Lindsay Donaldson**

9.3 The Committee noted the update, were content with the direction of travel and are looking forward to seeing a more detailed action plan at the next meeting for assurance.

**10. Medicine Annual Deanery Quality Report 2021/22**

10.1 Alastair McLellan introduced this report which provided a comprehensive overview of the work of the Specialty Quality Management Groups during the 2021/22 training year. Alastair McLellan drew the Committee's attention to page 15 of the report and the GMC Annual Quality Assurance Summary, this has been distilled into four bullet points and provides evidence that NES are meeting the GMC standards. The Chair opened up the meeting for questions.

10.2 The Committee noted that 200 doctors had delayed completing their training and asked if this was a larger number than usual. Alastair McLellan replied, it is a large number and over recent years this number has increased. He remarked that this is particularly because of the COVID-19 impact but also because of the increasing number of trainees extending their training by moving from full time to part time. These factors result in the original Certificate of Completion of Training (CCT) date changing. Alastair McLellan concluded that it is a higher than expected number, but not significantly disproportionate.

10.3 The Committee asked if the data can be provided year on year so we can note progress and trends. Alastair McLellan remarked that the data was a complex matrix but it could be possible to drill down to find areas of strength.

- 10.4 The Committee referred to the Michael West review which pointed out that hygiene factors could make a big difference to trainee satisfaction. Lindsay Donaldson confirmed that the Scottish Junior Doctor Council meetings are highlighting the same things. The biggest barrier in providing these are finding the appropriate space in buildings, local will and implementation. There are a number of things being trialled, for example rest pods in Fife for all health practitioners. This was proving to be very constructive and well received.
- 10.5 The Committee concluded that there may be ways to improve the format and data provided within the report and asked if there were future plans to develop the report. Lindsay Donaldson confirmed that ongoing discussions were taking place and that the format of the report is different this year and it is transitioning into a new style. The Committee suggested further commitment from Boards might be helpful and the Taskforce for Improving the Quality of Medical Education (TIQME) was recognised as a good forum for engaging the Boards.

Karen Wilson agreed to bring an update to Committee on the plans for the Annual Quality Report for next year. **Action: Karen Wilson**

- 10.6 The Committee noted the report and thanked medical colleagues for all the work that went into producing the report.

## **11. Specialist and Associate Specialist (SAS) Doctors and Dentists Development Paper**

- 11.1 Lynne Meekison joined the meeting and introduced this item. She remarked that the paper acknowledges the ongoing challenges for SAS doctors and dentists in Scotland and considers options for further support for SAS in Scotland.
- 11.2 The Committee noted that SAS posts really make a fundamental difference to how the service moves forward and asked if significant resources are being sought. Lynne Meekison highlighted that access to trainee wellbeing services should not be a significantly large resource, but Educational/Clinical Supervisor support would be a major undertaking.
- 11.3 The Committee noted the high levels of bullying/harassment/undermining of this group and asked if the further training of Board staff groups was enough? Lynne Meekison replied that training has been a key aim over the last year, active bystander training is now online in all different Boards. The bullying/harassment survey took 8 months to be approved and was launched a week before Christmas. There have been sessions on whistleblowing and support has been provided to any individuals who have been in contact.
- 11.4 The Committee were content to approve the direction of travel outlined in the paper and commented that they felt the individual interventions presented were operational decisions to be taken forward by senior managers.

**12. Education and Quality Committee Schedule of Business 2023/24**

12.1 Della Thomas introduced this item for Committee review and approval. She highlighted that once approved, the schedule will be used as the basis for preparing agendas for the next financial year.

12.2 The Committee discussed the suggestion of holding deep dive sessions in between meetings. It was recognised that this suggestion would add additional meetings to the schedule, and this would have implications for members and executives. It was suggested that the opportunity to include deep dives within forthcoming Board Development meetings could be explored.

12.3 The Committee approved the Schedule of Business.

**13. Identification of any key risks emerging from this meeting**

13.1 The Committee confirmed that there is a risk in relation to the foundation school. It was confirmed that this is already on the corporate risk register.

**14. Consultations Log and Parliamentary business update**

14.1 The consultations log was noted.

**15. Scottish Government and NES Educational policies**

15.1 There is no policy to report at this meeting.

**16. Committee Effectiveness**

- 16.1
- Do reports to the Committee communicate relevant information at the right frequency, time, and in a format that is effective? It was agreed that the papers assisted governance and scrutiny. The Committee asked that the Scottish Foundation School paper return to the May 2023 meeting with additional detail.
  - Has the Committee benefited from the right level of attendance from Lead Executive or Directors/Authors/Board Secretary/Others? Yes, Lindsay Donaldson (Deputy Medical Director) deputised for Emma Watson (Executive Medical Director) and Clair Graham (Head of Programme) deputised for Kevin Kelman (Director of Learning, Innovation and NHS Scotland Academy).

Are there any areas where the Committee could improve upon its current level of effectiveness? The Committee didn't highlight any areas for improvement of effectiveness at this meeting.

**17. Any other business**

17.1 The Committee raised the review of Artificial Intelligence in support of education as this cannot be overlooked as a mainstream issue for the future. Karen Wilson confirmed conversations are taking place across directorates in NES and with Health Education England (HEE). Clair Graham also confirmed the NHS Scotland Academy are very aware of this area for development and inclusion.



**18. Date and time of next meeting**

- 18.1 The next meeting of the Education and Quality Committee will be held on Thursday 11 May 2023, 10:15 a.m.

CD/DT/DH/KW

April 2023

V.03