

AGENDA FOR THE ONE HUNDRED AND SEVENTY EIGHTH BOARD MEETING

Date: Thursday 8 February 2024

Time: 10:15 – 12:50

Venue: Hybrid meeting: MS Teams / Room 3, 102 West Port, Edinburgh, EH3 9DN

1.	10:15	Chair's introductory remarks	
2.	10:16	Apologies for absence	
3.	10:17	Declarations of interest	
4.	10:18	Draft Minutes of the One Hundred and Seventy Seventh Board Meeting 23 November 2023 For Approval	NES/24/02
5.	10:20	Matters arising from the Minutes and notification of Any Other Business	
6.	10:21	Actions from previous Board Meetings For Review and Approval	NES/24/03
7.		Chair and Chief Executive reports	
	10:25	a. Chair's Report For Information and Assurance	NES/24/04
	10:35	b. Chief Executive's Report For Review and Assurance	NES/24/05
8.		Strategic Items	
	11:05	a. Draft NES Learning and Education Strategy For Review and Approval (R. Reed and K. Kelman)	NES/24/06
9.		Performance Items	
	11:15	a. Quarter 3 Financial Report For Review and Approval (J. Boyle)	NES/24/07

	11:30	b. Q3 Strategic Risk Update and NES Scoring Definitions and Matrix Proposal For Review and Approval (J. Boyle / D. Lewsley)	NES/24/08
	11:45	Comfort Break	
		Quarter 3 Performance Management Reports:	
	12:00	c. Quarter 3 Key Performance Indicator (KPI) Report For Review and Approval (C. Bichan)	NES/24/09
	12:10	d. Quarter 3 Delivery Report For Review and Approval (C. Bichan)	NES/24/10
10.	12:20	Annual Item a. Counter Fraud Strategy For Review and Approval (L. Howard)	NES/24/11
11		Governance Items	
	12:25	a. Corporate Governance Package - Board Standing Orders, Board Code of Conduct, Board Scheme of Delegation, Board Standing Financial Instructions & Committee Terms of Reference For Review and Approval (D. Thomas and L. Howard)	NES/24/12
	12:35	b. NES Policy for controlled documents For Review and Approval (N. El-Faragy and C. Bichan)	NES/24/13
		c. Significant issues to report from Standing Committees:	
	12:40	i. Education and Quality Committee 7 December 2023 (A. Gunner Logan, verbal update)	
	12:43	ii. Audit and Risk Committee 18 January 2024 (J. Ford, verbal update)	
12.		Items for Homologation or Noting	
	12:46	a. Staff Governance Committee Chair and Remuneration Committee Member For Homologation (D. Garbutt, verbal item)	
	12:47	b. Non-Executive Director Equality, Diversity and Human Rights Champion For Homologation (D. Garbutt, verbal item)	
	12:48	c. NES Standing Committee Minutes: i. Education and Quality Committee, 14 September 2023	NES/24/14

		ii. Audit and Risk Committee, 5 October 2023 For Homologation	NES/24/15
13.	12:49	Any Other Business	
14.	12:50	Date and Time of Next Meetings: <ul style="list-style-type: none"> • Private Board: 28 February 2024 (TEAMS Meeting) • Public Board: 28 March 2024 at 10.15 (Hybrid Meeting) • Private Board: 28 March 2024 follows on from Public Board (Hybrid Meeting) 	
		NHS Education for Scotland (NES) e-mail: Chair & Chief Executive's Office ceo.nes@nes.scot.nhs.uk	

NHS Education for Scotland

DRAFT MINUTES OF THE ONE HUNDRED AND SEVENTY-SEVENTH BOARD MEETING HELD ON 23 NOVEMBER 2023, 10:15 – 12:50

*** This public Board meeting was held in hybrid format via Microsoft Teams and in-person at the NES office at 102 Westport, Edinburgh.***

Present:

David Garbutt (DG), (Chair)
Ally Boyle (AB), Non-Executive Director
Jim Boyle (JB), Executive Director of Finance
Olga Clayton (OC), Non-Executive Director
Shona Cowan (SC), Non-Executive Director
Anne Currie (AC), Non-Executive Director
Jean Ford (JF), Non-Executive Director
Lynnette Grieve (LG), Non-Executive Director / Employee Director
Annie Gunner Logan (AGL), Non-Executive Director / Vice Chair
Nigel Henderson (NH), Non-Executive Director
Gillian Mawdsley (GM), Non-Executive Director / Whistleblowing Champion
Karen Reid (KR), Chief Executive & Accountable Officer
Emma Watson (EW), Executive Medical Director
Karen Wilson (KW), Executive Director of Nursing / Deputy Chief Executive (Clinical)

In attendance

Tracey Ashworth-Davies (TAD), Director of Workforce / Deputy Chief Executive
Gillian Barmack (GB), Scottish Clinical Leadership Fellow (to observe)
Christina Bichan (CBi), Director of Planning and Performance
Lindsay Donaldson (LD), Deputy Medical Director
Christopher Duffy (CD), Senior (Admin) Officer, (Minute Taker)
David Felix (DF), Postgraduate Dental Dean/Director of Dentistry
Nick Hay (NH), Public Affairs Manager (to observe)
Katy Hetherington (KH), Equality and Diversity Lead (For item 9c)
Gareth Hill (GH), Associate Director, Nursing, Midwifery and Allied Health Professionals (NMAHP) (to observe)
Laura Howard (LH), Deputy Finance Director (to observe)
Debbie Lewsley (DL), Risk Manager, Planning and Corporate Governance (For item 10b)
John MacEachen (JMacE), Head of Corporate Communications
Cara MacKenzie (CMcK), Scottish Clinical Leadership Fellow (to observe)
Claire Neary (CN), Manager, Communications (to observe)
Kirsty O'Hara (KO), Scottish Clinical Leadership Fellow (to observe)
Gordon Paterson (GP), Director of Social Care
Maria Pollard (MP), Associate Director, NMAHP (to observe)
Alison Shiell (AS), Manager, Planning and Corporate Resources (For items 8a and 10d)
Andrew Sturrock (AS), Director of Pharmacy
Della Thomas (DT), Board Secretary / Principal Lead Corporate Governance
Judy Thomson (JT), Director of Training for Psychology Service
Simon Williams (SW), Principal Educator, Planning and Corporate Resources (For item 10c)

1. Chair's Introductory Remarks

- 1.1 The Chair welcomed everyone to the meeting. He particularly welcomed Maria Pollard, Gareth Hill, Gillian Barmack, Cara MacKenzie, and Kirsty O'Hara who were observing as part of their development or induction to NES. The Chair noted that Alison Shiell will join via TEAMS for items 8a and 10d, Katy Hetherington for item 9c, Debbie Lewsley for item 10b and Simon Williams for item 10c.
- 1.2 The Chair informed the Board that following discussion with the Chief Executive, the Draft Learning and Education Strategy had been removed from the Board agenda. This will allow the Education and Quality Committee to consider the stakeholder feedback in more detail and it is recommended that the Learning and Education Strategy is scheduled to the next Board meeting on 8 February 2024. **Action: DT**
- 1.3 The Chair congratulated Olga Clayton on her appointment as Interim Head of Housing and Construction Services, Dundee City Council.

2. Apologies for absence

- 2.1. There were no apologies for absence received from Board members.
- 2.2. Apologies for absence were received from the following regular Board meeting attendees: Colin Brown, Kevin Kelman and Christopher Wroath.

3. Declarations of interest

- 3.1. Gillian Mawdsley declared a connection in relation to item 4.7 in the Chief Executive Report, the strategic partnership with The Open University. Gillian Mawdsley advised that she works with the Open University. Secondly, there was a reference to the Scottish COVID-19 Inquiry and Gillian Mawdsley declared a connection, advising the Board that she has recently delivered a talk to the Mason Institute, University of Edinburgh.
- 3.2. There were no declarations of interest in relation to any of the items of business on the agenda for this Board meeting.

4. Draft Minutes of the One Hundred and Seventy-Sixth Board Meeting (NES/23/66) 28 September 2023

- 4.1. The Board reviewed the draft minutes and approved the 28 September 2023 Board minutes with no changes required.

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 was one item of other business in relation to Board membership that will be raised by the Chair.

6. Actions from previous Board Meetings (NES/23/67)

- 6.1. The Board received the rolling Board action list for review and agreement. The Board noted that five actions are now completed, and two actions are in-progress.
- 6.2. The two in-progress actions related to risk, and it was confirmed that the Executive Team are meeting on 7th December 2023 to review risk appetite, categorisation and risk heatmap. This will then be scheduled through 16 January 2024 Audit and Risk

Committee and onwards to 8 February 2024 Board.

6.3 The Action list was agreed.

7. Chair & Chief Executive Updates

a. Chair's Report (NES/23/68)

7.1. The Chair presented a paper outlining his recent meetings and activity since the 10 August 2023 Board meeting, in his roles as Chair of the NES Board and a member of the NHS Scotland (NHSS) Board Chairs Group (BCG).

7.2. The Chair reminded Board members to complete the recently issued Blueprint of good governance self-assessment survey. The results will be collated and used to assist discussion at the Board Blueprint self-assessment workshop scheduled for 19 January 2024.

7.3. The Chair invited questions from the Board. The Board asked if further information could be provided on the item relating to the BCG review of primary care. The Chair confirmed that due to time constraints at that particular BCG meeting, a future opportunity to re-engage with Scottish Government (SG) is being sought.

7.4. The Board then noted the report and the Chair moved onto the next item on the agenda.

b. Chief Executive's Report (NES/23/69)

7.4. The Chair invited Karen Reid to introduce this report.

7.5. Karen Reid highlighted the following items within the report for the Board's information:

- a. NES has recently signed two strategic collaboration agreements with the Digital Health and Care Innovation Centre (DHI) and the Open University in Scotland. Media statements have been agreed and will be jointly published along with planned social media activity.
- b. NES have been asked to develop an Anchors Strategic Plan as part of 2023-24 Annual Delivery Plan guidance received from SG. This is the first time that NES has considered its role as an Anchor institution in a formal context and has provided an opportunity to set out our intentions as an Anchor institution and demonstrate how our work as a learning organisation can improve outcomes for local communities and the environment, both through our direct activities and the work we do to support partner organisations. The Draft NES Anchors Strategic Plan will be considered under item eight on the agenda.
- c. Kevin Kelman and Ryan Reed were thanked for their work so far on the NES Learning and Education strategy. The Learning and Education Strategy is an enabling and underpinning strategy that flows directly from the commitments set out in the NES 2023-26 Corporate Strategy. The strategy sets out both how NES will deliver education and training across the health and social care workforce and the direction, principles and priorities that will guide our future approach to fulfil our overall purpose and vision. The strategy will come to the Board for approval in February 2024.
- d. Laura Howard was welcomed as Deputy Director of Finance; Calum Cassie was welcomed as Associate Postgraduate Dental Dean for Dental Vocational Training and Dr Thomas Lamont was welcomed as Associate Postgraduate Dental Dean for Dental Workforce Development.
- e. It was announced that Judy Thomson, Director of Training for Psychology Services has received an Award of Honorary Status – Honorary Professorship by the University of Edinburgh.

- f. It was announced that Kevin Kelman, Director of NHS Academy, Learning and Innovation has been appointed a visiting professor at the University of Strathclyde's Business School.

7.6. Karen Reid invited executive colleagues to highlight any other particular aspects for the Board's information:

- a. Emma Watson drew attention to the Quality Management section of the Medicine update. Development of SMART objectives and increased engagement between NES and Health Boards has resulted in a decrease (44 to 13) in the number of enhanced monitoring visits. Emma Watson highlighted that the improvements in medical education via co-production and collaboration have resulted in improved trainee satisfaction, experience, and improved patient care. The number of sites on enhanced monitoring has also decreased (14 to 5). The feedback from Boards is that they feel much more supported. The Board Chair congratulated Emma Watson and her team on this work and asked for more information on how these results were achieved. Emma Watson explained that it has been an evolution of practice with the Quality team becoming more comfortable and experienced in providing improvement support, in addition to their established monitoring and scrutiny role. She advised that the team focus on learner and educator needs, peer support and targeted interventions. The Board asked what the 94 letters of good practice referred to. Emma Watson explained that in the past success wasn't celebrated and the letters are evidence that now it is. Board members thanked Emma Watson and her team for the significant improvements that have been made.
- b. Karen Wilson highlighted workforce diversification. She advised that a programme has been established to take forward defined project groups / activities resulting from the NES Medical Associate Professions (MAPs) report and recommendations. NES and SG are co-leading this activity which aligns with wider strategic workforce reform / innovation led by SG. Karen Wilson also referred to a commission agreed with SG to work on exploring an expanded role for NES as an apprenticeship provider. This will involve initial exploratory work in the remainder of 2023-24, with full scoping of different options, and recommendations to the NES Board and SG being completed during 2024-25.

7.7. The Chair thanked Karen Reid for her introductory remarks and executive colleagues for their additional opening comments and opened the report for questions. During discussion, the following points were raised:

- a. The Board discussed the section on addressing sexual misconduct in healthcare and the initial work undertaken in this area. It was noted that the evidence suggests the misconduct is pervasive across all professions in the health workforce. The Board asked if any of the new evidence relates to Scotland specifically. Emma Watson reported that more detail in this area is scheduled to come to the Education and Quality Committee on the 7th of December 2023. She advised the Board that the data has been gathered through a British Medical Association (BMA) survey and the trainee development and wellbeing service. There is no evidence that Scotland is different to the general landscape. She remarked that NES will be taking a leading role in this space. The Board enquired if this would extend to nursing. Karen Wilson advised that she is working with Emma Watson to widen to all professions. Emma Watson added that work is underway with colleagues from a "scrubs advocacy group" who have experienced sexual misconduct. She advised the Board that a session has been held with Associate Postgraduate Deans on sexual misconduct and the team reflected on their own experience and committed to developing their own skills as allies. The Education and Quality Committee Chair noted that there will be a further discussion on this subject at the next Education and Quality Committee. Following this the Board will be updated as appropriate. The Board thanked

Emma Watson for the update and noted the excellent key leadership role NES was taking.

- b. The Board highlighted item 3.5b which referenced the development of a climate change and sustainability strategy. The Board asked what the estimated timescales were for the development of this strategy. Jim Boyle advised that the strategy is currently in development and will be scheduled through a Board Development meeting for discussion and be progressed through Audit and Risk Committee before coming to full Board for final approval. Scheduling dates will be confirmed with Della Thomas. **Action JB/DT**
- c. The Board referenced the COVID-19 Public Inquiry and welcomed observations on areas of support such as trauma training. Karen Reid noted that there is a responsibility on each Board to provide support for staff, NES are focussing on support to our own staff should they be called to give evidence.
- d. The Board highlighted the announcement of a review into Mental Health Nursing in order to attract, grow and support the workforce and asked if there was any further information available on this. Karen Wilson reported that the Scottish Executive Nursing Directors Group (SEND) has undertaken an extensive review of Mental Health Nursing which policy colleagues attended. She advised that there was a good discussion on aspects unique to Mental Health Nursing. She remarked that advanced practice and “earn as you learn” routes are being explored to encourage different people into this profession.
- e. The Board asked what efforts were being made to improve the whistleblowing for managers (essential learning module) completion rate. Tracey Ashworth-Davies remarked that, whilst the figures continue to increase, these are not yet at the level NES would wish to see. She advised that now we are at the mid-year review stage, every individual has a responsibility to complete their essential learning and there is a line manager focus to ensure their teams complete and this is also being emphasised by executives.
- f. The Board noted the collaboration with the Scottish Refugee Council and the group exploring Employment and Education Opportunities for Asylum Seekers and Refugees and asked if there is any more information available at this stage. Gordon Paterson updated the Board that he is leading the group and a number of wider discussions were ongoing with colleagues in SG. He advised that volunteering opportunities are being explored and work has started on baselining activities, identifying synergies, reducing duplication and the creation of an action plan.
- g. The Board highlighted International Registration for Pharmacists and asked if there is a shortage of pharmacists. Andrew Sturrock reported that there are challenges in the Pharmacy workforce and there is a need for additional pharmacists. He remarked that at present there is no route for international registration. He explained that the current route requires 12 months of university plus a 12-month placement. He advised the Board that NES continue to be involved in development of new standards and processes for internationally qualified pharmacists to be registered in the United Kingdom (UK).
- h. The Board noted the work on Turas Office365 single sign on and asked if there are plans to extend this to Social Care. Karen Reid reported that NES are in the process of exploring user requirements and this aspect has been raised. She advised that due to the current tight fiscal environment, there is no guaranteed funding for phase 2 at this present time.
- i. The Board highlighted the work of the Social Care Directorate in the development of a National Improvement Framework and asked if the Care Inspectorate has been involved. Gordon Paterson confirmed that they are involved.

7.8. The Chair thanked Karen Reid and the executive team for the report and the assurance it has provided, the Board then moved onto the next agenda item.

8. Strategic Items

- 8.1. The Chair invited Christina Bichan to introduce the draft Anchors Strategic Plan which was presented to the Board for review and approval. Christina Bichan remarked that the Board discussed the NES's draft Anchors Strategic Plan at the 26 October 2023 Board Development Meeting. She advised the Board that feedback from that meeting has been used to refine and strengthen the version that has been submitted to this Board meeting. She advised that the NES draft Anchors Strategic Plan was submitted to SG at the end of October 2023. The plan will be an iterative document as feedback is awaited from SG on the content of the plan and work is ongoing to establish the baseline against the SG metrics set out in Appendix 1 of the papers. SG have advised that feedback on the plan will be issued in early 2024.
- 8.2. The Chair thanked Christina Bichan for the introduction and opened the meeting to questions.
- 8.3. The Board commented that in relation to the climate change and sustainability, the plan could be more aspirational in relation the impact NES would like to achieve in relation to net zero. The Board noted that strengthening the areas on non-professional routes and widening access would help link into employability opportunities. In relation to the metrics, the Board noted that this seemed very numbers focussed and may not provide evidence of outcomes. However, through discussion it was recognised that the policy documents have been developed particularly for territorial Boards. The Board noted that when the NES Strategic Key Performance Indicators (SKPIs), which are outcome focussed, are reviewed and further developed there will be the opportunity to feed back into the metrics at this stage.
- 8.4. The Chair reported that he had recently attended the Psychology of Parenting Project (POPP). He advised that this has had excellent outcomes for over 7500 children and it is a good example of community wealth building and good practice. The Board asked how visible is the work of NES in this area. Karen Reid advised that NES are currently holding meetings with all territorial Boards to encourage strategic partnerships with NES with a view to developing the role of NES in the community, place and wellbeing space.
- 8.5. The Board approved the plan and thanked Christina Bichan and her team for their contribution.

9. Annual Items

a. Annual Climate Emergency and Sustainability Report 2022/23 and Public Bodies Climate Change Duties Report 2022/23

(NES/23/72)

- 9.1. The Chair invited Jim Boyle to introduce these reports which were presented to the Board for review and approval. He remarked that there is an obligation on all Boards to publish the Annual Report that arises from the Policy for NHS Scotland on the Global Climate Emergency and Sustainable Development (the Policy), which was published by SG in November 2021 and subsequent Directors Letter DLs.
- 9.2. Jim Boyle advised the Board that further to approval by the Board the report will be submitted to SG and then published on the NES website. He remarked that the report has been circulated through the Audit and Risk Committee via correspondence, for comment and a meeting has been held with the Non-Executive Climate Change and Sustainability Champion. The feedback received has been incorporated into the report. Jim Boyle advised the Board that some small amendments to the Public Bodies Climate Change Duties Report under sections 4d and 4e is required to include additional comment to reflect work that has been done. Once the updates have been made the report will be recirculated to the Board.

Action: JB

- 9.3. The Chair thanked Jim Boyle for the introduction and opened the report to members for questions.
- 9.4. The Board asked if NES are on track to meet Net Zero by 2040, if we are dependent on working with others to meet this target and if there is a formula we are using to better understand staff travel and the links to reducing carbon emissions. Jim Boyle advised that we have the electric vehicle scheme, but more work could be done on understanding travel choices, the vehicles staff are using and the potential for influencing behaviour towards the use of the train. Tracey Ashworth-Davies remarked that there might be opportunities through the review of staff behaviours as part of the implementation of the Organisational Development Plan.
- 9.5. Karen Reid remarked that when thinking about how we may, or may not, be in a position to influence staff travel behaviours, we need to be conscious of staff living in remote and rural areas and also staff with disabilities.
- 9.6. The Board confirmed the reports provided assurance and approved the reports in principle, noting that a slightly updated Public Bodies Climate Change Duties Report will be circulated via correspondence once updates to sections 4d and 4e have been made. The Chair thanked Jim Boyle and his team for all their work.

b. NES i.Matter Report

(NES/23/73)

- 9.7. The Chair invited Tracey Ashworth-Davies to introduce this report which provides an update on the results from the 2023 iMatter staff experience continuous improvement tool roll out and highlights key areas of interest for assurance.
- 9.8. Tracey Ashworth-Davies reported that NES continue to have a good participation score and a good Employee engagement Index (EEI) score. She remarked that an area NES continue to work on is the area of strengthening leadership and management development. She advised that there has been an increase in communication with staff with more webinars and directorate townhalls being held. There has also been a focus on wellbeing. She highlighted that the report shows NES' lowest indicator is in the area of partnership working albeit it is still a high score. She advised that work is underway to improve board visibility and also trade union visibility. Tracey- Ashworth-Davies reported that the statistics on action planning continue to improve.
- 9.9. The Chair thanked Tracey Ashworth-Davies for the introduction and opened the meeting to questions and comments.
- 9.10. The Board commended the excellent results and noted that some examples were provided for staff feeling involved in decisions, however the score for staff feeling sufficiently involved in decisions was comparatively low compared to the rest of the results. The Board asked if anything could be done to address this particular area. Tracey Ashworth-Davies advised the Board that there is a two-pronged approach providing increased support for line managers through the line managers network and a continued effort to keep staff up to date with developments through increasing communications. She advised that this is a retrospective survey and NES are going through a period of change. She remarked that it is hoped that the ongoing work on support and communications will be reflected in next year's results.
- 9.11. The Board noted that the whistleblowing questions were not mandatory and asked why this was the case. Christina Bichan reported that this was specifically raised before the questionnaire was released and it was felt that those questions would be a barrier to engagement if they were made mandatory.

9.12. The Chair thanked Tracey Ashworth-Davies for the report.

9.13. The Board confirmed the report provided the necessary assurance and once again commended the excellent results.

c. 2023-24 Equality Outcomes Mid-Year Report

(NES/23/74)

9.14. The Chair welcomed Katy Hetherington to the meeting and invited her to introduce this report.

9.15. Katy Hetherington reported that the mid-year report on NES's equality and diversity work came to the Board for review and approval. She advised that the report, includes our statutory responsibilities under the Equality Act (2010) and the Public Sector Equality Duty report. The Board are asked to approve, for publication, NES's employment equality and diversity report, April 2022 – March 2023 and to note an update on recent policy and legislative developments relevant to equality, diversity and human rights. Katy Hetherington remarked that the Committees have received reports that were relevant to their remit and any comments and feedback have been addressed.

9.16. The Board congratulated Katy Hetherington for distilling a large amount of information into a very good and succinct report.

9.17. There were no questions on the report and the Board approved the report.

9.18. The Chair invited the Board to take a comfort break and reconvene after 10 minutes to consider the performance items.

10. Performance Items

a. Quarter 2 Finance Report

(NES/23/75)

10.1. The Chair invited Jim Boyle to introduce this report which informed the Board of the financial position at the end of Quarter 2 (Q2).

10.2. Jim Boyle reported that the year-end forecast of the financial position is included and advised that this is based on actual performance to the end of Q2 as well as anticipated activity for the remainder of the financial year. He added that the report is detailing a break-even reporting position and advised that SG has asked that any changes to the financial position are reported to them as soon as possible. Jim Boyle reported that NES has been asked to explore options to scale down any commissions. He advised the Board that the lateness of confirmation of recurring, non-recurring funding continues to be a challenge, this stood at 12% of confirmed funding at the end of Q2, however it is now up to 50%.

10.3. The Chair thanked Jim Boyle for the introductory remarks. Before opening the report to the meeting for questions and comment, he advised the meeting, that linked with previous Board discussions, there is an urgent need to progress and fund the important work of the NES Social Care Directorate aligned to the ambitions of the NES Strategy. Given that SG has not confirmed any funding for the work NES need to progress, the Chair advised that the Board had noted the underspend position and wish to ask the Executive to prioritise funding for Social Care work, from this financial year onwards, from the NES budget envelope. **Action: KR/JB**

10.4. Gordon Paterson reported that an email has recently been received to confirm that funding will be forthcoming to fund joint work between NES and the Scottish Social Services Council (SSSC). He advised that recruitment will take place from January 2024 to support the work from April 2024 onwards.

10.5. The Board moved on to consider the Q2 financial report in more detail.

10.6. The Board asked if the figures presented in table 3 of the report represented additional income as the figures don't appear to line up. Jim Boyle agreed to check this after the meeting and provide an update to the Board to clarify the position. **Action: JB**

10.7. The Board approved the report.

10.8. The Chair thanked Jim Boyle and colleagues for the report.

b. Quarter 2 Risk Report

(NES/23/76)

10.9. The Chair invited Jim Boyle to introduce this report. Jim Boyle advised that this report is brought to the Board for review and approval. He remarked that the report highlights the issues emerging in relation to the Board's risk appetite and the recommendation from the Audit and Risk Committee to initiate a review of NES's definitions and matrix for risk scoring.

10.10. The Chair thanked Jim Boyle for the introduction and opened the meeting to questions and comment. There were no questions on the report.

10.11 The Board approved the Quarter 2 Risk Report, noted the progress made in NES's processes and practice in Risk Management and approved the recommendation to initiate a review of NES's scoring definitions and matrix prior to considering the appropriateness and proportionality of the Board's appetite scorings.

c. Quarter 2 Key Performance Indicator (KPI) Report

(NES/23/77)

10.12 The Chair invited Christina Bichan to present this report. Christina Bichan remarked that this is the second quarterly performance report to the Board for 2023/24. She advised that the report includes the data available in phase 2 of the implementation of the Board's new balanced scorecard approach. The Board are asked to review and approve the report.

10.13 The Chair thanked Christina Bichan for the introduction and opened the meeting to questions and comment.

10.14 The Board recommended that a glossary of definitions would be useful for Board members. Christina Bichan confirmed that a data definition guide can be made available to Board members. **Action: CBi**

10.15 The Board approved the report. The Chair thanked Christina Bichan and her team for the report.

d. Quarter 2 Delivery Report

(NES/23/78)

10.16 The Chair invited Christina Bichan to present the report. Christina Bichan advised that the reports provides a Q2 update on NES's delivery performance against the deliverables and milestones set out in the 2023/24 NES Annual Delivery Plan (ADP).

10.17 The Chair thanked Christina Bichan for the introduction and opened the meeting to questions and comment.

10.18 The Board noted the lower-than-expected numbers of General Dental Practitioners signing up to Adults with Incapacity and Enhanced Skills Practitioner courses and asked if this was an issue for concern. David Felix reported that this relates to the introduction of a new General Dental Practitioner contract, the reason people are

not signing up is due to uncertainty over payment. NES are working with the Chief Dental Officer to resolve this issue.

The Board approved the report. The Chair thanked Christina Bichan and her team for the report.

11. Governance Items

a. Board Assurance Framework and Proposed Committee Assurance Frameworks: Update (NES/23/79)

11.1 The Chair invited Della Thomas to introduce this item. Della Thomas reported that revisions have been made to the existing Board Assurance Framework further to the review at the October Audit and Risk Committee meeting. She advised that work on the development of new Committee Assurance Frameworks has been paused for the time being.

11.2 The Chair thanked Della Thomas for the introduction, there were no questions or comments on the report.

11.3 The Board noted the decision to pause work on the progression of new Committee Assurance Frameworks. The Board approved the amendments to the current Board Assurance Framework and noted a new Board Assurance Framework will be developed in due course.

11.4 The Chair thanked Della Thomas for her work on the report.

b. 2024-25 Board and Committee Meeting Dates (NES/23/80)

11.1. The Chair invited Della Thomas to introduce this item which presented the 2024/25 Board and Committee Meeting dates for review and approval.

11.2. The Board approved the 2024/25 Board and Committee Meeting Dates with no changes required.

c. Co-opted Member Technology and Information Committee (NES/23/81)

11.3. The Chair invited Della Thomas to introduce this item which invited the Board to approve Angus McCann, as a co-opted member of the Technology and Information Committee for a further year (November 2023 – October 2024) and approve his additional role as Chair of the Turas Refresh Programme Board from 1 September 2023 – 31 March 2024.

11.4. The Board approved the co-opted membership.

d. Co-opted Member Education and Quality Committee (NES/23/82)

11.5. The Chair invited Della Thomas to introduce this item which invited the Board to approve Peter Donnelly as a co-opted member of the Education and Quality Committee (EQC) from 1 December 2023 – 30 November 2024 and an additional associated role advising the Board on the development of medical educational reform.

11.6. The Board approved the co-opted membership.

e. Significant issues to report from Standing Committees

i. Audit and Risk Committee held on 5 October 2023

11.7. Jean Ford, the Chair of the Audit and risk Committee, provided a brief verbal update on the Audit and Risk Committee meeting held on 5 October 2023. She advised that three main items of business were discussed at this Committee meeting. These were the Board Assurance Framework, the Risk Register and the Climate Emergency reports. Jean ford added that the progress with internal audit actions is very good, and assurance was received that external audit actions are being progressed.

ii. Technology and Information Committee held on 30 October 2023

11.8. David Garbutt, the Chair of the Technology and Information committee provided a brief verbal update on the Technology and Information Committee meeting held on 30 October 2023. He advised that Digital Front Door, Digital prescribing and dispensing system, digital maturity assessments and cyber security were all discussed.

iii. Staff Governance Committee held on 2 November 2023

11.9. Anne Currie, the Chair of the Staff Governance Committee, provided a brief verbal update on the Staff Governance Committee meeting held on 2 November 2023. She advised that the Committee reviewed the quality and diversity mid-year report and iMatter report which had also been sequenced through this Board meeting. The Committee reviewed SKPIs and Risk and reviewed and approved the annual staff governance monitoring return.

12. Items for Noting or Homologation

a. NES Standing Committee Minutes

i. Audit and Risk Committee, 15 June 2023 (NES/23/83)

11.1. The Audit and Risk Committee minutes were homologated.

ii. Technology and Information Committee, 29 August 2023 (NES/23/84)

11.2. The Technology and Information Committee minutes were homologated.

iii. Staff Governance Committee, 17 August 2023 (NES/23/85)

11.10. The Staff Governance Committee minutes were homologated.

12. Any Other Business

12.1. The Board Chair informed the Board that Anne Currie has reached a decision that she will take early retirement at the end of February 2024. Anne Currie will be greatly missed, and plans will be progressed with the Public Appointments Unit to begin the appointment process for a new non-executive director to the Board.

13. Date and Time of Next Meetings

- **Board Development: Extra Meeting (Blueprint for Self-Assessment)** 19 January 2024, 10:15 -12:30
- **Board Development Meeting:** 25 January 2024, 10:15 – 15:30
- **Public Board:** 8 February 2024, 10:15 – 12:45
- **Private Board:** 8 February 2024, 13:15 – 13:45

13.1 The Chair thanked everyone for their attendance and closed the meeting at 12:50.

NES
December 2023
CD/DT/KR
v.02

Actions arising from Board meetings: Rolling list

Minute	Title	Action	Responsibility	Date required	Status and date of completion
Actions agreed at Board meeting on 23 November 2023					
1.2	Chair's Introductory remarks	The Learning and Education Strategy was rescheduled to the 8 February 2024 Board meeting to allow more consideration of the stakeholder feedback by the Education and Quality Committee, further to final submission to Board.	DT	8 Feb 2024	Complete This has been scheduled through the Education and Quality Committee and appears on the agenda for the 8 February 2024 Board meeting.
7.7b	CEO Report	The Board asked for confirmation of the timescales and scheduling of the climate change and sustainability strategy	JB/DT	8 Feb 2024	Complete The strategy is scheduled to go through Board Development Session on 18 April, Audit and Risk Committee on 24 April and then Public Board on 23 May.
9.2	Public Bodies Climate Change Duties Report	JB advised that amendments were required to sections 4d and 4e and the report would be recirculated once the updates were made.	JB	8 Feb 2024	Complete Now circulated
10.3	Q2 Finance Report	Executive Team to prioritise funding for Social Care work from this financial year onwards, from the NES budget envelope.	KR/JB	19 January 2024	Complete Update on financial situation given at 19 January 2024 meeting
10.6	Q2 Finance Report	JB to check the figures presented in table 3 of the report and to provide an update to the Board.	JB	8 Feb 2024	Complete Update circulated to the Board by email on 23 November 2023

Minute	Title	Action	Responsibility	Date required	Status and date of completion
10.14	Q2 KPI Report	CBi to make the (Strategic Key Performance Indicators) SKPI data definition guide available to Board members.	CBi	8 Feb 2024	Complete A full definition of terms can be found in the 'Definitions' tab of the Q3 SKPI Report.
Actions agreed at Board meeting on 10 August 2023					
8.15	Q1 Risk Report	The Board suggested that the risk appetite relating to Strategic Risk 14 (Board Governance) could require to be amended from adverse to cautious. Jim Boyle to explore this.	JB	8 Feb 2024	Complete "Risk Strategy, Updated Strategic Risks and Risk Appetite" added to 8 February Board agenda.
8.16 – 8.17	Q1 Risk Report	The Board suggested that a risk heatmap could be included in future risk reports and suggested other improvements relating to controls and risk appetite could be included in the ratings and the scorings.	JB	23 Nov 2023	Complete The risk heatmap is included in the Q3 risk report.



NES/24/04

CHAIR'S REPORT

David Garbutt, Chair of NES Board

1 February 2024

February 2024

Since the last Board meeting, I have attended the following meetings and events in addition to internal NES meetings, Board and Standing Committees. I also offer an update on the NES Corporate Governance Blueprint Self-Assessment process.

November 2023

1. On the 16 November 2023 I addressed the Psychology of Parenting Project (PoPP) Celebration Event. This was a fantastic opportunity to celebrate the achievements over the last 10 years of a programme aimed at equipping parents with specific skills in support of their child's development. Of particular note were the parents who had undergone the training, in the past, and who were now volunteering to deliver the programme.
2. Interviews were held on the 17 November 2023 for the recruitment of Dental Director. The Chief Executive, myself and other senior colleagues from across the NHS participated in the panel.
3. The NHS Board Chairs Private (BCG) met on the 20 November 2023 and discussed a number of items.
4. I joined the quarterly Chair and Chief Executive engagement meeting between NES and Scottish Social Services Council and agreed the final Memorandum of Understanding (MOU) between the two services.
5. I attended several meetings of the National Board Chairs Forum. These meetings discussed reshaping primary and secondary care, workforce and supporting NHS Territorial Boards.
6. I attended a meeting of the Aspiring Chairs Advisory Panel with other Chairs to consider the future programme, progress and evaluation of the current course of meetings. This was followed by a Board Development Reference group which discussed the Corporate Governance Self-Assessment Blueprint.
7. On the 30 November 2023 I had the pleasure of addressing the National Centre for Remote and Rural Health and Social [International Rural Health Symposium](#) in partnership with colleagues from the Royal College of General Practitioners in Norway, and Norwegian Centre for Rural Medicine. Over 70 colleagues travelled from Norway to Scotland to participate in knowledge exchange and workshop sessions with some 30 key rural healthcare experts from across Scotland.

December 2023

1. We had a successful NES Annual Review on 5 December 2023, showcasing NES's key achievements of 2022-23 and a discussion of the organisation's future direction with the Scottish Government's Director of Health Workforce, Gillian Russell.

2. I attended an NHS Board Chairs Private Meeting where we discussed a number of agenda items.
3. I attended the National Board Chairs fortnightly meeting where we held discussions on future action learning sets, the current fiscal environment and contingency planning.
4. The Improving Wellbeing and Working Cultures Strategy Board held on the 13 December 2023 discussed the emphasis on supporting and prioritising mental health support programmes and their proven success. A discussion was held on attraction and retention policies, the development of anti-racism policies and transformational and change leadership in the current environment.
5. At the fifth meeting of the Board Development Reference Group, we reviewed the Aspiring Chairs Programme, discussed the Corporate Governance Blueprint self-assessment round and a refresh of the Board Development pages on TURAS.
6. I joined the NHS Chairs Meeting with the Cabinet Secretary for NHS Recovery, Health and Social Care.

January 2024

1. I had a very helpful meeting with Shirley Rogers, Chair of Scottish Quality Authority. We discussed areas of work in both organisations.
2. The National Board Chairs held discussions regarding the current fiscal environment for all NHS boards.
3. Tom Steele, Chair of Scottish Ambulance Service and I meet to discuss a range of issues around Board co-operation and the innovation landscape.
4. We were joined by Maree Todd, Minister for Social Care, Mental Wellbeing and Sport for the closing session of the Aspiring Chairs Programme 2023/24. This was highly evaluated by the participants and the mentor Boards.
5. Along with other NHS Board Chairs I joined the NHS Board Chairs Group. We discussed finance and sustainability and improving Population Health Group Identification.
6. The NHS Chairs Meeting with the Cabinet Secretary for NHS Recovery, Health and Social Care was held on the 29 January 2024. We focused on finance and sustainability, quality assurance and NHS recovery and performance.
7. We held a very successful visit for Ms Maree Todd, Minister for Social Care, Mental Wellbeing and Sport. Officials met with representatives from the NES Executive Team and myself to hear about the work NES is currently undertaking in the areas of social care and mental health and wellbeing.

Update on the [Corporate Governance Blueprint](#) Self-Assessment Process.

1. The NES Blueprint Self-Assessment Board Development Meeting was held on Friday 19 January 2024, in Westport, Edinburgh. Everyone actively participated and the session was an opportunity for the NES Board to discuss the results of the Corporate Governance Blue Print Self-Assessment Documents. The Improvement Plan will be prepared and scheduled to March 2024 Board for approval.

**David Garbutt
Chair**

Chief Executive's Report

Professor Karen Reid, Chief Executive



Date: February 2024

1. Introduction

- a) The agenda for our February 2024 Board meeting includes two key strategic items for the Board's approval. The draft NES Learning and Education Strategy is an integral component of a suite of enabling strategies that underpin the commitments set out in our [2023-26 Strategy](#) and sets the direction for NES to fulfil its overall purpose and vision through learning, education and training. The Quarter 3 Strategic Risk Update and NES Scoring Definitions and Matrix Proposal is a combined paper that presents the 2023/24 Quarter 3 Risk Report for approval. It also asks Board Members to consider and approve changes to the risk management arrangements which were recommended by the Audit and Risk Committee.
- b) The Board will also receive a suite of 2023-24 Quarter 3 performance items that cover our financial, risk, and delivery position, including a report setting out ongoing progress against our new strategic Key Performance Indicators (KPIs). Several governance items are also presented for approval including the annual Corporate Governance package which comprises the Board Standing Orders, Board Code of Conduct, Board Scheme of Delegation, Board Standing Financial Instructions & Committee Terms of Reference. The Board will also receive a paper setting out NES's new policy for controlled documents.
- c) The Board will wish to note that the overall structure of the Chief Executive's Report has been refreshed so that it now aligns with the People, Partnerships and Performance themes set out in our 2023-26 Strategy. This enables us to demonstrate more clearly how our work is supporting both the health and social care workforce and better care and outcomes for every person in Scotland. I am grateful to our staff, partners and stakeholders for their ongoing work and commitment.
- d) Board Members are already aware that this meeting marks Anne Currie's final Public Board meeting as a Non-Executive Director. I would like to formally thank Anne for her very significant contribution during her time on the NES Board, particularly in relation to her roles as Chair of the Staff Governance Committee and NES's Equality, Diversity and Human Rights Champion. NES has benefited greatly over the last five years from Anne's wisdom, support and expertise. On behalf of NES, I would like to pass on our very best wishes to Anne on her retirement from the Board.

2. Announcements and Updates

- a) **Visiting Professor Appointments – University of Strathclyde**
I am delighted to announce that two senior leaders in NES have recently been awarded Visiting Professor appointments at the University of Strathclyde (UoS). **Professor Kevin Kelman** (Director of NHS Scotland Academy, Learning & Innovation) and **Professor Andrew Sturrock** (Postgraduate Pharmacy Dean / Director of Pharmacy) have been appointed as Visiting Professors at the UoS Business School and Institute of Pharmacy and

Biomedical Sciences respectively. It is fantastic to see both Kevin and Andrew being recognised in this way and is testament to their respective leadership and experience.

- b) **Maree Todd, Minister for Social Care, Mental Wellbeing and Sport**
Minister for Mental Health, Wellbeing and Sport Maree Todd MSP and officials met with representatives from the NES Executive Team and our Chair to hear about the work NES is currently undertaking in the areas of social care and mental health and wellbeing. We also spoke about the broader workforce including nursing, pharmacy, NHSSA, NHS Youth Academy and remote and rural. It was a very positive discussion with a number of actions to take forward.

- c) **Further delay in Stage 1 of National Care Service (Scotland) Bill**
The Scottish Parliament has passed a motion extending Stage 1 of the National Care Service (Scotland) Bill to 1 March 2024. Following earlier delays in the process, Stage 1 was previously due to be completed by 31 January. The delay is to allow MSPs more time to consider the [information](#) Maree Todd, Minister for Social Care, Mental Wellbeing and Sport sent to the Health, Social Care and Sport Committee in December 2023. Ms Todd noted that while the Scottish Government is making some changes to the way the National Care Service (NCS) will be delivered, the key aims and vision remain the same. She also noted that further work will be required on the detail to be included in secondary legislation and what will be involved in operationalising the legislation.

- d) In an updated [Financial Memorandum](#) sent to the Finance and Public Administration Committee, the Minister also provided an updated timeline. In the updated Programme Business Case it is noted that the Scottish Government is committed to establishing the national level part of the NCS during 2025-26, with the local reformed Integration boards assumed to go live during 2028-29.

COVID-19 Public Inquiries

- a. [Module 3](#) of the UK Inquiry, “Impact of COVID-19 pandemic on healthcare systems in the 4 nations of the UK” is progressing. NES along with the other Scottish NHS Boards, is a [core participant](#).
- b. NES continues to regularly attend all the Central Legal Office (CLO) NHS Board COVID-19 Leads meetings to keep abreast of the progress of both the UK and the Scottish Inquiries and the implications for NES.
- c. The [Scottish Inquiry](#) paused proceedings in January 2024 to allow the UK Inquiry focus on Scotland and will re-commence February 2024.

3. Our Strategic Themes

This section of the report provides key developments and updates from NES Directorates in the context of the key strategic themes from our NES Strategy 2023-26: People, Partnerships and Performance.



3.1 People - how we are supporting our staff, learners & trainees

3.1.1 Chief Executive Update

- a) 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. Since the last Board meeting, I joined a NES Technology Service directorate session to share my leadership journey and enjoyed engaging with staff during discussion.
- b) We are also continuing to connect with NES staff to communicate key strategic messages through all-staff webinars and via my own monthly Chief Executive 'stand ups'. Two webinars have been held since the last Board meeting: on 19 December 2023, members of the Executive Team lead a 'NES Achievements' webinar which celebrated the wide range of excellent work that has been delivered over the past 12 months and provided the opportunity for staff to highlight their own / team achievements. A 'Corporate Improvement Programmes Progress' webinar also took place on 24 January 2024. This webinar updated staff on progress and next steps for the priority projects that underpin our transformation programme: Ways of Working & Property, TURAS Refresh and a Learning and Education Quality system.

3.1.2 Healthcare Science

- a) We have offered 24 clinical scientist training posts lasting three years to commence in September 2024. All 10 specialties requesting support have been offered traineeships. Further posts may be possible to meet the demand for 47 posts that was detected in May 2023. Trainees are supernumerary and distributed across 19 training centres. We may be able to add to the cohort should existing NES-funded trainees move early into substantive employment. We will run our annual demand scoping for clinical scientist training posts in May 2024 for the September 2025 intake and will advise Scottish Government (SG) colleagues of the findings.
- b) We are running a hybrid [Healthcare Science training event](#) on 8 - 9 February 2024. The agenda for the event includes sessions on patient centeredness and Artificial Intelligence as it applies to the training of scientific staff. Speakers include Ally Boyle (Non-Executive Director, NES), Lindsay Donaldson (Deputy Director of Medicine, NES) and clinical colleagues from across NHS Scotland and higher education.
- c) As part of Phase 3 of an SG commission to the NES NMAHP Directorate, we are working with the SG Chief Nursing Officer Directorate (CNOD) to extend the existing healthcare support worker framework to include Healthcare Science workforce. The NES Healthcare Science training event highlighted in the paragraph above includes a workshop on the project which is expected to be completed by April 2024. We are engaged with the NES Widening Access team to support this work and will also promote this work via the national [Scottish Apprenticeship Week](#) (4 – 8 March 2024).

3.1.3 Medical

- a) **Medical Recruitment** - National recruitment for medical training is ongoing with the Scotland team delivering recruitment for Paediatrics, Internal Medicine Training, Trauma and Orthopaedic Surgery and Anaesthetics across a number of days in January and February 2024. Further recruitment to Anaesthetics plus Broad Based Training and Gastroenterology will take place over 14 days in March 2024. The demand for administrative support has been particularly high and the support offered from all the Directorates across NES has been helpful and supportive for this key piece of work.
- b) **Enhanced Monitoring sites** - NES supported colleagues in General Psychiatry at Inverclyde Royal Hospital which has been de-escalated from enhanced monitoring. Sites remaining on Enhanced Monitoring include Anaesthetics and General Surgery, Dr Gray's Hospital, General (Internal) Medicine, Queen Elizabeth University Hospital, General (Internal) Medicine, University Hospital Ayr, General Surgery, Ninewells Hospital, General Surgery, University Hospital Monklands

- c) **Central Legal Office Training (CLO)** - The Medical senior team undertook training with the CLO team around how to deal with allegations of sexual misconduct. This informative session supported the senior team to understand their role in the escalation of any allegations however it also prompted a request for further education around the practicalities of managing any allegations.
- d) **CPD Connect** - [CPD Connect](#) has had two abstracts accepted for this year's annual conference of the [Society for Simulation in Europe](#), and a summary of these is detailed below:
- e) **Palliative care and end of life simulation for General Practitioners** - CPD Connect primary care educators team designed and piloted a skills and simulation course on palliative care. The simulation sessions involved one case of heart failure evolving from diagnosis to end of life management in a community setting. The skills session focused on complex decisions in end of life care. Evaluation included post course follow up where active changes in practice were recorded.
- f) **Domestic Violence training for GP teams** - In-situ simulation scenarios were designed around three core domestic violence presentations, using actors to enable the scenarios. Scenarios designed by CPD Connect team based on previous work presented at the RCGP conference. The intended learning outcomes were based on the Scottish adult support and protection framework for all health and social care staff in Scotland.
- g) **Responding to the Sudden Death of a Doctor or Dentist in Training** - A new education resource commissioned by the Conference of Postgraduate Medical Deans (UK) (COPMED) and developed by NES, will support medical and dental education teams in responding to the sudden death of a doctor or dentist in training.
- h) The new online resource fulfils a need to support teams with the implementation of local and national guidance regarding practical tasks and support for people who are affected in the event of a death. The resource offers a focus on wellbeing as well as information on how staff can support themselves and others.
- i) **NES Bereavement Conference** (28 November 2023) - This event attracted over 1,300 registrations from a wide range of delegates from health and social care in Scotland. Feedback to date has been very positive.
- j) **NES Mobile Skills Unit (MSU)** - In the last quarter of 2023, the MSU undertook seven separate regional visits and delivered 42 sessions for over 200 healthcare and emergency services participants (Nursing 54%; Scottish Ambulance 14%; Medical 11%; Emergency Services 11%; AHP 10%), supporting equity of access to high quality simulation and clinical skills training regardless of physical location or professional background. In addition, over

100 pupils from Forth Valley College took part in a simulated social care event.

- k) **The Clinical Skills Managed Education Network (CSMEN)** - CSMEN provided 14 training events covering eight medical specialty programmes (five of which, Anaesthetics, Intensive Care, Acute Care Common Stem, Ophthalmology and Vascular Surgery, are new for 2023) and provided 522 medical simulation training spaces for the last three months of the calendar year.

3.1.4 NES Technology Service (NTS)

- a) **TURAS Learn** - Enhancements have been delivered to Turas Learn making it easier for learners to discover learning resources that align to a specific educational framework. The ability to browse by educational frameworks is available for:
- NHS Knowledge and Skills Framework (KSF) – users can find learning that aligns with the KSF levels used by NHS Agenda for Change staff to identify areas for professional development.
 - General Dental Council (GDC) – users can find continuing professional development (CPD) activities that meet GDC development outcomes that align to the principles of practice for dental professionals.
- b) Additional discovery work is now underway to further improve the experience, looking at ‘browse by’ topic, course options etc which would enable quicker discovery of learning resources.

3.1.5 NHS Scotland Academy, Learning and Innovation (NHSSA, L & I)

- a) The NHS Scotland Academy (NHSSA) continues to deliver its programmes and explore potential new workstreams. The impact of individual NHSSA projects is evidently significant in reducing waiting times for a number of diagnostic tests as part of our imaging and endoscopy programmes. The NHS Scotland Youth Academy healthcare pathway is continuing with approximately 35 S4-S6 students registered across four health boards in Scotland and a number of schools.
- b) **Learning Strategy and Collaboration** - The NES Learning and Education Strategy has now been subject to external consultation. Responses from stakeholders were very positive with strong support for the overall direction, principles and priorities set out within the draft document. In response to constructive feedback, further refinements have been made and the final draft is on the NES Board agenda on 8 February 2024.
- c) **Knowledge Management and Discovery (KM&D) Business Unit** - Following discussions in partnership and in consultation with staff-side, the KM&D Business Unit has now moved from the NES Technology Service into

the Learning Strategy and Collaboration team led by Ryan Reed (Head of Programme, NHSSA, L & I). The Unit comprises of five teams that support critical business areas for NES and the wider health and social care sector. Catherine McLaren (Principal Lead) leads the Unit, with Derek Boyle (Knowledge Services) and Gayle Baxter (TEL Lead) forming the leadership team. The teams within the unit are,

- Knowledge Services – Infrastructure
- Knowledge Services – Outreach
- Technology Enhanced Learning (TEL)
- Turas Learn Content
- ELearning

This move allows the teams to be closely aligned and able to contribute to the implementation of the Learning and Education Strategy. The move is viewed as a positive development by the KM&D teams and by the wider NHSSA, L & I directorate.

d) **Innovation and Workforce Diversification** - Current areas of activity for the team include:

- Involvement in recruitment of two Clinical Artificial Intelligence fellowships (medical). NES is actively supporting the Clinical Entrepreneur Programme including recruitment, selecting and engaging with entrepreneurial fellows.
- The Medical Associate Professions (MAPs) implementation plan is ongoing. The Programme Board co-chaired by Scottish Government (SG)/NES to provide strategic oversight and governance hosted its first meeting on 27 February 2024.
- Maintaining engagement with North of Scotland services in support of Morayshire maternity plan for Dr Gray's Hospital and integrated maternity care regarding maternity perioperative need. Request from West of Scotland workforce planning regarding delivery of Oral Maxillo Facial Surgery (OFMS). Current activity is at early stages of defining specification of required activity, NES supporting facilitated discussion to inform model of approach.
- Preparation of a pilot/test of change model for a first Graduate Apprentice qualification for Operating Department Practitioner (ODP). NES providing a facilitative role to support engagement between Boards and strategic partners (Skills Development Scotland/Scottish Funding Council). This work has a very tight timeline to meet regulatory review and university requirements in designing and developing a new curriculum.

e) **Cultural Humility eLearning Resource** – The NHS Scotland Academy launched a national Cultural Humility eLearning resource on TURAS Learn in November 2023, to support the development of positive cultural humility

values, attitudes, and behaviours across the health and social care workforce in Scotland.

Cultural humility is the practice of self-reflection used to consider how our backgrounds and the backgrounds of others can impact our relationships. This is an important introductory learning resource for building a culturally humble workforce, with learning designed to complement statutory and mandatory training and meet continued professional development/learning requirements.

3.1.6 Pharmacy

- a) **Pharmacist Prescribers** - NES Pharmacy supports the delivery of the Scottish Government strategy to increase the number of pharmacist independent prescribers and enhance the pharmacist role in the clinical management of patients in acute, primary care and community settings. We have significantly increased the number of independent prescribing places commissioned from Robert Gordon University and the University of Strathclyde, resulting in 393 pharmacists, across all sectors of practice, being funded to undertake their independent prescribing qualification. This increased number includes an additional 115 community pharmacist places to help support delivery of the national community pharmacy NHS Pharmacy First Plus service, an easily accessible service for common clinical conditions within local communities.

3.1.7 Psychology

- a) **Psychological Therapies Specification** - We continue to work closely with Scottish Government on supporting the process of implementation of the [Psychological Therapies and Interventions](#) specification, particularly through the updated guidance from [The Matrix](#) (Guide to Delivering Evidence Based Psychological Therapies and Interventions in Scotland). This is a key development in ensuring people in Scotland get access to psychological services that are closely aligned with best practice as well as best available evidence.
- b) **The Training in Psychological Skills** – Early Intervention for Children (TIPS-EIC) workstream has trained 4,507 (938 of these in 2023-24) multi-agency staff (e.g., school nurses, pupil support officers, pastoral care staff, third sector staff, social workers, and educational psychologists) in evidence-based / informed interventions to enhance children and young people (CYP)'s mental health and wellbeing. A suite of NES coaching resources has been developed and launched to standardise the quality and content of coaching delivered to these multi-agency staff. Clinical outcome data from children and young people (CYP) for the TIPS-EIC Let's Introduce Anxiety Management (LIAM) and brief Behavioural Activation (brief BA) interventions show they consistently result in significant reductions in distress and progress towards children's own goals.

3.1.8 Social Care Directorate

- a) The Social Care Directorate have been commissioned by the Scottish Government to progress two specific workstreams. One will focus on repurposing TURAS Learn content to better meet the needs of social care learners and the other will resource our joint work with the Scottish Social Services Council on the development of the National Induction Framework and on a new model of Continuous Professional Learning for the social services workforce.

3.1.9 Workforce

- a) **Succession Planning** - a second cohort of senior leader roles is underway with roles being identified by NES directorates. A risk rated succession plan providing a RAG status for each role within the cohort is being produced. The purpose of succession planning is to ensure development of a healthy pipeline of internal candidates to be part of the candidate pool for senior leader roles. NES has also provided nominations to the NHS Scotland Aspiring Chief Executives programme led by Scottish Government and those nominated are receiving development support, both through the programme and NES.
- b) **Workforce Planning** - has been integrated into the annual NES Operational Planning process for the first time. Colleagues from NES Workforce and Organisational Development Leadership and Learning (ODLL) have worked with Finance and Planning & Corporate Resources colleagues to support directorates during the 2024/25 operational planning process and in turn support the organisation to develop an integrated workforce plan. The NES Workforce Plan will provide the basis for planning the development of staff core capabilities as identified within the NES Organisational Development plan.
- c) **Workforce Systems** - changes currently being planned include the implementation of eRostering as part of a national NHS Scotland programme and replacement of Kenexa, the system used by NES for establishment control.
- d) **Wellbeing Framework and resources** - intended to support and enable the resilience of individuals and teams across NES, has been approved by the NES Transformation Group. This is an important support mechanism for hybrid working, alongside the virtual support and development being delivered to Line Managers. An Executive champion for Wellbeing has been agreed and will be announced shortly.
- e) **Formal consultation** on a proposed new **Glasgow office space** is currently underway. Staff have been provided several routes to provide feedback following communication of proposals.

3.2 Partnerships - how we are supporting our partners

3.2.1 Chief Executive Update

NES works with partners, stakeholders and our own staff to build careers, lives and the future sustainability of the health and social care workforce. Partnership working is integral to ensuring that NES education, training and workforce development 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.

- a) The NES Executive Team (ET), Transformation Group (TG) and Strategic Implementation Group (SIG) continue to meet formally. Collectively these are focusing on strategic matters, strategic scrutiny, cross-organisational leadership and ensuring the direction of strategy with the focus on our people, partnerships, and performance.
- b) My engagement with a wide range of key stakeholders across health and social care continues. This includes a wide range of colleagues across NHS Scotland including Chief Executives and other senior colleagues. The NHS National Board Chief Executives (BCEs), NHS BCEs and Scottish Government, NHS Board CEs Private meeting, 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). Engagement with the Scottish Government (SG) continues through the Strategic Sponsorship meeting involving myself, Chair and SG's Director of Health Workforce, my regular 121 meetings with a number of SG colleagues and my attendance at wider SG meetings. Currently I am co-Chairing the Junior Doctor Negotiation Meetings which are being held fortnightly.
- c) Directorate Engagement with SG's Sponsor Team continues, covering strategic business including funding, planning/governance, social care and ad hoc topics as and when appropriate. We engage with SG's Sponsor Team through both a weekly informal meeting and fortnightly Sponsorship group meetings, involving the Head of Strategic Development and Directors of Planning and Performance, Finance and Social Care. We have also engaged with SG's Head of Health Sponsorship through this group.
- d) Our engagement with Sponsors also contributed to a successful NES Annual Review on 5th December, showcasing NES's key achievements of 2022-3 and a discussion of the organisation's future direction with the Scottish Government's Director of Health Workforce, Gillian Russell.
- e) Upcoming work includes a review of the NES Sponsorship Framework Agreement and continued analysis of funding arrangements.

3.2.2 Strategic Partnerships

NES has developed three new strategic partnerships over recent months. These ambitious collaborations demonstrate NES's commitment to engaging with key

partners in order to deliver shared priorities which improve outcomes and create sustainability and value across the health and social care system. The information below provides an overview of each collaboration and how they will impact the health and social care workforce and achieve improved outcomes.

- a) **Digital Health and Care Innovation Centre (DHI)** - The NES / DHI strategic partnership will bring new opportunities to collaborate, maximise the strengths and expertise of each organisation and help achieve NES's vision of supporting better rights-based quality care and outcomes for every person in Scotland through a skilled, capable, and resilient health and social care workforce. This strategic partnership approach will also support delivery of Scottish Government's policy priorities to achieve a more skilled and knowledgeable workforce and better outcomes for citizens.
- b) A collaborative work programme, which will be delivered via an agreed action plan, will focus on workforce development, education and training, research development and innovation, strategic level engagement with other organisations, developing and deploying innovative technologies and delivery of health and social care in remote and rural areas.
- c) **Open University in Scotland (OUIS)** - The OUIS / NES partnership shares the ambition of supporting the current and future health and social care workforce (including unpaid carers) to be appropriately developed through learning resources and training. This draws on the strength and expertise of both organisations to deliver innovative and inclusive education and training resources to help develop Scotland's health and social care workforce and improve outcomes for the people of Scotland.
- d) The joint agreement creates an opportunity to harness the strengths and expertise of both organisations in the design and development of the current and future health and social care workforce through the delivery of education, training and workforce development, informed and delivered through innovation and educational research.
- e) Both organisations have agreed to focus primarily on the following tangible areas of work including, exploring opportunities for nursing studies in schools, employment and education opportunities for refugees and asylum seekers, employment access routes in nursing using the OU Certificate of Higher Education in Healthcare Practice, and looking more broadly at supporting pathways from Higher National Qualifications and social care staff upskilling in learning languages for wellbeing in care settings.
- f) **UK Health Data Research Alliance** - The UK Health Data Research Alliance (the 'Alliance') is an independent alliance of leading healthcare and research organisations united to establish best practice for the ethical use of UK health data for research at scale. Members represent the UK's major organisations including NHS organisations, research charities, institutes and registries, bringing high value datasets, new approaches to developing tools and techniques for data research at scale to make improvements to people's lives through research.

3.2.3 Healthcare Science

- a) Scottish Government is leading a review of education and training in the healthcare science workforce. Dr Rob Farley (Associate Director, Healthcare Science) is acting as Chair of this review. This review is part of a wider exercise by the Chief Scientific Officer that is currently consulting on [Developing Scotland's Strategic Approach to Healthcare Science](#)
- b) The [Independent Review of Audiology Services in Scotland](#) (published in August 2023) included proposed recommendations for the education and training of the workforce. This element of the review was also chaired by Dr Rob Farley. Whilst we await Scottish Government's implementation response, there were no specific actions for NES in the report.

3.2.4 Medical

- a) The National Centre for Remote and Rural Health and Social Care hosted a three day [International Rural Health Symposium](#) in partnership with colleagues from the Royal College of General Practitioners in Norway, and Norwegian Centre for Rural Medicine. Over 70 colleagues travelled from Norway to Scotland in November 2023 to participate in knowledge exchange and workshop sessions with some 30 key rural healthcare experts from across Scotland.
- b) The 2023/24 Scottish Medical Appraisers virtual conference was held on 13 September 2023 and attended by over 250 appraisers. The aim of the day was to deliver an event that covered different topics relating to Medical Appraisal. Sessions included: exploring the Equality, Diversity and Inclusion (EDI) impact on appraisals, looking at 'A neurodiversity affirming approach to appraisal,' 'Cultural competence within appraisals' and 'Active bystander/unconscious bias.'

3.2.5 Nursing, Midwifery & Allied Health Professions (NMAHP)

- a) **Allied Health Professional Attraction Subgroup** - Allied Health Professionals (AHPs) have been liaising with Education Scotland / Developing the Young Workforce (DYW) Live regarding live career information sessions for school pupils. This opportunity was highlighted and followed up from a meeting of the cross-directorate NES career learning group. DYW Live are keen to have health professions represented and asked NES to deliver an online webinar about AHP careers through their glow platform in December 2023 on the week that young people will be making their subject option choices.
- b) For the future Education Scotland/DYW Live would like AHPs to consider continuing their offer of live sessions and to run more regular sessions to promote various Allied Health professions throughout the academic year.

Teachers would be able to sign up to the sessions on the glow platform and put in any specific requests or requests for bespoke sessions for their school. This requires practitioners from practice and an educator/facilitator with a PVG check to host the sessions. It is proposed these sessions would tie in with professions awareness days e.g. world physiotherapy day.

3.2.6 Pharmacy

- a) **Post registration career framework** - There are ongoing partnership discussions with the Chief Pharmaceutical Officer, Directors of Pharmacy, Community Pharmacy Scotland, regulators and professional bodies around progressing post registration career framework plans and subsequent implementation for pharmacists and pharmacy technicians in Scotland and UK wide. This work ties in with new guidance issued by Scottish Government in January 2024 on the recruitment and appointment of Consultant Pharmacists in Scotland.

3.2.7 Psychology

- a) TIPS-EIC (Training in psychological skills – early intervention for children), Parenting & Neurodivergent & Autism workstreams are collaborating with stakeholders to adapt our training offers for neurodivergent children and young people. Recent examples include working with NHS Greater Glasgow & Clyde Health Visitors to develop, pilot and evaluate the impact of a Neurodivergent training offer for Health Visitor and Community Nursery Nurse staff and plans to consult with NHS Board partners and neurodivergent people with lived experience for a new training offer for parents of neurodivergent children and young people.
- b) The trainee health psychology programme commenced in 2008 and since then over 50 trainees have enrolled in the programme. In November 2023 we held an event to celebrate 15 years of the Stage 2 Health Psychology Training Programme in Scotland and learned about the breadth of [health psychology](#) work happening both across the UK and internationally. The programme is a partnership between NES and NHS Boards, who, together, jointly fund trainee posts to contribute to the prevention and management of diabetes and other long term health conditions.

3.2.8 Social Care

- a) In partnership with colleagues across NES, the Social Care Directorate have been working with the Scottish Social Services Council (SSSC) to test the use of QR codes on some newly developed NES learning resources and activities. Initial feedback from this pilot has been positive in enabling social care learners to capture their learning and record this onto SSSC's MyLearning platform. We are looking at further ways in which we can scale up this initiative.

- b) The Social Care Directorate are working with Skills Development Scotland, Scottish Government and the SSSC to advance the recommendations and findings from an 'Adult Skills Response' research report. A stakeholder workshop will take place in early February 2024 to consider actions and implementation.

- c) We continue to explore the potential to extend educational and employment opportunities to asylum seekers and refugees through our partnership with the Scottish Refugee Council, and a wide range of other strategic partners. Scottish Government colleagues are keen to support this work and to explore with us whether it might become a sub-group of the Anchors Workforce Group.

3.2.9 Workforce

- a) Board Development support across NHS Scotland, funded by Scottish Government, is being provided through the Board Development team. Current activity includes, for example, rollout of 'Blueprint for Good Governance' workshops and the Aspiring Chairs programme. In addition, rollout of 'Leading in a Digital Age' workshops, targeted at Executive and Non-Executive Board members across the health and care sector, is being rolled out by the Digitally Enabled Workforce team.

3.3 Performance - how we are performing as an organisation

3.3.1 Climate Change Emergency and Sustainability

- a. "The Audit & Risk Committee recently received a further update report on what is being done within the Board to advance the work on this very important policy area. It confirmed that the Annual Report and the Public Bodies Climate Change Duties Report, as already approved by the Board,

were both submitted at the end of November. To date, no significant issues have been raised by the Scottish Government or the Sustainable Scotland Network. The report also noted that the Board Champion, Gillian Mawdsley, attended the December meeting of the NES Climate Emergency & Sustainability Group to be introduced to the Group and to share her experiences of attending COP 26 in 2021. Gillian also contributed to the wording of the two reports submitted at the end of November.

- b. The January meeting of the NES Climate Emergency & Sustainability Group noted further work that it is carrying out to develop the NES strategy in this area, to raise awareness of the issues, and to work jointly with other bodies to develop resources to support meeting the aims of the Scottish Government's policy in this area. In particular, the Clinical Subgroup is developing work to further embed this work in our education and training programmes. Future reports will be presented to the ARC and the Board as work develops.
- c. Finally, the Director of Finance as Executive Lead and the Board Champion will deliver a video update to the NES workforce to further raise awareness of the work that is progressing, and emphasising the role that NES can play in supporting the wider Health and Social Care response."

3.3.2 NES Corporate Improvement Programmes

- a) The **Ways of Working and Property** project deliverables remain on target. The development of resources to support the implementation of the Once-for-Scotland Flexible Working policies will be completed by the end of March 2024. A Wellbeing Framework has been drafted for approval, which proposes the collation of all wellbeing resources and support into a single easily accessible digital 'hub'. A lead advisor has been appointed to develop (re)configuration plans for Glasgow, Inverness, and Dundee sites. The Glasgow site move is under formal consultation presently which proposes a relocation and co-location with Public Health Scotland in new Glasgow City centre premises.
- b) **Learning and Education Quality System** continues to be led and supported alongside the NES Programme Management Office, drawing contributions to this essential work from across NES.
- c) The Learning & Education Quality System project is progressing at pace. Work on an Educator Capabilities Framework has been well received and planning for implementation across the organisation is underway. The review and development of Quality Policies to underpin the quality system continues and will be brought through relevant Board Committees over the coming months.
- d) The **TURAS Refresh programme** is working towards the submission of an Outline Business Case (OBC) setting out the future development of the platform by March 2024. The interim findings report on organisational

stakeholder needs is under consideration and will inform the writing of the OBC. The technical review of the architecture and capability of the existing platform is continuing with a report due in mid-February 2024. We are looking at developing a robust economic case which will demonstrate the economic value of the programme both to NES and to health and social care more widely. This work – together with existing discovery work carried out over the last year - will allow us to provide a robust outline business case to Scottish Government. The TURAS Refresh programme is being co-ordinated by the Head of Programme who joined NES on secondment from NHS National Services Scotland (NSS) in November, and who is supported by a small project team.

- e) Since the last Board meeting, the NES Transformation Group has approved a **Business Process Transformation project** into delivery as a Tier 1 project within the Corporate Improvement Programme (CIP). This project will focus on maximising the efficiency and effectiveness of our business support processes with Phase 1 of the activity exploring areas raised through the NES Bright Ideas scheme, including meeting and reporting activity.
- f) There has been significant focus on communications and engagement for transformation activity. Feedback from staff has been widely positive on improved transformation communications. The coordination and reporting on communication and engagement monthly at Transformation Group supports this improvement.

3.3.3 NES Technology Service (NTS)

- a) **Tracking of Medical Associated Costs of Teaching (ACT) applications -**
A new digital solution has been released which makes it easier for NHS Scotland Boards to submit applications for use of Medical Associated Costs of Teaching (ACT) monies and NES staff to track and approve these applications. This new digital solution will provide a more streamlined process, reduce the administration burden for staff and improve the auditing and management of the Medical Associated Costs of Teaching budget.
- b) **Eyecare** - NTS continues to support the rollout of OpenEyes software to support Ophthalmology and Optometry in Scotland. NHS Greater Glasgow and Clyde have been using the application for some time now in their Hospital Eye Service and more recently Community Glaucoma Service. The Community Glaucoma Service is a joint initiative with NES Optometry colleagues who provide the training and accreditation for this work. NTS have now completed work to enable NHS Forth Valley and NHS Lanarkshire to use the application in in the Acute and Community settings respectively.
- c) **SCI Diabetes** - Another NHS Board, NHS Golden Jubilee, has gone live with [SCI-Diabetes](#). Initially this will allow the staff associated with the Accelerated National Innovation Adoption (ANIA) Closed Loop Technology measurement project to record relevant data.

- d) **TURAS Care Management** - A refresh of TURAS Care Management data collection questions and reporting went live on 13 and 15 November 2023. The reports have been designed to provide users with situational awareness of the capacity, availability, and workforce position in care homes across Scotland. This is to help with and enhance the operational needs and business processes in place and facilitate getting people the appropriate level of care they need. The data capture and reporting also will inform support and policy for the Care Home sector.
- e) **Scan for Safety** - NTS continue to work with the NHS Scotland [Scan for Safety](#) programme to deliver a storage solution meeting their needs for the Medical Device Data Hub while laying the foundations for a national approach to clinical structured and unstructured data storage. A first iteration of the National Digital Platform (NDP) Structured Clinical Data Service is available in non-production environments for our delivery partner, NHS National Services Scotland (NSS), to build the accompanying Medical Device Data Hub product against.

3.3.4 NHS Scotland Academy, Learning and Innovation (NHSSA, L & I)

- a) The innovation and workforce diversification team have supported the Accelerated National Innovation Adoption (ANIA) Pathway activity, including implementation of Digital Dermatology and Closed Loop Systems for type 1 diabetes which is well underway, working closely with new project managers, clinical leads and NES Digital colleagues. Heart Failure and Stroke Genomics programmes are both working towards value case submission with input from NES around workforce models and education needs.

3.3.5 Planning and Corporate Resources

- a) The NES Board met to discuss the NHS Corporate Governance Blueprint Self-Assessment results on 19 January 2024 and noted the high governance standards the Board was maintaining against the domains. A Board Development session took place on 25 January 2024 to discuss Medical Education Reform and contributed to the shaping of plans for this important area. Board and Committee meetings have progressed as scheduled.

NHS Education for Scotland

Item 08a

Date of meeting: 8 February 2024

NES/24/06

NES Board

1. Title of Paper

Draft Learning and Education Strategy

2. Author(s) of Paper

Kevin Kelman, Director, NHS Scotland Academy, Learning and Innovation.
Ryan Reed, Head of Programme (Learning Strategy and Collaboration), NHS Scotland Academy, Learning and Innovation.
Jill Kyle, Senior Admin Officer, NHS Scotland Academy, Learning and Innovation (Appendix 3 analysis of survey responses).

3. Lead Director(s)

Kevin Kelman, Director, NHS Scotland Academy, Learning and Innovation

4. Situation/Purpose of paper

- 4.1 Following approval and publication of the NES Strategy 2023-26, the development of a suite of enabling strategies and plans to underpin implementation has been identified as a priority. The Learning and Education Strategy (L&E Strategy) is one of these enabling strategies and will set the direction for NES in fulfilling its overall purpose and vision through learning, education, and training.
- 4.2 It makes the necessary connections between the NES Strategy (approved by the Board at the 25 May 2023 meeting) and the Transformation Route Map (approved by the Board at the 28 September 2023), which outlines NES's approach to implementation of key corporate improvement projects over the strategic cycle. It is also aligned with NES's Organisational Development Plan. The L&E Strategy is an organisational strategy and is deliberately discipline and profession 'neutral'.
- 4.3 The purpose of this paper is to provide the NES Board the opportunity to **review** and (subject to any changes it may require) **approve** the L&E Strategy.

- 4.4 Board is asked to **note** that the design and layout of the document will be reviewed and updated once all changes are agreed.

5. Background and Route to Meeting

- 5.1 The content of the draft L&E Strategy has been informed by a series of workshops and focus group sessions involving key internal stakeholders, existing executive and management groups within NES such as the Strategic Implementation Group, Education Leadership Group, and the Executive Team.
- 5.2 There has been active engagement across all NES directorates. The 'priority themes' within the L&E Strategy directly reflect the key drivers and enablers that were identified by these stakeholder groups in the early stages of development. More broadly, the L&E Strategy has been closely aligned with the NES Strategy 2023-26, strategic KPIs, and the NES Corporate Improvement Projects as these have developed.
- 5.3 A Learning and Education Reference Group (LERG) was established in late April 2023, meeting monthly since its establishment, and bringing together representatives from across all NES directorates (circa. 40 members). LERG and a small sub-group have played a central role in the development of the draft. LERG has pooled subject matter expertise, but critically has allowed for the two-way flow of information into and out of directorates and NES teams.
- 5.4 An internal consultation was carried out to give all NES colleagues the opportunity to comment on early drafts of the L&E Strategy. This was also issued to non-executive directors. Overall support for the principles and priority themes set out within the document was very high amongst the moderate number of respondents, with an average 90% of them strongly agreeing or agreeing with these. A range of suggestions and comments received via the internal consultation have been incorporated into subsequent iterations of the document. The outcomes of this consultation were also shared with the NES Partnership Forum.
- 5.5 On the 26 October 2023 the Draft L&E Strategy was discussed as part of a NES Board Development Session. The background to the development of the L&E Strategy was explored and Board members had the opportunity to ask questions, provide comment or propose changes. The EQC Chair was specifically invited to provide feedback and steer.
- 5.6 The feedback from this meeting was captured and changes made to the document to ensure this feedback is reflected in the draft now being reviewed by Board. A summary of the feedback from the informal Board Development meeting and the changes made in response has been provided at Appendix 1.
- 5.7 On 2 November 2023, the draft L&E Strategy was circulated to the Education and Quality Committee (EQC) for comment and approval. Quorate approval was given by EQC on 9 November and no changes were proposed by members.

- 5.8 On 1 November 2023, the draft L&E Strategy was shared with external stakeholders to gather their views and feedback through a consultation survey. This survey closed on 14 November 2023. A summary of the circulation for this consultation is provided at Appendix 2 and mapped against the NES stakeholder matrix previously agreed by the Board in March 2023. A summary of the external consultation responses is included at Appendix 3, including any proposed changes in response.
- 5.9 Changes made in response to external stakeholder feedback were subsequently shared with EQC for review and approval. Quorate approval was given by EQC on 26 January 2024. In parallel, some additions were made in response to comments from the NES Chief Executive and in discussion with the NES Chairman.
- 5.10 All changes have now been incorporated into the document presented to the Board for review and approval.

6. Assessment/Key Issues

- 6.1 The introductory sections (p. 2-5) in the draft L&E Strategy reinforce the links with the NES Strategy 2023-26 and emphasise strategic alignment with NES's Purpose, Vision and areas of focus (people, partnership & performance). Alignment of the L&E Strategy with the NES Strategy 2023-26 has been a priority at all stages of development, but the intention has also been to build upon the level of detail and what this will mean in a learning and education context. The purpose of the L&E Strategy – as the first strategy of its kind for NES - is to support transformational change in the longer term, in addition to setting the priorities for delivery within the current strategic cycle (2023-26). The new content on p.5 acknowledges the complex landscape of the health and social care sector and the role of partnership in addressing the challenges across the system. It also reflects our willingness to work with a wide range of public services (whilst recognising the role of our partners) in pursuit of improved health and wellbeing outcomes and reduced inequalities for the people of Scotland.
- 6.2 The principles for learning education (p. 6-7) are intended to provide an enduring set of parameters that will support decision-making and educational developments across a range of contexts and at different levels of the organisation. It is proposed that these will be important as NES implements specific change projects, many of which are addressed in the priority themes set out later in the document. In many respects the principles are about a set of philosophies or values that underpin the approach NES will take to the provision of learning and education, but they could also be viewed as the foundations of a 'target operating model' for NES learning and education. Having these guiding principles at time of significant change will help to ensure that we stay true to our strategic vision and purpose. It is suggested that these principles (and the L&E Strategy as a whole) may also support and guide the

work of EQC and Board in providing the necessary governance and assurance around this work as NES moves forward with implementation.

- 6.3 The priority themes (p. 9>) reflect the direct input of colleagues from across NES and describe the focus we require to deliver on our overall strategic intent and will embed our principles for learning and education in our work. This section describes specific pieces of work, the outcomes this work will deliver, and the actions that will be taken to deliver them. Delivery against these priority themes will be largely (but not wholly) through the NES Corporate Improvement Programme and component projects. There are significant programme and project governance structures in place and regular reporting on progress, deliverables, and benefits realisation. NES will measure progress against these priority themes, which are directly linked to NES's Strategic KPIs for performance monitoring purposes. Many of the projects and actions detailed in this section will enhance the ability of the organisation to systematically provide data and information to EQC and Board, as these committees fulfil their governance and assurance functions.
- 6.4 Section e) of the checklist has been ticked to indicate that these issues have been considered as part of the development of the strategy and are referenced within, with a view to further strengthening our approach across NES in the context of our learning and education. An EQIA is in progress drawing from evidence collected as part of the development of the NES Inclusive Education and Learning Policy (it was thought best to wait until content was agreed). We are aware of the need to do this as we implement specific projects for implementation and the group managing the EQIA process for the L&E Strategy document will also inform these next steps from an EDI perspective. NES's Equality, Diversity and Human Rights team is engaged, and we will take further advice before the L&E Strategy is published.
- 6.5 Section f) of the checklist indicates that climate emergency and sustainability has been considered from the perspective of the role NES plays in terms of tackling the climate emergency through the development of the knowledge and skills of the Health and Social Care workforce in this area. An update on the development of the document has been provided to the NES Climate and Sustainability Group.

7. Recommendations

7.1 Board is invited to:

- Provide any further comments on the Strategy, noting the changes that have been incorporated further to the Board development meeting (Appendix 1) and those proposed in response to external consultation (Appendix 3)
- Approve the L&E Strategy.
- Note the intention to complete a formal EQIA before publication (currently underway).

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 [Our Strategy 2023 – 26 People, Partnerships and Performance](#)

1. People Objectives and Outcomes

2. Partnership Objectives and Outcomes

3. Performance Objectives and Outcomes

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

Author name: Kevin Kelman & Ryan Reed

Date: 29/01/2024

NES

Appendix 1

Feedback from Board development session (26 October 2023) and summary of changes made in response.

- 1. Link between principles and themes not entirely clear. Need a closer link between these to explain how principles have been pulled through into themes (or not).**

Response and changes

Text altered in the preamble to the principles (at p.4, directly before principles are outlined) to support clarity of their purpose. Added “We will deliver our Learning and Education Strategy through seven principles, which set out what staff, learners and trainees, partners and the people of Scotland can expect as we deliver on our strategic intent. These principles will guide our approach within the current strategic cycle (2023-26) and beyond. We will implement and embed them through our priority themes for 2023-26, as described from page 8. We will measure our progress against our priority themes and our Strategic Key Performance Indicators.”

Text also amended at the start of p.8 when introducing the priority themes to make it clearer that these are for delivery within the current strategic cycle: “Informed and guided by our seven principles for learning and education, for the 2023 – 2026 strategic cycle we will focus our efforts on four priority themes and their outcomes to enable us to fulfil our potential in supporting recovery and transformation across health and social care.”

- 2. References to co-production in the principles- could these be made more prominent/stronger?**

Response and changes

Principle 1 has been extended to include the following text: “The views of people with lived and living experience of health and social care services must be central to our approach to developing and delivering learning for the workforce. The use of co-design and co-production approaches can ensure we are focussing on what is most valuable to the people who use services. Combined with effective use of evidence and a focus on efficient and sustainable delivery, this ensures NES is making a full contribution to the implementation of value-based health and care in Scotland.”

This is linked with principle 1 through the focus on people. Principle 4 also refers to partnership with people that have lived and living experience.

- 3. Could sustainability be made more prominent given it must be business as usual and not an 'add on'?**
- 4. Widening access and EDI could be more prominent throughout document.**

Response and changes (to points 3 & 4)

Principle 5 (p.6) has been amended to include the following: "We prioritise accessibility, equity, inclusivity and diversity across all learning and education. By fulfilling our duty to do this, we are also better placed to widen access to learning and careers in health and social care. We also recognise the critical importance of sustainability and building the skills of the health and social care workforce in tackling the climate emergency through our learning and education offer."

Priority theme 2 (p.11) has been amended to include: "Across each of these frameworks we will systematically consider opportunities for widening access to learning and to careers in health and social care." and have added sustainability education into outcomes for the health and social care workforce.

- 5. Could/should the principles for learning and education be punchier and capture aspirations? Perhaps one of these might be 'accessible' and inequalities should be more prominent too?**

Response and changes

Wording across the principles has been changed so it is less descriptive of the future and is more a statement of 'how we do things' (e.g., removed references to 'will'). Headings of principles 1 and 2 have been shortened. Other text has been made more concise where possible. These principles are new to NES, and this is the first strategy of its type for the organisation. Therefore, it was felt important to maintain sufficient explanation of meaning. It is hoped references to accessibility and equity are addressed by changes in response to points 3 and 4 above.

- 6. In the principles, have we underplayed the role of individuals and their own responsibilities for professional development? As autonomous learners?**

Response and changes

Principle 1 has been amended to reflect this suggestion: "We show care for the wellbeing, health, and safety of our staff and learners and model the NHS Scotland Values in our approach. [Whilst recognising the individual responsibility held by health and social care staff for their personal and professional development,] we cultivate the competence, autonomy, and belonging of educators and learners, enabling them to deliver exceptional quality and improved outcomes through their practice."

Appendix 2

The NES Stakeholder Map¹: stakeholders by influence versus interest.

All stakeholders in the 'high influence' category (top half of the matrix) have been sent the external consultation survey. This is with the following exceptions:

- Scottish Government are being consulted through the NES Sponsorship Team, rather than through the consultation survey.
- Elected Representatives.
- People with lived or living experience have not been emailed directly due to the nature of the L&E Strategy and the need to keep consultation with these groups relevant and sensitively managed.

A number of organisations in the bottom right quadrant have also been consulted:

- Third sector
- Private sector health and social care
- Justice sector

¹ Please refer to figure 1

Figure 1 – Stakeholder Matrix

<p>High influence</p>	<p><i>Keep Satisfied:</i> Healthcare professional bodies Social care professional bodies Scrutiny/regulatory bodies</p>	<p><i>Engage closely:</i> Scottish Government Elected Representatives Golden Jubilee National and Territorial Boards Health and Social Care Partnerships/IJBs SSSC Social Care bodies Local Authorities, SOLACE, COSLA Scottish Care Academia/ Educational bodies Staff (NES) NES Trainees NES Board Unions People with lived and living experience Health and social care workforce NES Staff</p>
<p>Low influence</p>	<p><i>Monitor:</i> UK peer bodies Media</p>	<p><i>Keep informed:</i> Wider public sector workforce Wider public sector Third sector Private sector health and social care Justice sector Private sector providers Potential employees NHS Careers outreach work, e.g. schools, STEM Lay representatives Volunteers</p>
	<p>Low Interest</p>	<p>High Interest</p>

Appendix 3

Changes to the L&E Strategy in response to the external consultation survey responses.

The overall response to the L&E Strategy was positive, with the majority of respondents supportive of the approach taken and the content of the principles and the priority themes. However, there was a range of useful and constructive feedback to help to improve the L&E Strategy and its relevance and presentation for some of our external stakeholders.

In response to the external consultation, the following points were identified as areas for change and these have now been considered and incorporated into the final draft version of the L&E Strategy. Any further changes required by Board can also be included before publication.

1. In response to comments about the diversity (diversification) of the workforce changes should be made to **emphasise that the L&E Strategy is intended to be fully inclusive of all roles (and at all levels) in health and social care** and is focussed on NES's delivery of learning and education in line with its statutory responsibilities. There were a number of requests for specificity about particular roles or professions and it is suggested that this is avoided, because by including these others will be excluded. The L&E Strategy has, from the outset, been intended to be discipline neutral in order to maintain its inclusivity. It is **proposed this is made more explicit and more references made to the diverse nature of health and social care roles**. The language of 'learners', 'educators' and 'workforce' is prominent to maintain an inclusive approach.

Response: The inclusive, disciplinary, and professionally neutral approach has been made more explicit at p.5. Changes have also been made to explain NES's recognition of the diversity of the workforce and clarify that it extends to all professions and occupations. Willingness to engage with partners outside of the formal boundaries of the health and social care sector, whilst recognising the responsibilities of our partner organisations and limits of our statutory responsibilities has also been made clear at p.5.

2. Further explanation of **partnership and collaboration and the range of organisations that we will work alongside in delivery of the L&E Strategy** should be added at p.16 (now p.17/priority theme 4) to illustrate our systematic approach and willingness to work on a 'cross system' basis to improve outcomes.

Response: The range of partners we will work with has been extended at p.17 and further explanation (inc. naming some individual partner organisations) has been added at an earlier point in the document at p.5.

3. Further emphasis should be placed, wherever possible, on the role NES (through learning and education) can play in **improving public health and reducing health inequalities**. This is referenced in a general way throughout the document,

recognising that this is primarily through the workforce, but there may be opportunities to strengthen this.

Response: This has been reflected at p.10 (outcomes for the People of Scotland) and at p.17 in terms of implications/meaning of partnership working. The causal link between learning and education for the workforce and improved outcomes and equality (impact) is difficult to describe and evidence. However, there are many interconnected issues across health and social care which, if addressed, may positively influence health outcomes and equity. Many of these are the focus of the L&E Strategy as a whole (workforce sustainability, values-based care and its inclusion in L&E content, addressing the climate emergency, EDI in education, coherence, efficiency and reduced duplication). A willingness to work with others outside of health and social care (now strengthened within the L&E Strategy) also has the potential to positively impact on outcomes and inequalities, recognising that many determinants of health and wellbeing flow from outside of citizens direct contact with and use of formal health and care services.

Summary Analysis of External Consultation Survey Responses

Introductory questions (Q1-3)

The external stakeholders' consultation survey ran from 1 - 14 November 2023, based on the stakeholder matrix previously approved by the Board, and mirrored the questions of the internal NES staff consultation conducted in August 2023. The Draft Learning and Education Strategy had been refined since the earlier survey incorporating feedback from colleagues and benefitted from internal design to reflect NES's corporate 'look and feel' ahead of circulation externally.

A total of 35* responses were received from a variety of respondents covering NHS Territorial Health Boards, NHS24, Local Authorities, DHI, Social Work Scotland, Skills Development Scotland, Royal Pharmaceutical Society, General Pharmaceutical Council, Higher Education Institutions, Scottish Government and Third Sector organisations and spanning broad range of job roles, from CEOs down and including a mix of clinical and non-clinical staff.

**Of the 35 individuals who responded to the external stakeholder consultation, 4 mis-identified as 'internal' possibly due to dual roles; however, for the purposes of this analysis, they are being classified as 'external'.*

Words used to describe the strategy (Q4)

The most popular description was '**ambitious**' with 7 respondents (20%) choosing this as one of their three words. The next most common descriptors were and '**inclusive**' with 6 respondents, '**collaborative**' with 5 respondents, '**clear**' with 4 respondents, and '**comprehensive**' with 4 respondents.

Other descriptors provided by more than one respondent were: partnership, innovative, informative, long/lengthy, aspirational and complex.

A few individuals described it as brief, limited, unrealistic and unclear. While most individuals used more positive terms, describing it as relevant, forward-thinking, cohesive, challenging, considered, needed, robust, important, enabling, positive, attractive, coherent, tailored, innovative, quality-focused, patient-focussed, illustrative, thoughtful, evolving, professional, modern, interesting, intriguing, curious, high-level, cross-cutting, aligned, quality, pathways and readable.

A few respondents left comments rather than specific words. These were:

- “failing to meet needs”
- “motivated training deliverables”
- “long but at times vague.”
- “values”, “learners”
- “good piece of work”
- “theoretically good”
- “people-first”

NES Learning and Education Principles (Q5)

Respondents were asked to what extent they agreed that each of the principles were an effective means to achieving NES’s ambitions (as set out in the vision and purpose of NES):

1. Prioritising the quality and impact of learning and education by supporting and developing people
86% strongly agreed (60%) or agreed (26%), with 14% remaining neutral
2. Supporting high-quality learning and education across health, social care and the public service
91% strongly agreed (57%) or agreed (34%), with 8% remaining neutral
3. Enhancing coherence, reducing duplication, and driving efficiency
83% strongly agreed (49%) or agreed (34%), with 17% remaining neutral
4. Actively seeking collaboration and partnership
89% strongly agreed (69%) or agreed (20%), with 9% remaining neutral and 3% disagreeing
5. Playing our part in addressing the shared challenges we face
86% strongly agreed (57%) or agreed (29%), with 9% remaining neutral, 3% disagreeing and 3% strongly disagreeing
6. Adapting for innovation and new ways of delivering health and social care

80% strongly agreed (54%) or agreed (26%), with 17% remaining neutral and 3% disagreeing

7. Systematically defining and measuring value and impact

86% strongly agreed (51%) or agreed (34%), with 11% remaining neutral and 3% disagreeing

Missing content in the principles (Q6)

Respondents were then asked if there was anything missing in the principles. 19 respondents chose to give comments – of those 19, 7 said “no”. Of the 12 that did think there was content missing, suggestions varied about what that content was. Some respondents gave specific suggestions as to what was missing. However, other than **diversity** being highlighted twice (in terms of Equality and Diversity, and diversity of the workforce), and more definition requested around **collaboration and partnership** within the supplementary comments, there was little consensus on what these should be:

- A digital strategy.
- Equality and Diversity.
- How impact will be measured.
- Recognising the diversity of the workforce (feels like 'the doctors and nurses show' often).
- There is no mention in the Strategy regarding articulating with the Centre for Sustainable Development - the relationship between this and NES is often not well understood and confusing.
- **Partnership** is not defined, and it seems really too vague given the substantial role that, for example, external tertiary educational institutions play and given the urgent need for collaboration to move efficiency and positive impact forward. Who / what is a partner - document would benefit from definition. A partner might be an employer / health board / university / regulatory body / funder etc. A stakeholder / partner diagram would help and break up / cut through the long word content.
- COSLA strongly agree with the principles. COSLA welcomes the emphasis on **collaboration and partnership** but is concerned that in relation to training for Social Work and Social Care there is no mention of the SSSC and their pivotal role in providing training and regulation for social work and social care workforce. We would welcome inclusion of how NES will work with partners to include training developed by them, into their platform.

Additional extensive general and detailed discipline-specific feedback was provided relating to the principles:

Practical suggestions:

- The principles are largely comprehensive; however, overall my main observation about the Strategy is that it is very broad brush in nature. It makes reference on page 3 to improving population health and reducing inequalities,

but no further explicit mention to how NES will support the workforce to achieve this. It also makes reference to the health and social care workforce - this is vast and it would be helpful if this could be more clearly defined. My own area of expertise and practice is in relation to public health; there is little detail of the role NES will play in supporting the public health workforce.

- Although this might be implicitly considered in the strategy, it would help mentioning health and care professionals moving to Scotland (perhaps under Principle 3 on page 5 and/or Priority Theme 2 on page 11), to make reference to, for example, professionals qualified overseas, trainees and registrants moving from England, Wales and NI, etc.
- As the strategy outlines, the Principles for Learning and Education align with the organisational goals. The strategy highlights NES's commitment to co-production integration of education research, innovation, technology, and data to improve learning delivery. This offers a practical path to achieve better outcomes and sustainability by providing high-quality learning opportunities aligned to the system's needs and individuals. An additional consideration would be to ensure that all aspects of workforce development are considered, including adaptability to future changes in healthcare demands and emerging challenges.

Other Reflections:

- Need to concentrate on training those who will remain in the area / country. Currently train large amount of international students who have no plan to work here. Universities are businesses, not interested in improving workforce.
- The seven principles noted appear to underpin the vision for the NES Learning and Education Strategy 2023-2026. Principle 3 is focussed on enhancing coherence, reducing duplication, and driving efficiency which is welcomed. Supporting a multi-professional approach where shared system, organisational or workforce needs identified span sectoral, professional, or occupational boundaries. Learning interventions are where possible developed using a once for NES/Once for Scotland and discipline neutral approach. There is discussion about the development of 'uni-professional' learning where necessary or to meet professional regulatory requirements.
- Social Work in Scotland faces a growing set of challenges in meeting increasing demand for services at a time when budgets are under pressure through cuts in public expenditure. Building and maintaining a robust, confident social work workforce is a key priority in responding to identified challenges. However, social work, in common with other public services, faces major difficulties in recruitment and retention, particularly of qualified social workers. The *Setting the Bar for Social Work in Scotland* report of 2022 identified key workforce issues. Along with an ageing workforce where 19% of social workers are nearing retirement, data indicates that at least 25% of newly qualified social workers have left the profession within six years of qualification.
- Within Social Work we currently have a system whereby there are 33 different approaches to learning and development, pay, practice standards and improvement across social work. There is no single body tasked with oversight of social workers professional development, policy development or improvement which results in the inconsistencies in provision across the sector.

Priority themes (Q7)

Respondents were asked to what extent they agreed that the following themes reflected our learning and education principles:

1. Developing and implementing an integrated and holistic approach to quality
89% strongly agreed (49%) or agreed (40%), with 11% remaining neutral
2. Developing new, future-focussed learning pathways.
89% strongly agreed (51%) or agreed (37%), with 11% remaining neutral
3. Enhancing learner-centred delivery
83% strongly agreed (60%) or agreed (23%), with 14% remaining neutral and 3% disagreeing
4. Working in partnership
82% strongly agreed (57%) or agreed (26%) with 14% remaining neutral and 3% disagreeing

Missing content in the priority themes (Q8)

Respondents were then asked if there was anything missing in the themes. 20 respondents chose to give comments – of those, 10 said “no”. Of the 10 that did have suggestions, there was very little consensus about what was missing.

Other suggestions:

- Supporting the staff
- I appreciate these are high level themes overall, but for me there is lack of detail on the role NES will play in *supporting the public health workforce*. In particular, clear career pathways into public health, then to support progression within public health is a significant gap. Learning, education, training in particular for public health (and the practitioner workforce) is a gap in Scotland. Clarity also on the role between NES and PHS within this would be helpful?
- Another gap for me is relating to learning and development to support all levels of staff within health and social care deliver their work in line with a positive culture - so more value based informed learning and development.
- The importance of partnership is evident throughout the Themes which is welcomed. Although there is mention on page 14 of partnership with HE, there should also be *reference to partnership with schools and FE*. This will be crucial in coming years in relation to workforce development but also the skills young people are entering the health and social care sector with, eg meta-skills and experience of simulation, etc.

- It would be better to combine 'Working in partnership to develop new, future focused learning pathways' so that the partnership aspect is not dissociated from scoping or thinking work.
- Developing collaboration and cohesion in the workforce (lost/being lost due to 'portal' and online approaches to learning and development) as learning from others experience and networking is such a valuable part of staff development.
- Outcomes - impact of learning
- Hard to see how they will report on KPIs because these haven't been operationalised in a meaningful way at this stage.

Reflections:

- The themes appear aligned to the priorities.
- Priority Theme 2 does have a KPI around attraction. I think this is very important. In all growth industry sectors, we have observed a pattern around developing the courses but not attracting the supply pipeline required. "Sector attractiveness" is a huge issue. I didn't see anything around meta-skills specifically although I note how digital skills is embedded.
- Would recommend removing the word 'young' from Priority Theme 2 (page 12) and throughout the document as it could be perceived as exclusive language.
- COSLA strongly agrees with the priority themes outlined. We welcome the emphasis on collaboration and reduction of duplication but again we are concerned that there is no mention of the role of the SSSC.
- While we welcome the TURAS refresh, there needs to be collaboration with Local Government, SSSC and other social care organisations to ensure that this platform is easily accessible to the whole workforce, including those in the third and independent sectors. This will require a decision with partner organisations on whether TURAS is the platform of choice for social care education and learning. If this is the platform of choice for education and learning for all health and social care then it will need to include the range of excellent resources developed by Local Government, SSSC and other social care organisations.

Other comments (Q9)

Respondents were given the option to provide any additional comments - 32 (91%) chose to do so.

Most respondents used this opportunity to reiterate their support for the strategy, noting that it was "comprehensive". Others welcomed the opportunity to influence development of the strategy and provided broader reflections or suggestions on how it could be improved or refined.

Positive comments:

- Excellent clearly written strategy which accurately defines NES's future direction of travel to support the health and social care workforce in Scotland.
- Comprehensive strategy, from an Educational perspective it would be interesting to see how you would see yourselves working more closely with partners and how you can overcome barriers that impede shared outcomes.
- Really like the measure progress through People Partnerships & Performance - this will help when reporting / accountability of evidence of impact.
- Partnership with schools in developing the workforce and ensuring young people are aware of a career (they are) and just as importantly clear and obvious pathways into the sector. This is crucial. Links can be in the primary sector through 'Future Nurse' programmes. In secondary it is important that co-creation of the curriculum is developed. This is happening at the moment through Foundation Apprenticeship programmes. This allows for easier entry into the health and social care sector, but also develops the required skills in the young people, including having experience of what NES training has to offer.
- Strategy is well considered but would definitely benefit from clearer discussion about stakeholders and partners.
- The strategy is very comprehensive and wholesome.
- Excellent approach to collaborative learning.
- Good to have a chance to give feedback
- As a strategy it looks great, but the key is whether it's delivered. That must always be the objective.
- Comments from Glasgow Caledonian University re Strengths:
 - Excellent link to prioritising people/service users to ensure the strategy is truly person and family centred.
 - Highlights the vision for expansion in terms of education across healthcare to meet the needs of the population – although how this will be achieved could be clearer.
 - The drive to ensure quality and value in terms of service delivery and development.
 - Good to see the link to credit rating across theme 1 but we also thought it plays a key role in theme 2, 3 and 4.

Reflections:

- I noted that Artificial Intelligence was mentioned at the beginning of the strategy as a key driver; however, did not see where this was picked up in the themes and what the position of NES is in relation to leveraging this technology in future years to help deliver the themes. It would also be good to understand more deeply the extent to which NES will seek to develop systems-wide learning products which can be picked up and utilised locally in a bid to seek a national approach to learning and development.
- Does not seem to actively address the geographical needs and inequalities in workforce development. For me it does not confidently address what is needed from an education perspective for the future NHS workforce in Scotland. Underwhelming.
- Will be interesting to see how the learning pathways interrelate and reinforce each other within a neutral approach to disciplines.

- The extent to which NES is 'open for innovation' could be further stressed, as we have to find new ways of educating and accrediting learning in order to transform our health and care system at pace.
- Acknowledging the importance of influencing Higher and Further Education to respond to changing workforce needs will be crucial to collaboratively build a talent pipeline. This could perhaps be more overt.
- I note reference to 'sustainability education'. Does this mean education relating to the climate change agenda?? It would be helpful to clearly define this as this could be open to interpretation.
- There is little that talks about qualifications aligned with roles and career pathways. Being able to count the number of professionally qualified people is important to employers (ISO) as is having a portable qualification as testimony of knowledge is to individual workers. The word 'qualification' bizarrely features not once in the strategy draft and yet the backdrop is a highly regulated sector. Qualifications are a worker route to financial independence, career progression and staff retention and mobilisation. Learning is clearly discussed at length but qualification as one type of benchmarked outcome / metric is also critical.
- All the personalisation and feeling of being a member of an NHS Team is lost, as learning and Education has become so 'silo' and impersonalised.
- Need to set priorities in line with national workforce pressures (e.g. Audiology workforce severely depleted yet seemingly no NES action (I'm aware of) to support improved education pathways, which is the root of the workforce depletion).
- The link to Centre for Sustainable Development (CfSD) could be made explicit to assist understanding in context.
- This is an ambitious strategy to deliver in under three years. However, I was left wondering how NES will be anticipating the rapid evolution of job roles and their impact on career pathways and learning - maybe that is something to consider beyond 2026? There will be the emergence of new hybrid roles to cope with digital transformation, as well as the predicted expansion of digital, data and knowledge workforce in health and social.
- I was left wanting to see a stronger emphasis on digital transformation and its impact on learning and workforce development in health and social care. It is implied throughout but not explicitly brought forward.
- The Royal Pharmaceutical Society are the professional body for pharmacy and pharmacists and welcome the opportunity to respond to this consultation in our capacity as a strategic partner. NES Pharmacy and RPS are already working together to deliver on education programmes. We recognise the value of multi-professional learning and would like to understand the potential impact on our profession of a move to discipline neutral learning. There may be opportunities for discipline neutral learning for skills in leadership, education, research and some areas of clinical practice. We support the need for uni-professional learning when necessary for regulation, however, there will be a necessity for profession specific learning for pharmacists to ensure that our workforce reaches its potential. The strategy describes the approach NES will take to assure the quality of the education provision, however, there is little describing the assurance of the workforce capability after these

education and training experiences e.g., assurance that the learning outcome has been achieved.

- Would help seeing a more specific strategy following this, with a breakdown for each health and social care profession, such as pharmacy technicians.
- Looking forward to seeing this strategy implemented
- RCGP Scotland welcomes the opportunity to respond to this consultation.
- Comments from Glasgow Caledonian University re Limitations:
Very limited link to the HEI sector or the widening access for higher education within health and social care – even within page one, it mentions academic regulators but not academic organisations (may be poor word choice but either way, not inclusive as the vision suggests). Whilst the narrative suggests collaboration to achieve the vision of this strategy it very much focuses on NES. Within the section on partnerships this could focus more heavily on the vast civic partnerships and collaborations. This area of focus isn't very clear in terms of what the strategy wants to achieve and with who. Point 4 perhaps alludes to the collaboration with NHS Academy and view to be an independent credit bearing body (although not actually stated anywhere, we believe it should, as would appear integral to achieving the KPIs by 2026). Collaborations with educational organisations would need to be the focus of achieving point 4. Again, page 7, we think perhaps there is a need to make the collaboration with NES and the Golden Jubilee to form the academy, clearer. Lack of focus on diversification across the work force. We know this is a driver for the government and NES, it seems to be missing from this report. Appendix 1 appears confusing with people mentioned twice – learners and staff. Maybe this could be Learners (and combine both of these since employees need to be seen as the learner as we all have to support CDP) and then have another quarter that has a different title that focuses on wider diversification, staff development, wellbeing and satisfaction. Employees need to be seen as the learner as we all have to support continuous development in all roles. This is a high-level document and as such not too finely grained, but we would have liked to see some mention of students in the purpose and vision statements and under the “what we do” section, all of which refer to workforce only. There may be good reasons for this i.e. until students become workforce they don't really sit under NES, so perhaps not their core business, but still it would have been good to see some kind of nod to the future workforce, which NES do have a role in preparing (e.g. through TURAS) and in working with the workforce on placement provision and capacity. The 2023-26 objectives do not mention students, or placement capacity in the workforce at all. Again, this might be too finely grained, but our concern is if it is not mentioned it makes it look unimportant, and that sense of students and placement not being important is one as an HEI consistently come up against (there can be a lack of appreciation (at times) of the transferable skills students gain while on non-traditional placements such as third sector). Yes, direct service provision is the most important, but if we don't have a workforce coming through, it becomes quite problematic to provide that for the future. The strategy is very 'skills' heavy would have liked to have seen some mention of 'leadership' also meeting the 'needs to the population' requires I think at least a mention of 'prevention' and the interface between primary/secondary care. To avoid duplication across our sectors how does

this strategy fit into the PfG priorities and the AHP review and Nursing taskforce (led by CNOD) both who have recommendations and actions around education and alternate routes to registration?

- While COSLA welcomes the emphasis on coherence and reduced duplication within the Value Lens diagram, there needs to be recognition that social care is one of many functions within Local Government. There will be overlap for learning and education for our workforce across many services so it is essential that we reduce any unnecessary duplication across the system. For example, COSLA has joint responsibility with the Scottish Government for the delivery of *Enabling, Connecting and Empowering: Care in the digital age, Scotland's Digital Health and Care Strategy (2021)* as well as *A Changing Nation: How Scotland will Thrive in a Digital World*, so coherence and reduced duplication is essential for ensuring resources are used as efficiently and effectively as possible. While COSLA agrees with the vision outlined in this draft strategy, it is a concern that there is no mention of the role of social work. Social Work has a unique role acting as conduit between health and social care. It is therefore essential that it is recognized as such within this strategy. Social work and social care are not the same.
- Overall, the strategy was easy to read, with a clear link to the overall NES strategy 2023-26. Some points for consideration:
 - How/ when the strategy's outcomes are delivered may be influenced or dependent on the outcome of a number of other factors such as the Educational Bill and the Withers review.
 - Given the ambitious outcomes, it would be helpful to have a list of priority areas.
- The Value lens diagram with the examples, was particularly helpful in visualising how the educational strategy's values interact. It was reassuring that the priorities (e.g., supporting high quality education, actively seeking collaboration and partnership, learner centred delivery) were closely aligned to those of SFC, and look forward to developing the SFC/NES joint work to understand and respond to changing needs and the current challenges we face in the area of health and social care.
- The link from priority to outcomes, to how the outcomes will be achieved and measured was clear, and the focus on developing a systematic approach to any work to deliver the outcomes is important, as the strategy is very ambitious.

Further contact and late responses.

Although the survey was completed 'anonymously', a total of 16 external respondents provided contact details and expressed a willingness to engage in further consultation on the NES Learning and Education Strategy, e.g. surveys, interviews or focus groups. Additionally, ~5 individuals/organisations contacted NES after the survey deadline had passed to offer late feedback some of which (from Scottish Funding Council, COSLA) has been reflected within the comments. The SSSC also provided a late response (not

included in the analysis due to time pressures), strongly in support of the L&E Strategy, but with some further comments that seek to build in clarity on the respective roles of the SSSC and NES. All late responses are included below.

Learning and Education Strategy: Consolidated External Feedback from late respondents

	Comments
1.	<p>NHS Greater Glasgow and Clyde</p> <p>General/ Structure</p> <ul style="list-style-type: none"> • Comprehensive high level document, would be helpful to understand background on stakeholder engagement to bring the document to this stage. • The description of workforce is high level and generic, while understand that not all job roles can be listed is helpful to outline the job families that this strategy covers to provide assurance that all roles are encompassed within the principles of the strategy • Positive to see emphasis on inclusivity across the strategy • Seven principles of delivery provide a clear structure to the document layout and offer broad principles for development of heal and social care workforce • Overview section intro sets scene of NES offerings for 2023 – 2026 (Provision high quality education, training, workforce development, workforce data and technology for Scotland’s health and social care workforce) • Purpose section outlines priorities for NES, plus aim to be responsive to NHS needs over the next decade • Strategy on a page - in design of appendix 2 suggest demonstration of flexibility and an agile approach to support employers needs for the long term as very generic principles for the period and aspiration of support for the decade. • In regard to the areas of Quality and impact through people, not clear if this be led by NES or for Boards to commission work in these areas to support a local population focus. What and how needs to be clear • Value Lenses - Helpful diagram to illustrate positioning of NES and examples of outcomes • Positive to see emphasis on inclusivity and wellbeing across the strategy • Value Lenses - Helpful diagram to illustrate positioning of NES and examples of outcomes in particular the importance of workforce and learners as individuals • The positive impact of principle three should be to support inter professional learning and so multi-disciplinary working, however it is reassuring to see that the importance of specialised professional learning is also recognised. • Principle 6 supports development of technology; the workforce of the future will need to be trained in how best to use these technologies, and to understand opportunities that they offer but also their limitations <p>Content - Priority themes and outcomes</p> <ul style="list-style-type: none"> • High level outcome statements, clear connection to the NES Strategy and National Workforce Strategy in this section required - overview on a page suggested with timeframes and connections to strategies to support Board in identifying areas of support for local workforce development priorities

- Explicit connections required to Centre for Workforce Supply - Scottish Government, NHS Academy
- More specific focus on priority professional groups and development of pathways, clarity on the main focus areas to support workforce supply and development and fit with long term national and local workforce planning needs.
- Include recognition of changing/ review of skills education landscape in Scotland
- For action plan, outline priorities for Year 1 – 3 of the strategy, (short, medium, long)
- Approach to measurement of progress is outlined for each priority theme - how will this be shared with stakeholders
- What are the cost implications for the action plan to support the strategy, how this will fit with National Workforce Strategy.
- Will Boards be able to bid for monies/ services to develop local action
- It is key that the workforce data referenced in principle 2 (and priority 1) is as accurate as possible in order that modelling based on these data has high value (connections to Centre for Workforce Supply - Scottish Government, NHS Academy).
- The emphasis on quality is reassuring - how that is assessed, and supported where necessary, seems key

Action Plan

- The high level principles and outcomes require to be seen in context of an action plan supporting this strategy document to provide timeframes for the areas described. This allows Board to factor in pace of national work or to identify areas of influence to connect with local Board workforce planning

Communication and Engagement

- Reference to engagement and consultation with stakeholders - how will this be done, perhaps outlined in the action plan if not in the strategy.
- Not clear on ways that Board can influence direction of programmes
- How we will get there section - NES have committed to organisational change within their service to be fit for the future - how can stakeholders engage with this redesign
- A shared communication and engagement plan essential to make visible the stakeholder groups invited to provide feedback plus timeline for development, agreement and final publication with action plan. This aides Board local discussion and have insight to level of awareness that partners have in the development of this strategy
- Be clear how NES will work with partners to provide the outlined support to develop skills, capable, resilient workforce etc as pertains to local Board
- There are many elements across the strategy that refer to engagement with partners and stakeholders. A share of stakeholder map and approach for co-design and collaboration would ensure that Board can plan for engagement activity and contribute to this effectively.
- Emphasis on research and networking how will this be shared to avoid duplication in specific areas/ access to support local efficiencies in these areas

	<ul style="list-style-type: none"> • Cultivate capabilities - section covering build careers and anticipating technology and workforce innovations, see comments on engagement re linkage with Boards for input and discussion, sharing current practice 														
2	<p>GMC Scotland</p> <ul style="list-style-type: none"> • Please list three words you would use to describe the draft Learning and Education Strategy <ol style="list-style-type: none"> 1. Broad 2. Forward-looking 3. Collaborative • <i>Our Principles for Learning and Education:</i> <ul style="list-style-type: none"> • To what extent do you agree with each of the Principles as an effective means to achieving our Ambitions? <table border="1" data-bbox="405 797 1246 1514"> <tr> <td>Prioritising quality and impact through people</td> <td>Strongly agree</td> </tr> <tr> <td>Supporting high-quality learning and education</td> <td>Strongly Agree</td> </tr> <tr> <td>Enhancing coherence, reducing duplication, and driving efficiency</td> <td>Strongly agree</td> </tr> <tr> <td>Actively seeking collaboration and partnership</td> <td>Strongly agree</td> </tr> <tr> <td>Playing our part in addressing the shared challenges we face</td> <td>Agree</td> </tr> <tr> <td>Adapting for innovation and new ways of delivering health and social care</td> <td>Strongly Agree</td> </tr> <tr> <td>Systematically defining and measuring quality, value, and impact</td> <td>Agree</td> </tr> </table> • Is there anything in the Principles that we may have missed? <ul style="list-style-type: none"> • ED&I is mentioned under principle 5 but this should have greater emphasis. Incorporating 'equality, diversity and inclusion' in the title of the Principle would elevate its importance, rather than referring to 'shared challenges'. • Although principle 6 sets out the approach that NES learning and education is 'shaped by' changes and changing needs of the system, we would like to see this go further and NES commit to actively drive positive change for the workforce, the service, and patient outcomes. • <i>Priority Themes:</i> 	Prioritising quality and impact through people	Strongly agree	Supporting high-quality learning and education	Strongly Agree	Enhancing coherence, reducing duplication, and driving efficiency	Strongly agree	Actively seeking collaboration and partnership	Strongly agree	Playing our part in addressing the shared challenges we face	Agree	Adapting for innovation and new ways of delivering health and social care	Strongly Agree	Systematically defining and measuring quality, value, and impact	Agree
Prioritising quality and impact through people	Strongly agree														
Supporting high-quality learning and education	Strongly Agree														
Enhancing coherence, reducing duplication, and driving efficiency	Strongly agree														
Actively seeking collaboration and partnership	Strongly agree														
Playing our part in addressing the shared challenges we face	Agree														
Adapting for innovation and new ways of delivering health and social care	Strongly Agree														
Systematically defining and measuring quality, value, and impact	Agree														

- To what extent do you agree that these Priority Themes reflect our Principles?

Development and implementation of an integrated and holistic approach to quality	Agree
Developing new, future-focused learning pathways	Strongly agree
Enhancing learner-centred delivery	Neither agree nor disagree
Working in Partnership	Strongly agree

Any other comments:

- We welcome priority theme 2 and the focus on new, future-focused learning pathways, and the commitment to work with other actors in the system to achieve this.
- We encourage you to consider the role of leaders and leadership in delivering the strategy.

3 Scottish Social Services Council

1. What is your job title?

Policy Analyst

2. What is your connection with NHS Education for Scotland (NES)?

a. Internal (e.g. employee)

b. External (e.g. represent partner organisation or service user)

External

3. To which internal NES directorate or external organisation do you align?

The Scottish Social Services Council. We collaborate and work closely with a number of directorates in NES.

4. Please list three words you would use to describe the draft Learning and Education Strategy in the space below:

Comprehensive, Ambitious, Systematic

5. NES Ambitions:

We're here to **provide the highest quality learning opportunities**, which are aligned to and informed by the needs of the health and social care system, individuals, and partners and which effectively support the delivery of better outcomes and enhanced sustainability. We use co-production approaches,

education research and innovation insights, alongside technology and data, to inform, evaluate and enhance delivery of learning and education.

Through delivery of this Learning and Education Strategy and through collaboration, our goal is **to further develop NES as a world class organisation for education, training and learning to improve health outcomes and reduce inequality for the people of Scotland.** We will build on our success, ensuring we are valued as a collaborative, innovative and inclusive learning organisation, fully integrated and working in partnership across the health and social care, public service, education and skills ecosystem in Scotland.

Our principles for Learning and Education (Section 5):

NES has created a set of principles for learning and education, outlined below, to help guide decision making and inform our collective approach to delivering on our ambitions. They inform how NES develops, supports and delivers high quality learning and education and, in turn, how we will develop our staff and organisation to do so.

To what extent do you agree with each of the Principles as an effective means to achieving our Ambitions?

	Strongly agree
Prioritising the quality and impact of learning and education by supporting and developing people	X
Supporting high-quality learning and education across health, social care and the public service	X
Enhancing coherence, reducing duplication, and driving efficiency	X
Actively seeking collaboration and partnership	X
Playing our part in addressing the shared challenges we face	X
Adapting for innovation and new ways of delivering health and social care	X
Systematically defining and measuring value and impact	X

6. Is there anything in the principles that we may have missed?

The SSSC has the statutory and regulatory role of setting and maintaining standards for practice for social care and for quality assuring education and training for the sector. We are also the national lead for workforce planning/development and a national statistics provider for the social work, social care and children and young peoples sectors in Scotland. We believe it is important that the differences between NES’ roles in relation to health and to social care are made clear in the principles in order to avoid confusion in the sector and for those commissioning work.

We welcome the inclusion, in principle three, of a once for Scotland approach, however, we feel that it should be made clear that NES or TURAS may not be the most appropriate to lead or host the learning and education resources, depending on the purpose of the resource. The social work, social care and children and young people sectors in Scotland currently have a portable record for learning through our MyLearning platform which can be used to evidence their required CPL. We believe

that it is important to make sure any proposed systems do not duplicate this work unnecessarily and that existing systems can interface fully.

We believe the Principles will be effective in meeting NES' ambitions and we welcome the opportunity to share our knowledge and expertise of the education and learning needs of, and the existing resources available to, the social work, social care and children and young people sector in Scotland.

7. Priority Themes (Section 6):

Informed and guided by our principles for learning and education, our interconnected priority themes, outlined below, and the outcomes they will deliver will enable NES to fulfil its full potential in supporting recovery and transformation across health and social care, for the benefit of Scotland's population.

To what extent do you agree that these Priority Themes reflect our Principles?

	Strongly agree
Developing and implementing an integrated and holistic approach to quality	X
Developing new, future-focused learning pathways	X
Enhancing learner-centred delivery	X
Working in partnership	X

8. Is there anything in the Priority Themes that we may have missed?

We strongly welcome the focus the Priority Themes have on collaboration and partnership working. Full cooperation between interested stakeholders will help to minimise any duplication of work in relation to the social work, social care and children and young peoples sectors. We would particularly like to highlight the work we are undertaking in relation to career pathways in the sector. We currently have a careers website for the sector and we are working on creating new career pathways through the integrated SVQ award and the graduate apprenticeship for social work. Continued collaborative working between our organisations will help to ensure our resources and those that will be developed under your Priority Themes are complementary and compatible.

We believe the Priority Themes do reflect the Principles of the Learning and Education Strategy, in particular the focus on partnership and collaborative working. We would welcome the opportunity to coordinate with you in relation to the provision of social work, social care and children and young people sector education and learning resources to ensure that existing systems can interface effectively and to make sure the potential for duplication of work is minimised.

9. Please feel free to include any additional comments on the draft Learning and Education Strategy below.

We have no additional comments to make.

10. If you would be interested in taking part in further consultation on the Learning and Education Strategy, please provide your email address below. This might include further surveys, interviews or focus groups.

policyandequality@sssc.uk.com

	<p>Is there anything in the Principles that we may have missed? COSLA would strongly agree with the principles. COSLA welcomes the emphasis on collaboration and partnership but is concerned that in relation to training for Social Work and Social Care there is no mention of the SSSC and their pivotal role in providing training and regulation for social work and social care workforce. We would welcome inclusion of how NES will work with partners to include training developed by them, into their platform.</p> <p>Is there anything in the Priority Themes that we may have missed? COSLA strongly agrees with the priority themes outlined. We welcome the emphasis on collaboration and reduction of duplication but again we are concerned that there is no mention of the role of the SSSC.</p> <p>While we welcome the TURAS refresh, there needs to be collaboration with Local Government, SSSC and other social care organisations to ensure that this platform is easily accessible to the whole workforce, including those in the third and independent sectors. This will require a decision with partner organisations on whether TURAS is the platform of choice for social care education and learning. If this is the platform of choice for education and learning for all health and social care then it will need to include the range of excellent resources developed by Local Government, SSSC and other social care organisations.</p> <p>Please feel free to include any additional comments on the draft Learning and Education Strategy below.</p> <p>While COSLA welcomes the emphasis on coherence and reduced duplication within the Value Lens diagram, there needs to be recognition that social care is one of many functions within Local Government. There will be overlap for learning and education for our workforce across many services so it is essential that we reduce any unnecessary duplication across the system.</p> <p>For example, COSLA has joint responsibility with the Scottish Government for the delivery of Enabling, Connecting and Empowering: Care in the digital age, Scotland’s Digital Health and Care Strategy (2021) as well as A Changing Nation: How Scotland will Thrive in a Digital World, so coherence and reduced duplication is essential for ensuring resources are used as efficiently and effectively as possible.</p> <p>While COSLA agrees with the vision outlined in this draft strategy, it is a concern that there is no mention of the role of social work. Social Work has a unique role acting as conduit between health and social care. It is therefore essential that is recognized as such within this strategy. Social work and social care are not the same.</p>
5	<p>Council of Deans of Health Scotland</p> <ol style="list-style-type: none"> 1. What is your job title? Policy Officer 2. What is your connection with NHS Education for Scotland (NES)? <i>(delete as applicable)</i> <ol style="list-style-type: none"> 1. External (e.g. represent partner organisation or service user) 3. To which internal NES directorate or External Organisation do you align? Council of Deans of Health Scotland 4. Please list three words you would use to describe the draft Learning and Education Strategy: Comprehensive

Person-centred
Innovative

5. *Our Principles for Learning and Education:*

1. To what extent do you agree with each of the Principles as an effective means to achieving our Ambitions?

Prioritising quality and impact through people	Strongly Agree
Supporting high-quality learning and education	Agree
Enhancing coherence, reducing duplication, and driving efficiency	Strongly Agree
Actively seeking collaboration and partnership	Agree
Playing our part in addressing the shared challenges we face	Strongly Agree
Adapting for innovation and new ways of delivering health and social care	Strongly Agree
Systematically defining and measuring quality, value, and impact	Strongly Agree

6. Is there anything in the Principles that we may have missed?

- Needs stronger link to widening access agendas.
- Partnerships section could focus more on civic partnership and collaborations, with more detail on who NES will engage with. Need to collaborate with educational organisations.
- Needs more focus on diversification across the workforce, and students as the future workforce. Needs more mention of placements.
- Very skills heavy – would like to see more mention of leadership.
- Need to identify how the strategy fits into Programme for Government priorities, AHP review, and Nursing and Midwifery Taskforce.
- It would be useful to understand what informed these seven principles.

7. *Priority Themes:*

1. To what extent do you agree that these Priority Themes reflect our Principles?

Development and implementation of an integrated and holistic approach to quality	Strongly Agree
Developing new, future-focused learning pathways	Agree

Enhancing learner-centred delivery	Agree
Working in Partnership	Strongly Agree

Any other comments:

The Council of Deans of Health welcomes the opportunity to comment on NES' Learning and Education Strategy. The Strategy's key elements align with our [strategy](#) and [political manifesto asks](#).

The Council welcomes the focus on equity and diversity across learning and education and support for the widening participation agenda. We value the focus on research and acknowledgement of its impact on informing high quality learning and education. We welcome the references to innovation and emphasise the importance of its role in developing the workforce of the future. We also welcome the focus on complying to regulatory standards and educational best practice whilst making these changes.

We also welcome the proposed projects to deliver a comprehensive Learning and Education Quality System and Turas Refresh project to enhance training opportunities. The members of the Council of Deans of Health Scotland are keen to work with NES to ensure quality healthcare education and research in Scotland.

A collaborative approach, engaging with the whole system, is needed. Higher Education Institutions (HEIs) will be central to the delivery of the Learning and Education Strategy's ambitions and any further development and implementation of the strategy should include HEIs. The Council would like to see an increased focus on partnership with HEIs, reflecting the contributions of students.

LEARNING AND EDUCATION STRATEGY 2023 - 2026 [DRAFT]





Overview

Our purpose in NES is to be a collaborative, innovative and inclusive learning organisation providing high quality education, training, workforce development, workforce data and technology for Scotland's health and social care workforce.

Our strategic vision is to support better rights-based quality care and outcomes for every person in Scotland through a skilled, capable, and resilient health and social care workforce.

We are adaptable, creative, and responsive to the needs of the workforce and the communities we 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.

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. 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.

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. Our goal is to create a workforce that meets the needs of the people of Scotland, through collaboration with staff, learners, and our stakeholders. [The NES Strategy 2023-26](#) recognises this, setting a clear direction and three areas of focus – People, Partnerships and Performance.



Learning and Education Strategy purpose

Learning and education is vital for the health, social care, and public service workforce, enabling individuals within it to be knowledgeable, skilled and competent to deliver good quality care and health and wellbeing outcomes.

This Learning and Education Strategy sets out how we will deliver education and training across the health and social care workforce and support our own colleagues working within NES to do so. It also sets the direction, principles, and priorities which will guide our future approach to fulfil our overall purpose and vision.

Learning and education is at the heart of what we do. This Learning and Education Strategy outlines our priorities for the current strategic cycle (2023-2026) while preparing us to be adaptive, creative, and responsive to the system's needs, workforce requirements, and Scotland's communities over the next decade.

Why we are here

We provide the highest quality learning opportunities, aligned to and informed by the needs of the health and social care system, individuals, and partners to support the delivery of better outcomes and sustainability. We use co-production approaches, education research and innovation insights, alongside technology and data, to inform, evaluate and enhance delivery of learning and education.





What we are aiming to achieve

Through this strategy and our collaborative approach, our vision is to support better rights-based quality care and outcomes for every person in Scotland through a skilled, capable, and resilient health and social care workforce.

We will achieve this by delivering the highest quality of education, training, learning and research.

How we will get there

To deliver the ambitions and intent set out in the [NES Strategy 2023-26](#) and address the challenges faced by the health and social care system, we have committed to a programme of organisational transformational change and corporate improvement which will ensure we remain 'fit for the future'. Our transformational journey has been outlined in our recently published Transformation Route Map which underpins the delivery of our Medium-Term Plan and Annual Delivery Plans and is supported by our Organisational Development Plan.

This Learning and Education Strategy builds upon our strategic commitment to:

- > Co-design quality and excellence, by working with our partners and those with lived and living experience of health and social care services to shape our education, training, and resources.
- > Connect and collaborate, by building relationships and extending our reach nationally and internationally to innovate and learn from research and practice, adding value where it is most needed.

- > Cultivate capabilities, to build careers and a sustainable workforce which is fit for the future, both within NES and the wider health and social care system, anticipating and responding to the impact of technological and workforce innovations.
- > Continue to develop our culture of being inclusive and reflecting our values and behaviours in all that we do to support, empower, and value our staff, partners, trainees and learners.

We will deliver our Learning and Education Strategy through seven principles, which set out what staff, learners and trainees, partners and the people of Scotland can expect as we deliver on our strategic intent. These principles will guide our approach within the current strategic cycle (2023-26) and beyond. We will implement and embed them through our priority themes for 2023-26, as described in from page 98. [We will measure our progress against our priority themes and our Strategic Key Performance Indicators, which will give us a clear indication of our reach and impact.](#)

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Recognising the context we work in

At NES, we understand that our work sits alongside that of our partners and stakeholders. Within the complex system of health and social care, we believe that partnership and collaboration is key to recognising, learning from and responding to the learning and education needs of individuals, organisations, and health and social care services. We believe partnership working will be key to our own organisational transformation, but more importantly in ensuring we deliver learning and education that is of high-quality, value and impact – ultimately driving improved outcomes and reducing inequalities. The formal health and social care workforce alone includes over 400,000 people working across Scotland. However, many more outside of this formal workforce have a critical role in supporting public health and wellbeing. In light of this diversity, and recognising the need for inclusivity, we have maintained a **disciplinary and professionally neutral approach** in the development of this Strategy. We want to be clear that this Strategy is intended to speak to the learning and education of the workforce across all roles, in line with NES's statutory responsibilities, and extends beyond this where we can meaningfully support others working to improve health and wellbeing.

The National Workforce Strategy for Health and Social Care highlights the need for a whole system approach if we are to effectively address the challenges facing health and social care and deliver the high-quality care that the People of

Scotland need and expect. Reflecting this, partnerships and collaboration are emphasised throughout this strategy, in our principles for learning and education and the priority themes (for delivery in the 2023-26 strategic cycle).

Our key partners and stakeholders include (but are not limited to):

- The Scottish Government
- Other NHS Scotland Boards (National and Territorial) and centres, such as the Centre for Sustainable Delivery (CfSD)
- Health and Social Care Partnerships
- The Convention of Scottish Local Authorities (COSLA)
- The Scottish Social Services Council (SSSC)
- Other professional, statutory and regulatory bodies across health and social care including Royal Colleges and professional regulators.
- Education and skills bodies, agencies and representative organisations such as the Scottish Funding Council, Skills Development Scotland, Education Scotland, The Scottish Qualifications Authority, The College Development Network and the Council of Deans of Health (Scotland) and the Association of Directors of Education for Scotland (ADES).

- Individual Higher and Further Education Institutions.

We stand ready to work with our partners to support those in social work (recognising that this is a regulated profession distinct from social care and in light of the future development of a National Social Work Agency), education, community learning and development and justice amongst other areas of public services. We will continue to actively consider the relevance of our services and learning resources for those working beyond the formal boundaries of health and social care. We will do this through a consistent process of horizon scanning and engagement, identifying workforce needs and recognising the distinct roles of our partners across these services - for example in relation to professional registration and regulation.

There are many illustrative examples of our existing commitment to this inclusive approach, including wide-ranging work to support trauma informed and responsive practice (via the National Trauma Transformation Programme) across public services, including social work, children's and adult services, justice, and education. We have also developed training, guidance and support for early psychological interventions by qualified professionals and for parents, carers and trusted adults.

As we move forward with the implementation of this Strategy, we remain committed to considering the ways we can partner and share with other public services and organisations.

We will measure our progress against our priority themes and our Strategic Key

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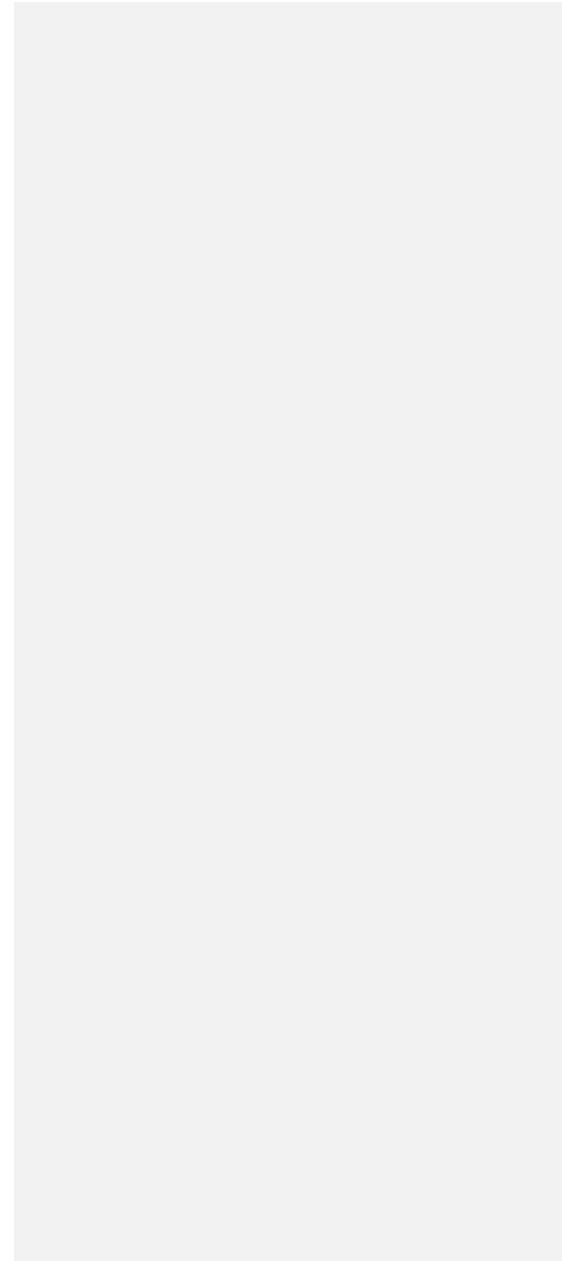
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| Performance Indicators.



Our seven principles for learning and education:

1 Prioritising quality and impact through people

We recognise that people are at the heart of both high-quality learning experiences and the provision of health and care services. We prioritise learning quality and impact over quantity, making careful decisions on resource allocation to best support improved outcomes and to meet the needs of our learners, educators and staff, partners, and the people of Scotland.

We show care for the wellbeing, health, and safety of our staff and learners and model the NHS Scotland Values in our approach. Whilst recognising the individual responsibility held by health and social care staff for their personal and professional development, we cultivate the competence, autonomy, and belonging of educators and learners, enabling them to deliver exceptional quality and improved outcomes through their practice. This principle will inform our approach to learning development, design and delivery, as well as the development of our educators and staff, underpinned by educational research.

The views of people with lived and living experience of health and social care services

must be central to our approach to developing and delivering learning for the workforce. The use of co-design and co-production approaches ensure we are focussing on what is most valuable to the people who use services. Combined with effective use of evidence and a focus on efficient and sustainable delivery, this ensures NES is making a full contribution to the implementation of value-based health and care in Scotland.

2 Supporting high-quality learning and education

As a national health board with responsibility for developing and delivering education and training for the NHS in Scotland and with a similarly important role in relation to social care [\(in partnership with the SSSC\)](#), we are in a unique position to combine workforce data, innovation insights, feedback from the workforce and people with lived experience, educational expertise, knowledge services and research to inform high quality learning and education.

Through collaboration, we enhance the relevance, quality and impact of learning and education across health, social care, and public services. We do this by sharing our insights and capabilities with partners,

bolstering their capacity to deliver high-quality learning in a range of settings. We advocate for learners and for the value of high-quality learning and education in the workplace working with employers to support and embed learning and development for their staff.

3 Enhancing coherence, reducing duplication, and driving efficiency

Recognising the importance of specialised professional learning, we develop learning and education, with partners, that supports a multi professional approach. Where shared system, organisational or workforce learning needs are identified that span sectoral, professional, or occupational boundaries we will develop learning interventions using a once for NES/Once for Scotland and discipline neutral approach wherever possible. We will develop uni-professional learning where necessary or to meet professional regulatory requirements. We support coherence by working with partners to define needs, and to guide and support the development of learning to ensure those needs are met.

4 Actively seeking collaboration and partnership

Collaboration and partnerships are our default approach to developing and supporting learning and education across health and social care. We understand our place in the broader system and act accordingly, working collectively with partners, learners and those with lived and living experience to provide best value and improved outcomes.

5 ~~Playing our part in addressing the shared challenges we face~~ Embedding inclusivity, widening access and responding

Alongside our commitment to maintaining professional standards, supporting a learning culture, developing leadership capabilities across the system, and improving the quality of care, we prioritise accessibility, equity, inclusivity and diversity across all learning and education. By fulfilling our duty to do this, we are also better placed to widen access to learning and careers in health and social care. We also recognise the critical importance of sustainability and building the skills of the health and social care workforce in tackling the climate emergency through our learning and education offer. These considerations inform a 'common core' in our learning provision and delivery, ~~alongside our~~



6 Adapting for innovation and new ways of delivering health and social care

Our learning and education offer is shaped by emerging roles, new (or existing) technology and tools that can positively impact the workforce, foster service transformation, and improve outcomes. For example, technologies such as artificial intelligence (AI).

Within NES, we foster a culture of continuous learning which enables us to adapt and improve our approach to delivery of learning and education as technology and educational research in areas such as assessment, simulation and virtual/augmented reality, reveal opportunities for enhancing our learning and education programmes and practice.

7 Systematically defining and measuring quality, value, and impact

We systematically evaluate relevance, quality, value and impact in our learning and education, building on existing good practices through the lens of public, organisational and individual value.

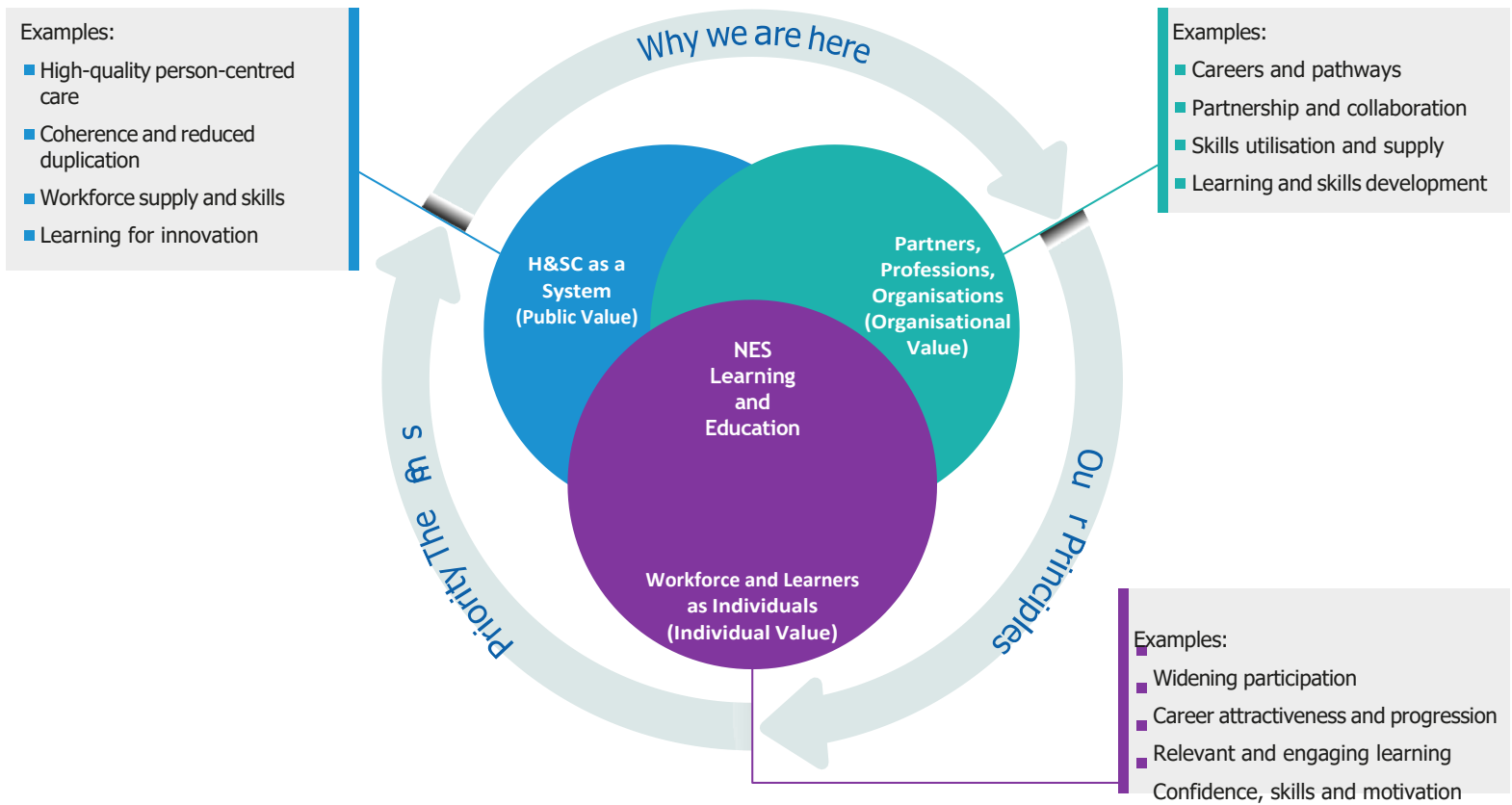
Our work serves the needs of the people of Scotland through the health and social care system (public value).

It adds value for professions, partners, and organisations involved in providing high-quality care, improving population health, and reducing health inequalities (organisational value).

Finally, our work supports individuals' career progression and aspirations, retraining, and skill development (individual value).

These 'value lenses' guide decision-making and resource allocation, ensuring our effectiveness as a public body that maximises value and improves outcomes. We use our expertise, data analysis, and collaboration to inform decision-making and measure, evaluate, and enhance the quality, value and impact of our contributions.

Value Lenses



Our Focus

Informed and guided by our seven principles for learning and education, for the 2023 – 2026 strategic cycle we will focus our efforts on **four priority themes** and their outcomes to enable us to fulfil our potential in supporting recovery and transformation across health and social care.

They are:



Priority Theme 1
Development and implementation
of an **integrated and holistic**
approach to quality

This means being clear about why and how we develop, deliver, evaluate, and enhance learning and education. We will transform educational governance, policies, processes, and systems, creating an ‘ecosystem’ that embeds our learning and education principles, supporting us as we develop as a learning organisation.

This is important so that we use our finite resources to offer education and training that is of high quality, value, and impact. This means considering service needs, research evidence, workforce data, innovation insights, stakeholder involvement and the views of those with lived experience, in a systematic way. We also need the right information to evaluate programmes and improve our work at individual, team, and organisational levels. [This priority theme also underpins our commitment to becoming an SCQF Credit Rating Body \(CRB\).](#)

Outcomes

> **For the Health and Social Care Workforce:**

Learners will experience increased relevance and focus across all types of learning, aligning more closely with their needs, career aspirations and the challenges and opportunities of working in health and social care and in their communities. They will benefit from a consistently high-quality learning experience and improved recognition and portability of their learning.

> **For Partners:**

Our partners will have greater clarity on the totality of the learning and education offer provided by NES, how this supports their organisational objectives and underpins the delivery of high-quality health and social care services. They will have more opportunities to influence our learning and education priorities and contribute to learning design, quality assurance and enhancement.

> **For the People of Scotland:**

People who use health and social care services will have more opportunities to have their views taken account of and to participate in the design of learning and education relevant to their experiences. They will be confident that the workforce understands what is important to them and have the right knowledge, skills and competencies to provide high-quality and person-centred care. [There is a strong correlation between the relevance and quality of education and the delivery of high-quality care. We also recognise the connection between learning and education opportunities across public services in relation to health and wellbeing, and public and population health outcomes.](#)

> **For our Staff:**

Our staff will see consistent structures for decision making, clearer business processes and the right information to inform the development, approval, evaluation, and enhancement of learning and education. They will benefit from being part of a learning organisation, where learning and good practice is shared at individual, team, organisational and systems levels. Staff will benefit from appropriate development opportunities and a more systematic approach to bringing people together to reflect and develop their practice alongside peers. They will be supported to deliver learning, education and training that has a positive impact on the quality of care delivered to the people of Scotland.

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We will achieve this by:

Delivering a comprehensive Learning and Education Quality System project. This will define quality dimensions and expectations in a consistent way, embedding our principles for learning and education across NES, whilst supporting a culture of reflection, learning and innovation. The project will include the following workstreams to ensure a holistic and integrated approach:

- › **Quality Policy Framework** – developing clear standards and expectations on a ‘Once for NES’ basis, appropriate to the different types of learning we deliver and support, fulfilling the requirements of regulatory and professional bodies and educational best practice. Our policies will set expectations across the full life cycle of our resources, courses and programmes – commissioning, design and approval, delivery and assessment, monitoring, evaluation and review. Our policies will embed an accessible, inclusive, human rights based and learner centred approach.
- › **Quality Management, Assurance and Enhancement** – building a coherent approach to educational governance across NES, to meet the requirements of our Quality Policy Framework, accompanied by business processes and systems to underpin an organisational quality cycle, informed by data, evaluation outcomes and embedding metrics for reporting, assurance and continual improvement.
- › **Educator Quality and Competence** – being clear about the training our educators need and systematically planning how we provide this (working with partners where appropriate), supporting them as reflective practitioners and providing opportunities for development, progression and sharing practice. Within this, we will embed expectations and support for inclusive, human rights-based and learner-centred approaches.
- › **Learning Design and Practice** – further developing the tools and resources to support educators in designing, delivering and (where relevant) assessing learning. In the medium term, we will extend the availability of these to others working in educational roles.
- › **Quality of the Practice Learning Environment** – ensuring the experience of workplace and practice education is of high-quality, complies fully with all regulatory requirements and effectively supports our trainees and learners.
- › **User Engagement** – ensuring we have the right mechanisms to meaningfully engage with learners, staff and partner organisations.
- › **Lived Experience and Co-production** – making sure the views of people who use health and social care services are taken account of through our work and developing structured approaches to co-production where this is most valuable and appropriate.

We will measure our progress by:
Reporting on our Strategic Key Performance Indicators in the following areas (see Appendix 1):

People

- > Learner experience
- > Quality of clinical training environment
- > Attraction, reach and accessibility
- > Employee satisfaction

Partnerships

- > Stakeholder satisfaction
- > Co-production
- > Credit rating

Performance

- > Efficiency and value





Priority Theme 2

Developing new, future-focused learning pathways

This means working closely with our partners, including professional and regulatory bodies, to develop career and learning frameworks across health and social care. These frameworks will enable us to align career pathways and development needs with available learning opportunities.

Where needs are not being met, we will work with partners to develop new learning pathways and opportunities, supporting workforce supply, service recovery and access to rewarding careers. Across each of these frameworks we will systematically consider opportunities for widening access to learning and to careers in health and social care.

This is important so that we have a coherent and shared understanding of the needs of the workforce and the people they serve to better support a sustainable health and social care workforce and system. New learning pathways will be informed by the needs of Scotland's population and the requirements for safe, effective, person centred and rights-based delivery of health and care services.

Outcomes:

> For the Health and Social Care Workforce:

Learners will be able to access a greater range of learning opportunities which are more closely aligned to their needs and their chosen career pathways. Those considering a career in health and social care will appreciate the diverse range of career opportunities available and the learning pathways that can support their next steps and future development needs. All learners will see digital skills, accessibility, sustainability education, inclusivity, and equity increasingly embedded in learning opportunities and pathways.

> For Partners:

Our partners will see greater coherence and availability of learning, with links to the needs of the health and social care workforce and services made clearer. Partners delivering learning and education will be able to plan and align their offers with existing and emerging pathways, supporting greater efficiency and coherence across the education and skills landscape with stronger connections to the needs of the health and social care system.

> For the People of Scotland:

People who use health and social care services will have confidence that NES, with its partners, is working effectively to deliver against the National Workforce Strategy for Health and Social Care, addressing the challenges impacting on the quality and availability of services.

> For our Staff:

Our staff will see more consistent tools and methodologies for aligning learning with career and learning pathways, giving greater opportunity to evidence outcomes and impact linked to the needs of health and social care services and the people who use those services. Where new needs emerge, NES staff will have an existing methodology for planning responses and effectively directing resources, supported by the right information and data.

We will achieve this by:

- › Defining existing career and learning pathways across health and social care professions and occupations, setting these down in a consistent 'framework' format that will allow us to identify challenges for career entry, progression, development, and mobility. Within these pathways we will embed digital skills, recognising that they are critical for inclusive access to learning and education and will increasingly underpin service delivery and transformation.
- › Developing a more consistent approach to defining and aligning learning opportunities across NES and the education and skills sectors, to allow learning and education to be linked to the needs of individuals and with career and learning frameworks. Initially we will introduce a 'prospectus' to consolidate the learning offer available across NES. Building on this, we will create a digital presentation of learning, linked directly to career and learning pathways – aligned with Priority Theme 3: Enhancing learner-centred delivery.
- › Informed by workforce data and analysis, innovation insights, and population health data, working with partners to commission or develop learning that supports a responsive yet coherent approach to building skills and competence where needs or gaps are identified, supporting people to move within and between roles. This will enable investments that both support individual aspirations and development and meet the existing and emerging needs of the health and social care system.
- › Collaborating across the education and skills sectors to offer young people experiential learning opportunities, such as apprenticeships and internships, so people can explore careers in health and social care and appreciate the diversity of the sector and the professions and occupations within it.
- › Highlighting career mobility opportunities and the transferable skills and knowledge that can support movement across roles, particularly for experienced members of the workforce and those entering from other sectors, through our career and learning frameworks.

We will measure our progress by:

Reporting on our Strategic Key Performance Indicators in the following areas (see Appendix 1):

People

- › Learner scale and reach
- › Attraction, reach and accessibility
- › Sustainability focused education

Partnerships

- › Stakeholder satisfaction
- › Data utilisation
- › Supporting young people
- › Digital skills
- › Research and collaboration

Performance

- › Efficiency and value



Priority Theme 3 Enhancing learner-centred delivery

This means personalising the learning experience and meeting learners where they are. Using improved workforce data and career and learning frameworks, we will refresh our digital platform, Turas, to deliver personalised learning and a portable record of achievements. A key feature of this work will be to consider how it can support greater transferability of learning resources and records across the system (including mandatory learning) with a view to reducing duplication and driving efficiency. This will be a medium-term goal with immediate foundational work commencing in late 2023 to better understand user requirements and our current system capabilities. At the same time, we will develop our educators to support inclusive approaches and promote learner-centred practices.

This is important so that we develop a technology-enabled learning eco-system to support learning when, where and how it suits our learners, accommodating their needs and existing responsibilities. The ability of learners to access learning at all points in their careers and at each stage of their development is critical in supporting a responsive, skilled, and motivated workforce.

Outcomes:

> For the Health and Social Care Workforce:

Learners will find it easier to locate and access the learning resources, courses and programmes they need and that are most relevant to them, taking that learning with them as they progress in their career or move between roles and employers. They will feel supported to learn in the way that suits them and their situation best, enabled by the development of our policies and practices and through engagement with learners' views. They will be supported to develop the digital skills needed to undertake learning offered through technology.

> For Partners:

Our partners will benefit from the improved capabilities of our digital platform to suit the needs of the workforce and their employees, enhancing efficiency, and helping to address the shared challenges they face. They will have increased visibility of learning and training undertaken by employees, including that related to mandatory training and learning. In time, and subject to the relevant information governance requirements, this will extend to training undertaken with other employers whenever it is recorded via Turas. Partners across and beyond health and social care sectors, will be able to readily access open learning resources, leading to increased reach and positive impact through learning and education.

> For the People of Scotland:

People who use health and social care services will benefit from a responsive, skilled and motivated workforce able to deliver high-quality and person-centred care.

> For our Staff:

Our staff will be supported to develop their knowledge and practice of inclusive and learner-centred approaches across the range of contexts and environments we deliver and support learning and education. There will more opportunities to link learning and education provision in different combinations and across disciplinary boundaries to create coherent programmes that support progression of learners and their careers.

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We will achieve this by:

- › Delivering a Turas Refresh project, as part of our Corporate Improvement Programme. This will incorporate:
 - › user engagement across stakeholder groups, providing an evidence base for the user and consumer expectations of a modern, dynamic learning and development experience.
 - › an independent review of our existing technology and data architecture.
 - › consideration of the wider enterprise architectures in operation across the sector and how best to achieve joined up and effective data flows.
- › Building on the work to understand user requirements, technology, and data architecture we will streamline learning resources, courses and programmes with career and learning frameworks, ultimately combining these with learner profiles and through technology to create a personalised presentation of learning opportunities that support progression and skill development for individual learners.
- › Ensuring inclusive and learner-centred approaches are embedded in our organisational expectations for the development, design and delivery of learning and education. Enhanced educator training, sharing best practices and using our partnerships with other educational organisations to support this (for example strategic partnerships with Higher Education Institutions).
- › The development of representation structures and co-production processes for learners and practice educators to enhance NES's responsiveness. We will embed these in quality assurance and enhancement expectations.
- › Increasing engagement with employers to identify and develop good practice in supporting staff to undertake learning and development in the workplace.
- › Developing and implementing an integrated and holistic approach to quality (Priority Theme 1), establishing and supporting an educator skills framework, including training that supports educators to identify learner needs – including digital literacy and skills needs – and develop learner centred approaches to address these needs.

We will measure our progress by:

Reporting on our Strategic Key Performance Indicators in the following areas (see Appendix 1):

People

- › Learner experience
- › Learner scale and reach
- › Attraction, reach and accessibility
- › Sustainability focused education

Partnerships

- › Stakeholder satisfaction
- › Data utilisation
- › Supporting young people
- › Digital skills
- › Research and collaboration

Performance

- › Efficiency and value
- › Delivery performance



Priority Theme 4 Working in Partnership

This means collaborating at an individual and organisational level - on a national basis - to understand and respond to changing needs, challenges and opportunities. We are proactive in engaging with wider public services and organisations to share relevant learning and education resources where this will have a positive impact on public health and wellbeing.

This is important so that together we design and develop education and learning that meets the needs of our broader health and social care system, uses our collective knowledge and resources to deliver best value and harnesses the latest technological, research and innovation advancements. To deliver on our strategic ambitions we need to work with others to understand the complete picture and deliver sustainable solutions to the challenges being faced. We must act as responsible 'stewards' for the system as a whole, as well as delivering on our organisational responsibilities.

Outcomes:

> **For the Health and Social Care Workforce:**

Learners will notice greater coherence and availability of learning and education to support their needs, with improved flexibility in learning pathways and more opportunities for prior learning to be recognised and built upon as they progress through their career.

> **For Partners:**

Our partners will benefit from a greater sharing of information and collaborative approaches to addressing systems level challenges within health and social care, aligned to the National Workforce Strategy for Health and Social Care. Our national partners, and education and skills partners will see NES working alongside them to understand the challenges they face, provide information and data to support their planning and coherence at a systems level, acting increasingly as a conduit between the health and social care and education and skills sectors.

> **For the People of Scotland:**

People who use health and social care services will be assured that NES is working with partners to achieve value and impact and using public resources in the most efficient and effective way possible.

> **For our Staff:**

Our staff will be supported to develop partnership approaches within a clearer framework and with more information to hand about the relationships that have already been established. This will ensure that we maximise the value and coherence of our organisational approach to partnerships, making best use of opportunities and appropriately managing any risks. Staff will experience a greater sharing of the work our partners are doing so together we can build a full understanding of the role other organisations are playing within the system – recognising that this is especially important at a time of change.

We will achieve this by:

coordinating to deliver greater value and impact through joint planning processes.

> Systematically extending and prioritising partnership working and collaboration across the system to deliver more, together. We will continue to deepen our engagements across health and social care as well as the education and skills sectors, to deliver more, together.

> Broadening and deepening strategic engagements across health, social care, education, and skills sectors with our partners, making our purpose and vision clear and identifying synergies with our partners. NES will actively seek to understand the needs of partners including other NHS Boards, HSCPs, local government, professional and regulatory bodies, alongside education agencies, bodies and institutions. We will do this so we can better support them to deliver improved outcomes for people through learning and education and contribute to coherence and efficiency across the system.

> Being proactive and responsive in looking for opportunities to share and collaborate. Where appropriate, we will align with partners, sharing common goals, pooling resources, and coordinating to deliver greater value and impact through joint planning processes.

> Whilst recognising our statutory responsibilities for learning, education and training in health and our existing partnership arrangements in social care (alongside the Scottish Social Services Council), we understand that many of our resources and capabilities may have value across wider public, third and private sector services that support public health and wellbeing.

Providing support, coordination, and information for learning and skills responses with an emphasis on future learning pathways (Priority Theme 2) and alignment with service and workforce needs.

NES will actively seek to understand the needs of our partners, including other NHS Boards, HSCPs and local government, so we can better support them to deliver improved outcomes for people through learning and education.

Aligning with partners, sharing common goals, pooling resources, and

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Partnering with organisations providing insights into health and social care innovation and seeking to understand and support these through learning and education, including technologies for improved care quality and availability. We will use these insights to drive innovation and recovery alongside our partners.

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Developing systematic communications across partner networks to promote coherence and a shared understanding of system needs.

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A structured and corporate approach to strategic partnership formation, development, evaluation, and review - ensuring we get the best impact from our work with other organisations. There will be clear links between our strategy, key performance indicators and our partnerships.

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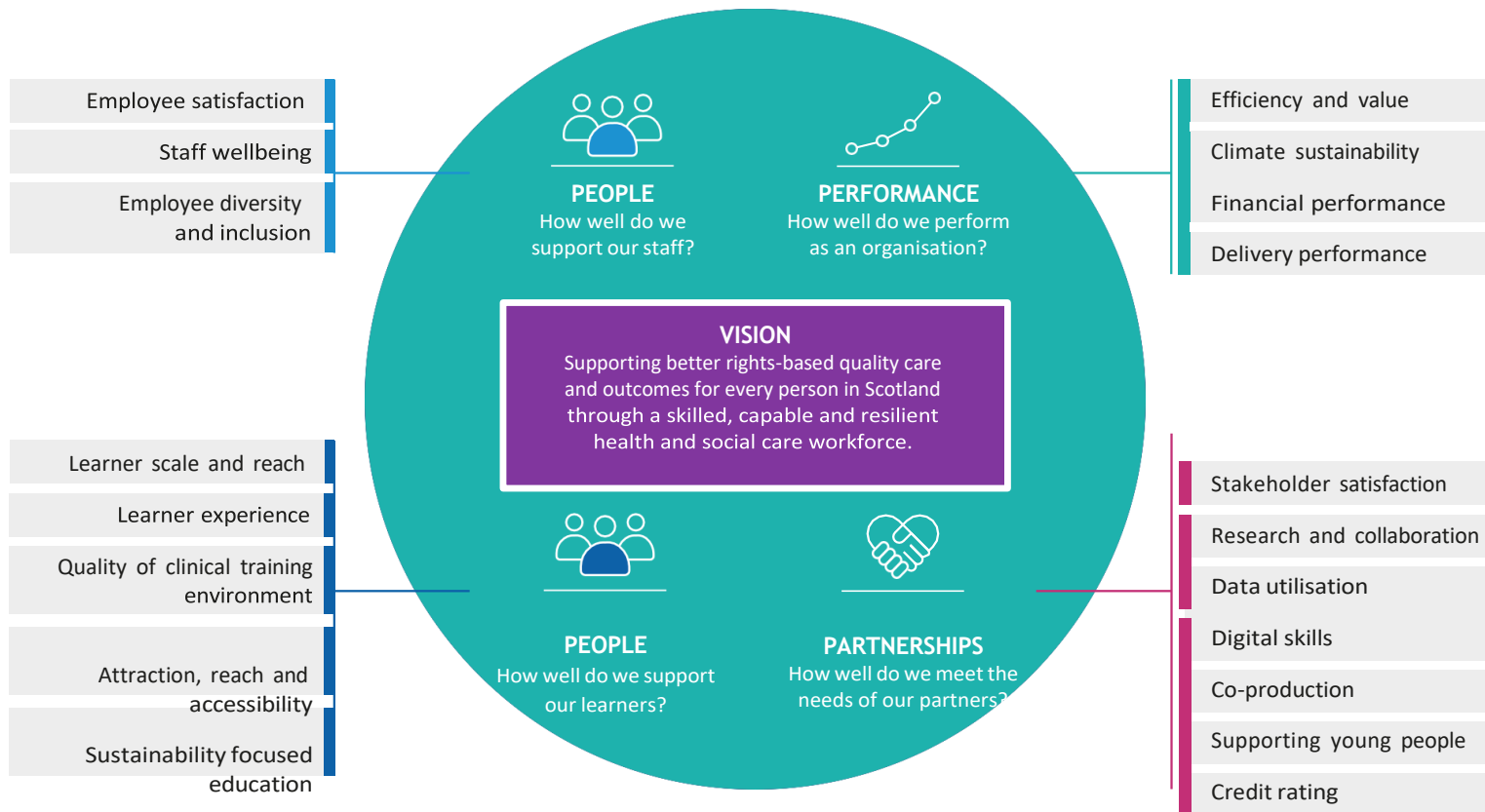
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	People	Partnerships	Performance
We will measure our progress by: Reporting on our Strategic Key Performance Indicators in the following areas (see Appendix 1):	Learner scale and reach	Stakeholder satisfaction	Efficiency and value
	Attraction, reach and accessibility	Data utilisation	Delivery performance
		Supporting young people	
		Research and collaboration	
		Co-production	

>

>

Appendix 1: NES Strategic Key Performance Indicators



Appendix 2: Strategy on a page

Commented [RR2]: Propose this is developed as a separate document to aid understanding and which can be distributed independently of the L&E Strategy where needed.

Still to be developed



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 to discuss how we can best meet your requirements.



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NHS Education for Scotland

Item

Date of meeting 8 February 2024

NES//

NES BOARD

1. Title of Paper

2023/24 Quarter 3 Finance Report

2. Author(s) of Paper

Jim Boyle, Director of Finance

Laura Howard, Deputy Director of Finance

Alan Young, Acting Head of Finance Business Partnering

3. Lead Director(s)

Jim Boyle, Director of Finance

4. Situation/Purpose of paper

The purpose of this paper is to:

- 4.1 Inform the Board of the financial position at the end of Quarter 3 (Q3), to the end of December 2023, including the year-end forecast of the financial position. This is based on actual performance to the end of Q3 as well as anticipated activity for the remainder of the financial year, which will be affected by the financial position across NHS Scotland and the instruction by Scottish Government for Boards to reign in spending where possible.
- 4.2 Highlight the ongoing work with Scottish Government (SG) finance and policy teams on funding which continues to create financial planning uncertainty for NES.

5. Background and Route to Meeting

- 5.1 The Financial Plan which supports the Annual Delivery Plan was approved by the NES Board on 23 March 2023. This consisted of a baseline budget of £524.4m for NES to carry out its core activities with non-recurring funding of around £150m indicated at that time for additional commissioned work by the SG policy teams.
- 5.2 Throughout the year Scottish Government policy teams ask NES to carry out additional commissions aligned to the NES strategy and are supported by further

funding. Work with Scottish Government is ongoing to ensure funding requirements are based on the most up to date information available and can be fully utilised in the financial year. At Q3 anticipated in year allocations have risen to £179m, of which £133m has been confirmed in an allocation letter.

- 5.3 In August 2023, all National Boards were asked by Scottish Government to consider options for stopping, reducing or rescheduling commissions funded through anticipated non-recurring allocations, to support the wider NHS Scotland financial challenge. Savings levels of 5% and 10% of in-year Scottish Government allocations were required to be presented. At the meeting with Scottish Government Health Finance and the Director General for Health and Social care in August a savings target of £6.9m was set, equivalent to the 5% target level, and deducted from NES allocations. At Q3 NES have now identified the full savings target via both in year SG allocations and NES baseline work.
- 5.4 A new section (6) has been included in the Financial Summary Report to highlight staffing cost movements across the year. This is in response to a request made by Board at a previous meeting.

6. Assessment/Key Issues

- 6.1 At the end of Q3 (December), NES remains on track to meet its financial targets. The year-to-date reported position is an underspend of £2.8m, mainly due to increased savings on vacancy lag, lower recruitment on Dental training grades and phasing of budgets against actual spend in NMHAP. Full year forecast is an underspend of £1.7m which is driven by no further bids being approved on Medical ACT, reduced costs of dental training grades from fewer trainees and delays in Glasgow property move has reduced spend in 2023/24. This is partly offset by higher rent, rates and service charges on our properties.

Performance Indicator	Year-End Forecast	Q3 Position (YTD)	Q2 Position (YTD)	Q1 Position (YTD)
Revenue Outturn	£1.7m (underspend)	£2.8m (undersp.)	£2.8m (undersp.)	£0.7m (undersp.)
Cash Releasing Efficiency Savings Total	£5.3m	£3.6m	£2.4m	£1.5m
Non-Recurrent Savings Target	£6.9m	£6.9m	£6.2m	n/a

- 6.2 At Q3 NES had received £660.8m of funding from Scottish Government. This includes £527.7m (100%) of baseline funding and £133m (74%) of additional allocations. Of the £46m outstanding, c.£36m relates to Medical ACT, with allocations for this historically not made until Q4 due to timing of student number information from universities, which is required to finalise funding requirement.

Confirmation has now been received from SG that allocation for this will be made in January funding letter. Appendix 2 to the attached detailed financial report provides a risk assessment of the outstanding allocations and indicates that £1.3m of outstanding funding has been agreed in principle and is rated as AMBER, with only a small balance of outstanding allocations being graded as RED at this stage.

- 6.3 The Director-General for Health and Social Care wrote to all NHS Boards at the end of November 2023, setting out the tight financial environment that NHS Scotland is currently operating in, and instructing all Boards to minimise spending in 2023/24. The letter confirmed that the position was extremely challenging and that the Autumn Budget Statement did not provide any relief in terms of planning assumptions for this year and next and urgent action is required in 2023/24 to move towards year-end financial balance. Discretionary spending should be paused and Boards should carefully consider whether recruitments should proceed, and only essential recruitment should occur.
- 6.4 The areas to consider for NES are discretionary spending, earmarked funding and vacancies. NES have already delivered £6.9m of savings from both earmarked funding (non-recurring funding) and all vacancies are reviewed by the Executive Team at the post prioritisation meetings, although this process has been reviewed in the light of the Director-General's instructions. In addition, the Executive Team has agreed to stop all discretionary spend in this financial year and the Chief Executive has issued instructions to all NES staff to that effect. The impact of the DG instruction, and actions that will be taken by NES is that the year-end underspend being reported in this report is likely to rise.
- 6.5 Initial savings plans of £3.4m have been exceeded at Q3, resulting in £3.6m YTD. We now anticipate an additional £1.9m, bringing total for year to £5.3m. The increased savings are driven by longer lead times to recruit to vacant posts, and £1m saving on Medical ACT.
- 6.6 The Finance team will also work with the directorates to ensure forecasting assumptions and funding expectations for remainder of financial year are robust, and any potential savings are highlighted to the ET, Board and Scottish Government as early as possible. Any significant movements in the forecast year-end position will be reported to the Board as part of the year-end Financial Report.

7. Recommendations

- 7.1 To review and approve the financial results and forecasts set out in this report.

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 [Our Strategy 2023 – 26 People, Partnerships and Performance](#)

1. People Objectives and Outcomes

2. Partnership Objectives and Outcomes

3. Performance Objectives and Outcomes

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

Author name:

Alan Young, Acting Head of Finance Business Partnering

Laura Howard, Deputy Director of Finance

Jim Boyle, Director of Finance

Date: 31/1/24

NES

FINANCIAL SUMMARY REPORT

AS AT Q3 (DECEMBER) 2023/24

Contents

1. Executive Summary	Page 2
2. Operational Performance	Page 4
3. Scottish Government Additional In-Year Allocations	Page 7
4. Cash Releasing Efficiency Savings (CRES)	Page 10
5. Additional Savings Target Summary	Page 11
6. Staff Costs 2023/24	Page 12
Appendix 1 – Q3 Monitoring Position by Directorate	Page 13
Appendix 2 - Anticipated Funding – Received and outstanding	Page 14

1. Executive Summary

At the end of Q3, NES is on track to meet all its statutory financial targets, provided that Scottish Government funding is received in line with expectations.

Table 1 – Summary Position	Year-end Forecast	Q3 (YTD)	Q2 (YTD)	Q1 (YTD)
Revenue Budget	£1.7m	£2.8m	£2.8m	£0.7m
Savings	£5.3m	£3.6m	£2.4m	£1.5m

A. Revenue Budget

- The position at the end of Q3 (December) for the whole of NES was an underspend of £2.8m with a year-end forecast underspend of £1.7m. This excludes the Medical Training Grade (MTG) budget which has a Q3 forecasted year end overspend of £0.2m, however as in prior years we anticipate SG funding any material variance at year end, although given the forecast underspend position, it is likely that SG will ask NES to absorb this. The year-to-date position is mainly due to differences in phasing of expenditure compared to original spending plans and additional savings being delivered via vacancy lag as recruitment of vacant posts is taking longer than anticipated. The year end forecast is driven by £1m of savings delivered from Medical ACT, as no further bids will now be accepted for in year funding requests. This has been implemented in response to the November letter from Director-General for Health & Social Care around discretionary spend across NHS in final months of 2023/24 financial year. The other main area of underspend is in relation to the Ways of Working & Property project where reduced costs will materialise in 2023/24 due to later start of lead advisers and new lease not commencing until 1 April 2024.
- There are various overspends and underspends reported across directorates, and these are discussed further in the Operational Performance section on Page 4.

- The Scottish Government in-year savings target of £6.9m has now been fully met. A breakdown is included in Table 4 on page 10.

B. Capital

- Each financial year a revenue to capital allocation is agreed with Scottish Government as part of the financial plan. For 2023/24 that amount is £1.3m to support capital programmes. NES are on track to spend within this allocation and therefore there is no impact on the overall financial position.

C. Savings

- At the end of Q3 NES had delivered all of its Cash-Releasing Efficiency Savings (CRES) savings plans, and the Board is on track to exceed the £3.4m target by the end of the financial year. The increased savings are driven by longer lead times to recruit to vacant posts. In addition to planned savings, we have also delivered £1m from reducing ACT bids and achieved the £6.9m in year savings target set by SG.

D. Key Risks and Issues

- **Funding** – at the end of Q3 NES still had £46.3m of in year funding allocations outstanding, which equates to 26% of total anticipated full year. Discussions continue with Scottish Government Finance and Sponsor teams to ensure allocations are received. Delays to the receipt of allocations may impact our ability to fully utilise the funding in the current financial year, and the Board will be required to assess its risk position regarding spending before funding confirmations. The uncertainty around NHS funding more generally is likely to exacerbate this position in 2024/25.
- **Major Programmes** - Work is underway on both the Phase 1 of the TURAS refresh project and Ways of Working & Property project. Due to the timing and nature of these programmes we will monitor progress and the financial position closely and identify any slippage as quickly as possible. Investment in the Glasgow property move has already been rephased, due to delays in receiving approvals from Scottish Government. Q3 forecast includes expenditure of £0.9m for TURAS refresh and £0.2m for property move. Progress on further phases of the TURAS project will be dependent on funding availability.

- **Digital Front Door (DFD)** – At Q3 only £0.6m of the remaining £1.5m of DFD funding has been committed. Following the letter from the Director-General for Health and Social Care, discussions with Digital Health and Care (DHAC) SG policy team took place in January 2024, where agreement was reached that no further spending in this area should progress in 2023/24. The remaining funding, c£0.9m, will be returned in year to SG to help manage overall NHS funding position.

2. Operational Performance

Revenue Position

- An in-depth review of the financial position has been undertaken with directorates and this process will continue throughout the remainder of the year. The summary of the Q3 position is included by Directorate in Table 1 below and a more detailed breakdown by Directorate can be found at Appendix 1.
- The most significant variance is a £1m underspend within Medical, with no further bids on Medical ACT being accepted in response to letter from Director-General for Health & Social Care which set out the pressures faced by NHS to meet year-end financial balance.
- The underspend of £0.758m on Dental, Healthcare Science and Optometry is driven primarily by Dental underspend of £0.766m. this is mainly from lower recruitment to both vocational training and core & specialty training (£0.576m), lower pay costs from staff leaving the pension scheme and new appointments below budget (£0.1m) and a further £0.1m across other areas, higher income from modern apprenticeships and reduced training costs in workforce development.
- Corporate Provisions is the budget line where corporate savings, costs and funding are held, this includes savings targets, depreciation, the investment fund etc. The in-year Savings Target of £6.9m set by SG has now been fully met. The forecast underspend position is due to delays on the Glasgow property move, as part of the Ways of Working corporate programme. A

provision of £0.8m was previously held for this, however due to delays with tendering exercise for lead advisers and minimal costs being incurred for Bothwell Stret in 2023/24, the forecast costs have reduced to £0.1m.

- There is currently a £0.5m overspend in Properties due to increased rates bills of £0.2m following the recent rates review and a higher than anticipated service charge of £0.1m for Westport. Annual rent for Westport has also increased by £0.2m following the recent contracted rent review which is index linked.
- Overspend in NMAHP and Psychology is driven by pressure on Psychology Mental Health training grades where Scottish Government Finance have not provided the full pay award. It was confirmed by Scottish Government in January that this is to be absorbed by Boards.
- Medical Training Grades (MTG) are forecast at a year-end overspend of £0.243m at Q3. This is driven by higher numbers of GP trainees (7.2 wte) requiring extensions to training, partly offset by higher number (6 wte) of Core & Specialty trainees opting to work less than full time. As in previous years, it is anticipated that Scottish Government will fund any material variance to a balanced position at year-end, although it is likely that NES will be asked to absorb the current 2023/24 overspend.

Table 1 – Revenue Budget Position by Directorate	Full Year Budget £000	Full Year Forecast £000	Under/(over) spend £000
Medical and Pharmacy	179,117	178,054	1,063
Dental, Healthcare Science and Optometry	58,219	57,461	758
NMAHP and Psychology	57,710	58,045	(335)
NHS Scotland Academy, Learning and Innovation	3,408	3,395	13
Social Care	405	414	(9)
NES Technology	21,884	21,796	88
Workforce and Planning	15,138	15,181	(43)
Finance, Procurement and Properties	8,396	8,864	(468)
Corporate Provisions	1,571	898	673
Total Excluding Medical Training Grades	345,848	344,108	1,740
Medical Training Grades	361,245	361,488	(243)
Total NES	707,093	705,596	1,497

3. Scottish Government Additional In-Year Allocations

- At Q3 (December) NES expect to receive a total of £179.3m in additional allocations this year. This equates to a quarter of the total NES revenue budget.
- At the end of Q3 we had received £133m, 74% of the total anticipated additional allocations.
- The £46.3m of outstanding allocations includes c.£36m for Medical ACT. Now that University returns for medical overseas student numbers have been received, NES has a confirmed in-principle funding agreement with the Scottish Government for this allocation coming in the January letter.
- Directorates and Finance continue to work closely with Scottish Government finance and policy leads to ensure the prompt receipt of all other outstanding allocations.
- The baseline and bundling exercise undertaken by Scottish Government, and supported by NES, was expected see the transfer of additional allocations to the recurring baseline. This transfer of funding would have reduced uncertainty and allowed NES to plan services on a longer term/permanent basis. We had expected this exercise to be implemented in the 2023/24, however latest update from Scottish Government is that the work is still ongoing, and may not be concluded until next financial year, due to the uncertainty of funding in the system across NHS Scotland.
- Table 2 below shows the anticipated, received and outstanding allocations for 2023/24 by Directorate as at the end of Q3, and a more detailed breakdown appears in Appendix 2.

Table 2 - Allocation Status by Directorate at Q3	Anticipated £'000	Received £'000	Outstanding £'000	Outstanding %
Medical	58,725	20,271	38,455	65%
Dental, Healthcare Science, Optometry	5,066	4,978	88	2%
NMAHP, Psychology	31,325	30,812	513	2%
NHS Scotland Academy, Learning & Innovation	2,127	-	2,127	100%
Social Care	401	3	399	99%
NES Technology	11,378	11,203	175	2%
Workforce, Planning	4,087	3,733	353	9%
Finance, Properties	78	78	-	0%
Provisions	565	565	-	
Total Excluding Medical Training Grades	113,752	71,643	42,109	37%
Medical Training Grades	65,596	61,411	4,185	6%
Total NES	179,348	133,054	46,294	26%

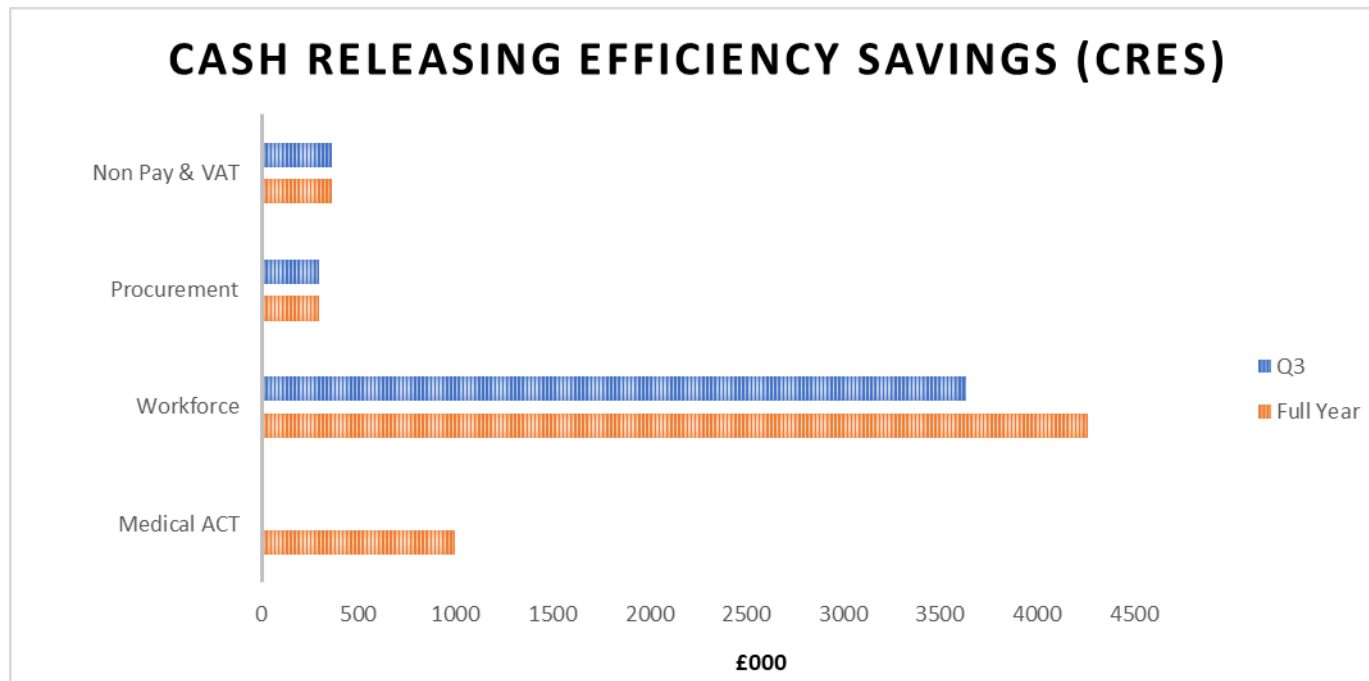
- Table 3 provides a risk status across all remaining outstanding allocations.
- The four high risk allocations requiring further discussions with Scottish Government include Dental Overseas Levy (£1m income received from universities passed to SG), Medical ACT GP Tariff uplift £515k, Dental Vocational Trainers Grants £485k and Social Care £399k. Now that overseas Dental Levy numbers have been received from universities, discussions will take place with policy team in January to review overall position and value to be returned to SG. The Medical ACT GP Tariff uplift allocation has been raised in risk as still have no confirmation if this will be funded from either Primary Care or Health Workforce policy teams.

- Medium risk allocations include £0.5m for Pharmacy Technician, £0.4m Dental Recruitment & Retention and £0.1m for Digital Prescribing & Dispensing Pathway.

Table 3 – Allocations Risk Status at Q3	Outstanding £'000
1 - Allocation confirmed will be received in next month's letter	41,638
2 - Formal confirmation in writing received	3,015
3 - Funding approved in principle	1,286
4 - Funding under discussion - Final Commitment to be confirmed	399
5 - No communication with SG	-43
Total NES	46,294

4. Cash Releasing Efficiency Savings (CRES)

- The 2023/24 approved Financial Plan identified a non-recurring savings plan of £3.4m, 1% of the total NES baseline.
- We have achieved all of the CRES savings target at the end of Q3 and will exceed the full year target by March 2024.
- The graph below shows the savings achieved at Q3 and the full year forecast by category. The workforce savings are as a result of the time required to recruit to vacant posts.

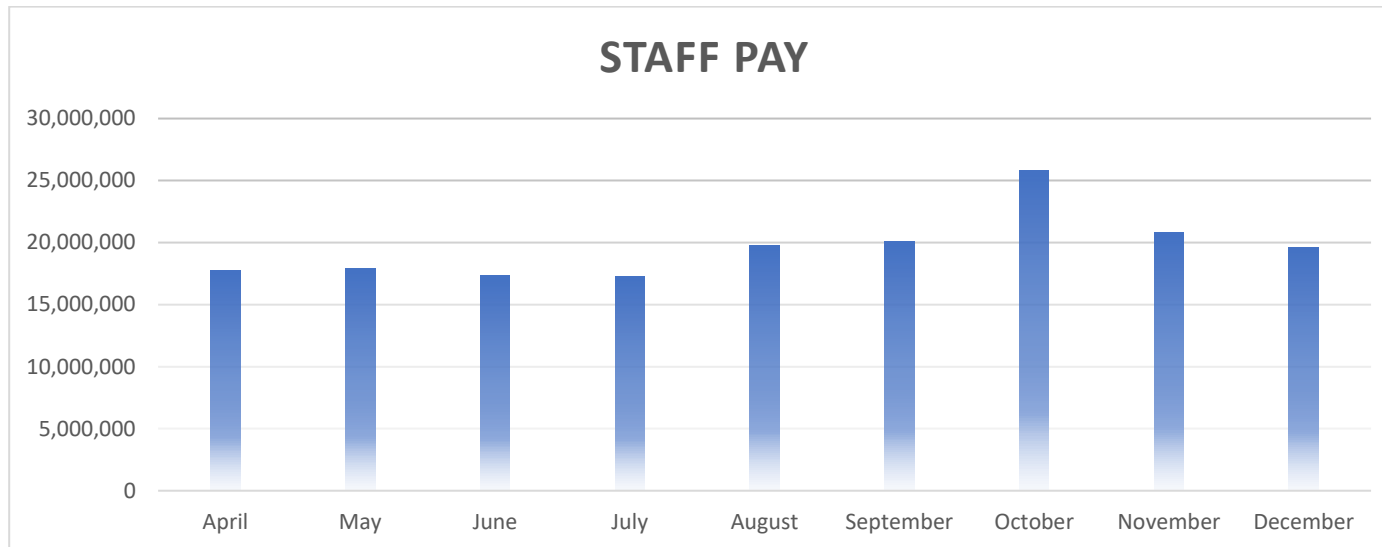


5. Additional Savings Target Summary

- The £6.9m in year savings target set by SG for 2023/24 has now been fully met.

Table 4		£M
1. Overall Savings Target	5% SG savings target confirmed by SG	6.900
	Creation of Turas refresh headroom funding	1.000
		7.900
2. Cat. A Savings Accepted	Category A SG commissions savings offered (18 Aug)	(4.628)
	Category A SG commission savings not implemented	0.311
		(4.317)
3. Cat. B Savings Accepted	Category B savings offered (2 Oct)	(0.750)
	Category B savings not implemented	0.750
		0.000
4. NES Baseline Savings	Medical Training Grade Salaries savings	(0.498)
	Property investment costs rephasing	(0.750)
	Increased Vacancy Lag	(0.807)
	Other NES baseline savings	(1.528)
		(3.583)
Savings Target Balance		0.0

6. Staff Costs 2023/24



- The data on above graph includes all NES staff, agency staff, secondees and lead employer staff.
- Small cost reduction, from £17.7m in April to £17.3m in July, as trainees on lead employer model complete training and are not replaced until next intakes in August and September.
- Costs then increase across August and September to £20m from higher number of trainees, before peaking at £25.8m in October, which is the month the backpay for medical and dental staff and trainees was processed. Before coming back to c.£20m in November where small number of GP trainees received backpay payments.
- Expectation is that costs will slightly decrease each month as more trainees complete training and are not replaced until next recruitment round in February. As this is a smaller recruitment round than August there will only be a marginal increase in monthly costs.

Appendix 1 – Q3 Monitoring Position by Directorate

Directorate	Year to Date (Period 9)			Full Year Forecast		
	Current Budget	Outturn	Variance	Current Budget	Outturn	Under/ (Over) Spend
	£000s	£000s	£000s	£000s	£000s	£000s
Quality Management	1,372	1,346	26	1,856	1,824	32
Medical ACT and Academic	80,291	80,218	73	120,367	119,372	995
Medical Directorate Support	5,727	5,712	15	7,740	7,740	0
Training Programme Management excl. MTG	18,315	18,451	(136)	24,912	25,019	(107)
Professional Development	5,802	5,588	214	8,117	8,015	102
Pharmacy	9,665	9,713	(48)	16,125	16,084	41
Medical Total	121,172	121,028	144	179,117	178,054	1,063
Dental	37,856	37,245	611	51,897	51,131	766
NMAHP	11,144	10,620	524	15,012	15,088	(76)
Psychology	31,102	31,069	33	42,698	42,957	(259)
Healthcare Sciences	3,566	3,593	(27)	4,574	4,614	(40)
Optometry	1,332	1,215	117	1,748	1,716	32
NHS Scotland Academy, Learning & Innovation	1,742	1,684	58	3,408	3,395	13
Social Care	301	309	(8)	405	414	(9)
NTS	15,215	15,322	(107)	21,884	21,796	88
Workforce	8,513	8,298	215	12,678	12,561	117
Finance	2,402	2,339	63	3,334	3,350	(16)
Properties & Facilities Mgmt	3,771	4,107	(336)	5,062	5,514	(452)
Planning	1,803	1,915	(112)	2,460	2,620	(160)
Net Provisions	2,702	1,042	1,660	1,571	898	673
NES Total (excl. MTG)	242,621	239,786	2,835	345,848	344,108	1,740
Training Programme Management - MTG Salaries	270,728	270,882	(154)	361,245	361,488	(243)
NES Total including MTG	513,349	510,668	2,681	707,093	705,596	1,497

Appendix 2 – Anticipated Funding – Received & Outstanding as at 31st December 2023

Funding	Recurrent £000s	Earmarked £000s	Non Recurrent £000s	Total £000s	Total split by:		Risk Rating
					Received £000s	Outstanding £000s	
Baseline budget	524,385	0	0	524,385	524,385	0	Green
Pay Inflation Adjustments	3,359	0	0	3,359	3,359	0	Green
Original budget	527,744	0	0	527,744	527,744	0	
Psychology Mental Health	0	0	26,959	26,959	26,700	259	Amber
Medical Training Grade Expansions	4,768	0	32,714	37,481	32,145	5,336	Green
Medical ACT additional funding	0	0	23,421	23,421	0	23,421	Green
MEP funding gap	0	0	12,331	12,331	0	12,331	Green
Primary Care Fund National Boards	0	0	3,550	3,550	2,484	1,065	Green
NTS Digital Front Door	0	0	2,500	2,500	2,500	0	Green
Vaccinations	0	0	1,800	1,800	1,800	0	Green
NTS Digital funding (inc NDS)	0	0	5,939	5,939	5,939	0	Green
Dental Aberdeen Dental School	0	0	3,074	3,074	3,074	0	Green
Pharmacy Workforce Priorities inc Independent prescribing and ACTp	0	0	4,727	4,727	4,727	0	Green
Pharmacy Trainees	0	8,268	1,118	9,386	9,386	0	Green
Centre for Workforce Supply	0	0	889	889	600	289	Green
NHS Scotland Academy	1,810	0	317	2,127	0	2,127	Green
HCS Cardiac Science training	0	0	728	728	728	0	Green
National Leadership Development Programme	0	0	1,194	1,194	1,194	0	Green
Dental Overseas levy	0	0	(1,043)	(1,043)	0	(1,043)	Red
Anticipated pay award	38,235	0	682	38,918	38,918	0	Green
Workforce Development Programme	0	0	950	950	950	0	Green
Social Care	0	0	424	424	25	399	Red
Chief Nursing officer	1,109	0	1,179	2,288	2,168	120	Green
R&R National Centre	0	0	412	412	328	83	Green
Other allocations (under £600k)	1,306	81	(93)	1,293	(614)	1,907	
Total in-Year allocations	47,228	8,349	123,771	179,348	133,054	46,294	

NHS Education for Scotland
Item 09b
08 February 2024

NES/24/08

NES Board

1. Title of Paper

Q3 Strategic Risk Update and NES Scoring Definitions and Matrix Proposal

2. Author(s) of Paper

Rob Coward, Principal Educator, Planning & Corporate Resources
Debbie Lewsley, Risk Manager, Planning & Corporate Resources
Jim Boyle, Director of Finance.

3. Lead Director(s)

Jim Boyle, Director of Finance

4. Situation/Purpose of paper

4.1 The purpose of this report is to present to the Board the third quarterly strategic risk update for 23/24 for review and approval.

4.2 At its January meeting, the Audit & Risk Committee approved proposals to amend elements of NES's Risk Strategy (subject to minor changes). These proposals included new Risk Scoring Definitions and a revised Scoring Matrix. The Committee also approved proposed additional risk categories of People/Workforce, Health & Safety, Environmental Sustainability/Climate Change and Transformation/Innovation. The additional risk categories are designed to provide a better understanding of the organisations overall risk profile, enhance NES's reporting of risks, and strengthen assurance that NES is effectively managing individual categories of risk.

In addition to reviewing and approving the Q3 strategic risk report, Board members are asked to consider and approve the following changes to risk management arrangements as recommended by the Audit and Risk Committee (Appendix 4):

- the proposed revised four-level risk scoring matrix.
- proposed definitions for risk impact and likelihood to guide scoring.
- proposed additional risk categories.

5. Background and Governance Route to Meeting

- 5.1 NES has well established risk management processes which are subject to frequent review by the Executive Team, the Audit and Risk Committee, NES Board and the Risk Management Group. Our risk management infrastructure is predominantly in place, with established directorate risk leads, risk log format and following the review of the Board risk appetite a revised risk Strategy (subject to final approval by the Audit & Risk Committee).
- 5.2 At the August 2023 NES Board meeting it was agreed that a review of the Board's risk appetite should be conducted to determine if the appetite for individual risk categories was still appropriate. It was recommended at the October 2023 Audit and Risk Committee that prior to considering the appropriateness and proportionality of the Board's appetite scorings, the Executive Team should undertake a review of the NES Scoring Definitions and Matrix. This recommendation was approved at the NES Board November 2023 meeting.
- 5.2 The Executive Team conducted a full review at their December 2023 meeting and the NES Scoring Definitions and Matrix proposal was presented to the Audit & Risk Committee at their January 2024 meeting, members discussed, reviewed and with minor recommendations approved the proposal (as shown in Appendix 4) which included adding additional categories to NES's risk profile.

6. Assessment/Key Issues

NES Strategic Risk Register

- 6.1 The Strategic Risk Register (summary Appendix 1, detail Appendix 2) has been subject to a recent review by the Executive Team and individual risk owners. Within the last reporting period there has been one new risk added to the Strategic Risk Register relating to NES not being an evidence-based data driven organisation (SR15), the current net score is 6 which sits outwith the Board's risk appetite for risks categorised as 'Governance'. Actions have been identified to help mitigate the risk.
- 6.2 There has been movement to two risk ratings, the net impact of Strategic Risk 1 (relating to NES Strategic Plan not aligning with the needs and expectations of stakeholders) has been decreased due to current measures in place and additional actions have also been identified to further control this risk. This assessment has resulted in the overall net risk rating being reduced from 12 to 9, this risk sits within the Boards appetite for risks in the 'Strategic' category. For Strategic Risk 9 (NES does not put sufficient measures in place to address ongoing cost and funding pressures), the net rating has been changed to 4 for likelihood and 4 for impact, given the significantly tightening financial outlook for NHS Scotland, and the proposed funding reductions for NES.

- 6.3 Within the last reporting period the Executive Team reviewed the Strategic Risk Register and agreed to widen the scope of Strategic Risk 13 to cover recruitment within all Directorates not just specifically NES Technology. This resulted in a change of risk owner who has reviewed and updated the risk to reflect the change within the cause, effect and result and the control and actions. The current net score is 8 which sits within the Board's risk appetite for risks categorised as 'Operational'.
- 6.4 Table 1 (as shown in Appendix 3) provides a summary of the current Net risk exposure across each of the categories within the Strategic Risk Register, with Table 2 providing the last reported position for reference. As can be seen there has been a slight decrease in risk exposure relating to Strategic Risks as a result of the reduction in the Net risk rating to Strategic Risk 1 and an increase in risk exposure relating to Governance and Finance due to the new risk being identified and the increase in the Net risk rating to Strategic Risk 9. Currently 50% of the risk exposure sits out with the Board's risk appetite, this is attributed to the risks within the Financial and Governance categories. Actions have been identified to further control risks where the net score is outwith the Board's appetite.

NES Risk Scoring Matrix Proposal

- 6.5 The current NES Risk Scoring Matrix is made up of five levels of risk, Primary 1, Primary 2, Contingency, Housekeeping and Low. When applied, the current scoring matrix at the Contingency and Housekeeping levels enables a crossover which can cause some confusion, as several risks with the same score can sit within different levels of the matrix.
- 6.6 The proposal (Appendix 4) has four levels of risk, Very High, High, Medium, and Low aligns NES's risk scoring matrix with other NHS Boards within Scotland. This approach prevents apparent anomalies in scoring and provides a standardised and consistent approach to defining NES's level of risk.

NES Scoring Definitions – Likelihood and Impact

- 6.7 It is important to develop a framework for assessing risks which evaluates both the likelihood of the risk being realised and of the impact if the risk is realised. NES's current definitions for likelihood follow the standardised approach used by other boards, and therefore no changes are identified in the proposal.
- 6.8 The proposed impact definitions (Appendix 4) introduces a detailed guide to the different types of risk that could impact on individual categories. This presents a more effective tool for assessing impact which focuses on scale, scope and

resource implications. This will allow for an enhanced understanding of the level of a risk and assist in prioritising how it should be managed.

NES Risk Categories

6.9 At present NES uses five categories to assist with risk management (Strategic, Governance, Financial, Reputational and Operational). The Executive Team approved the proposed addition of four further categories to the profile as follows:

- People/Workforce,
- Health & Safety,
- Environmental Sustainability/Climate Change and
- Transformation/Innovation.

6.10 These additional categories will enable NES to enhance its reporting of risks and strengthen its assurance that the organisation is effectively managing individual categories of risk. The proposal also provides an enhanced description of each category which will support in identifying the correct risk category when assessing potential risks and overall support a more effective and robust risk management process.

Board Risk Appetite

6.11 The NES Board has considered its risk appetite using five classifications Averse, Minimalist, Cautious, Open and Hungry. The classification is based on the existing risk scoring matrix, which again can be anomalous. This means that some risks with same scores would be considered appropriate for either the Contingency or Minimalist level of risk appetite. The proposal (as shown in Appendix 5) has combined the minimalist and cautious classifications to mitigate this issue and allow them to be scored using the proposed risk matrix. The proposed risk appetite levels are as follows:

- Low priority (score of 1 - 5),
- Medium priority (score of 6 - 10),
- High priority (score of 12 - 16) and
- Very high priority (score of 20 - 25).

6.12 Furthermore this aligns NES's Board risk appetite classifications with other NHS Boards within Scotland and provides a standardised and consistent approach to defining NES's Risk Appetite.

6.13 A summary of the Strategic Risk Register with the risk appetite proposal implemented is presented in Appendix 5, this shows Strategic Risk 14 now sitting within the Boards appetite and a reduction in the gap for all other

strategic risks sitting outwith the Boards appetite. Following approval of the proposal from the Board the Executive Team will conduct a full review of the Board's risk appetite to determine if the appetite for individual risk categories, including the additional categories is still appropriate. This will be presented to the April Audit and Risk Committee and to the Board in May 2024 for discussion and approval.

7. Recommendations

The NES Board is invited to:

- 7.1 To review and approve NES Strategic Risk Q3 update and provide any feedback as appropriate.
- 7.2 To review and approve the NES Scoring Definitions and Matrix proposal.
- 7.3 Consider and approve the additional categories People/Workforce, Health & Safety, Environmental Sustainability/Climate Change and Transformation/Innovation to NES's risk profile.

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 [Our Strategy 2023 – 26 People, Partnerships and Performance](#)

1. People Objectives and Outcomes
 2. Partnership Objectives and Outcomes
 3. Performance Objectives and Outcomes

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) Has an Equality Impact Assessment (EQIA) been completed or in progress for this piece of work?

- Yes
- No

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

- Yes
- No

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

- Yes
- No

Author name: Rob Coward, Debbie Lewsley, Jim Boyle
Date: January 2024
NES

Summary of Risk Log

Risk No.	Risk Title	Risk Date	Date due for next review	Gross Total	Net Total	Risk Category	Risk Appetite	Risk appetite vs net score
SR1	NES Strategic Plan does not align with the needs and expectations of stakeholders	19/04/2023	10/03/2024	15	9	Strategic	10-12	
SR2	Disproportionate amount of non-recurrent funding, without conversion to recurrent funding	19/04/2023	03/03/2024	16	12	Finance	1-3	Gap 9
SR3	Failure to recruit and retain sufficiently experienced and knowledgeable people to the Board, Executive Team and senior management establishment	19/04/2023	10/04/2024	16	8	Operational	10-12	
SR4	NES does not adequately engage with its employees	19/04/2023	10/04/2024	16	9	Operational	10-12	
SR5	NES does not put in place an adequate corporate infrastructure to support the Transformation Route Map.	19/04/2023	25/12/2023	16	9	Operational	10-12	
SR6	Failure to develop and maintain adequate Business Continuity arrangements to deal with the risk of adverse events and threats	19/04/2023	12/03/2024	16	9	Governance	1-3	Gap 6
SR7	Failure to put in place measures to adequately protect against breaches of cyber security	19/04/2023	12/03/2024	20	15	Governance	1-3	Gap 12
SR8	Failure to put sufficient employee training and other operational controls in place to minimise the risk of breaches of Information Governance	19/04/2023	12/03/2024	20	12	Governance	1-3	Gap 9
SR9	NES does not put sufficient measures in place to address ongoing cost and funding pressures	19/04/2023	01/05/2024	25	16	Finance	1-3	Gap 13
SR10	Failure to adequately anticipate and mitigate the impacts of policy, legislative, economic and societal change	19/04/2023	10/03/2024	12	8	Strategic	10-12	
SR11	Poor learning outcomes and learning experience for our stakeholders	19/04/2023	11/03/2024	16	9	Operational	10-12	
SR12	Insufficient investment in TURAS Learn and other NES learning platforms.	19/04/2023	12/03/2024	12	12	Operational	10-12	
SR13	Failure to recruit sufficient number of appropriately skilled and experienced staff within NES.	19/04/2023	10/04/2024	12	8	Operational	10-12	
SR14	Inadequate Board governance, systems, processes and scrutiny of them	19/04/2023	10/03/2024	25	4	Governance	1-3	Gap 1
SR15	NES is not an evidence based data driven organisation, lacking intelligence and insights from its Information Assets.	14/12/2023	13/03/2024	12	6	Governance	1-3	Gap 3

STRATEGIC RISK 1

Risk no:	SR1				
Risk Short Title:	NES Strategic Plan does not align with the needs and expectations of stakeholders				
Risk Owner:	Karen Reid	Date Added to Register:	19/04/2023		
		Review Date:	10/03/2024		
		Frequency of Review:	Quarterly		
		Committee/Group overseeing	NES Board		
Risk Category(s)	Strategic	Reputational			
Risk impacts on NES Strategy Key Area of Focus :					
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite	Within Board Appetite
19/04/2023	12	Primary 2		Open	10-12
26/09/2023	12	Primary 2	↔		
11/12/2023	9	Contingency	↓		
	-				
	-				

Gross Impact (1-5)	Gross Likelihood (1-5)
5	3
Gross Total:	15

Net Impact (1-5)	Net Likelihood (1-5)
3	3
Net Total:	9

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

Existing control rating: Partially controlled

Cause:		Effect:	
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	
Result:		Result:	
		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.	
Control:		Actions:	
1	Revised NES Strategic Plan clearly articulates the importance of education and training to a sustainable workforce and has been widely consulted upon	1	Executive engagement sessions with Territorial Health Boards, Health & Social Care Partnerships, Scottish Government, Social Care Sector and Academia to develop relationships and understanding of needs.
2	Annual Operating Plan, incorporating desired outcomes, forms the baseline for organisational activities	2	ADP 2023/204 submitted to SG
3	Development of focused communications to support management of stakeholder expectation in relation to NES capacity to deliver and support new systems development.	3	SG signed off new NES Strategy July 2023 Update Dec 2023 - Action Closed - Strategy now published
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	Ongoing SG engagement and commissions to NES for social care workforce education and training
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

Risk no:	SR2				
Risk Short Title:	Disproportionate amount of non-recurrent funding, without conversion to recurrent funding				
Risk Owner:	Jim Boyle	Date Added to Register:	19/04/2023		
		Review Date:	03/03/2024		
		Frequency of Review:	Quarterly		
		Committee/Group overseeing	NES Board		
Risk Category(s)	Finance				
Risk impacts on NES Strategy Key Area of Focus :					
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite	Within Board Appetite
19/04/2023	12	Primary 2		Averse	1-3
26/09/2023	12	Primary 2	↔		
04/12/2023	12	Primary 2	↔		
	-				
	-				

Gross Impact (1-5)	Gross Likelihood (1-5)
4	4
Gross Total:	16

Net Impact (1-5)	Net Likelihood (1-5)
3	4
Net Total:	12

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

Existing control rating: Partially controlled

Cause:		Effect:	
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	
Result:		Result:	
		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	
Control:		Actions:	
1	NES Exec Team maintain strong engagement with relevant leads at Scottish Government.	1	Baselining and bundling impact will be assessed when proposals are made available by the Scottish Government, and will be reported to the Board at the earliest opportunity Update Nov 2023 - This is more likely to impact on 2024/25.
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	Any requests by Scottish Government to decommission any work streams will be fully considered by the Executive Team, considering education and training impacts, as well as staffing and financial implications
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	Further response to SG has been sent, highlighting the policy risks of reducing in-year funding by 5% in 2023/24. Completed - Sent October 2023.
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

Risk no:	SR3				
Risk Short Title:	Failure to recruit and retain sufficiently experienced and knowledgeable people to the Board, Executive Team and senior management establishment				
Risk Owner:	Tracey Ashworth Davies	Date Added to Register:	19/04/2023		
		Review Date:	10/04/2024		
		Frequency of Review:	Quarterly		
		Committee/Group overseeing	Staff Governance Committee		
Risk Category(s)	Operational				
Risk impacts on NES Strategy Key Area of Focus :					
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite	Within Board Appetite
19/04/2023	8	Contingency		Open	10-12
26/09/2023	8	Contingency	↔		
11/01/2024	8	Contingency	↔		
	-				
	-				

Gross Impact (1-5)	Gross Likelihood (1-5)
4	4
Gross Total:	16

Net Impact (1-5)	Net Likelihood (1-5)
4	2
Net Total:	8

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

Existing control rating: Controlled

Cause:		Effect:	
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	
Result:		Result:	
		This would result in a deterioration of NES performance and credibility at all levels and would increase the risk of serious failures in governance	
Control:		Actions:	
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	Succession planning exercise covering cohort of executive and senior management roles has resulted in risk rating each role based on identifying potential internal candidates within a 2 year period of being ready for the role. Internal candidates are producing development plans which they and their line manager will regularly review supported by ODLL. A second cohort of senior management roles has been identified and a further succession planning exercise will take place by June 2024.
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

Risk no:	SR4					
Risk Short Title:	NES does not adequately engage with its employees					
Risk Owner:	Tracey Ashworth Davies	Date Added to Register:	19/04/2023			
		Review Date:	10/04/2024			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	Staff Governance Committee			
Risk Category(s)	Operational					
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
19/04/2023	9	Contingency		Open	10-12	
26/09/2023	9	Contingency	↔			
11/01/2024	9	Contingency	↔			
	-					
	-					

Gross Impact (1-5)	Gross Likelihood (1-5)
4	4
Gross Total:	16

Net Impact (1-5)	Net Likelihood (1-5)
3	3
Net Total:	9

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

Existing control rating: Controlled

Cause:		Effect:	
NES does not adequately engage with its employees, including the wellbeing and pastoral care of staff and learners for whom we have responsibility.		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 Directorate Operational Plans	
Result:		That could result in a significant deterioration in NES' ability to deliver on those plans	
Control:		Actions:	
1	Strong partnership working arrangements in place and maintained through regular contact with the Employee Director and via the Change Management Programme Board.	1	iMatter action plans are completed yearly and submitted.
2	Communication plan to be a key focus on all organisational change projects.	2	Rollout Viva Engage
3	Strong focus on communication and visibility, both at a corporate and directorate level through, for example, weekly executive led corporate videos.	3	Rollout OD Plan (Phase 1)
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

Risk no:	SR5				
Risk Short Title:	NES does not put in place an adequate corporate infrastructure to support the Transformation Route Map.				
Risk Owner:	Tracey Ashworth Davies	Date Added to Register:	19/04/2023		
		Review Date:	10/04/2024		
		Frequency of Review:	Quarterly		
		Committee/Group overseeing	Staff Governance Committee		
Risk Category(s)	Operational	Reputational			
Risk impacts on NES Strategy Key Area of Focus :					
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite	Within Board Appetite
19/04/2023	12	Primary 2		Open	10-12
26/09/2023	12	Primary 2	↔		
11/01/2024	9	Contingency	↓		
	-				
	-				

Gross Impact (1-5)	Gross Likelihood (1-5)
4	4
Gross Total:	16

Net Impact (1-5)	Net Likelihood (1-5)
3	3
Net Total:	9

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

Existing control rating: Partially controlled

Cause:		Effect:	
NES does not have in place a corporate infrastructure to support business processes in relation to the improvement programme including HR, Finance and the PMO. This includes not having 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	
Result:		Result:	
		This could result in NES having insufficient corporate infrastructure staff to support delivery of the AOP, Transformation Activity and potential efficiency savings. Resulting in reputational damage and impact on stakeholder engagement.	
Control:		Actions:	
1	Workforce Planning takes place alongside AOP processes so that resourcing can be aligned on an annual basis.	1	Development of Business Process Transformation Project as part of Corporate Improvement Programme to drive efficiency and effectiveness in business operations. Update Jan 2024 PID completed and approved.
2	In year changes to resourcing are made in alignment with in year consideration of new projects through the Corporate Radar process.	2	Implementation of Business Process Transformation Project - Completing Phase 1 delivery in Quarter 1 2024/25
3	Via the Post prioritisation process we identify issues associated with funding posts required to deliver the AOP and/or Corporate Radar approved projects and loop back to considering the impact on committed deliverables.	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	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	5	

STRATEGIC RISK 6

Risk no:	SR6					
Risk Short Title:	Failure to develop and maintain adequate Business Continuity arrangements to deal with the risk of adverse events and threats					
Risk Owner:	Christopher Wroath	Date Added to Register:	19/04/2023			
		Review Date:	12/03/2024			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	Technology & Information Committee			
Risk Category(s)	Governance	Operational				
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
19/04/2023	9	Contingency		Averse	1-3	
26/09/2023	9	Contingency	↔			
13/12/2023	9	Contingency	↔			
	-					
	-					

Gross Impact (1-5)	Gross Likelihood (1-5)
4	4
Gross Total:	16

Net Impact (1-5)	Net Likelihood (1-5)
3	3
Net Total:	9

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

Existing control rating: Partially controlled

Cause:		Effect:	
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.	
Result:			
This could result in failure to achieve strategic outcomes.			
Control:		Actions:	
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

Risk no:	SR7					
Risk Short Title:	Failure to put in place measures to adequately protect against breaches of cyber security					
Risk Owner:	Christopher Wroath	Date Added to Register:	19/04/2023			
		Review Date:	12/03/2024			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	Technology & Information Committee			
Risk Category(s)	Governance	Operational				
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
19/04/2023	15	Primary 1		Averse	1-3	
26/09/2023	15	Primary 1	↔			
13/12/2023	15	Primary 1	↔			
	-					
	-					

Gross Impact (1-5)	Gross Likelihood (1-5)
5	4
Gross Total:	20

Net Impact (1-5)	Net Likelihood (1-5)
5	3
Net Total:	15

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

Existing control rating: Partially controlled

Cause:		Effect:	
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	
Result:		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	
Control:		Actions:	
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	Continue to use the NIS Audit framework to manage and build on NES' cyber security posture.
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	Continue to act as an early adoptor for the NHSS Security Operations Centre (Dundee)
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

Risk no:	SR8					
Risk Short Title:	Failure to put sufficient employee training and other operational controls in place to minimise the risk of breaches of Information Governance					
Risk Owner:	Christopher Wroath	Date Added to Register:	19/04/2023			
		Review Date:	12/03/2024			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	Technology & Information Committee			
Risk Category(s)	Governance	Reputational				
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
19/04/2023	12	Primary 2		Averse	1-3	
26/09/2023	12	Primary 2	↔			
13/12/2023	12	Primary 2	↔			
	-					
	-					

Gross Impact (1-5)	Gross Likelihood (1-5)
4	5
Gross Total:	20

Net Impact (1-5)	Net Likelihood (1-5)
4	3
Net Total:	12

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

Existing control rating: **Partially controlled**

Cause:		Effect:	
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	
Result:		This could result in serious reputational damage and the imposition of punitive financial fines by regulatory authorities.	
Control:		Actions:	
1	Statutory and relevant data security processes in place, with specific reference to the new General Data Protection Regulations.	1	NES' Executive Team to increase all IG/IT security training to mandatory.
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	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

Risk no:	SR9					
Risk Short Title:	NES does not put sufficient measures in place to address ongoing cost and funding pressures					
Risk Owner:	Jim Boyle	Date Added to Register:	19/04/2023			
		Review Date:	01/05/2024			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	NES Board			
Risk Category(s)	Finance					
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
19/04/2023	9	Contingency		Averse	1-3	
26/09/2023	9	Contingency	↔			
04/12/2023	9	Contingency	↔			
01/02/2024	16	Primary 1	↑			
	-					

Gross Impact (1-5)	Gross Likelihood (1-5)
5	5
Gross Total:	25

Net Impact (1-5)	Net Likelihood (1-5)
4	4
Net Total:	16

Board Risk Appetite v Net Total	
Averse	1-3
Primary 1	16

Existing control rating: Partially controlled

Cause:		Effect:	
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	
Result:		Result:	
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		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	
Control:		Actions:	
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	The financial implications of any requests to decommission specific activities, or to reduce funding generally will be fully explored, with the financial, staffing and service impacts fully set out
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	The Operational Planning process for 2024/25 will have a significantly sharpened focus on the achievement of savings, as required by the SG's Sustainability & Value programme, and with the increasing likelihood of reductions to baseline funding
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	NES are working with SG to identify how baseline and additional commission activity can be modelled to match reduced funding availability.
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	Implications and risks of reducing activity will be set out for SG to allow decisions to be taken in the full knowledge of their impact to the wider NHS in Scotland
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

Risk no:	SR10					
Risk Short Title:	Failure to adequately anticipate and mitigate the impacts of policy, legislative, economic and societal change					
Risk Owner:	Karen Reid	Date Added to Register:	19/04/2023			
		Review Date:	10/03/2024			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	NES Board			
Risk Category(s)	Strategic					
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
19/04/2023	8	Contingency		Open	10-12	
26/09/2023	8	Contingency	↔			
11/12/2023	8	Contingency	↔			
	-					
	-					

Gross Impact (1-5)	Gross Likelihood (1-5)
4	3
Gross Total:	12

Net Impact (1-5)	Net Likelihood (1-5)
4	2
Net Total:	8

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

Existing control rating: Controlled

Cause:		Effect:	
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 disciplines	
Result:		Result:	
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		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	
Control:		Actions:	
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	Significant Engagement with Health Boards, Health & Social Care Partnerships, Scottish Government, Social Care Sector and Academia.
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	Ongoing SG discussions on fiscal impact on NES ADP.
3		3	Policy Parliamentary Team within NES meets regularly with Scottish Government.
4		4	0
5		5	

STRATEGIC RISK 11

Risk no:	SR11					
Risk Short Title:	Poor learning outcomes and learning experience for our stakeholders					
Risk Owner:	Karen Wilson	Date Added to Register:	19/04/2023			
		Review Date:	11/03/2024			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	Education & Quality Committee			
Risk Category(s)	Operational	Reputational				
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
19/04/2023	9	Contingency		Open	10-12	
26/09/2023	9	Contingency	↔			
12/12/2023	9	Contingency	↔			
	-					
	-					

Gross Impact (1-5)	Gross Likelihood (1-5)
4	4
Gross Total:	16

Net Impact (1-5)	Net Likelihood (1-5)
3	3
Net Total:	9

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

Existing control rating: Controlled

Cause:		Effect:	
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	
Result:		Result:	
		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	
Control:		Actions:	
1	Chief Executive and/or NES Directors maintain open and collaborative relationships/arrangements with counterparts in partner organisations	1	Development of a Learning & Education Strategy.
2	Ensure Chair is well briefed to manage relationships with other Board/organisational Chairs	2	Development of a strategy and resources for coproduction & engagement.
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	3	Learning and Education Framework being developed.
4	Widespread evaluation of education programmes, including the use of feedback from learners to effect improvement.	4	Implement a corporate improvement programme to support high quality learning and education provision through the Learning & Education Quality System (LEQS).
5	Education Governance arrangements in place to ensure quality and performance is monitored and improved where necessary.	5	

STRATEGIC RISK 12

Risk no:	SR12					
Risk Short Title:	Insufficient investment in TURAS Learn and other NES learning platforms.					
Risk Owner:	Christopher Wroath	Date Added to Register:	19/04/2023			
		Review Date:	12/03/2024			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	Technology & Information / Education & Quality Committee			
Risk Category(s)	Operational	Reputational				
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
19/04/2023	12	Primary 2		Open	10-12	
26/09/2023	12	Primary 2	↔			
13/12/2023	12	Primary 2	↔			
	-					
	-					

Gross Impact (1-5)	Gross Likelihood (1-5)
4	3
Gross Total:	12

Net Impact (1-5)	Net Likelihood (1-5)
4	3
Net Total:	12

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

Existing control rating: Uncontrolled

Cause:		Effect:	
NES do not sufficiently invest in technology that supports learning outcomes including 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	
Result:		Result:	
		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	
Control:		Actions:	
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

Risk no:	SR13					
Risk Short Title:	Failure to recruit sufficient number of appropriately skilled and experienced staff within NES.					
Risk Owner:	Tracey Ashworth Davies	Date Added to Register:	19/04/2023			
		Review Date:	10/04/2024			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	Staff Governance Committee			
Risk Category(s)	Operational					
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
19/04/2023	8	Contingency		Open	10-12	
26/09/2023	8	Contingency	↔			
11/01/2024	8	Contingency	↔			
	-					
	-					

Gross Impact (1-5)	Gross Likelihood (1-5)
4	3
Gross Total:	12

Net Impact (1-5)	Net Likelihood (1-5)
4	2
Net Total:	8

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

Existing control rating: Controlled

Cause:		Effect:	
Failure to recruit sufficient number of appropriately skilled and experienced staff within NES.		NES having insufficient staff to support delivery of the AOP, Transformation Route Map and Strategic Plan	
Result:		This could result in reputational damage and impact on stakeholder engagement.	
Control:		Actions:	
1	Monitoring and continuously improving job packs to ensure they attract an appropriate number of high quality candidates.	1	Work with Higher/Further Education establishments in Scotland, in addition to targeted Third Sector and related bodies to support greater apprenticeship opportunities and related early career routes.
2	Monitoring and continuously improving recruitment routes eg career sites, social media to ensure they attract an appropriate number of high quality candidates.	2	Deliver the Armed Forces Talent Programme Plan.
3	Monitoring and continuously improving our Equality and Diversity Practices in order to ensure they attract and retain underrepresented staff groups.	3	Anti racism training for line managers.
4	Monitor and report on the composition of the NES workforce and sex/gender/ethnicity/disability pay gaps to the Board.	4	Development of Talent Attraction Strategy.
5		5	

STRATEGIC RISK 14

Risk no:	SR14				
Risk Short Title:	Inadequate Board governance, systems, processes and scrutiny of them				
Risk Owner:	Karen Reid	Date Added to Register:	19/04/2023		
		Review Date:	10/03/2024		
		Frequency of Review:	Quarterly		
		Committee/Group overseeing	NES Board		
Risk Category(s)	Governance				
Risk impacts on NES Strategy Key Area of Focus :					
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite	Within Board Appetite
19/04/2023	4	Housekeeping		Averse	1-3
26/09/2023	4	Housekeeping	↔		
11/12/2023	4	Housekeeping	↔		
	-				
	-				

Gross Impact (1-5)	Gross Likelihood (1-5)
5	5
Gross Total:	25

Net Impact (1-5)	Net Likelihood (1-5)
2	2
Net Total:	4

Board Risk Appetite v Net Total	
Averse	1-3
Housekeeping	4

Existing control rating: **Partially controlled**

Cause:		Effect:	
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	
Result:		Result:	
		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	
Control:		Actions:	
1	Standing committees responsible for each governance domain supported by Executive Groups.	1	New refreshed Board and committee Assurance Framework has been developed and discussed with the Board at a development session. This will be further developed before final implementation.
2	Each committee provides an annual report to Audit Committee detailing how it has discharged its remit.	2	ET review outstanding Audit actions - quarterly
3	Comprehensive programme of internal audit	3	Scottish Government sign off of ADP - completed 2023/24
4	An Assurance framework has been developed in line with the 'Blue Print for Governance' and the Assurance and Audit Committee Handbook	4	Board Governance Training at Board Development Events
5	Ensure corporate awareness of relevant statutory regulatory oversight, and maintain close working with relevant professional and other regulatory bodies	5	

STRATEGIC RISK 15

Risk no:	SR15				
Risk Short Title:	NES is not an evidence based data driven organisation, lacking intelligence and insights from its Information Assets.				
Risk Owner:	Christopher Wroath	Date Added to Register:	14/12/2023		
		Review Date:	13/03/2024		
		Frequency of Review:	Quarterly		
		Committee/Group overseeing	Technology & Information Committee		
Risk Category(s)	Governance				
Risk impacts on NES Strategy Key Area of Focus :					
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite	Within Board Appetite
14/12/2023	6	Housekeeping		Averse	1-3
	-				
	-				
	-				
	-				

Gross Impact (1-5)	Gross Likelihood (1-5)
3	4
Gross Total:	12

Net Impact (1-5)	Net Likelihood (1-5)
2	3
Net Total:	6

Board Risk Appetite v Net Total	
Averse	1-3
Housekeeping	6

Existing control rating: Partially controlled

Cause:		Effect:	
Lack of strategic application of data quality standards. Lack of outcome focussed in our information gathering and structures.		Inefficiency and waste of resources in all aspects of NESs work in support of our strategic outcomes.	
		Result:	
		This could result in a loss of credibility towards the Board, from the Scottish Government and scrutiny bodies, which could pose a threat to the general credibility and future of NES	
Control:		Actions:	
1	Transformation Programme is now operational. There is a specific focus from the Corporate Improvement Programme on efficiency and effectiveness of data collection, storage and management.	1	Development of an overt data plan as part of the Corporate Improvement Plan.
2	Plans for automation and preparation for artificial intelligence will drive new and improved data collection, storage and management.	2	
3	Development of the Implementation Plan for the M365 Viva Suite of applications will drive new and improved data collection, storage and management.	3	
4	Planned pilot of M365 Copilot Application will drive intelligence and knowledge on required improvements and restructuring of all NES data and information.	4	
5		5	

Summary of Strategic Risks Exposure

Table 1 - Current Position - February 2024

Current Risk Exposure							
(Total Score)	Primary 1	Primary 2	Contingency	Housekeeping	Low	Total	% of Total
Strategic	0	0	17	0	0	17	11.6%
Operational	0	12	43	0	0	55	37.7%
Finance	16	12	0	0	0	28	19.2%
Reputational	0	0	0	0	0	0	0.0%
Governance	15	12	9	10	0	46	31.5%
Technology	0	0	0	0	0	0	0.0%
TOTAL EXPOSURE	31	36	69	10	0	146	100.0%
% of Total	21.2%	24.7%	47.3%	6.8%	0.0%		

31

Table 2 - Last Reported Position - November 2023

Current Risk Exposure							
(Total Score)	Primary 1	Primary 2	Contingency	Housekeeping	Low	Total	% of Total
Strategic	0	12	8	0	0	20	14.4%
Operational	0	24	34	0	0	58	41.7%
Finance	0	12	9	0	0	21	15.1%
Reputational	0	0	0	0	0	0	0.0%
Governance	15	12	9	4	0	40	28.8%
Technology	0	0	0	0	0	0	0.0%
TOTAL EXPOSURE	15	60	60	4	0	139	100.0%
% of Total	10.8%	43.2%	43.2%	2.9%	0.0%		

NES Risk Matrix, Scoring and Categories Proposal

APPENDIX 4

Risk Matrix and Score –

Very High	20 - 25
High	12 - 16
Medium	6 - 10
Low	1 - 5

	Impact / Consequences				
Likelihood	Negligible	Minor	Moderate	Major	Extreme
Almost Certain	Medium (5)	High (10)	High (15)	Very High (20)	Very High (25)
Likely	Medium (4)	Medium (8)	High (12)	High (16)	Very High (20)
Possible	Low (3)	Medium (6)	Medium (9)	High (12)	High (15)
Unlikely	Low (2)	Medium (4)	Medium (6)	Medium (8)	High (10)
Rare	Low (1)	Low (2)	Low (3)	Medium (4)	Medium (5)

NES Scoring Definitions – Likelihood -

Descriptor	Rare	Unlikely	Possible	Likely	Almost Certain
Likelihood	Cannot believe this event would happen – will only happen in exceptional circumstances. Risk will not materialise more regularly than every 10 years.	Not expected to happen, but definite potential exists – unlikely to occur. Risk will materialise on average once every 5 – 10 years.	May occur occasionally, has happened before on occasions – reasonable chance of occurring. Risk will materialise on average once every 3 – 5 years.	Strong possibility that this could occur – likely to occur. Risk will materialise on average once within each year.	This is expected to occur frequently/in most circumstances – more likely to occur than not. Risk will materialise within 6 months.

NES Scoring Definitions – Impact/Consequence –

Types of Risk	Negligible (1)	Minor (2)	Moderate (3)	Major (4)	Extreme (5)
Strategic <i>(Risk could impact on achievement of strategic objectives)</i>	<ul style="list-style-type: none"> Negligible impact on achievement of strategic objectives. No loss of confidence from key stakeholders. Negligible impact on services. 	<ul style="list-style-type: none"> Minor impact on achievement of limited number of strategic objectives. Minor loss of confidence from some key stakeholders. Reduced ability to support some services. 	<ul style="list-style-type: none"> Some strategic objectives will not be achieved. Loss of confidence from key stakeholders in specific areas. Inability to support specific services. 	<ul style="list-style-type: none"> Significant proportion of strategic objectives will not be achieved. Loss of confidence from key stakeholders in several areas. Inability to support several services. 	<ul style="list-style-type: none"> Inability to deliver on strategic objectives. Loss of confidence from key stakeholders including Scottish Government. Inability to support service.
Financial <i>(Risk could impact on financial position)</i>	<ul style="list-style-type: none"> Some adverse financial impact but not sufficient to affect the ability of the service/department to operate within its annual budget (up to £100k). 	<ul style="list-style-type: none"> Adverse financial impact affecting the ability of one or more services/ departments to operate within their annual budget (£100k – 250k). 	<ul style="list-style-type: none"> Significant adverse financial impact affecting the ability of one or more directorates to operate within their annual budget (£250k - £500k). 	<ul style="list-style-type: none"> Significant adverse financial impact affecting the ability of the organisation to achieve its annual financial control total (£100k-1m). 	<ul style="list-style-type: none"> Significant aggregated financial impact affecting the long-term financial sustainability of the organisation (£>1m).
Governance <i>(Risk could impact on the governance of the organisation and services)</i>	<ul style="list-style-type: none"> Small number of potential issues affecting minor quality improvement issues. Minor non-compliance with governance requirements 	<ul style="list-style-type: none"> Potential issues which can be addressed by low level of management action. Isolated failures to meet internal standards or follow protocols. 	<ul style="list-style-type: none"> Challenging issues that can be addressed with appropriate action plan. Repeated failures to meet internal standards or follow protocols. 	<ul style="list-style-type: none"> Mandatory improvement required to address major issues. High level action plan is necessary. Major failure to meet legal requirements or governance standards. 	<ul style="list-style-type: none"> Major governance issues leading to the threat of prosecution. Board level action plan required. Systematic failure to meet legal or governance standards.
Reputational <i>(Risk could impact on public/stakeholder trust and confidence, and affect organisation's reputation)</i>	<ul style="list-style-type: none"> Adverse comments/feedback, no media coverage. Little effect on staff morale. 	<ul style="list-style-type: none"> Adverse local media coverage – short term. Some public embarrassment. Minor impact on staff morale and public/political perception and confidence in the organisation 	<ul style="list-style-type: none"> Adverse local or social media coverage – long-term adverse publicity. Significant effect on staff morale and public/political perception of the organisation 	<ul style="list-style-type: none"> Adverse national media coverage, less than 3 days. Public/political confidence in the organisation undermined. Use of services affected 	<ul style="list-style-type: none"> Adverse coverage in national/International media - more than 3 days. MSP/MP concern (Questions in Parliament). Court Enforcement. Public Enquiry
Operational <i>(Risk could impact on the NES operations and delivery of products and services)</i>	<ul style="list-style-type: none"> Interruption in a service which does not impact on the ability to continue to provide service. 	<ul style="list-style-type: none"> Short term disruption to service with minor impact on quality-of-service provision. 	<ul style="list-style-type: none"> Some disruption in service with unacceptable impact on service provision. Temporary loss of ability to provide service. 	<ul style="list-style-type: none"> Sustained loss of service which has serious impact on delivery of services. Major Contingency Plans invoked. 	<ul style="list-style-type: none"> Permanent loss of core service or facility. Disruption to facility leading to significant “knock on” effect.
Technology <i>(Risk could impact on delivery of services due to technological systems/processes/development and resilience)</i>	<ul style="list-style-type: none"> Negligible impact on delivery of services due to inadequate or deficient system/process development and performance or inadequate resilience. 	<ul style="list-style-type: none"> Minor impact on delivery of services due to inadequate or deficient system/process development and performance or inadequate resilience. 	<ul style="list-style-type: none"> Late delivery of services due to inadequate or deficient system/process development and performance or inadequate resilience. 	<ul style="list-style-type: none"> Failure to deliver services due to inadequate or deficient system/process development and performance or inadequate resilience. 	<ul style="list-style-type: none"> Non delivery of services due to inadequate or deficient system/process development and performance or inadequate resilience.
Workforce <i>(Risk could impact on staff wellbeing, staffing levels and competency)</i>	<ul style="list-style-type: none"> Short term staffing issues temporarily reduces service provision and quality. Short term staffing issues, where there is no disruption to service quality. 	<ul style="list-style-type: none"> Ongoing staffing issues reduce service quality. Minor errors due to ineffective training / implementation of training. 	<ul style="list-style-type: none"> Late delivery of a key objective / service due to staffing issues Moderate error due to ineffective training / implementation of training. 	<ul style="list-style-type: none"> Failure to meet key objective / service due to staffing issues. Major error due to ineffective training/implementation of training. 	<ul style="list-style-type: none"> Non delivery of key objectives/service due to staffing issues Loss of key/high volumes of staff. Critical error due to ineffective training / implementation of training.
Health and Safety <i>(Risk could impact on staff/public/volunteer, or a patient out with delivery of care)</i>	<ul style="list-style-type: none"> Adverse event leading to minor injury not requiring first aid. Temporary, local disruption to operations due to health and safety issues No staff absence 	<ul style="list-style-type: none"> Minor injury or illness, first aid treatment required. Up to 3 days staff absence Local disruption of operations for up to one week due to health and safety concerns 	<ul style="list-style-type: none"> Agency reportable, e.g., Police (violent and aggressive acts) Significant injury requiring medical treatment and/or counselling. RIDDOR over 7- day absence due to injury/dangerous occurrences Local disruption to operations for a period of more than one week due to health and safety concerns. 	<ul style="list-style-type: none"> Major injuries/long term incapacity /disability (e.g., loss of limb), requiring, medical treatment and/or counselling. RIDDOR over 7- day absence due to major injury/dangerous occurrences. Widespread disruption to operations for a period of up to one week due to health and safety concerns. 	<ul style="list-style-type: none"> Incident leading to death(s) or major permanent incapacity. RIDDOR Reportable/FAI Widespread disruption to operations for an extended period due to health and safety concerns
Environmental Sustainability / Climate Change <i>(Risk could impact on environment, ability to comply with legislation/targets or environmentally sustainable care)</i>	<ul style="list-style-type: none"> Limited damage to environment, to a minimal area of low significance. Negligible impact on ability to comply with climate legislation/targets or ability to reach net zero. 	<ul style="list-style-type: none"> Minor effects on biological or physical environment. Minor impact on ability to comply with climate legislation/targets or ability to reach net zero. 	<ul style="list-style-type: none"> Moderate short-term effects but not affecting eco-system. Moderate impact on ability to comply with climate legislation/targets or ability to reach net zero. 	<ul style="list-style-type: none"> Serious medium term environmental effects. Serious impact on ability to comply with climate legislation/targets or ability to reach net zero. 	<ul style="list-style-type: none"> Very serious long term environmental impairment of eco-system. Critical non-compliance with climate legislation/targets or ability to reach net zero.
Transformation/Innovation <i>(Risk could impact on an operational/technology risk)</i>	<ul style="list-style-type: none"> Barely noticeable reduction in scope/quality/ schedule. Negligible impact on achievement of intended benefits. 	<ul style="list-style-type: none"> Minor reduction in scope/quality/ schedule. Minor impact on achievement of intended benefits. 	<ul style="list-style-type: none"> Reduction in scope/quality/project/programme objectives or schedule. Some intended benefits will not be achieved. 	<ul style="list-style-type: none"> Significant project/programme over-run. Significant proportion of intended benefits will not be achieved. 	<ul style="list-style-type: none"> Inability to deliver project/programme objectives. Inability to achieve sustainable transformation.

NES Risk Categories –

- | | |
|---|---|
| Strategic | - Risks arising from the achievement of NES's Strategy due to failure in supporting the delivery of commitments, plans or objectives due to a changing macro-environment. |
| Finance | - Risks arising from not managing finances in accordance with requirements and financial constraints resulting in poor returns from investments, failure to manage assets/liabilities or to obtain value for money from the resources deployed, and/or non-compliant financial reporting. |
| Governance | - Risks arising from unclear plans, priorities, authorities and accountabilities, and/or ineffective or disproportionate oversight of decision-making and/or performance. |
| Reputational | - Risks arising from adverse events, including ethical violations, a lack of sustainability, systemic or repeated failures or poor quality or a lack of innovation, leading to damages to reputation and or destruction of trust and relations. |
| Operational | - Risks arising from inadequate, poorly designed or ineffective/inefficient internal processes resulting in fraud, error, impaired customer service (quality and/or quantity of service), non-compliance and/or poor value for money. |
| Technology | - Risk arising from technology not delivering the expected services due to inadequate or deficient system/process development and performance or inadequate resilience. |
| People/Workforce | - Risks arising from ineffective leadership and engagement, suboptimal culture, inappropriate behaviours, the unavailability of sufficient capacity and capability, industrial action and/or non-compliance with relevant employment legislation/HR policies resulting in negative impact on performance. |
| Health & Safety | - Risks arising from inefficient safety management resulting in non-compliance and/or harm and suffering to employees, contractors, service users or the public. |
| Environmental Sustainability/ Climate Change | - Risk arising from ineffective management of natural resources resulting in harm to the environment and non-compliance with climate legislation/targets or ability to reach net zero. |
| Transformation / Innovation | Risk arising from major transformation projects and innovations resulting in inability to achieve planned changes and reduced effectiveness of delivering on objectives. |

NES Board Risk Appetite (Proposal) - Classification

Classification	Description	Residual Score Range: Likelihood x Impact
Averse	Avoidance of risk and uncertainty is a key organisational objective.	1 – 5 (Low Priority)
Cautious	Preference for safe options where the inherent risk has relatively low impact/ likelihood and there is limited potential for reward.	6 - 10 (Medium Priority)
Open	Willing to consider all options and choose the one that is most likely to result in success, despite a relatively high level of risk.	12 – 16 (High Priority)
Hungry	Eager to be innovative and to choose options offering the highest potential rewards or transformation, despite a high level of residual risk.	20 – 25 (Very High Priority)

NES Board Risk Appetite with proposal implemented -

Type of Risk	Risk Appetite		
	Concept (Gross Risk)	Pilot /Test of Change (Gross Risk)	Business as Usual (Net Risk)
Strategic/Policy risks	Hungry (20 – 25)	Hungry (20 – 25)	Open (12 – 16)
Operational/Service Delivery risks	Hungry (20 – 25)	Hungry (20 – 25)	Open (12 – 16)
Finance risks	Cautious (6 – 10)	Cautious (6 – 10)	Averse (1 – 5)
Reputational/Credibility risks	Open (12 – 16)	Cautious (6 – 10)	Cautious (6 – 10)
Accountability/Governance risks	Cautious (6 – 10)	Cautious (6 – 10)	Averse (1 – 5)
Technology risks	Hungry (20 – 25)	Hungry (20 – 25)	Open (12 – 16)

Summary of Risk Log with Proposed NES Board Risk Appetite Implemented

Risk No.	Risk Title	Risk Date	Date due for next review	Gross Total	Net Total	Risk Category	Risk Appetite	Risk appetite vs net score
SR1	NES Strategic Plan does not align with the needs and expectations of stakeholders	19/04/2023	10/03/2024	15	9	Strategic	12 - 16	
SR2	Disproportionate amount of non-recurrent funding, without conversion to recurrent funding	19/04/2023	03/03/2024	16	12	Finance	1 - 5	Gap 7
SR3	Failure to recruit and retain sufficiently experienced and knowledgeable people to the Board, Executive Team and senior management establishment	19/04/2023	10/04/2024	16	8	Operational	12 - 16	
SR4	NES does not adequately engage with its employees	19/04/2023	10/04/2024	16	9	Operational	12 - 16	
SR5	NES does not put in place an adequate corporate infrastructure to support the Transformation Route Map.	19/04/2023	25/12/2023	16	9	Operational	12 - 16	
SR6	Failure to develop and maintain adequate Business Continuity arrangements to deal with the risk of adverse events and threats	19/04/2023	12/03/2024	16	9	Governance	1 - 5	Gap 4
SR7	Failure to put in place measures to adequately protect against breaches of cyber security	19/04/2023	12/03/2024	20	15	Governance	1 - 5	Gap 10
SR8	Failure to put sufficient employee training and other operational controls in place to minimise the risk of breaches of Information Governance	19/04/2023	12/03/2024	20	12	Governance	1 - 5	Gap 7
SR9	NES does not put sufficient measures in place to address ongoing cost and funding pressures	19/04/2023	01/05/2024	25	16	Finance	1 - 5	Gap 11
SR10	Failure to adequately anticipate and mitigate the impacts of policy, legislative, economic and societal change	19/04/2023	10/03/2024	12	8	Strategic	12 - 16	
SR11	Poor learning outcomes and learning experience for our stakeholders	19/04/2023	11/03/2024	16	9	Operational	12 - 16	
SR12	Insufficient investment in TURAS Learn and other NES learning platforms.	19/04/2023	12/03/2024	12	12	Operational	12 - 16	
SR13	Failure to recruit sufficient number of appropriately skilled and experienced staff within NES.	19/04/2023	10/04/2024	12	8	Operational	12 - 16	
SR14	Inadequate Board governance, systems, processes and scrutiny of them	19/04/2023	10/03/2024	25	4	Governance	1 - 5	
SR15	NES is not an evidence based data driven organisation, lacking intelligence and insights from its Information Assets.	14/12/2023	13/03/2024	12	6	Governance	1 - 5	Gap 1

NHS Education for Scotland
Item 09c
8 February 2024

NES/24/09

Board Meeting

1. Title of Paper

Strategic Key Performance Indicators: Board Performance Report 2023-24, Q3

2. Author(s) of Paper

Joe Hands, Principal Lead – Quality Improvement

Simon Williams, Principal Educator – Planning & Corporate Resources

3. Lead Director(s)

Christina Bichan, Director of Planning and Performance

4. Situation/Purpose of paper

4.1 This third quarterly performance report to the Board for 23/24 presents the data available in phase 3 of implementation of the Board's new balanced scorecard approach.

4.2 The Board is asked to review and approve this report.

5. Background and Governance Route to Meeting

5.1 This paper represents the third time the Board has received a report on performance against the strategic KPIs approved alongside the NES Corporate Strategy in May 2023. Performance Reports will continue to be presented to the Board on a quarterly basis.

5.2 Extension of reporting to governance committees has continued, with the Technology and Information Committee, the Staff Governance Committee and the Audit and Risk Committee all having received their first performance reports at recent meetings.

6. Assessment/Key Issues

6.1 Updates to measures previously reported to the Board

In order to provide the Board with more transparent information, Strategic KPI14b (Dental Funded trainee placements - Completion rate) has been divided into two measures. SKPI14b now shows developmental outcomes for Vocational Training while SKPI14c shows developmental outcomes for Core Training.

6.2 Measures due to be first reported at the end of Q3 2023-24

The following strategic KPIs were scheduled to be first reported to the Board at the end of Q3 2023-24:

- SKPI04 (vacancy rate)
- SKPI23 (collaborations)
- SKPI24 (innovation initiatives)
- SKPI25 (use of workforce analysis services).

6.2.1 Strategic KPI04 (vacancy rate)

Strategic KPI04 is not reported this quarter and will be first reported to the Board at the end of Quarter 4 2023-24. Reporting mechanisms for this KPI are currently being developed by the Workforce Directorate.

6.2.2 Strategic KPI23 (collaborations)

Strategic KPI23 is not reported this quarter and will be first reported to the Board at the end of Quarter 4 2023-24. Discussions with the collaborative partnerships group are ongoing and a policy to support the overall corporate approach to the management and governance of strategic collaborations has been recently drafted. Once approved this will form the basis of our approach and put the necessary structure around arrangements to enable future reporting.

6.2.3 Strategic KPI24 (innovation initiatives)

Strategic KPI24 is reported this quarter as scheduled.

6.2.4 Strategic KPI25 (use of workforce analysis services)

Strategic KPI25 is reported this quarter as scheduled. It has been slightly reworded from “% of Service Providers who report utilising NES-provided workforce data” to “% of Service Providers utilising NES workforce analysis services”. This change from a focus on data to a focus on the services which are directly provided by NES will allow more accurate monitoring of performance. A full definition of terms can be found in the ‘Definitions’ tab of the Report.

6.3 Overall findings

This 2023-24 Quarter 3 report gives data on 33 strategic KPIs. The remaining 16 strategic KPIs are scheduled to be reported to the Board for the first time following 2023-24 Quarter 4. A summary of RAG status is presented in Table 1. In the case of 8 KPIs, RAG status parameters are yet to be set. Each KPI is considered individually in this respect and for some a better understanding of the data over time is necessary before a view can be taken on the suitable range for parameters. A further update on progress will be provided in the Quarter 4 report.

Table 1: RAG Status Summary – All reported KPIs, Q3 23/24

Green	Amber	Red	RAG parameters to be set
19	2	4	8

Tables 2 and 3 provided an overview of the KPIs reporting a Red or Amber status at Quarter end. Further detail on improvement plans and mitigating actions is provided in the KPI data report.

Table 2: KPIs reporting as Red status

SKPI07a	% of disabled staff
SKPI13a	Medical Funded trainee placements - Fill rate
SKPI13b	Dental Funded trainee placements - Fill rate
SKPI22	Net Promoter Score

Table 3: KPIs reporting as Amber status

SKPI06c	Ethnicity pay equality
SKPI14c	Dental Funded trainee placements - Completion rate (Core Training)

6.4 Future reporting

Looking ahead, further strategic KPIs will be reported to the Board at the end of Q4. These are summarised in Table 4 below for reference along with their status.

Table 4: KPIs scheduled for first reporting at Quarter 4 – status summary

KPI	Status
SKPI08	Group working on data collection.
SKPI09-12 SKPI18-21	EQEG working group clarifying measures and working on short- and longer-term reporting. Progress to be reported to Board end Quarter 4.
SKPI16 (Quality of Clinical Training Environment)	Scope to be clarified. Progress to be reported to Board end Quarter 4.
SKPI26-28 SKPI33	Groups working on clarifying measures and on short- and longer-term reporting. Progress to be reported to Board end Quarter 4.

7 Recommendations

7.1 The Board is asked to review and approve this report.

a) Have Educational implications been considered?

- Yes
 No

b) Is there a budget allocated for this work?

- Yes
 No

c) Alignment with [Our Strategy 2023 – 26 People, Partnerships and Performance](#)

1. People Objectives and Outcomes
 2. Partnership Objectives and Outcomes

3. Performance Objectives and Outcomes

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) Has an Equality Impact Assessment (EQIA) been completed or in progress for this piece of work?

Yes

No

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

Yes

No

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

Yes

No

Author name: Simon Williams

Date: February 2024

NES

NHS Education for Scotland
Item 09d
8 February 2024

NES/24/10

Board Paper

1. Title of Paper

2023/24 Quarter 3 Delivery Report

2. Author(s) of Paper

Alison Shiell, Planning & Corporate Governance Manager

3. Lead Director(s)

Christina Bichan, Director of Planning & Performance

4. Situation/Purpose of paper

4.1 This report provides the Board with a Quarter 3 update on NES's delivery performance against the deliverables and milestones set out in the 2023/24 NES Annual Delivery Plan (ADP). The report uses (B)RAG exception reporting to evidence progress and completion status.

4.2 The report comprises an overall 2023/24 Quarter 3 summary position (Appendix 1) and a full 2023/24 Quarter 1, Quarter 2 and Quarter 3 update (Appendix 2).

4.3 The Board are asked to review and approve this report.

5. Background and Governance Route to Meeting

5.1 This report has been prepared for the Board's review and approval and has been considered by the NES Executive Team in advance of the 8 February 2024 Board meeting.

5.2 The 2023/24 NES ADP was approved by the NES Board in September 2023 and Scottish Government in October 2023. The 2023/24 NES ADP is published on the [Corporate Publications](#) page of the NES website.

6. Assessment/Key Issues

2023/24 Quarter 3 – Delivery Performance Overview

6.1 In 2023/24 Quarters 1 and 2 the NES 2023/24 ADP comprised 141 deliverables. During Quarter 3, the overall number of deliverables has decreased to 140 as one deliverable has been closed for the remainder of 2023/24. Further detail is provided within paragraph 6.9.

Delivery performance at the end of 2023/24 Quarter 3 is summarised in Table 1.

Table 1: Summary of deliverable status – 2023/24 Quarter 3

Deliverable Status	Number	Percentage
Blue – complete	4	3%
Red – significant delay	4	3%
Amber – minor delay	23	16%
Green – on track	109	78%
Total	140	

6.2 Appendix 1 provides an overview of 2023/24 Quarter 1 / Quarter 2 / Quarter 3 (B)RAG status. In relation to Quarter 3 (Q3) specifically, there is an increase in red deliverables since Quarter 2 (Q2), however the single red deliverable identified at Q2 (5887) has now been brought back on track and has been rated Green for Q3. One deliverable (5697) has been completed during Q3, which increases the overall Blue status to four out of 140 deliverables.

2023/24 Quarter 3 – Red & Amber Deliverables

6.3 Four deliverables have been reported as Red (experiencing significant delay) in Quarter 3. Three of the red deliverables are within Psychology and the other within NMAHP (Nursing, Midwifery & Allied Health Professions). The key delivery impacts arising from the delays reported and planned mitigating actions to bring performance back on track before the end of 2023/24 Quarter 4 are presented in Table 2.

6.4 23 deliverables have been reported as amber (minor delay) in Quarter 3. The majority of amber deliverables are linked to short-term delays, including staff / faculty capacity (sickness or absence), lower than expected numbers participating in educational programmes and delays to original project plans and timelines. A small number of deliverables continue to be in transition as delivery priorities are agreed with Scottish Government. Table 3 provides an overview of the key delivery impacts arising from the delays reported.

6.5 All deliverables are subject to ongoing mitigating actions and further progress is expected during the final quarter of 2023/24 to bring performance back on track.

Table 2: Impacts and mitigations summary – Red deliverables

2023/24 Quarter 3 – Red Deliverables	
Deliverable	Impact of Current Delays and Mitigating Actions
5407 Psychology	<p>Ongoing internal and external workforce pressures during Quarter 3 (mainly due to competing pressures and staff capacity) have meant that maximising external stakeholder engagement in the evidence-based psychological therapies and interventions programme of work is currently very challenging.</p> <p>Delivery numbers for the publication of NES / Scottish Government (SG) Matrix evidence tables and intervention templates is lower than expected at Quarter 3, however planned engagement and prioritisation discussions in early Quarter 4 aim to increase delivery so that this deliverable can be rated Amber by the end of 2023/24.</p>
5461 Psychology	<p>The delivery of trauma skilled workshops has been severely impacted by unfilled posts / absence issues within the network of Transforming Psychological Trauma Implementation Co-ordinators (TPTICs). At Quarter 3, at least six out of 14 Health Boards are affected by recruitment and / or absence issues. NES are working with Boards to support TPTIC recruitment and retention, however it is likely that this deliverable may remain red at the end of 2023/24 due to the ongoing reduced training delivery position.</p> <p>NES is working to arrange a central delivery team to increase numbers trained within the enhanced 'Survive and Thrive' training course however ongoing internal capacity issues mean that further actions to mitigate current risks are limited.</p>
5497 Psychology	<p>Workforce availability to attend training that will support improved health and wellbeing outcomes for people living with dementia, their families and carers continues to be a significant issue. Capacity issues within NES as a result of staffing changes are also affecting the delivery of this programme of work. Ongoing issues as a result of this work being funded on a non-recurrent basis by SG has put both 2023/24 Quarter 4 deliverables at risk and the future delivery of this programme beyond the end of 2023/24.</p> <p>To mitigate these issues, NES is regularly engaging with partners and issuing additional communications with the aim of increasing workforce attendance at education and training events. Consideration is also being given to training date flexibility and different delivery modes out with the central belt. NES also continues to engage with SG policy colleagues in relation to the funding and capacity issues highlighted in the paragraph above.</p>

2023/24 Quarter 3 – Red Deliverables	
Deliverable	Impact of Current Delays and Mitigating Actions
5517 NMAHP	<p>Despite ongoing efforts to promote student engagement with the Quality Management of the Practice Learning Environment (QMPLE) Nursing & Midwifery system, overall student feedback rates continue to sit at only just above 30%. Reduced student feedback rates mean that fewer evidence-based improvements can be made to the NMAHP practice learning experience.</p> <p>The value and importance of student feedback is being promoted to students via Practice Education Facilitator (PEF) and Care Home Education Facilitator (CHEF) networks and social media with the aim of bringing this deliverable back on track by 2023/24 Quarter 4. The value of student feedback via QMPLE is also promoted to NHS Boards at their Practice Education review meetings.</p>

Table 3: Summary of impacts – Amber deliverables

Deliverable	Deliverables rated Amber at Q1, Q2 and Q3
5424 Medical	Possible delays to the delivery of education and training that enhances health and social care workforce preparedness in relation to death, dying and bereavement care continue to be highlighted as a result of internal staffing / workload issues, however milestones are being achieved.
5539 Workforce	Development of the NES HR proposition model continues to progress however internal delivery timelines and process reviews are still in the process of being confirmed and completed.
5868 5863 5862 NTS	Within the NES Technology Service (NTS) there are ongoing delays to digital work including the Individual Care Summary information, vaccination programmes and the TURAS Care Management tool. This continues to be as a result of awaiting further clarity from Scottish Government regarding the longer-term future direction and funding of these programmes of work.
5839 NTS	Delays in receiving a formal decision regarding the Knowledge Network hosting platform means that the launch of the redesigned platform has been pushed back to 2023/24 Quarter 4.
5532 NMAHP	Agreement has been reached with Skills Development Scotland and the Scottish Funding Council to develop a Graduate Apprenticeship (GA) for Operating Department Practitioners (ODPs) however there is recognition that the proposed timeline for delivery (to commence in Autumn 2024) is challenging.

Deliverables rated Amber at Q2 and Q3 (Green at Q1)	
5581 Dental	Unfilled posts within Dental Specialty Training Programmes continue to impact service provision within Health Boards and may have a detrimental effect on the trainee training experience.
5585 Dental	<p>Lower than expected numbers of General Dental Practitioners signing up to Adults with Incapacity and Enhanced Skills Practitioner (ESP) Domiciliary Care courses continue to affect course delivery and planned course delivery targets may not be met. Some Health Boards may experience an impact on patient care within Care Homes as result of these courses not taking place.</p> <p>NES continues to work with Territorial Health Board Directors of Dentistry / Clinical Leads to scope and understand Health Board requirements in this area and whether the need for these courses has already been met. Clarification is also awaited from Scottish Government regarding funding for General Dental Practitioners to provide ESP Domiciliary Care which may increase interest and make future courses viable.</p>
5884 NHSSA, Learning & Innovation	Lower than expected number of learners participating in a Healthcare Pathway pilot qualification as part of the NHSS Youth Academy. The recruitment window remains open to enable schools to offer the qualification in a more immersive way with the aim of increasing future participation.
5892 NHSSA, L & I	The NES Learning and Education Strategy will be submitted for Board approval during 2023/24 Quarter 4, rather than Quarter 3 as originally planned.
5543 Workforce	Whilst positive feedback has been received during regional engagement sessions, NES continues to await clarity from Scottish Government (SG) regarding how the NHS Scotland Workforce Planning tool will be used to support the national workforce planning process. Further meetings between NES and SG are planned for early 2024.
5457 Psychology	Ongoing delays to the delivery of training to improve health, care and partner organisation staff knowledge, skills, and confidence in supporting the adults they care for to improve their physical and mental health due to workforce capacity and absence issues.
Deliverables raised from Green (Q1 & 2) to Amber in Q3	
5699 Optometry	NES's role in supporting enhanced service delivery in Optometry (via the development of an undergraduate training programme) has been impacted by the need to further explore the scope of NES's role in relation to this commission. NES Optometry are working with relevant stakeholders to establish this required scoping.

5583 Dental	Ongoing staffing capacity issues have delayed the delivery of food and nutrition development sessions to Childsmile staff in Health Boards.
5576 Dental	The Dental directorate is awaiting receipt of an internal audit report that focuses on the NES Additional Costs of Teaching (ACT) and outreach funding process. Initial verbal feedback suggests that current ACT reporting processes may need revision and further improvement which may take time to implement, however there is currently no risk to the provision of ACT funding to Health Boards.
5439 Medical	Internal staff capacity issues have meant that there has been a reduction in continuing professional development (CPD) courses for postgraduate medical trainers. During Quarter 3, resource has focused on the delivery of mandatory training. Mitigating actions are being put in place to support the delivery of training for the next 12 months.
5866 NTS	Rollout of the OpenEyes (electronic patient record application for ophthalmology) to NHS Golden Jubilee (NHS GJ) to support the Cataract pathway has been delayed until June 2024 as there is a need for NHS GJ to upgrade to a new system (Trakcare) as part of the overall OpenEyes integration. NES and NHS GJ continue to have good engagement in relation to this issue and governance preparation is underway to allow technical work by NES to be delivered once the Trakcare upgrade is complete.
5867 NTS	Delays to the Community Health Index (CHI) digital programme means that integration of OpenEyes into the National Digital Platform is now delayed by approximately two months.
5713 NTS	Alignment of Technology Enabled Learning (TEL) activity with the NES Learning & Education Strategy has not been fully realised during Quarter 3 due to delays in the publication of the final version strategy (deliverable 5892).
5857 NTS	A delay in the receipt of confirmed multi-year funding from Scottish Government for the NES Technology Service's support of the NHS Scotland Digital Prescribing and Dispensing Pathways Programme (DPDP) is impacting on NES's ability to fully resource this work.
5761 NMAHP	Limited number of responses received on the draft Transgender Care Knowledge and Skills Framework consultation may impact design work planned for 2023/24 Quarter 4. The consultation deadline date has been extended to February 2024 as per a request from Scottish Government.

5472 Psychology	Delivery of a programme of education and training to improve awareness and detection of perinatal and infant mental health problems in Scotland has been affected by Health Boards' capacity to release staff for training.
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Key Achievements during Quarter 3

- 6.6 There have been a number of significant achievements during Quarter 3 that support the delivery of the [NES 2023-26 Strategy](#) and align directly with our strategic themes ([People, Partnerships and Performance](#)). Within our education and training remit (People), we have delivered mandatory training to almost 100% of General Ophthalmic Services (GOS) Optometrists / Ophthalmic Medical Practitioners in Scotland, reached over 12,000 Pharmacy e-Learning completions in Pharmacy and welcomed almost 60 family nurses and supervisors onto a Continuing Professional Development (CPD) programme for the Family Nurse Partnership.
- 6.7 To support the delivery of our Partnerships strategic theme objectives, in December 2023 we supported Scottish Rugby, Brain Health Scotland, Scottish Brain Sciences and sportscotland with their concussion in sport campaign to deliver player welfare training at the Scottish Gas Murrayfield stadium via the NES Mobile Skills Unit. We also received positive feedback in relation to a new cultural humility resource launched by the NHS Scotland Academy and which was developed in partnership with a wide range of organisations and stakeholders.
- 6.8 In relation to our Performance strategic theme, the NES Board approved the NES Anchors Strategic Plan which sets out NES's intentions and contributions as an Anchor Institution and explains how our work as a learning organisation can improve outcomes for local communities and the environment. We also published a student conversion resource as part of a programme of work to improve the NHS Scotland careers offer and support increased attraction to the NHS Scotland workforce.

2023/24 ADP Amendments during Quarter 3

- 6.9 As per the 2023/24 Quarter 2 Delivery Report, the Board will wish to note changes and refinements to the 2023/24 ADP as a result of ongoing changes within our operating environment and the fluid nature of certain aspects of our work. The following amendments have been made to the 2023/24 ADP during Quarter 3 and have been reviewed and approved by the NES Executive Team:

2023/24 ADP Deliverable	Amendment Detail
5625	Deliverable 5625, which relates to NES's aim to obtain Scottish Credit and Qualifications Framework (SCQF) credit-rating status, has been closed as there is no direct progress anticipated in either 2023/24 Quarter 3 or Quarter 4. This is due to deliverable 5906 (Development

	of new approach to educational quality assurance and quality management) being a prerequisite to achieving 5625. A refreshed version of deliverable 5625 will be included within the 2024/25 NES delivery plan.
5857	The Quarter 2, 3 and 4 milestones for deliverable 5857 have been updated to reflect changes in overall NHS Scotland Digital Prescribing and Dispensing Pathways Programme (DPDP) timelines.

Risk Management

6.10 The four red deliverables reported at 2023/24 Quarter 3 have been reviewed against the NES Corporate Risk Register and do not demonstrate a significant corporate risk at this time. Mitigating actions are in place to address current issues as much as possible with the position to be reviewed again at Quarter 4. The 2023/24 Quarter 4 delivery report to the Board will highlight any red deliverables that are directly linked to a corporate risk.

6.11 For the Board's information, whilst an EQIA (Equality Impact Assessment) has not been undertaken for the NES 2023/24 ADP, EQIAs have been completed for individual NES programmes of education and training activity as appropriate.

7. Recommendations

7.1 The Board is asked to approve the Quarter 3 Delivery Report and note the amendments made to the 2023/24 NES ADP.

a) Have Educational implications been considered?

- Yes
 No

b) Is there a budget allocated for this work?

- Yes
 No

c) Alignment with [Our Strategy 2023 – 26 People, Partnerships and Performance](#)

1. People Objectives and Outcomes
 2. Partnership Objectives and Outcomes
 3. Performance Objectives and Outcomes

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) **Has an Equality Impact Assessment (EQIA) been completed or in progress for this piece of work?**

- Yes
- No

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

- Yes
- No

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

- Yes
- No

Alison Shiell
January 2024
NES

Annual Delivery Plan (ADP) Summary Progress Report (Quarter 3, 2023/24)

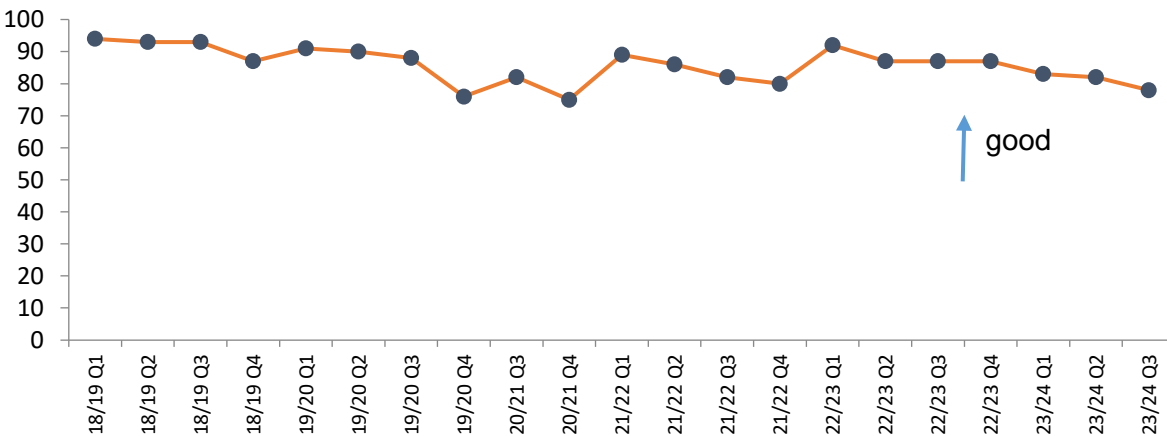
Aim: To provide an overview of progress and highlight key achievements, delays and risks in relation to delivery of the 2023/24 NES ADP.

Delivery Status at 31 December 2023 (Quarter 3)

- **81% of deliverables** are completed or on target to be completed in line with ADP milestones at the end of Quarter 3 and a further **16%** progressing with minor delays.
- **3% of deliverables** are experiencing significant delay. Mitigating actions are in place to bring deliverables back on track where possible.
- Red / Amber deliverables will be monitored and proactive support given to directorates as required.

Status:	Q1 23/24	Q2 23/24	Q3 23/24	Q4 23/24
Complete	2	2	4	-
On Track	114	116	109	-
Minor Delay	25	22	23	-
Significant Delay	0	1	4	-
Closed - no further action	0	0	1	-
Total Deliverables	141	141	141 (140)	-

Percentage of on target deliverables, by Quarter, 2018/19 – 2023/24



Key Achievements (Individual ADP milestone references shown in brackets)

- Mandatory training delivered to almost 100% of General Ophthalmic Services (GOS) Optometrists/Ophthalmic Medical Practitioners in Scotland (Ref **5697**)
- NES Anchors Strategic Plan approved (Ref **5898**)
- Positive feedback received for new cultural humility resource launched by the NHSS Academy, as part of Nursing & Midwifery Council OSCE preparation for nurses recruited from outside the UK. (Ref **5888**)
- 100% fill rate for 2024/25 Pharmacy trainee Foundation Training Year (FTY) posts (Ref **5362**)
- Principles for a NES approach to Co-Production and involving people with lived / living experience developed (Ref **5903**)
- Supporting Scottish Rugby (and others) with their concussion in sport campaign with player welfare training delivered via the NES Mobile Skills Unit (Ref **5416**)
- First stage of enhanced reporting delivered for the TURAS Family Nurse Partnership application (Ref **5862**)
- Publication of student conversion resource to support increased attraction to the NHS Scotland workforce (Ref **5548**)

Delays and associated impact

Of the 4 red and 23 amber deliverables, the majority have mitigating actions in place. Progress in early Quarter 4 aims to bring the majority of deliverables back on track. The red deliverables are due to internal and external workforce pressures, reduced levels of learner engagement in a quality management system and non-recurrent funding issues. The majority of amber deliverables are linked to short-term delays, including staff/faculty capacity (sickness or absence), lower than expected numbers participating in educational programmes and delays to original project plans / timelines. A small number are impacted by delays in strategic decision making. The associated impact is a small reduction in the scale of our educational offering in some instances and a lengthening in the timeline for delivery in others.

Corporate Risks Affecting Delivery

At the end of Quarter 3 there are 4 deliverables reporting significant delay. There are no impacts highlighted at present which align to the NES Corporate Risk Register.

NHS Education for Scotland

NES/24/11

Item 10a

Date of meeting Thursday 8 February

Meeting: NES Board

1. Title of Paper

Counter Fraud Strategy and Policy Review

2. Author(s) of Paper

Laura Howard, Deputy Director of Finance and Fraud Liaison Officer (FLO)

3. Lead Director(s)

Jim Boyle, Executive Director of Finance and Counter Fraud Champion (CFC)

4. Situation/Purpose of paper

- 4.1. The purpose of this paper is to update the Board on the new of the Counter Fraud Strategy and review of the current policy.

5. Background and Governance Route to Meeting

- 5.1. The previous Counter Fraud Strategy was issued to all Boards in July 2015 by John Matheson, Director of Finance at SGHSCD. The strategy has now been refreshed by Counter Fraud Services (CFS) and the Scottish Government (SG), setting out the key priorities in order to reduce fraud affecting the NHS.
- 5.2. The Counter Fraud Policy was approved by the Board and came effective from April 2022. B The policy provides detailed direction and help to NES staff dealing with circumstances suspected to be fraud.
- 5.3. The strategy and the update on the policy review was presented to the Audit and Risk Committee as part of the quarterly fraud update on 18 January 2024.

6. Assessment/Key Issues

- 6.1. The new Counter Fraud Strategy 2023-26 Working together to reduce fraud across NHSScotland, introduced by Michael Matheson Cabinet Secretary for NHS Recovery,

Health and Social Care was issued by Scottish Government and Counter Fraud Services in November 2023. The strategy sets out the vision, mission and purpose, the strategic assessment, the principles, actions and how they will collaborate, support and provide assurance to boards.

- 6.2. The document serves as a roadmap for CFS commitment to safeguarding NHSScotland from the threat of fraud, bribery, and corruption. Collaboration is at the heart of the strategy, and it will be implemented through annual delivery plans to provide Boards with the support, guidance and tools to enable effective counter fraud responses at both a local and national level.
- 6.3. The Fraud Liaison Officer (FLO) and Counter Fraud Champion (CFC) will support CFS with the delivery of the strategy through the regular review of risks, support for investigations and delivering the annual action plan and our compliance with the Counter Fraud Standard. We will work closely with CFS and the CFC/FLO network to raise awareness and implement best practice to reduce the risk of fraud, bribery and corruption within NES.
- 6.4. A detailed update will be provided to the Audit and Risk Committee on a quarterly basis on actions taken by NES to support the strategy.
- 6.5. To read the full strategy please click [here](#).
- 6.6. A review has been carried out on the NES Counter Fraud Policy which was approved by the NES Board on 24th November 2022. The current policy aligns to the NHS Scotland policy on countering fraud which is detailed in the Partnership Agreement 2022-25 signed by the Chief Executive and the Head of CFS. The policy is supported by the new Counter Fraud Strategy and the NES Standing Financial Instructions (SFIs). There are no updates required to the policy at this time.
- 6.7. The policy will be reviewed in 2025 when the new partnership agreement is agreed.

7. Recommendations

- 7.1. The Board is asked to adopt the National Counter Fraud Strategy 2023-26 and approve the approach NES will take to support the Strategy and the date for the next policy review.

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 [Our Strategy 2023 – 26 People, Partnerships and Performance](#)

- 1. People Objectives and Outcomes
- 2. Partnership Objectives and Outcomes
- 3. Performance Objectives and Outcomes

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) Has an Equality Impact Assessment (EQIA) been completed or in progress for this piece of work?

- Yes
- No

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

- Yes
- No

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

- Yes
- No

Author name: Laura Howard

Date: 29 January 2024

Board

1. Title of Paper

Corporate Governance Package: Board Standing Orders; Board Code of Conduct; Board Scheme of Delegation; Standing Financial Instructions (SFIs) & Committee Terms of Reference

2. Author(s) of Paper

Della Thomas, Board Secretary and Corporate Governance Lead
Laura Howard, Deputy Director of Finance

3. Lead Director(s)

Jim Boyle, Executive Director of Finance

4. Situation/Purpose of paper

4.1 This paper brings the following elements of the Board Corporate Governance Package to the Board for final strategic overview and approval:

- Board Standing Orders (Website hyperlink)
- Board Code of Conduct (Website hyperlink)
- Board Scheme of Delegation (Appendix 1)
- Standing Financial Instructions (SFIs) (Appendix 2)
- ARC Terms of Reference (ToRs) (Appendix 3)
- Technology and Information Committee (TIC) ToRs (Appendix 4)
- Staff Governance Committee (SGC) ToRs (Appendix 5)
- Remuneration Committee ToRs (Appendix 6)
- Education and Quality Committee (EQC) ToRs (Appendix 7)

5. Background and Governance Route to Meeting

5.1 The Board Corporate Governance Package is reviewed on an annual basis by the Audit and Risk Committee (ARC) and approved for onward progression through to the Board for final approval. Once approved the pack is published on the Board website.

5.2 The ToRs were sequenced through the respective Committees for review and approval prior to the ARC as follows:

- ARC ToRs – 5 October 2023 ARC meeting

- Technology and Information Committee (TIC) ToRs – 30 October 2023 TIC meeting
- Remuneration Committee ToRs – by correspondence October 2023
- Staff Governance Committee (SGC) and Remuneration Committee ToRs – 2 November 2023 SGC meeting
- Education and Quality committee (EQC) ToRs – 7 December 2023 EQC meeting

5.3 Further to the Committee review, changes were made to the ToRs as detailed in section 6 of this paper.

5.4 Changes recommended to the other corporate governance documents (Board Standing Orders; SFIs, Board Scheme of Delegation and Board Code of Conduct) are also detailed in section 6. These documents had not been sequenced to any other Committee prior to ARC and were reviewed and approved by ARC at the 16 January 2024 meeting.

6. Assessment/Key Issues

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

6.1 There is a risk that if the Corporate Governance Package is not considered from a strategic overview perspective, as well as an individual component perspective, then changes or improvements in governance elsewhere in the organisation or in the wider system may not be implemented as appropriate. The strategic overview also mitigates duplication of governance effort and enables the identification of any gaps and enhances governance line of sight.

Board Standing Orders

6.2 The Board Standing Orders approved by the Board at the 16 February 2023 Board meeting are published on the NES website [here](#) and align with [DL\(2019\)24](#).

6.3 The Board Standing Orders have been reviewed and no changes are recommended at this time. The only change that will be required is to include updated SFIs and Board Scheme of Delegation hyperlinks signposting to the revised versions of these documents once they have been approved by the Board and published.

Board Code of Conduct

6.4 The Board Code of Conduct was revised significantly and discussed and approved by the Board at the 26 May 2022 meeting. This is available on the NES website [here](#). No changes are recommended.

Board Scheme of Delegation

6.5 The Board Scheme of delegation was reviewed and is available as Appendix 1.

6.6 The following changes were agreed by the ARC:

- Section 1.1 details the decisions and approvals retained by the Board. These have been amended to better reflect the NHS Corporate Governance Blueprint domains, with reference to strategic risk, risk appetite and strategic stakeholder engagement added. In relation to financial and performance reporting, a change has been proposed to reflect this is the *overall* responsibility of the Board. Full delivery performance, risk and finance reports are scheduled to the Board on a quarterly basis. However, the Board has delegated the governance of particular components of performance in relation to certain Strategic Key Performance Indicators (SKPIs) and strategic risks to the Standing Committees. A new section 2 has been added to the table to reflect this.
- A new section 4 has been added relating to the Board Assurance Framework and the Committee Assurance Frameworks.
- A new section 51 has been added following the 6 December 2023 Remuneration Committee Meeting. This meeting agreed a revision to the current NES process for the awarding of consultant discretionary pay points. The Remuneration Committee agreed that the Chair of the Panel would be the Director of Workforce, or their delegate and that the decision would come to the Remuneration Committee for assurance and final approval. The awarding of consultant discretionary pay points will be done in line with the Scottish Government and Scottish Executive Health Department circulars.
- An addition has been made to section 44 to include cyber security. Amendments have been made to sections 12, 42, 51 and 53 to correct delegations.

6.7 The ARC asked for some additional amendments to be made to specify deputies, in areas where previously a non-applicable N/A had been marked. Deputies have been added to section 18c, 18d, 19b, 20g and 26e.

6.8 The deputy delegation associated with item 25d on the Scheme of Delegation has been amended to remove the Head of Procurement and to add instead the Director of the Commissioning area along with the Deputy Director of Finance as this is considered to be more appropriate, given the level of budget delegated.

6.9 Item 50 has been amended to include the Chief Executive as Accountable Officer as well as Remuneration Committee.

SFIs

6.8 The SFIs (Appendix 2) were reviewed, and the ARC agreed the following amendments to the SFIs:

- Section 6 Budget and Planning (page 13) paragraph 6.4 and 6.5 has been added to provide Officers with clarity on responsibilities when agreeing new /specific ring-fenced funding with SGHSCD and the approval of Directorate budgets.
- Section 11 Contracting and Procurement (page 29) the UK tender rates for 2024 have been updated.
- Section 19 Financial Irregularities (page 45) Paragraph 19.1 has been updated to reflect the new NHS Scotland Counter Fraud Strategy 2023-2026, which was published in November 2023.

6.9 In addition, the ARC asked for the following amendments to be made:

- Section 11.17 now sets out the requirement for approval of the Chief Executive and Director of Finance prior to the appointment of a Management Consultant.
- Section 23.6 has been updated to “an independent examination or external audit” which aligns to latest guidance.

ARC ToRs

6.10 The ARC ToRs were considered at the 5 October 2023 ARC meeting. The ARC noted that the ToRs had been reviewed against the 4 delegated ARC SKPIs (Numbers 31, 32, 34 and 35) and that these areas were already embraced within the ARC ToRs. No changes were therefore required.

6.11 The ARC considered revising the ToRs to specifically reference the new strategic risks but agreed to maintain a more concise narrative in the ToRs, paragraph 9.2.3 therefore remains unchanged.

6.12 The 5 October 2023 ARC meeting questioned the appropriateness of the “Property and Asset Management Strategy (PAMS) Update” coming through the ARC. This was since further discussed and given the work pending on the review of Committee roles and remits, the ARC, at their 18 January 2024 meeting, agreed to keep this within their remit of the ARC for now. As per section 9.5.7 of the ARC ToRs, “Consider the financial implications of matters relating to accommodation, maintenance of premises and provision of services. This will include reviewing the content of the Property and Asset Management Strategy (PAMS)”.

6.13 The ARC ToRs are included as Appendix 3.

TIC ToRs

- 6.14 The TIC ToRs were considered at the 30 October 2023 meeting. The TIC noted that the ToRs had been reviewed against the TIC delegated Strategic Key Performance Indicators (SKPIs) (38, 39, 28 and 26 with a contribution towards number 41).
- 6.15 The TIC concluded that SKPI Number 28. “% of staff, learners and partner feedback that states technology, data and digital developments meets their needs”, is not referenced explicitly in the TIC ToRs, however section 9.2 of the TIC ToRs details the role of the TIC to provide scrutiny and oversight of the corporate governance processes for incorporating in-year Commissions into the overall strategic work programme. TIC will start to receive reports on the new Scottish Government Turas Refresh Commission and also receive information, for assurance on the newly formed multi-agency Turas Refresh Programme Board. The TIC has already been receiving quarterly reports on the Scottish Government Digital Skills and Leadership Programme Commission for over a year.
- 6.16 In relation to SKPI Number 26 “% of health and social care workforce who report being confident in using digital ways of working”, there was no direct correlation to the ToRs, the TIC therefore approved an enhancement to section 9.3 of the ToRs to capture this aspect of the remit of the TIC.
- 6.17 The TIC noted that Angus McCann had been co-opted for a further year and agreed an amendment to the ToRs to reflect that the TIC *may* include a Co-opted member instead of *will* include.
- 6.18 Section 11.2 of the ToRs has been revised to reflect the decision not to conduct Annual Self-Assessments of effectiveness for Committees (other than the Audit and Risk Committee) and instead take this forward in an on-going way as a standing agenda item at the end of each meeting. ARC members are asked to note that this same amendment has also been made to the SGC and EQC ToRs.
- 6.19 Board members are also invited to note that TIC, SGC and TIC ToRs have been amended to reflect the governance role for Board delegated equality outcomes.
- 6.20 Approved TIC ToRs are included as Appendix 4.

Remuneration Committee ToRs

6.21 The Remuneration Committee ToRs were approved by the Committee through correspondence during October 2023 and then reviewed and further approved by the SGC at their meeting 2 November 2023.

6.22 Minor amendments were made to the Remuneration Committee ToRs. Section 7.1 stated that the Committee will meet at least three times per annum. Last year the Committee met on one occasion on 1 June 2022 to review executive performance and objectives and conducted all other business by correspondence. This was then homologated at the June 2023 meeting. This year the Committee has held one meeting on 21 June 2023 for the same purpose. Section 7.1 was changed to “will be scheduled to meet three times per annum and with the Chair’s discretion, conduct business by correspondence on occasion where this provides a more timely or effective mechanism.”

6.23 Section 9.1.2 has been amended to improve clarity on what the employment related terms and conditions are in line with.

6.24 To note, whilst all other Committee ToRs have been reviewed against the NES Strategy, delegated Committee SKPIs and delegated Committee Strategic risks, the Remuneration Committee does not have any Board delegated SKIPs or strategic risks at this time.

6.25 Approved Remuneration Committee ToRs are available as Appendix 5.

SGC ToRs

6.26 The SGC ToRs were considered at the meeting held 2 November 2023. The SGC noted that the ToRs had been reviewed against the 10 SGC delegated SKPIs (Number 1-8, 17 and 25).

6.27 The SGC ToRs specify two **roles** for the SGC, the first referred to in section 2.1 of the ToRs, is in relation to the Staff Governance Standard. The remit section of the ToRs further develops this role and the SKPIs 1-8 reflects performance reporting associated with the internal governance of NES staff.

6.28 The second role specified in the ToRs relates to work commissioned directly by Scottish Government, or any other aspect of NES business approved formally through the Annual Delivery Plan. Whilst reports on external delivery of work relating to staff and workforce have been received by the SGC over the last year or so, the current **remit** of the SGC ToRs did not capture this aspect as the remit section is heavily focused on the internal governance of NES staff.

6.29 The SGC approved changes to the remit to include the governance of external delivery work, particularly relating to SKPI numbers 17 and 25. A new form of words has been added as 9.25 to the ToRs.

6.30 An amendment to paragraph 9.2.3 of the ToRs has been made to reflect the new risk reporting approach and the Board delegation of strategic risks to the SGC.

6.31 Paragraph 9.3 was added to the SGC ToRs during the height of the COVID pandemic. This paragraph has now been removed.

6.32 Approved SGC ToRs are available as Appendix 6.

EQC ToRs

6.33 The EQC ToRs were considered at the meeting held 7 December 2023. The EQC noted that the ToRs had been reviewed against the EQC delegated SKPIs (Numbers 9-12, 13a-b, 14a-b, 15a-b, 18-21, 23-24, 27, 29-30, 37 and 16 (under development)).

6.34 EQC considered if paragraph 9.10 of the ToRs relating to the governance and quality controls of technology enhanced learning should be removed from the remit of the EQC. Substantive Technology Enhanced Learning Reports are taken through the Technology and Information Committee (TIC) and the TIC receive delegated SKPI reports in relation to SKPI Number 28 “% of technology, data and digital developments which are shaped by staff, learner and partners feedback” and SKPI Number 26 “% of health and social care workforce who report being confident in using digital ways of working”. The TIC also receive reports on Turas Refresh and the Chair of the Turas Refresh Programme Board is a Co-opted member of the TIC. Therefore, the EQC agreed to remove this aspect of the ToR for the time being.

6.35 In relation to SKPI Number 10 “Number of health and social care staff accessing NES learning products as a % of the health and social care workforce”, it was noted that the governance of Social Care *education and training* was not reflected in the EQC ToRs, references have therefore been included.

6.36 Paragraph number 9.2 of the ToRs has been amended to include reference to Credit Rated Programmes.

6.37 The NHS Scotland Academy delegated remit reflected as Appendix 1 of the EQC ToRs was reviewed. Item 1 of the Appendix has been revised to include young people and school-based pathways and to align with SKPI Number 29 “Number of young people participating on a school-based pilot pathway”.

6.38 An addition to section 3.1 of the membership section of the ToRs has been made to reflect that the membership may include one co-opted member with non-voting rights.

6.39 Approved EQC ToRs are available as Appendix 7.

7 Recommendations

7.1 The Board is invited to:

- Note that the ARC has reviewed each individual element and taken a strategic overview of the full corporate governance package.
- Provide final approval for the whole corporate governance pack.

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 [Our Strategy 2023 – 26 People, Partnerships and Performance](#)

1. People Objectives and Outcomes
 2. Partnership Objectives and Outcomes
 3. Performance Objectives and Outcomes

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) Has an Equality Impact Assessment (EQIA) been completed or in progress for this piece of work?

- Yes
 No

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

- Yes
- No

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

- Yes
- No

Author name: Della Thomas

Date: Janaury 2024

NES

NES Board Scheme of Delegation

RESERVATION OF POWERS AND SCHEME OF DELEGATION

1.1 Matters on which decisions on, and/or approval of, are retained by the Board:

- Policy,
- Strategy, strategic risk and setting risk appetite, delivery plan and budgets,
- Standing Orders,
- Standing Financial Instructions,
- The establishment, terms and reference and reporting arrangements for all Committees and Sub Committees (including Standing Committees),
- Significant items of Capital Expenditure or disposal of assets,
- Recommendations from all Committees and Sub-Committees (Where powers are Delegated),
- Annual Report and Annual Accounts,
- Overall financial and performance reporting arrangements,
- Strategic Stakeholder Engagement plan and
- Constitution and Terms of Reference for statutory Committees.

1.2 Powers delegated by the Board to the Standing Committees and the executives are detailed in the table below:

Delegated Issue and Scope of Delegation	Individual Responsible	Deputy
1. Chair all Board meetings and associated responsibilities	Chair	Vice Chair
2. Standing Committees Board delegated Strategic Key Performance Indicators and Strategic Risks	Committee Executive/Director Lead	Committee Executive Lead nominated deputy Director/Associate Director
3. Risk Management	Chief Executive	Executive Director of Finance
4. Board Assurance Framework and Committee Assurance Frameworks	Chief Executive	Executive Director of Finance
5. Demonstrate Best Value for all services	Chief Executive	Executive Director of Finance
6. Disciplinary and Grievance arrangements	Chief Executive	Director of Workforce
7. Standards of business conduct for staff	Chief Executive	Executive Director of Finance
8. Standards of Board Member Conduct	Chair and Chief Executive	Deputy Chair; Deputy Chief Executives
9. Register of Interests (including gifts and hospitality) <ul style="list-style-type: none"> • Board Members 	Chief Executive	Board Secretary & Corporate Governance Lead

Delegated Issue and Scope of Delegation	Individual Responsible	Deputy
<ul style="list-style-type: none"> • Staff 	Chief Executive	Executive Director of Finance
10. Approve and sign all legal documents which will be necessary in legal proceedings related to staff	Chief Executive	Executive Director of Workforce
11. Complaints	Chief Executive	Director of Planning and Performance
12. Freedom of Information	Chief Executive	Director of Planning and Performance
13. Educational Quality Assurance Systems	Chief Executive	Executive Director of Nursing, Midwifery and Allied Health Professionals (NMAHP) and Executive Medical Director
14. Operation of all detailed financial matters including bank accounts and banking procedures.	Executive Director of Finance	Deputy Director of Finance
15. Implementing the Board's financial policies and co-ordinating corrective action and ensuring detailed financial procedures and systems are prepared and documented	Executive Director of Finance	Deputy Director of Finance
16. Delegation of budgets	Chief Executive & Executive Directors	Executive Director of Finance

Delegated Issue and Scope of Delegation	Individual Responsible	Deputy
17. Responsibility for the implementation and monitoring of budget virements	Executive Director of Finance	Deputy Director of Finance
18. Virement between Budgets (<i>Section 21.6 to 21.9 of SFIs</i>)		
a) Up to or equal to £25,000	Budget Holder	N/A
b) Up to or equal to £100,000	Deputy Director of Finance	Head of Finance Business Partnering
c) Up to or equal to £500,000	Executive Director of Finance	Deputy Director of Finance
d) Up to or equal to £1,000,000	Chief Executive (and report to the Board)	Executive Director of Finance (only if Accountable Officer is absent and report to Board)
19. Approval of expenditure for which no provision has been made in an approved budget, and which is not covered by funding under the delegated powers of virement, (<i>Section 6.12 & 9.2 of SFIs</i>)		
a) Up to or equal to £500,000	Executive Director of Finance	Deputy Director of Finance

Delegated Issue and Scope of Delegation	Individual Responsible	Deputy
b) up to or equal to £1,000,000	Chief Executive (and report to the Board)	Executive Director of Finance (only if Accountable Officer is absent and report to Board)
20. Approval to spend funds within delegated limits: <i>[Section 21.4 of SFIs]</i>		
c) Up to the level of their designated authority, which shall be no greater than £10,000	Designated Directorate Administrator, Coordinator, Officer	Nominated authoriser as per the PECOS matrix
d) Up to or equal to £25,000	Senior Managers and Associate Directors	Nominated authoriser as per the PECOS matrix
e) Up to or equal to £50,000	Associate Directors; Deputy Directors and Associate Post Graduate Deans	Senior Managers and Associate Directors
f) Up to or equal to £250,000	Directors and Executive Medical Director	Associate Directors; Deputy Directors and Associate Post Graduate Deans
g) Up to or equal to £500,000	Executive Director of Finance	Deputy Director of Finance

Delegated Issue and Scope of Delegation	Individual Responsible	Deputy
h) Contractual and other commitments over £500,000	Chief Executive	Executive Director of Finance
21. Recording and monitoring of payments under the losses and compensation regulations	Executive Director of Finance	Deputy Director of Finance
22. Approval of Losses within delegated limits set by Scottish Government <i>[Section 12.5 of SFIs]:</i>	Chief Executive	Executive Director of Finance
23. Procedures for the procurement, ordering and receipt of goods	Executive Director of Finance	Head of Procurement
24. Approval to sign contracts on behalf of the Board <i>(Section 21.3 of SFIs): First signatory</i>		
a) Up to or equal to £10,000 based on individual delegated authority level	Designated Directorate officers	Designated Directorate officers
b) Up to or equal to £25,000	Designated Senior Managers and Associate Directors	Designated Senior Managers and Associate Directors
c) Up to or equal to £50,000	Associate & Deputy Directors; Associate Post Graduate Deans	Designated Senior Managers and Associate Directors

Delegated Issue and Scope of Delegation	Individual Responsible	Deputy
d) Over £50,000	Directors and Executive Medical Director	Associate & Deputy Directors; Associate Post Graduate Deans
25. Approval to sign contracts on behalf of the Board (<i>Section 21.3 of SFIs</i>): Second Signatory		
a) Up to or equal to £150,000 based on individual delegated authority level	Procurement Officer	Procurement Officer
b) Up to or equal to £250,000	Procurement Manager	Procurement Officer
c) Up to or equal to £500,000	Head of Procurement	Procurement Manager
d) Up to or equal to £1,000,000	Executive Director of Finance	Deputy Director of Finance plus Director of Commissioning Area
e) Unlimited	Chief Executive	Executive Director of Finance
26. Approval to sign Service Level Agreements on behalf of the Board: (<i>Section 21.2 of SFIs</i>)		
a) Up to or equal to £25,000	Senior Managers and Assistant Directors	N/A

Delegated Issue and Scope of Delegation	Individual Responsible	Deputy
b) Up to or equal to £50,000	Associate & Deputy Directors; Associate Post Graduate Deans	Senior Managers and Assistant Directors
c) Up to or equal to £250,000	Directors and Executive Medical Director	Associate & Deputy Directors; Associate Post Graduate Deans
d) Up to or equal to £500,000	Executive Director of Finance	Deputy Director of Finance
e) Over £500,000	Chief Executive	Executive Director of Finance (only if Accountable Officer is absent and report to the Board)
27. Payment of staff	Executive Director of Finance	Deputy Director of Finance
28. Procedures for the payment of travel, subsistence, study course and other expenses	Executive Director of Finance	Deputy Director of Finance
29. Procedures for the payment of accounts including Payments on Behalf (PoB) to other Boards	Executive Director of Finance	Deputy Director of Finance

Delegated Issue and Scope of Delegation	Individual Responsible	Deputy
30. Management of Non-Exchequer funds	Executive Director of Finance	Deputy Director of Finance
31. Management of Capital Schemes	Executive Director of Finance	Deputy Director of Finance
32. Liaison with Internal and External Audit services	Executive Director of Finance	Deputy Director of Finance
33. Issuing Tenders	Executive Director of Finance	Head of Procurement
34. Receiving and Opening of Tenders	Executive Director of Finance	Authorised personnel
35. Waiving of Competitive Tendering (in specific, limited circumstances) (<i>Section 11.8 – 11.9 of SFIs</i>)	Executive Director of Finance	Head of Procurement
a) Up to or equal to £50,000	Head of Procurement	Procurement Manager
b) greater than £50,000	Executive Director of Finance	Deputy Director of Finance
36. Devise and maintain systems of budgetary control	Executive Director of Finance	Deputy Director of Finance

Delegated Issue and Scope of Delegation	Individual Responsible	Deputy
37. Preparing the Annual Accounts and the Annual Report	Executive Director of Finance	Deputy Director of Finance
38. Signing the Annual Accounts and Annual Report	Chief Executive (CEO)/ Accountable Officer (AO) and Executive Director of Finance (statement of Financial Position)	In the absence of the Accountable Officer the Accounts can be delayed until the AO is available to sign them
39. Banking Arrangements	Executive Director of Finance	Deputy Director of Finance
40. Risk Management Processes	Executive Director of Finance	Director of Planning and Performance
41. Management and control of technology systems and facilities including data protection	Director of NES Technology	Deputy Director Technology
42. Investigate any suspected cases of fraud and other irregularity	Fraud Liaison Officer (Deputy Director of Finance)	Head of Governance and Operational Services (Finance)

Delegated Issue and Scope of Delegation	Individual Responsible	Deputy
43. Review, appraise and report in accordance with NHS Internal Audit Manual and best practice	Chief Internal Auditor	N/A
44. Information Governance including Cybersecurity	Director of NES Technology	Deputy Director of Technology
45. Caldicott Guardianship	Post Graduate Dean of Dental Education	Deputy Director of Medicine
46. Human Resource (HR) Management	Director of Workforce	Associate Director of HR
47. Procedures for employment of staff	Director of Workforce	Associate Director of HR
48. Leave: annual, compassionate, special leave and leave without pay.	Director of Workforce	Associate Director of HR
49. Grievance and disciplinary procedures for staff	Director of Workforce	Associate Director of HR
50. Any redundancy situation leading to contractual entitlement to a payment in excess of £95,000 (<i>Section 9.53 & 9.55 of SFIs</i>)	Remuneration Committee and Chief Executive as Accountable Officer	N/A
51. Chair of Consultant Discretionary Points Panel (non-voting)	Director of Workforce	Associate Director of Workforce
52. Health and Safety arrangements	Director of Workforce	Associate Director of Workforce

Delegated Issue and Scope of Delegation	Individual Responsible	Deputy
53. Whistleblowing	Chief Executive	Director of Planning and Performance
54. Emergency Climate Change and Sustainability	Executive Director of Finance	Clinical Lead for Climate Emergency and Sustainability
55. Responsible for security of the Board's property, avoiding loss, exercising economy and efficiency in using resources and conforming Standing Orders, Financial Instructions and Procedures.	All members and employees of NES.	N/A

NES
DT/LH January 2024

Appendix 2



STANDING FINANCIAL INSTRUCTIONS

February 2024

1.	INTRODUCTION.....	3
2.	RESPONSIBILITIES OF THE CHIEF EXECUTIVE AS ACCOUNTABLE OFFICER	4
3.	RESPONSIBILITIES OF THE BOARD.....	8
4.	RESPONSIBILITIES OF SENIOR MANAGERS & ALL OFFICERS	9
5.	RESOURCE LIMITS	10
6.	PLANNING AND BUDGETING	12
7.	ANNUAL ACCOUNTS AND REPORTS.....	14
8.	BANKING ARRANGEMENTS AND OPERATION.....	16
9.	FINANCIAL ARRANGEMENTS	18
10.	TRAVEL, SUBSISTENCE AND OTHER ALLOWANCES.....	28
11.	CONTRACTING AND PROCUREMENT	28
12.	LOSSES AND SPECIAL PAYMENTS.....	35
13.	RISK MANAGEMENT.....	38
14.	STANDING COMMITTEES.....	39
15.	SPECIFIC ROLES & RESPONSIBILITIES.....	39
16.	INFORMATION TECHNOLOGY.....	41
17.	FIXED ASSETS	43
18.	PERSONAL USE OF OFFICIAL ACCOMMODATION, EQUIPMENT OR VEHICLES.....	46
19.	FINANCIAL IRREGULARITIES.....	46
20.	WHISTLEBLOWING.....	48
21.	AUTHORISATION LIMITS	49
22.	ENDOWMENT FUNDS	51
23.	GENERAL NURSING COUNCIL (GNC) FUND.....	52
24.	JOINT WORKING ARRANGEMENTS	53
25.	SPONSORSHIP.....	53
26.	INTELLECTUAL PROPERTY	54
	APPENDIX 2a. STANDING FINANCIAL PRINCIPLES	55

1. INTRODUCTION

1.1 Background

These Standing Financial Instructions are issued in accordance with the financial directions issued by the Scottish Government Health and Social Care Directorate (SGHSCD) under the provisions contained in the Regulation 4 of the NHS (Financial Provisions) (Scotland) Regulations, 1974 together with the subsequent guidance and requirements contained in NHS Circular No. 1974 (GEN) 88 and Annex, and NHS Circular MEL (1994) 80. Their purpose is to provide a sound basis for the control of NHS Education for Scotland's (NES) financial affairs and shall have the effect as if incorporated in the Standing Orders of NES.

1.2 The purpose of such a scheme of control is:

- to ensure that NES acts within the law and that financial transactions are in accordance with the appropriate authority;
- to ensure that proper accounting records, which are accurate and complete, are maintained;
- to ensure that financial statements, which give a true and fair view of the financial position of NES and its expenditure and income, are prepared timeously;
- to protect NES against the risk of fraud and irregularity;
- to ensure that all staff feel comfortable raising issues of concern, confident that those issues will be investigated fully and impartially;
- to safeguard NES assets;
- to ensure that proper standards of financial conduct are maintained;
- to enable the provision of appropriate management information;
- to ensure that NES seeks best value from its resources, by making proper arrangements to pursue continuous improvement, having regard to economy, efficiency, and effectiveness in NES's operations;
- to ensure that any delegation of responsibility is accompanied by clear lines of control and accountability, together with reporting arrangements; and
- to ensure transparency and accountability in all procurement and contracting activities.

COMPLIANCE

- 1.3 All Board Members, officials, staff, and agents of NES shall observe the Standing Financial Instructions. The Chief Executive, Directors and Members of the Executive Team shall be responsible for ensuring that

staff and others within the organisation are aware of, and adhere to, the Standing Financial Instructions.

- 1.4 Failure to comply with these Standing Financial Instructions may lead to disciplinary action being taken.
- 1.5 Where these Standing Financial Instructions place a duty upon a person, this may be delegated to another person, subject to the Scheme of Delegation contained within the Standing orders of NES.
- 1.6 All references in these instructions to a particular gender shall be read as equally applicable to any gender.
- 1.7 Nothing in these Standing Financial Instructions shall be held to override any legal requirement or Ministerial Direction placed upon NES, its members, or officers.

2. RESPONSIBILITIES OF THE CHIEF EXECUTIVE AS ACCOUNTABLE OFFICER

- 2.1 Under the terms of Section 14 and 15 of the Public Finance and Accountability (Scotland) Act 2000, the Principal Accountable Officer (PAO) for the Scottish Government has designated the Chief Executive of NES as its Accountable Officer.
- 2.2 Accountable Officers must comply with the terms of the Guidance to Accountable Officers and any updates issued to them from time to time by the Scottish Government Health and Social Care Directorate.

2.3 GENERAL RESPONSIBILITIES

- 2.3.1 The Accountable Officer is personally answerable to the Scottish Parliament for the propriety and regularity of the public finances for NES ensuring that the resources of the body are used economically, efficiently, and effectively.
- 2.3.2 The Accountable Officer has a personal duty of signing the Annual Accounts of NES for which they have responsibility. Consequently, they may also have the further duty of being a witness before Scottish Parliament committees including the Public Audit Committee (PAC) and be expected to deal with questions arising from the Accounts, or, more commonly, from reports made to Parliament by the Auditor General for Scotland on examinations into the economy, efficiency, and effectiveness with which the body has used its resources in discharging

its functions. The Accountable Officer must also ensure that any arrangements for delegation promote good management, and that they are supported by the necessary staff with an appropriate balance of skills. This requires careful selection and development of staff and the sufficient provision of special skills and services.

2.4 SPECIFIC RESPONSIBILITIES

The Accountable Officer must:

- 2.4.1 Ensure that appropriate financial systems are in place and applied, and that procedures and controls are reviewed from time to time to ensure their continuing relevance and reliability, especially at times of major changes.
- 2.4.2 Sign the Accounts and the associated governance statement assigned to them, and in doing so accept personal responsibility for their proper presentation as prescribed in legislation and/or in the relevant Accounts Direction issued by Scottish Ministers.
- 2.4.3 Ensure that proper financial procedures are followed and that accounting records are maintained in the form prescribed for published accounts.
- 2.4.4 Ensure that the public funds for which they are responsible are properly managed and safeguarded, with independent and effective checks of cash balances in the hands of any official.
- 2.4.5 Ensure that the assets for which they are responsible, including land, buildings, fixtures, fittings, equipment, intangible, and other assets are properly managed and safeguarded and checked as appropriate.
- 2.4.6 Ensure that, in consideration of policy proposals relating to expenditure or income for which they have responsibilities as Accountable Officer, all relevant financial considerations, including any issues of propriety, regularity or value for money, are taken into account, and where appropriate brought to the attention of the NES Board.
- 2.4.7 Ensure that any delegation of authority is accompanied by clear lines of control and accountability, together with reporting arrangements.
- 2.4.8 Ensure that procurement activity is conducted in accordance with the requirements in the Procurement section of the Scottish Public Finance Manual

- 2.4.9 Ensure that effective management systems appropriate for the achievement of the organisation's objectives, including financial monitoring and control; systems have been put in place.
- 2.4.10 Ensure that risks, whether to achievement of business objectives, regularity, propriety, or value for money, are identified, that their significance is assessed and that systems appropriate to the risks are in place in all areas to manage them.
- 2.4.11 Ensure that arrangements have been made to secure Best Value as set out in the Scottish Public Finance Manual.
- 2.4.12 Ensure that managers at all levels have a clear view of their objectives and the means to assess and measure outputs, outcomes, and performance in relation to those objectives.
- 2.4.13 Ensure that managers at all levels are assigned well-defined responsibilities for making the best use of resources (both those consumed by their own commands, and any made available to third parties) including a critical scrutiny of outputs, outcomes, and value for money.
- 2.4.14 Ensure that managers at all levels have the information (particularly about costs), training, and access to the expert advice which they need to exercise their responsibilities effectively.

2.5 REGULARITY AND PROPRIETY OF EXPENDITURE

- 2.5.1 The Accountable Officer has a particular responsibility for ensuring that NES achieves high standards of regularity and propriety in the consumption of resources. Regularity involves compliance with relevant legislation, relevant guidance issued by the Scottish Ministers - in particular the Scottish Public Finance Manual - and the framework document defining the key roles and responsibilities which underpin the relationship between NES and the Scottish Government. Propriety involves respecting the Parliament's intentions and conventions and adhering to values and behaviours appropriate to the public sector.
- 2.5.2 All actions must be able to stand the test of parliamentary scrutiny, public judgement on propriety and professional codes of conduct. Care must be taken to avoid actual, potential, or perceived conflicts of interest.

2.6 ADVICE TO THE NHS EDUCATION BOARD, AND OTHER DECISION-MAKING BODIES

- 2.6.1 The Accountable Officer has a duty to ensure that appropriate advice is tendered to the Board, the Executive team, and other decision-making bodies on all matters of financial propriety and regularity, and more broadly, as to all considerations of prudent and economical administration, efficiency, and effectiveness.
- 2.6.2 If the Accountable Officer considers that, despite their advice to the contrary, the Board or other decision making body is contemplating a course of action which they consider would infringe the requirements of regularity or propriety, and that, as a result, they would be required to take action that is inconsistent with the proper performance of their duties as Accountable Officer, they should, inform the Scottish Government Health and Social Care Directorate's Accountable Officer, so that the Department, if it considers it appropriate, can intervene, and inform Scottish Ministers. If this is not possible, the Accountable Officer should set out in writing their objection to the proposal and the reasons for the objection. If their advice is overruled, and the Accountable Officer does not feel that they would be able to defend the proposal to the Scottish Parliament's Public Audit Committee (PAC), as representing value for money, they should obtain written instructions from the Board and send a copy of their request for instruction and the instruction itself as soon as possible to the External auditor and the Auditor General for Scotland.
- 2.6.3 The Accountable Officer must also ensure that their responsibilities as Accountable Officer do not conflict with those as a Board member. They should vote against any action that they cannot endorse as Accountable Officer, and in the absence of a vote, ensure that their opposition as a Board member, as well as Accountable Officer is clearly recorded.

2.7 ABSENCE OF ACCOUNTABLE OFFICER

- 2.7.1 The Accountable Officer should ensure that they are generally available for consultation and that in any temporary period of unavailability due to illness or other cause, or during the normal period of annual leave, a senior officer will act on their behalf.
- 2.7.2 In the event that, the Accountable Officer would be unable to discharge their responsibilities for a period of four weeks or more,

NES will notify the Principal Accountable Officer of the Scottish Government, in order that an Accountable Officer can be appointed pending their return.

- 2.7.3 Where an Accountable Officer is unable, by reason of incapacity or absence, to sign the Accounts in time for them to be submitted to the Auditor General, the Board may submit unsigned copies, pending the return of the Accountable Officer.

3. RESPONSIBILITIES OF THE BOARD

The Board functions in accordance with the NHS Scotland Blueprint for Good Governance (Second Edition) (issued through [DL \(2022\) 38](#)) in setting the direction, clarifying priorities and defining expectations; holding the executive to account and seeking assurance that the organisation is being effectively managed; managing risks to the quality, delivery and sustainability of services; engaging with stakeholders and influencing the Board's and the organisation's culture.

- 3.1 The Board has key functions for which it is held accountable by Scottish Government Health and Social Care Directorate on behalf of the Scottish Ministers:

- to set strategic direction of the organisation within the overall policies and priorities of the Government and NHS Scotland, define its annual and longer-term objectives and agree plans to achieve them;
- to oversee the delivery of planned results by monitoring performance against objectives and ensuring corrective action is taken when necessary;
- to ensure that there is effective dialogue within the organisation and between the organisation and key stakeholders on its plans and performance and that these are responsive to the stakeholders needs;
- to ensure effective financial stewardship through value for money, financial control and financial planning and strategy;
- to ensure that high standards of corporate governance and personal behaviour are maintained in the conduct of the business of the whole organisation; and
- to appoint, appraise and remunerate senior executives.

- 3.2 In fulfilling these functions, the Board should:

- specify its requirements in organising and presenting financial and other information succinctly and efficiently to ensure the Board can fully

understand its responsibilities;

- be clear what decisions and information are appropriate to the Board and draw up standing orders, a schedule of decisions reserved to the Board, and standing financial instructions to reflect this;
- establish performance and quality targets that maintain the effective use of resources and provide value for money;
- ensure that management arrangements are in place to enable responsibility to be clearly delegated to senior officers for the main programmes of action and for performances against programmes to be monitored and senior officers held to account;
- establish committees, including audit and risk and remuneration committees, on the basis of formally agreed terms of reference which set the membership of the committees, the limit to their powers, and the arrangements for reporting back to the Board; and
- act within the statutory, financial, and other constraints.

4. RESPONSIBILITIES OF SENIOR MANAGERS AND ALL OFFICERS

- 4.1 The Chief Executive shall have delegated authority from the NES Board to secure the efficient operation and management of the full range of NES activities in accordance with the current policies of NES and within the limits of the resources available.
- 4.2 Directors of NES have collective responsibility to exercise financial supervision, control, and monitoring by requiring the submission and approval of budgets within approved allocations, by defining and approving essential features of financial arrangements in respect of important procedures and financial systems, including the need to obtain best value, and by defining specific responsibilities placed on officers.
- 4.3 The NES Strategic Financial Principles must be adopted by all NES staff in the exercise of their duties. See Appendix 2a.
- 4.4 All staff individually and collectively are responsible for the security of NES's property, for avoiding loss, for economy and efficiency in the use of resources, for identifying and managing risk, and for complying with the requirement of Standing Orders, Standing Financial Instructions, and other financial procedures which the Executive Director of Finance may issue.

- 4.5 It shall be the duty of the Chief Executive to ensure that arrangements are made for existing staff and all new employees to be notified of their responsibilities within these instructions and receive appropriate awareness training.
- 4.6 The Chief Executive shall be responsible for the implementation of NES's financial policies and for ensuring whatever corrective action is necessary to further these policies after taking account of advice given by the Executive Director of Finance on all such matters.
- 4.7 Without prejudice to the functions of any other officers of NES, the duties of the Executive Director of Finance shall include the provision of financial information to NES and its officers; the design, implementation, and supervision of systems of financial control and the preparation and maintenance of such accounts, certificates, estimates, records, and reports as NES may require for the purpose of carrying out its statutory duties and responsibilities.
- 4.8 The Executive Director of Finance shall prepare, document, and maintain detailed financial procedures and systems incorporating the principles of separation of duties and internal control to supplement these instructions. The Executive Director of Finance shall require any officer, who carries out a financial function, to ensure that the form in which the records are kept and the manner in which the officer discharges their duties shall be to the satisfaction of the Executive Director of Finance.
- 4.9 All records should be stored securely and in accordance with the [NES Retention Policy](#).
- 4.10 Where a fundamental organisational change occurs, the Executive Director of Finance should initiate a review of the relevant Standing Financial Instructions to ensure that if any amendments are required these are implemented timeously. This review would then be subject to the approval of the Board.
- 4.11 Wherever the titles Chief Executive, Executive Director of Finance or other nominated officer is used in these instructions, it shall be deemed to include such officers who have been duly authorised to represent them.

5. RESOURCE LIMITS

- 5.1 NES, as a Special Health Board, is required by statutory provision made under Section 85 of the National Health Service (Scotland) Act

1978, as amended by the Health Services Act 1980, to perform its functions within the total of funds allocated by the Scottish Government Health and Social Care Directorate. The financial targets which NES must operate within are the:

- Revenue Resource Limit (RRL)
- Capital Resource Limit (CRL)
- Cash Requirement

- 5.2 The Executive Director of Finance shall ensure that all income and expenditure is identified correctly and accounted for in the relevant financial year.
- 5.3 The Executive Director of Finance shall, on behalf of the Chief Executive, request an appropriate level of Capital resource from the Scottish Government Health and Social Care Directorate. This may be in the format of a funding transfer from Revenue to Capital.
- 5.4 The Executive Director of Finance shall ensure that amounts drawn for NES against the agreed cash limit are required for approved expenditure only.
- 5.5 The Executive Director of Finance will ensure that the cash balances held by NES are not excessive but are sufficient to meet immediate liabilities. The Executive Director of Finance shall therefore ensure that due receipts are collected promptly and shall pay invoices in accordance with targets set by the Scottish Government Health and Social Care Directorate.
- 5.6 Payments shall not be made in advance of need and payments of due debts shall not be delayed artificially to a following financial year in order to manage cash balances at year-end.
- 5.7 In submitting the final requisition for a fiscal year, the Executive Director of Finance shall ensure that sufficient resources are available to meet financial commitments at the end of the year. The balances of accounts holding public funds will be maintained at the lowest practicable levels.
- 5.8 The Executive Director of Finance will review the RRL/CRL and Cash positions regularly to ensure that NES remain on target to meet its financial objectives.
- 5.9 The Executive Director of Finance shall provide reports to the Scottish Government Health and Social Care Directorate in the form requested and in accordance with the guidance issued by the Scottish

Government Health and Social Care Directorate.

6. PLANNING AND BUDGETING

- 6.1 The Chief Executive shall carry out their duties within the total of funds allocated by Scottish Ministers and shall not exceed the budgetary limit set for NES. All plans and financial approvals and control systems shall be designed to meet this obligation.
- 6.2 The Chief Executive, with the assistance of the Director of Planning and Performance shall compile and submit to NES Board and the Scottish Government Health and Social Care Directorate (SGHSCD) such Delivery Plans as required in accordance with the guidance issued by the Scottish Government Health and Social Care Directorate. The lifespan of the plans will be in accordance with SGHSCD requirements which prevail.
- 6.3 Officers shall provide the Executive Director of Finance with all financial, statistical, and other relevant information as necessary for the compilation of such estimates and forecasts that the Executive Director of Finance may need to fulfil the requirements of NES and the Scottish Government Health and Social Care Directorate.
- 6.4 The funding for new / specific ring-fenced projects will be agreed in advance of the project's commencement with NES and SGHSCD and will be supported by a business case. The Executive Director of Finance should be notified of any such projects at the earliest opportunity and will be responsible for ensuring funding is secured via additional allocations.
- 6.5 Officers will be required to review and formally confirm the delegated budget for their directorate on an annual basis, and to notify the Executive Director of Finance of any subsequent changes to funding or spending requirements as soon as they become known.
- 6.6 The Executive Director of Finance shall, on behalf of the Chief Executive, prepare and submit budgets within the limits of available funds to NES Board for its approval.
- 6.7 The Executive Director of Finance shall provide frequent reports to the Chief Executive and senior managers, comparing actual expenditure and income with approved budgets. Identifying any areas of significant variance against the financial plan which requires action to be taken.
- 6.8 The Executive Director of Finance shall provide quarterly reports to the Chief Executive and NES Board, comparing actual expenditure and

income with approved budgets. The Executive Director of Finance shall report to NES Board any significant in year variance from the financial plan and shall advise the Board on action to be taken.

- 6.9 The Executive Director of Finance shall also compile and submit to the Board such financial estimates and forecasts as may be required from time to time. As a consequence, the Executive Director of Finance shall have a right of access to all budget holders on all financial related matters.
- 6.10 The Executive Director of Finance shall ensure that a system of budgetary control is maintained and that all officers whom NES may empower to engage staff or otherwise incur expenditure, collect, or generate income, shall comply with the requirements of those systems. The systems of budgetary control shall incorporate the reporting of, and investigation into, expenditure variances from budget.
- 6.11 The Chief Executive will delegate responsibility for budgets to nominated officers (budget holders) to permit the performance of defined activities. Budget holders must manage financial resources in line with NES' Strategic Financial Principles demonstrating control of expenditure; Value for Money; and achievement of planned levels of service and regular reporting. All budget holders must ensure that the financial limits detailed within the scheme of delegation are adhered to. The Executive Director of Finance will be responsible for providing budgetary information and advice to the Chief Executive and budget holders to enable the Chief Executive and other officers to carry out their budgetary responsibilities.
- 6.12 In carrying out their duties:
- the Chief Executive shall not exceed the budgetary or virement limits set by NES Board;
 - officers designated as budget holders shall not exceed the budgetary or virement limits set for them by the Chief Executive; and
 - the Chief Executive may vary the budgetary limit of an officer within the Chief Executive's own budgetary limit.
- 6.13 Except where otherwise approved by the Chief Executive, taking account of advice of the Executive Director of Finance, budgets shall be used only for the purpose for which they were provided and any budgeted funds not required for their designated purpose shall revert to the immediate control of the Chief Executive, unless covered by delegated powers of virement, see Section 22.
- 6.14 Expenditure, for which no provision has been made in an approved

budget and not covered by funding under the delegated powers of virement, shall only be incurred after authorisation by both the Executive Director of Finance and the Chief Executive to limits as specified in the Scheme of Delegation. Any programme of expenditure greater than £1m, will require board approval and any programme of expenditure over £500k will be reported to the Board.

- 6.15 The Executive Director of Finance shall keep the Chief Executive and the Board informed of the financial consequences of changes in policy, pay awards, and other events and trends affecting budgets and shall advise on the financial and economic aspects of future plans and projects. For information relating to authorisation limits and budget virements, see Section 22.

7. ANNUAL ACCOUNTS AND REPORTS

- 7.1 NES is required under the terms of Section 86(3) of the National Health Services (Scotland) Act 1978 and the Public Finance and Accountability (Scotland) Act 2000 to prepare and transmit Annual Accounts to Scottish Ministers.
- 7.2 Scottish Ministers have issued an Accounts Direction in exercise of the powers conferred by Section 86(1) of the National Health Service (Scotland) Act 1978 which contains provisions covering the basis of preparation and the form of accounts. NES shall comply with all these provisions. Subject to the foregoing requirement, the Annual Accounts shall also contain any disclosure and accounting and requirements which Scottish Ministers may issue from time to time.
- 7.3 The Executive Director of Finance shall maintain proper accounting records which allow the timely preparation of Annual Accounts, in accordance with the timetable set by the Scottish Government Health and Social Care Directorate, and which give a true and fair view of NES and its expenditure and income for the period in question.
- 7.4 Annual Accounts, Supplementary Notes and other financial returns required by the Scottish Government Health and Social Care Directorate shall be prepared by NES in accordance with the guidance and the timetables contained within the NHS Board Accounts Manual for the Annual Report and Accounts of NHS Boards as amended from time to time.
- 7.5 Under the terms of the Public Finance and Accountability (Scotland) Act 2000, the Auditor General for Scotland is responsible for the

appointment of the External Auditors of NES.

- 7.6 The Executive Director of Finance shall agree with the External Auditor a timetable for the production, audit, adoption by the Board and submission of accounts to the Auditor General for Scotland and the Scottish Government Health and Social Care Directorate. This timetable shall be consistent with the requirements of the Scottish Government Health and Social Care Directorate and reported to the ARC for information.
- 7.7 The Chief Executive shall be responsible for preparing a Governance Statement as parts of their duties as an Accountable Officer, and in so doing shall seek appropriate assurances, including that of the Chief Internal Auditor, with regard the adequacy of internal control throughout the organisation, including the performance of the non-executive committees.
- 7.8 The Annual Accounts of NES shall be reviewed by the Audit and Risk Committee, which has the responsibility of recommending adoption of the accounts by the NES Board. Under the terms of the Public Finance and Accountability (Scotland) Act 2000, Annual Accounts may not be placed in the public domain, prior to them being formally laid before Parliament.
- 7.9 Following the formal approval of the motion to adopt the accounts by NES Board, the Annual Accounts and relevant certificates shall be duly signed on behalf of the Board and submitted to the External Auditor for completion of the relevant audit certificates.
- 7.10 Signed sets of NES's Annual Accounts shall then be submitted by the External Auditor to the Scottish Government Health and Social Care Directorate, and to the Auditor General in the required format.
- 7.11 The Chief Executive shall arrange for the publication of an Annual Report for NES, in such form as may be determined by the Scottish Government Health and Social Care Directorate (SGHSCD). The Annual Report, together with an audited financial statement, shall be published no later than nine months after the relevant accounting date, subject to confirmation that they have been formally laid before Parliament.

8. BANKING ARRANGEMENTS AND OPERATION

- 8.1 All arrangements with NES's bankers will be made in accordance with directions and advice from the Scottish Government Health and Social Care Directorate (SGHSCD).

- 8.2 NES is obliged to comply with instructions from Scottish Ministers and His Majesty's Treasury in relation to the operation of bank accounts. All bank accounts will only be opened on the instruction of the Executive Director of Finance.
- 8.3 The Scottish Government commercial banking arrangements provide for public bodies to hold a commercial bank account with the Royal Bank of Scotland (RBS) part of the NatWest Group.
- 8.4 HM Treasury manage arrangements for the Government Banking Service (GBS) so that all NHS Scotland bodies are obliged to use accounts provided by National Westminster Bank (NatWest Group plc), From the 31st December 2018 the following bank accounts have been in operation: -

Bank	Account Description	Services Provided
Royal Bank of Scotland	Commercial Account under the terms of the Scottish Government contract for commercial Bank Accounts	BACS sponsorship and receipts from BACS rejects and recalls; and Local Pay-Ins.
NatWest	Account provided under existing GBS contract	Payable Orders (cheques); BACS payments; Receipt of Income from Debtors; Portal; Pay by Link card receipts; and payments from/to Other Public Sector organisations.

Any new accounts or changes to existing arrangements for the accounts must be approved by the Executive Director of Finance.

- 8.5 Payable Orders are printed with the signature of the Assistant Paymaster General added at the time of processing.
- 8.6 All other payments are authorised electronically on the above accounts. For payments generated from the Finance System, only one authoriser is required to approve payments using secure on-line access. However, all payments, including manual payments which exceed £50,000 require on-line approval from two authorisers. The Executive

Director of Finance will specify all officers approved to authorise payments and BACS files.

- 8.7 The signatory(ies) will satisfy themselves that payments are correctly substantiated and are in respect of sums properly payable by NES.
- 8.8 All Payable Orders (cheques) (which shall be crossed with “Not Negotiable – Account Payee Only”) shall be treated as controlled stationery in the charge of a duly designated officer controlling their issue.
- 8.9 The Executive Director of Finance is responsible for ensuring the system of control of access to; and authorisation of payments from all bank accounts is robust and administered appropriately using the systems provided by the banks. This system of administration will cover creation and prompt deletion of users as necessary to ensure the security of access and efficient management of the accounts.
- 8.10 The Executive Director of Finance shall ensure that NES does not, without the approval of Scottish Government given as appropriate with the consent of Treasury, borrow or lend money nor give any guarantee, indemnity, nor letter of comfort.

FOREIGN CURRENCY

- 8.11 Business should normally be conducted in sterling. However, some supplies need to be purchased using on-line foreign currency transactions through the Government Banking Services. The Executive Director of Finance will approve the currencies which are open to NES for use through GBS.
- 8.12 Foreign currency transactions in excess of £2m require to receive advance authorisation through the Government Banking Service. Such transactions will be referred to the Executive Director of Finance for arrangement.

9. FINANCIAL ARRANGEMENTS

- 9.1 The Executive Director of Finance shall ensure that detailed written procedures relating to financial systems are designed, including specific reference to duties of officers under these systems and that these systems, incorporating internal control principles, duly approved by the Executive Director of Finance, are maintained, reviewed annually, and updated as necessary.

- 9.2 Any authorisation for expenditure outside of the approved plans, policies, or regulations and for which no budget has been provided under the powers of virement, must have the written approval from both the Chief Executive and the Executive Director of Finance before payment as per the Scheme of Delegation.

SECURITY OF CASH, CHEQUES AND OTHER NEGOTIABLE INSTRUMENTS:

- 9.3 All means of officially acknowledging or recording amounts received or receivable shall be in the form approved by the Executive Director of Finance. These stationery items shall be subject to the same precautions as are applied to cash, in accordance with the requirements of the Executive Director of Finance.
- 9.4 All officers, whose duty it is to collect or hold cash, shall be provided with a safe or with a lockable cash box which will normally be deposited in a safe or other secure location. The officer concerned shall hold only one key with one duplicate being held by another officer authorised by the Executive Director of Finance and suitable receipts obtained. The loss of any key shall be reported immediately to the Deputy Director of Finance. The Executive Director of Finance shall arrange for all new keys to be despatched directly to them from the manufacturers and shall be responsible for maintaining register of authorised holders of safe keys.
- 9.5 The safe key holder shall not accept unofficial funds for depositing in their safe unless deposits are in sealed envelopes or locked containers. It shall be made clear to the depositor that the NES Board is not held liable for any loss and written indemnity must be obtained from the organisation or individual absolving NES from responsibility for any loss. During the absence of the holder of a safe or cash box key, the officer who acts in their place shall be subject to the same controls as the normal holder of the key. There shall be written discharge for the safe/cash box contents on the transfer of responsibilities and the discharge document must be retained for audit inspection.
- 9.6 All cash, cheques, postal orders, and other forms of payment shall normally be received by more than one officer and shall be entered in an approved form of register which should be signed by both. All cheques and postal orders shall be crossed immediately "Not Negotiable". The remittances shall be passed to the Operational Assistant from whom a signature shall be obtained.
- 9.7 The opening of mail and the counting and recording of any takings shall

be undertaken by two officers together.

- 9.8 Official monies shall not under any circumstances be used for the encashment of private cheques.
- 9.9 All cheques, postal orders, cash etc. shall be banked intact promptly in accordance with the approved procedures of the Executive Director of Finance. Disbursements shall not be made from cash received, except under arrangements approved by the Executive Director of Finance.
- 9.10 Any cash collected from fund raising events will be counted by two staff members in the Directorate where the funds have been collected. If passing to Finance for onward payment to the charity, the directorate team must complete a form with the breakdown of cash, signed by the two staff members before passing the form and cash to Finance. Finance will bank the income and issue a cheque to the Charity. Cash will be banked by finance, no later than the next available working day. Any cash held overnight will be kept in the safe.
- 9.11 All unused payable orders shall be kept in the safe.
- 9.12 Any loss or shortfall of cash, cheques, or other negotiable instruments, however occasioned, shall be reported immediately in accordance with the agreed procedure for reporting losses.
- 9.13 Petty cash reconciliations shall be prepared prior to requesting cash reimbursement for expenses.

SECURITY OF ASSETS

- 9.14 Each employee has a responsibility to exercise a duty of care over the property of NES and it shall be the responsibility of senior staff in all disciplines to apply appropriate routine security practices in relation to NHS property. Persistent breach of agreed security practices shall be reported to the Chief Executive.
- 9.15 Wherever practicable, items of equipment shall be marked as NES property. Items to be controlled shall be recorded and updated in an appropriate register including all capital assets.
- 9.16 Nominated officer(s) designated by the Chief Executive shall maintain an up-to-date asset register of those items which are capital by definition. (See Section 18 Fixed Assets).

- 9.17 A separate register of items of a specialist nature, which do not meet the formal definition of capital assets, for example Laptops, PCs, mobile phones, shall be maintained by nominated officers. The Executive Director of Finance shall approve the form of all registers and the methods of updating.
- 9.18 Any damage to premises, vehicles and equipment, or any loss of equipment or supplies shall be reported by staff in accordance with the agreed procedure for reporting losses (Also see Losses section).
- 9.19 Registers shall also be maintained by responsible officers and where practicable receipts retained for:
- Equipment on loan, and
 - Leased equipment.

Equipment on loan to other public bodies will be approved by the Executive Director of Finance and the Director of NES Technology Service

- 9.20 The Chief Executive will ensure that NES does not dispose of any assets, unless Scottish Government otherwise agrees, except at current market values and in accordance with the practices applicable to assets purchased out of public funds as laid down in Government Accounting. The Chief Executive shall ensure that assets having a net book value or realisable value, whichever is the higher, in excess of £50,000, are not disposed of without prior Scottish Government approval.
- 9.21 The NES Corporate Information Security Policy provides assurance that the Integrity of Operational systems and Information assets will be maintained. Access to systems is managed through strict user management protocols and firewalls. As a Cloud first organisation, NES information (intangible) assets reside within the technology environments provided by the contracted cloud providers. There are two levels of policy and procedure applied to this model, the first provided at vendor level: and the second specific to the NES deployment of applications. Both are developed and managed to the UK government standards of technology and information security, audited by the NES Information Security Forum through internal audit and Scottish Government administered Annual Network and Information (NIS) audits
- 9.22 The responsibilities of individuals within NES to protect the information assets owned and used by NES from threats whether internal or external, deliberate or accidental are set out within the [NES Information Security Acceptable Use Policy](#)

INCOME

- 9.23 The Executive Director of Finance shall be responsible for designing and ensuring maintenance of systems for the proper recording and collection of all monies due.
- 9.24 All officers shall inform the Executive Director of Finance of monies due to NES arising from transactions they initiate, including all contracts, leases, tenancy agreement and any other transactions in order that an official invoice is raised to the customers.
- 9.25 The Executive Director of Finance shall take appropriate recovery action on all outstanding debts including the establishment of procedures for the write-off of debts after all appropriate recoverable steps have been taken to secure payment (see Losses section 12).
- 9.26 In relation to Income Generation Schemes, the Executive Director of Finance shall ensure that there are systems in place to identify all costs and services attributed to each scheme before implementation and such schemes should only proceed on the basis of providing income in excess of the cost of the scheme. All fees and charges must be:
- approved in advance by the Executive Director of Finance, and
 - reviewed annually by the Budget Holder to ensure they are still appropriate and agreed by the Executive Director of Finance.
- 9.27 When deciding whether fees should be charged for courses, consideration must be given to both the source of the funding, and those participating in the courses. Where new courses are run that are not covered by NES baseline, nor by additional non-recurring funding from Scottish Government, fees should be set at a level which as a minimum covers the net costs to NES for providing the course, including an appropriate share of overheads. Approval should be sought as per sections 6.12 and 9.2.

PAYMENT OF ACCOUNTS

- 9.28 The Executive Director of Finance shall ensure that up to date lists of authorised signatories are maintained and reviewed regularly, at least annually.
- 9.29 The Executive Director of Finance shall be responsible for the payment

of all accounts, invoices and contract claims in accordance with contractual terms and/or targets set by the Scottish Government Health and Social Care Directorate. Payment systems shall be designed to avoid payments of interest arising from non-compliance with the Late Payment of Commercial Debts (Interest) Act 1998.

- 9.30 All officers shall inform the Executive Director of Finance promptly of all agreements entered into related to leases or tenancy agreements in order to ensure –NES complies with lease accounting standards.
- 9.31 All expenditure should be consistent with approved spend from the budget process.
- 9.32 Suppliers shall be instructed to send all invoices to the Finance Department for processing, quoting a valid purchase Order number where appropriate.
- 9.33 All other requests for payment not covered by a Purchase order, should, wherever possible, have relevant invoices or contract payment vouchers attached and shall be authorised by an approved officer from a list of authorised signatories.
- 9.34 The Executive Director of Finance shall be responsible for designing and maintaining a system for the verification, recording and payment of all amounts payable. The system shall provide for certification that:
- goods have been duly received, examined, are in accordance with specification and order, are satisfactory and that prices are correct;
 - work done or services rendered have been satisfactorily carried out in accordance with the order; that where applicable the materials used were of the requisite standard and that the charges are correct;
 - in the case of contracts based on the measurement of time, materials or expenses, the time charged is in accordance with the time sheets, that the rates of labour are in accordance with the appropriate rates, that the materials have been checked as regards quantity, quality, and price and that the charges for the use of the vehicles, plant and machinery have been examined;
 - where appropriate, the expenditure is in accordance with regulations and that all necessary Board or appropriate officer authorisations have been obtained;
 - the account/claim is arithmetically correct;
 - the account/claim is in order for payment;
 - VAT has been recovered as appropriate;
 - payments are processed timeously in order to secure discounts available; and

- a timetable and system for submission of accounts for payment is maintained to ensure prompt payment to suppliers.
- 9.35 Budget Holders shall ensure, before a requisition for goods and service is placed, that the purchase has been properly considered and forms part of the department's allocations, agreed business plans, or other known and specific funds available to the department.
- 9.36 Procurement rules must be followed at all times as outlined in section 11.
- 9.37 The Executive Director of Finance shall ensure that payment for goods and services is only made once the goods and services are received other than under the terms of a specific contractual agreement. (e.g., Venue Hire where a deposit may be required – see also section 9.42 below).
- 9.38 Where an officer certifying accounts or claims relies upon other officers to do preliminary checking, they shall, wherever possible, ensure that those who check delivery or execution of work act independently of those who have placed order and negotiated prices and terms. Budget Managers must therefore ensure that there is effective separation of duties between:
- the person placing the order,
 - the person certifying receipt of goods and services, and
 - the person authorising the invoice.

No single person should undertake all three functions. The Executive Director of Finance must approve the list of officers authorised to certify invoices, non-invoice payments and payroll schedules, including where required by the Executive Director of Finance, financial limits to their authority. The Director of Finance will maintain details, together with their specimen signatures.

- 9.39 In the case of contracts for building or engineering works which require payment to be made on account during progress of the works, the Executive Director of Finance shall make payment on receipt of certificate from the appropriate technical consultant or officer. Without prejudice to the responsibility of any consultant or works officer appointed to a particular building or engineering contract, a contractors account shall be subject to such financial examination by the Executive Director of Finance and such general examination by a works officer as may be considered necessary before the person responsible for the contract issues the final certificate.

- 9.40 The Executive Director of Finance may authorise petty cash as required. Individual payments must be restricted to the amounts authorised by the Director of Finance and appropriate vouchers obtained and retained in accordance with the [NES Retention Policy](#).
- 9.41 When commissioning contractors to carry out work on behalf of NES, the responsible officer must check the employee/employer status of the individual concerned to assess whether NES are compliant with the IR35 rules for each assignment. Claims of self-employed status on behalf of the individual need to be verified for every project undertaken. The His Majesty's Revenue & Customs (HMRC) Employment Status Indicator tool should be completed by the officer commissioning the individual (<http://www.hmrc.gov.uk/calcs/esi.htm>). The result should be kept by the officer to produce in the event of an audit from HMRC. If the result confirms that there is no employee/ employer relationship, then the contractor should be asked to provide an invoice for their fees. However, if the result indicates that there is a relationship then the contractor should be provided with a copy of the Employment Status Indicator result as a Status Determination Statement and asked to complete a fee form and will be paid through the NES payroll.
- 9.42 Advance payment for supplies, equipment, or services out-with normal business practices shall not be normally permitted. Advance payment in all exceptional circumstances shall be subject to the express approval of the Executive Director of Finance.
- 9.43 The budget holder is responsible for ensuring that all items due under a payment in advance contract, are received and they must inform the Executive Director of Finance immediately problems are encountered.
- 9.44 NHS Scotland operates a "Payment on Behalf" process which eliminates the need for the transfer of cash between NHSScotland Boards for the payment of services. The process removes the need for Boards to raise Purchase Orders and invoices to one another, and instead recognises the payments as a non-cash transfer. The system is managed by NHS National Services Scotland (NSS) on behalf of Scottish Government and the transfers are processed monthly. Where payments to other Boards are managed through this process, the Executive Director of Finance is responsible for ensuring that there is an authorisation process in place which assures that services have been received and payment authorised prior to the transfer being made. The Deputy Director of Finance has delegated authority to approve the transfer request to NSS on behalf of the Executive Director of Finance.
- 9.45 The issue of NHS Credit/Purchasing cards will be managed by the Executive Director of Finance who will delegate authority to the Deputy

Director of Finance to amend credit/purchasing card limits as appropriate. It is the responsibility of the Executive Directors to nominate a card holder or card user for their own area. Daily and single transaction limits will be set by the Deputy Director of Finance based on the expected use of the card. Increases to those limits must be submitted by the card holder and approved by the Deputy Director of Finance. All corporate purchase card transactions will be reviewed at least annually by Finance to ensure appropriate use.

PAYMENT OF STAFF

- 9.46 Staff may be engaged or re-graded only by authorised officers within the limit of the approved budget and establishment when agreed by the Chief Executive or other authorised officer unless following successful grading appeals. The Remuneration Committee shall approve any changes to the remuneration, allowances, and conditions of service of the Chief Executive and other Directors in accordance with the Code of Corporate Governance, subject to advice from the Director of Workforce.
- 9.47 Each employee shall be issued with a contract which shall comply with current employment legislation and be in a form approved by NES.
- 9.48 Electronic completion and signing of engagement forms and change forms containing information necessary for the payment of staff as they may require shall be co-ordinated and quality assured by appropriate HR Officers and approved forms processed on eESS for transmission to National Services Scotland (NSS) Payroll, as close to the new member of staff commencing with NES as possible.
- 9.49 A termination of employment ticket or any such other documents as may be required, for payment purposes, shall be completed, and where appropriate signed, and approved through the appropriate Line Manager, or other authorised NES - Deanery personnel for trainee employees and HR Officers and processed on eESS for transmission to NSS Payroll. Where an employee fails to report for duty, in circumstances which they have left without notice and this has been confirmed, NSS Payroll shall be informed immediately.
- 9.50 Completion and signing of notification of change forms and such other documents necessary for the payment of staff following changes in employment status or terms and conditions of service shall be co-ordinated between the appropriate HR Officers and approved forms processed on eESS as close to the effective date of change for processing by NSS Payroll.

- 9.51 All time-records, staff returns, and other pay records and notifications shall be in a form approved by the Executive Director of Finance and shall be certified and submitted in accordance with their instructions. Where this information is transmitted by electronic means, appropriate procedures covering such transmissions require to be agreed with him/her.
- 9.52 Subject to the limits laid down in the Scheme of Delegation, the Remuneration Committee shall review and approve submissions from the Director of Workforce, approved by the Chief Executive for any redundancy situation leading to contractual entitlement to a payment in excess of £95,000.
- 9.53 An annual report on voluntary severance agreements and any other voluntary resignations with a financial consideration that have been approved through the extant Scottish Government business case process and authorised by the NES CEO as Accountable Officer shall be presented to the Remuneration Committee in advance of the inclusion of the associated data in the Annual Accounts.
- 9.54 Subject to the limits laid down in the Scheme of Delegation, all early retirements, that meet the requirement for a two-year maximum pay-back period and result in additional costs being borne by the employer, will be submitted to the Remuneration Committee for consideration and recommendation to the NES Board.
- 9.55 Early retirements due to ill health are approved by SPPA and are usually out-with the remit of the Remuneration Committee, in any rare and exceptional case where additional costs may be borne by NES, this will be submitted to the Remuneration Committee for consideration and recommendation to the NES Board.
- 9.56 The Director of Workforce and the Executive Director of Finance shall be jointly responsible for ensuring that rates of pay and relevant conditions of service are in accordance with current agreements as advised by the Scottish Government Health and Social Care Directorate and agreed by the Board. The Chief Executive, or Board in appropriate circumstances, shall be responsible for the final determination of pay but subject to the statutory duty of the Executive Director of Finance who shall issue instructions regarding:
- verification of documentation of data;
 - the timetable for receipt and preparation of payroll data and payment of staff;
 - maintenance of subsidiary records for Superannuation, Income Tax, National Insurance, and other authorised deductions of pay;

- security and confidentiality of payroll information in accordance with the principle of the General Data Protection Regulations Act, May 2018;
- checks to be applied to completed payroll before and after payment;
- methods of payment available to various categories of staff;
- procedures for payment to staff;
- procedures for unclaimed wages which should not be returned to salaries and wages staff;
- pay advances authorised and their recovery;
- maintenance of regular and independent reconciliation of adequate control accounts;
- separation of duties of preparing records and handling cash; and
- a system to ensure the recovery from leavers of any sums due by them to NES.

9.57 All employees shall be paid by bank credit transfer, unless otherwise agreed by the Executive Director of Finance.

9.58 After approval by the Remuneration Committee, the Chair will personally authorise for payment the Performance Related Pay Progression (PRPP) of the Chief Executive; and the Chief Executive will personally authorise the progression payment for other contracted NES staff within the Executive and Senior Management Cohort.

9.59 The Executive Director of Finance shall ensure salaries and wages are paid on the currently agreed dates but may vary these when necessary due to special circumstances (e.g. Christmas or other Bank Holidays). Payment to an individual shall not normally be made in advance of the normal pay date.

10. TRAVEL, SUBSISTENCE AND OTHER ALLOWANCES

10.1 The Executive Director of Finance shall ensure that all expense claims by employees of NES are reimbursed in line with the relevant NHS regulations, and in line with the NES Travel and Subsistence Policy.

10.2 The Executive Director of Finance shall issue additional guidance on the submission of expense claims, specifying the documentation to be used, the timescales to be adhered to and the required level of authorisation.

11. CONTRACTING AND PROCUREMENT

- 11.1 All procurement must be undertaken in line with the requirements of the Public Contracts (Scotland) Regulations 2015, the Procurement Reform (Scotland) Act 2014, the Procurement (Scotland) Regulations 2016 and the principles set out in the Scottish Government's Scottish Procurement Policy Handbook 2008, and the Scottish Government's published Procurement Journey, including any subsequent revisions. In addition, as a result of the UK's exit from the European Union on 31 December 2020, The Public Procurement etc. (EU Exit) (Scotland) (Amendment) Regulations 2020 and The Public Procurement (Agreement on Government Procurement) (Amendment) Regulations 2021 also apply.
- 11.2 In all circumstances, officers of NES shall seek to obtain Best Value through the application of the NES Policy and Procedures. Adopting a MEAT (Most Economically Advantageous Tender) approach enables NES to take account of criteria that reflects qualitative, technical, and sustainable aspects of the tender submission as well as price when reaching an award decision.
- 11.3 NES shall comply as far as is practicable with the Scottish Capital Investment Manual (SCIM) and Scottish Procurement Policy Notes.
- 11.4 In accordance with CEL 05 (2012) where national, regional, or local contracts exist (including framework agreements) NES will use these contracts. Only in exceptional circumstances and with the authority of the Executive Director of Finance, can goods or services be ordered out-with such agreements.

THRESHOLDS FOR PURCHASING/ORDERING

- 11.5 The central Procurement team are responsible for all Procurement activities. The thresholds (excluding VAT) for the purchasing/ordering of goods and services are as follows: -

Thresholds (ex-VAT)	Purchasing Process
Order value ≤ £10,000	Achievement of best value should be demonstrated.
Order value > £10,000 and ≤ £25,000	Three competitive written quotations to be received from reputable suppliers.
Order value ≥ £25,000	Tendering process applies.

Value for Money (VfM), the use of Public Contracts Scotland (PCS), including PCS Quick Quote and any World Trade Organisation's (WTO) and Government Procurement Agreement (GPA) directives must be applied when the estimated contract value exceeds the procurement thresholds set out in the table below.

In case of any doubt, advice must be sought from the Procurement Department

Spend £k	≥116.4*	FaT*	FaT*	FaT*	FaT*	FaT*
	>50 <116.4*	PCS-T	PCS-T	PCS-T	PCS-T	PCS-T
	>25 ≤50	PCS	PCS	PCS	PCS	PCS
	>10 ≤25	PCS Quick Quote	PCS Quick Quote	PCS Quick Quote	PCS Quick Quote	PCS
	>0 ≤10	VFM	VFM	VFM	VFM	PCS Quick Quote
		Very Low	Low	Medium	High	Very High
Risk/Complexity						

* UK Find a Tender (FaT) threshold £116,407 ex-VAT, implemented 30/10/23 and valid from 1/1/24 ((FaT) replaced OJEU Tender process on 1/1/21)

Order value refers not only to individual orders but also to the total estimated value of recurring orders for like goods/services.

ACCEPTANCE AND AWARD BY CHIEF EXECUTIVE

- 11.6 The Chief Executive, acting with the Executive Director of Finance are authorised on behalf of the organisation to accept tenders and award contracts. This responsibility can be assigned to those who have delegated financial authority.
- 11.7 The limits for delegation for the acceptance of tenders shall be approved by NES Board and the Executive Team from time to time.
- 11.8 Formal tendering procedures may be waived with the recorded approval of the Executive Director of Finance where:
- For values below the UK Find a Tender (FaT) limits, the timescale genuinely precludes competitive tendering. Failure to plan the work properly is not a justification for single tender; and
 - Specialist expertise is required, and evidence is provided to demonstrate that this is available from only one source; and
 - The task is essential to complete the project; and
 - Arises as a consequence of a recently completed assignment; and
 - Engagement of different consultants for the new task would be inappropriate; or
 - There is a clear benefit to be gained from maintaining continuity with an earlier project. However, in such cases the benefits of such continuity must outweigh any potential financial advantage to be gained by competitive tendering; or
 - Clause 21 of the Public Contracts (Scotland) Regulations 2015 allows any public sector body to restrict the tendering process for goods or services to supported factories and businesses only. The directive only applies as a matter of law to contract opportunities which have a financial value greater than the OJEU threshold values.
 - Where provided for in the Scottish Capital Investment Manual.
- 11.9 Competitive tendering can only be waived in specific, limited circumstance by the Executive Director of Finance, the Head of Procurement, or their deputies as per the maximum contract values in the Scheme of Delegation. The waiver request and the reasons supporting the request, should be provided by the relevant Director and the record retained by Procurement.

SINGLE TENDER (REGULATED)

- 11.10 Where only one tender is received, NES must ensure, as far as practicable, that the price to be paid is fair and reasonable. If this situation arises the reasons for accepting the single tender should be formally documented and

submitted to the Head of Procurement.

OFFICIAL ORDERS

- 11.11 No goods, services or works other than works and services executed in accordance with a contract, or a NES Purchasing Card shall be ordered except on an official order, whether hardcopy or electronic, and contractors shall be notified that they should not accept orders unless on an official order form or processed via an approved secure electronic medium. Oral (Verbal) orders shall be issued only by an officer designated by the Chief Executive and only in accordance with the Business Continuity Plan. These shall be confirmed by an official order issued no later than the next working day, except for in exceptional circumstances, and clearly marked "Confirmation Order". National contracts must be used unless express permission, within the Scheme of Delegation, has been obtained from the Head of Commissioning and Procurement, the Deputy Director of Finance, or the Executive Director of Finance.
- 11.12 Official orders shall be issued by the NES Purchase to Pay (P2P) Order system and shall incorporate an obligation on the contractor to comply with NES terms and conditions as regards delivery, carriage, documentation, variations etc.
- 11.13 Orders will be processed and transmitted by electronic methods in place of signed numbered paper-based orders providing always that appropriate procedures for such orders are agreed by the Executive Director of Finance.
- 11.14 Official order forms, supported by appropriate requisition requests, shall only be approved officers authorised by the Chief Executive. Lists of authorised officers shall be maintained and a copy of such list supplied to the Executive Director of Finance.
- 11.15 No order, contract, lease shall be issued for any items for which there is no budget provision or for which no funding has been provided under the delegated powers of virement unless authorised by the Executive Director of Finance on behalf of the Chief Executive. Members and officials must ensure that all contracts, leases, tenancy agreements and other commitments they enter into on behalf of NES for which a financial liability may result but without secured funding or budget provision are notified to the Executive Director of Finance in advance of commitment being made.

MANAGEMENT CONSULTANTS

- 11.16 In accordance with the [SG Consultancy Procedures](#) issued in 2017, when

consultants are necessary, they need to be used sparingly, appropriately and effectively. Within NES, Management Consultants should only be used when documentary evidence of a benefit to NES has been prepared and the following demonstrated:

- the work cannot be carried out internally;
- Management is determined to take action to bring about change and demonstrate commitment to act upon the outputs;
- The Management consultants can bring relevant knowledge and have proven experience which will add value; and
- The number of consultants must not exceed in-house capacity to manage them effectively.

11.17 Directorates must submit the documentary evidence to support the request for a management consultant to the Chief Executive and the Executive Director of Finance for approval before progressing with selection and appointment.

11.18 In choosing a Management Consultant, steps should be taken to ensure that they are capable of carrying out the assignment; that Value for Money is obtained; and that due probity is demonstrated in awarding the contract. Appointment of Management Consultants must normally be by Competitive Tender.

11.19 Where successive assignments beyond the scope and terms of an appointment made by competitive tender arise, these should also be subject to tender arrangements. Where it is expected that there may be follow on assignments, it may be more appropriate for the tendering exercise to appoint Management Consultants under a call off arrangement.

CONTRACTS

11.20 NES may only enter into contracts within its statutory powers and shall comply with:

- Standing Orders;
- NES Standing Financial Instructions;
- UK and World Trade Organization Government Procurement Agreement (WTO GPA) Directives and other statutory provisions;
- any relevant directions including the Scottish Capital Investment Manual, Scottish Public Finance Manual, and guidance on the use of Management Consultants; and
- such NHS Standard Contract conditions as are applicable.

11.21 Where specific contract conditions are considered necessary by the lead officer, these will be drafted by the Head of Procurement and Commissioning and where appropriate, advice shall be sought from suitably qualified persons and/or the Central Legal Office part of National Services Scotland (NSS).

11.22 In all contracts made by NES, the Procurement team shall endeavour to obtain Value for Money. All tenders are awarded on the basis of MEAT (Most Economically Advantageous Tender) which incorporates both qualitative and financial measures into the tender process. All supporting evidence is documented and held in accordance with the [NES Retention Policy](#).

11.23 Any contractual aspects will be managed by the Procurement team in addition to a nominated Point of Contact who shall oversee and manage deliverables.

11.24 All contracts entered into shall contain standard clauses empowering NES to:

- Cancel the contract and recover all losses in full where a company or their representative has offered, given, or agreed to give, any inducement to members or officials; and
- Recover all losses in full or enforce specific performance where goods or services are not delivered in line with contract terms.

11.25 The Executive Director of Finance shall ensure that arrangements for financial control and financial audit of building and engineering contracts and property transactions comply with the guidance contained within Scottish Construction Code (SCOTCONCODE) and the Scottish Capital Investment Manual (SCIM). The Technical audit of these contracts shall be the responsibility of the relevant Director.

IN HOUSE SERVICES

11.26 The Chief Executive, as Accountable Officer, shall be responsible for ensuring that Best Value can be demonstrated for all services provided under contract or in-house. The Board or appropriate committee may also determine from time to time that in-house services should be market tested by competitive tendering.

REGISTER OF INTEREST

11.27 Acceptance of Financial Assistance, Gifts and Hospitality and Declaration of Interest.

- the principles relating to the acceptance by Health Service staff of financial assistance, gifts and hospitality from commercial sources and declaration of interest are stated in the [NES Standards of Business Conduct Policy](#) which references NHS Circular MEL 1994(48) Annex 7 and NHS Circular MEL 1994(80). This policy has been widely circulated and should be read as part of the Standing Financial Instructions;
- the policy covering acceptance of financial assistance, gifts and hospitality and declaration of interest is updated by the Workforce Directorate on behalf of the Chief Executive;
- a register covering acceptance of financial assistance, gifts and hospitality is maintained by the Finance Directorate and the register of and declaration of interest is maintained by Board Services on behalf of the Chief Executive for board members and a separate register of interests for staff (excluding Executive Board Members) is maintained by Finance;
- no order shall be issued for any item or items for which an offer of gifts (other than low-cost items e.g. calendars, diaries, pens and like value items), or hospitality has been received from the person interested in supplying goods or services. Any employee of NES receiving such an offer shall notify their line manager as soon as is practicable; and
- visits at supplier's expense to inspect equipment, goods or services must not be undertaken without the prior approval of the Chief Executive.

12. LOSSES AND SPECIAL PAYMENTS

- 12.1 Any officer discovering or suspecting a loss of any kind shall forthwith inform their line manager, who shall immediately inform the Fraud Liaison Officer. Where a criminal offence is suspected, the Counter Fraud policy in operation at NES must be applied, in accordance with the partnership agreement between NES and Counter Fraud Services.
- 12.2 The Executive Director of Finance shall maintain a losses and compensation register in which details of all losses shall be recorded, as they are known. Write off action shall be recorded against each entry in the register. Losses are noted even if they are recovered or expected to be recovered.
- 12.3 Losses are classified according to details issued by the Scottish Government Health and Social Care Directorate.
- 12.4 An annual report on losses and special payments is presented to the Audit and Risk Committee, and details of individual losses exceeding £250k are published in the Annual Report and Accounts.
- 12.5 In accordance with the Scheme of Delegation, the Chief Executive, acting

together with the Executive Director of Finance, may approve the writing off of losses within the limits delegated to the Board / Executive team by the Scottish Government Health and Social Care Directorate, as per NHS Circular CEL 10 (2010) (Appendix C): -

Item No	Category of Loss	Delegated Authority (per case) £
Theft / Arson / Wilful Damage		
1	Cash	10,000
2	Stores / procurement	20,000
3	Equipment	10,000
4	Contracts	10,000
5	Payroll	10,000
6	Buildings & Fixtures	20,000
7	Other	10,000
Fraud, Embezzlement & other irregularities (including attempted fraud)		
8	Cash	10,000
9	Stores / procurement	20,000
10	Equipment	10,000
11	Contracts	10,000
12	Payroll	10,000
13	Other	10,000
14	Nugatory & Fruitless Payments	10,000
Claims Abandoned		
15(a)	Private Accommodation	10,000
15(b)	Road Traffic Acts	20,000
15(c)	Other	10,000
Stores Losses		
16	Incidents of the Service –	
	- Fire	20,000
	- Flood	20,000
	- Accident	20,000
17	Deterioration in Store	20,000
18	Stocktaking Discrepancies	20,000
19	Other Causes	20,000

Item No	Category of Loss	Delegated Authority (per case) £
Losses of Furniture & Equipment and Bedding & Linen in circulation		
20	Incidents of the Service -	
	- Fire	10,000
	- Flood	10,000
	- Accident	10,000
21	Disclosed at physical check	10,000
22	Other Causes	10,000
Compensation Payments - legal obligation		
23	Clinical	250,000
24	Non-clinical	100,000
Ex-gratia payments		
25	Extra-contractual Payments	10,000
26	Compensation Payments - Ex-gratia - Clinical	250,000
27	Compensation Payments - Ex-gratia - Non Clinical	100,000
28	Compensation Payments - Ex-gratia - Financial Loss	25,000
29	Other Payments	2,500
Damage to Buildings and Fixtures		
30	Incidents of the Service	
	- Fire	20,000
	- Flood	20,000
	- Accident	20,000
	- Other Causes	20,000
31	Extra-Statutory & Extra-regulatory Payments	Nil
32	Gifts in cash or in kind	10,000
33	Other Losses	10,000

12.6 The exercise of powers of delegation in respect of losses and special payments will be subject to the submission of annual reports to NES Audit & Risk Committee identifying which powers have been exercised and the amount involved.

- 12.7 The Audit and Risk Committee will formally consider and approve all Losses annually when recommending the adoption of the Statutory Annual Accounts.
- 12.8 No special payments exceeding the delegated limits laid down, and subsequent amendments thereto shall be made without prior approval of the Scottish Government Health & Social Care Directorate.
- 12.9 The Executive Director of Finance shall be authorised to take any necessary steps to safeguard NES's interests in bankruptcies and company liquidations.
- 12.10 All articles surplus to requirements or unserviceable shall be condemned or otherwise disposed of by an officer authorised for that purpose by the Executive Director of Finance.
- 12.11 The officer shall satisfy their self as to whether or not there is evidence of negligence in use and shall report any such evidence to the Executive Director of Finance and the Chief Executive who shall take the appropriate action.

13. RISK MANAGEMENT

The Chief Executive shall ensure that NES has a Risk Management Strategy that is approved and monitored by the Audit and Risk Committee.

The Risk Management Strategy shall include:

- a Statement on the NES approach to Risk Management,
- a summary of the NES Strategy for Risk Management,
- details of the Structures in place to implement the strategy,
- details of the processes in place supporting the risk management structures,
- definition of the Risk Appetite i.e. the level of risk the board is willing to accept, and
- definition of responsibilities with regard to risk management.

The Audit and Risk Committee shall have oversight of the Risk Management Strategy and of the implementation and monitoring of risk management structures and processes.

The Executive Director of Finance shall ensure that appropriate insurance and indemnity arrangements are in place in support of the risk management strategy.

14. STANDING COMMITTEES

The Board has established standing committees to which it delegates responsibilities. The Terms of Reference of all Committees will be reviewed annually and are published on the [NES external website](#). The NES Board jointly governs with NHS Golden Jubilee, the work of the NHS Scotland Academy. This is undertaken via NHSS Academy Executive Programme Group and governed through NES Education and Quality Committee and NHS Golden Jubilee Strategic Portfolio Governance Committee.

15. SPECIFIC ROLES & RESPONSIBILITIES

ROLE OF THE EXECUTIVE DIRECTOR OF FINANCE

15.1 The Executive Director of Finance is responsible for:

- ensuring there are arrangements to review, evaluate and report on the effectiveness of internal control including the establishment of an effective internal audit function;
- ensuring that the effectiveness of Internal Audit is reviewed by the Audit and Risk Committee and meets the NHS mandatory audit standards; and
- liaising with Counter Fraud Services as appropriate to determine at what stage to involve the police in cases of fraud, misappropriation, and other irregularities.

15.2 The Executive Director of Finance, designated auditors, and representatives from Counter Fraud Services (CFS), are all entitled without necessarily giving prior notice to require and receive:

- access to all records, documents and correspondence relating to any financial or other relevant transactions, including documents of a confidential nature;
- access at all reasonable times to any land, premises, or employee of the organisation;
- the production of any cash, stores, or other property of the organisation under an employee's control; and
- explanations concerning any matter under investigation.

ROLE OF INTERNAL AUDIT

- 15.3 The role, objectives and scope of Internal Audit are set out in the NHS Internal Audit Standards and the Public Sector Internal Audit Standards recognising the importance of an independent and objective internal audit service working to the [NHS Internal Audit Standards](#) (2011). The work of Internal Audit is carried out primarily for the benefit of the Accountable Officer and Board/Executive of the organisation. The Head of Internal Audit, in accordance with the [Public Sector Internal Audit Standards](#) (2013), has a responsibility to provide an annual opinion on the overall adequacy and effectiveness of the organisation's governance, risk management and control processes. There is consequently a major synergy between the purpose of the Head of Internal Audit and the role of the Audit and Risk Committee.
- 15.4 The Internal Auditor shall have specific responsibility to review, appraise and report upon:
- (a) controls to ensure achievement of NES's objectives;
 - (b) the extent of compliance with established policies, procedures, plans, regulations, and laws etc;
 - (c) the extent to which NES's assets and interests are accounted for and safeguarded from loss of any kind arising from: fraud and other offences, theft, accident, waste, extravagance, inefficient administration, poor value for money or other causes;
 - (d) the suitability, reliability, and integrity of management information systems; and
 - (e) the adequacy of follow-up action to their reports.
- 15.5 The Internal Auditors shall be accountable to the Audit and Risk Committee of NES. The reporting and follow up systems for internal audit shall be agreed between the Accountable Officer, the Executive Director of Finance, the Audit and Risk Committee and the Chief Internal Auditor. The agreement shall be in writing and shall comply with the guidance on reporting contained in the NHS Internal Audit manual. The reporting system shall be reviewed at least every 3 years.
- 15.6 Whenever any matter arises which involves, or is thought to involve, irregularities concerning cash, stores or other property of NES or any suspected irregularity in the exercise of any function of a pecuniary nature; the Executive Director of Finance shall be notified immediately. (See also Section 13 – Losses and Special Payments).
- 15.7 NES will nominate a senior officer as Fraud Liaison Officer (FLO) to liaise with NHS Counter Fraud Services (CFS) on all fraud related matters. This is in compliance with the approach agreed in the partnership agreement with CFS. The FLO will report and receive all allegations of fraud to and from CFS on NES's behalf and will distribute all fraud reports and communications, on behalf of CFS, to appropriate recipients within NES.

- 15.8 The Internal Auditors shall issue reports to the Executive Director of Finance, who shall refer audit reports to the appropriate officers designated by the Chief Executive. Failure to take any necessary remedial action within a reasonable period shall be reported to the Chief Executive.
- 15.9 Where, in exceptional circumstances, the use of normal reporting channels could be seen as a possible limitation of the objectivity of the audit, or where sufficient action is not taken on matters of consequence, the Internal Auditor shall have direct access to the Audit and Risk Committee. In exceptional circumstances, where they deem necessary, the Internal Auditor shall have the right to report direct to the Chief Executive, NES Chair or the Chair of the Audit and Risk Committee.
- 15.10 At each meeting of the Audit and Risk Committee the opportunity should be given for the Chair of the Committee to meet with Non-Executive Members privately. At least twice a year the Chair of the Audit and Risk Committee and the Non-Executive Members should be provided with the opportunity to meet with the Chief Internal Auditor and External Auditors privately.

EXTERNAL AUDIT

- 15.11 The External Auditor is concerned with providing an independent assurance on financial stewardship including value for money, probity, material accuracy, compliance with guidelines and accepted accounting practice for NES accounts. Responsibility for securing the audit of NES rests with Audit Scotland. The appointed External Auditor's statutory duties are contained in the Public Finance and Accountability (Scotland) Act 2000.
- 15.12 The appointed auditor has a general duty to satisfy themselves that:
- the organisation's accounts have been properly prepared in accordance with directions given under the Public Finance and Accountability (Scotland) Act 2000;
 - proper accounting practices have been observed in the preparation of the accounts; and
 - the organisation has made proper arrangements for securing economy, efficiency, and effectiveness in the use of its resources.

16. INFORMATION TECHNOLOGY

- 16.1 The Director of NES Technology Service shall be responsible for the overall maintenance and security of networked systems within NES. The Executive Director of Finance shall be primarily responsible for the

accuracy of data and the maintenance of appropriate security levels within the financial systems of NES.

- 16.2 The Director of NES Technology Service shall devise and implement any necessary policies and procedures to protect NES and individuals from inappropriate access, use or misuse of any financial or other information held in NES systems or devices for which they have responsibility and shall take account of the provisions of the Data Protection Act 2018, the UK General Data Protection Regulations (GDPR) and the UK Network and Information Systems (NIS) Regulations.
- 16.3 The Executive Director of Finance shall satisfy themselves that such digital and information system audit checks and reviews as they may consider necessary are being carried out.
- 16.4 The Executive Director of Finance shall ensure that new financial systems and amendments to current financial systems are developed in a controlled manner and thoroughly tested prior to implementation. Where this is undertaken by another NHS Board or any other agency, assurances of adequacy will be obtained from them prior to implementation.
- 16.5 The Executive Director of Finance shall ensure that contracts for digital services for financial applications with another NHS Board or any other agency shall clearly define the responsibility of all parties for the security, privacy, accuracy, completeness, and timeliness of data during processing and storage. The contract should also ensure rights of access for audit purposes.
- 16.6 Where another NHS Board or any other agency provides a digital service for financial applications, the Executive Director of Finance shall periodically seek assurances that adequate controls are in operation.
- 16.7 Where digital systems have an impact on corporate financial systems the Executive Director of Finance shall ensure that:
 - (a) systems acquisition, development and maintenance are in line with corporate policies such as Scottish Government Digital Health and Care Strategy 2021.
 - (b) data produced for use with financial systems is adequate, accurate, complete, and timely, and that a management (audit) trail exists; and
 - (c) Executive Director of Finance staff have access to such data.

17. FIXED ASSETS

17.1 The Chief Executive and Executive Director of Finance shall ensure that there is an adequate appraisal and approval process in place for determining capital expenditure priorities and the effect of each proposal upon the financial plans for the organisation.

17.2 Capital assets can be tangible i.e. they have a physical substance, and Intangible have no physical substance e.g. software purchases and internally generated digital developments

17.3 Items falling into the following categories are tangible assets:

- property, plant, and equipment assets which are capable of being used for a period which could exceed one year and have a cost equal to or greater than £5,000 (inclusive of VAT);
- where a new development would result in an exceptional charge to the Operating Cost Statement in the first year of use, Boards have the option to capitalise such expenditure as a single 'equipping' asset with a useful economic life of up to 10 years. Where it is intended to exercise this option, Boards should consult with the SGHSCD;
- assets of lesser value may be capitalised where they form part of a group of similar assets purchased at approximately the same time, each individual part costs £250 or more and costs over £20,000 in total.

17.4 Intangible assets can be bought or developed internally and must meet recognition criteria as set out in the NHS Capital Accounting Manual. They are generally analysed over the following headings:

- Information Technology - software developed in-house or by third parties;
- software licences – the right to use software developed by third parties;
- websites that deliver services;
- development expenditure;
- licences, trademarks, and artistic originals – original films, sound recordings, etc on which performances are recorded or embodied;
- patents – inventions that are afforded patent protection; and
- goodwill

17.5 The Executive Director of Finance shall ensure that every capital expenditure proposal meets the following criteria:

- potential benefits have been evaluated and compared with known costs,
- the cost consequences of the developments have been evaluated and

- included in future budgets, and
 - complies with the guidance in the NHS in Scotland (NHSiS) Scottish Capital Investment Manual and subsequent disclosure complies with International Financial Reporting Standards (IFRS).
- 17.6 The Executive Director of Finance shall ensure that processes are in place to capture the impact on the NES Capital Resource Limit (CRL) from entering into property and equipment leases from the 1st April 2022.
- 17.7 In the case of large capital schemes, a system shall be established for progressing the scheme and authorising necessary payments up to completion. Provision should be made for regular reporting of actual expenditure against authorisation of capital expenditure.
- 17.8 Where capital assets are sold, scrapped, or impaired, their value must be reduced or moved from the accounting records and each disposal must be validated by reference to authorisation documents and invoices (where appropriate). Where land and property are disposed of, the requirements set out in the NHSiS Scottish Government Property Transactions handbook and the Scottish Public Finance Manual (SPFM), together with any subsequent amendments, shall be followed.
- 17.9 There is a requirement to achieve the best price reasonably achievable when disposing of assets belonging to NES. Competitive Tendering should normally be undertaken in line with requirements of the Board's tendering procedure.
- 17.10 Competitive Tendering or Quotation procedures shall not apply to the disposal of:
- any matter in respect of which a fair price can be obtained only by negotiation or sale by auction as determined by the Chief Executive;
 - obsolete or condemned articles and stores, which may be disposed of in accordance with the supplies policy and recorded within the losses of the organisation;
 - items to be disposed of with an estimated sale value of less than £5,000, this figure to be reviewed annually;
 - items arising from works of construction, demolition, or site clearance, which should be dealt with in accordance with the relevant contract; and
 - land or buildings concerning which Scottish Government guidance has been issued but subject to compliance with such guidance.
- 17.11 When evaluating options for the treatment of surplus assets, consideration of the disposal of assets to community bodies will be

included, where appropriate. This consideration should be consistent with the principles of Best Value, where wider public benefits may be achieved.

17.12 The overall control of fixed assets shall be the responsibility of the Chief Executive advised by the Executive Director of Finance.

- The Executive Director of Finance shall be notified of the disposal and proceeds from disposal of any fixed assets.

17.13 NES shall maintain an asset register recording NES's fixed assets. The minimum data set to be held within these registers shall be as specified in the Capital Asset Accounting Manual as issued by the Scottish Government Health and Social Care Directorate. The organisation shall also maintain a register of assets held under operating leases.

17.14 A fixed asset control procedure shall be approved by the Executive Director of Finance. This procedure shall make provision for:

- recording managerial responsibility for each asset;
- identification of additions including internally developed assets;
- identification of assets for impairment or disposal;
- identification of all repairs and maintenance expenses;
- security of assets;
- periodic verification of the existence, condition, remaining life, and title to assets recorded; and
- identification and reporting of all costs associated with the retention of an asset.

17.15 The items on the register shall be checked at least annually by the designated officer and all discrepancies shall be notified in writing to the Executive Director of Finance, who may also undertake such other independent checks as they consider necessary. On the closure of premises, a check shall be carried out and a designated officer shall certify a list of items held showing eventual disposal.

17.16 The Executive Director of Finance shall approve procedures for reconciling balances on fixed assets accounts in ledgers against balances on fixed asset registers.

17.17 All discrepancies revealed by verification of assets to fixed asset register shall be notified to the Executive Director of Finance.

17.18 The value of each asset shall be indexed to current values in

accordance with methods specified in the Capital Accounting Manual.

17.19 The value of each asset shall be depreciated or amortised appropriately, using methods and rates as specified in the Capital Accounting Manual.

17.20 The Executive Director of Finance shall approve a procedure for the calculation and payment of capital charges as specified in the Capital Accounting Manual.

18. PERSONAL USE OF OFFICIAL ACCOMMODATION, EQUIPMENT OR VEHICLES

18.1 No employee of NES may make use of, or make available for use, official accommodation, equipment, supplies, services, or vehicles, for private purposes, without the prior permission of the Chief Executive, unless relating to the use of IT equipment which is covered by Section 19.2 below; and the use of Leased cars which are governed by the leased car agreement.

18.2 Employees should not make inappropriate or unauthorised use of IT systems, the NES [Information Security Acceptable use Policy](#) governing the use of IT systems should be referred to for further guidance.

19. FINANCIAL IRREGULARITIES

This section should be read in conjunction with the [NES Counter Fraud policy](#) and the [NES Standards of Business Conduct Policy](#).

19.1

In November 2023, the Scottish Government with NHS Scotland Counter Fraud Services published NHS Scotland Counter Fraud Strategy 2023-2026.pdf The strategy sets out the key priorities for the period to reduce fraud affecting the NHS in Scotland.

19.2 NES works in partnership with NHS Scotland Counter Fraud Services (CFS) to combat financial crime within the NHS in Scotland. Health Boards nominate a senior officer as Fraud Liaison Officer (FLO) to liaise with CFS on all fraud related matters. The FLO will report and receive all allegations of fraud to and from CFS on the Health Board's behalf. The designated FLO within NES is the Deputy Director of

Finance.

- 19.3 The Scottish Government's Strategy also requires Health Boards to appoint a senior executive or non-executive director as Counter Fraud Champion (CFC). Their role is to influence cultural change within organisations to achieve a position where fraud is considered unacceptable. The designated CFC within NES is the Executive Director of Finance. SG circular [CEL 11 \(2013\)](#) provides details of the roles and responsibilities of CFCs and FLOs.
- 19.4 Accountable Officers are responsible for having adequate arrangements in place to counter fraud within their Health Board. In line with central guidance, these arrangements should encompass robust systems of prevention, detection, and investigation controls, to reduce the risk of fraud and contribute to the promotion of a counter-fraud culture.
- 19.5 Within NES all staff are expected to undertake the NHS Scotland counter Fraud eLearning Module available within Turas. Line Managers are also required to complete the Counter Fraud for Line Managers Training. This training is subject to compliance monitoring.
- 19.6 All fraud against NHS Scotland must be reported to CFS, regardless of who the suspect or victim is, whether or not the matter has been prosecuted criminally, through civil action or by discipline, or whether the fraud was actual or attempted. However, the FLO, in consultation with CFS, may occasionally decide that a fraud is best dealt with by internal management action. In general, this will be on the grounds of low value.
- 19.7 There are numerous types of fraud, and some examples are given below, but this list is not exhaustive.

Deception	bribery	forgery
extortion	corruption	theft
conspiracy	embezzlement	misappropriation
false representation	concealment of material facts & collusion	

For practical purposes fraud may be defined as the use of deception with the intention of obtaining an advantage, avoiding an obligation, or causing loss to another party.

- 19.8 Any officers suspecting theft and/or fraud should immediately inform their line manager who shall in turn inform the Fraud Liaison Officer, who will immediately comply with the requirements of the partnership agreement with NHS Counter Fraud Services.
- 19.9 The Fraud Liaison Officer will also prepare a report for the first appropriate meeting of the Audit and Risk Committee setting out the full circumstances of the incident and any implications for management, including changes to internal control systems which may require to be made.
- 19.10 Careful consideration should be given to payment claims which arise from organisations or individuals who are under investigation or against whom proceedings are being taken for suspected fraud, etc. Legal advice should be sought where necessary.
- 19.11 The Chief Executive should report the matter to the Scottish Government Health and Social Care Directorate in cases where the nature, scale or the persons involved in the suspected offence could give rise to national or local controversy or publicity, or where the offence may be widespread.

20. WHISTLEBLOWING

- 20.1 NES adopts the National whistleblowing standards and encourages all staff in NES to raise any concerns where there is a risk of harm or wrongdoing (including where financial loss or misuse could ensue). Information on how to raise any concerns is available on the [NES Intranet](#).
- 20.2 Any issues raised will be investigated fully and impartially. Nobody will be unfairly treated for raising a concern, for having a whistleblowing allegation made about them or for cooperating with any investigation.

21. AUTHORISATION LIMITS

- 21.1 One of the objectives of the Standing Financial Instructions is to ensure adequate controls exist for the committing and payment of funds on behalf of the Board.

SERVICE LEVEL AGREEMENTS (SLAs)

21.2 Provided the service or activity has been approved in the Operational Planning process or virement approval has been obtained, and once verified by the designated Finance Manager, one of the signatories on a Service Level Agreement must be in accordance with Delegated Authority Limits as per Section 24 of the Scheme of Delegation. The relevant Director should also sign the SLA.

CONTRACTS

21.3 Contracts and other agreements with non-NHS Bodies must have two signatories, one of which will be a Directorate officer and the other an authorised buyer, with specific delegated authority in accordance with Sections 22 and 23 of the Scheme of Delegation. The total contract value must also be verified by the designated Finance Manager to ensure this is in line with Operational Plans and budgets.

Contractual and other commitments with non-NHS Bodies, over £1,000,000 in total, should be reported to the Board.

PURCHASES (PURCHASE ORDERS AND INVOICES)

21.4 Purchase requisitions and invoices must be authorised by budget holders, or staff with delegated authority from budget holders, and verified by the designated Finance Managers as noted in Section 18 of the Scheme of Delegation:

21.5 Special arrangements exist for payments to other Boards in relation to payments made through the Payment on Behalf Process as outlined in Section 9.40. These include payments in respect of Training Grades and the Additional Costs of Teaching (ACT). These payments are covered by approved SLAs and individual monthly payments are processed subject to confirmation from nominated senior officers within the relevant Directorate who have delegated authority from their director. All submissions are reviewed and authorised by the Deputy Director of Finance before being processed.

VIREMENTS

21.6 It is the responsibility of the Chief Executive and the Executive Director

of Finance to ensure all financial commitments entered into on behalf of the Board are in line with approved budgets and management plans.

21.7 A Virement is the transfer of budget from one income or expenditure line to another. To maintain financial control within NES we require authorisation of virements which are above agreed delegated levels and are not considered to be technical adjustments required to adhere to recognised accounting processes. The authority to vire between budgets and the virement limits is covered in Section 16 of the Scheme of delegation.

21.8 During the operational planning process, the Executive Team members consider, and the Board approves the allocation of budgets on the basis of the information provided to them at that time. A key part of the governance process in NES is a robust system of budget monitoring and review to ensure that:

- budgets are used for the purposes for which they are allocated,
- any planned change in the purpose for which funds are used, supports the strategic direction of NES, and
- there is no duplication in the use of funds across the organisation.

It is these criteria which must be taken into account when any budget virement is being considered.

21.9 The following technical budget adjustments are not subject to the Scheme of Delegation for Virements but will be approved by the Head of Finance Business Partnering or their nominated deputy:

- actual receipt of allocations which were anticipated and included as part of the operational planning process and therefore use has been approved. This transaction merely confirms receipt of pre-agreed funds. and will be noted at the next Executive team meeting;
- the anticipated receipt of a confirmed allocation from Scottish Government which has been accepted by NES outwith the Operational planning process
- training grade adjustments - where the number of trainees is set by Scottish Government and the total funding allocation agreed. Budget adjustments which reallocate funds within the pre-agreed total and on the approval of the appropriate governance group (National Reshaping Workforce Group) are not subject to virement rules;
- Technical Adjustments including budget allocations made by finance to release pre-agreed provisions (example – a provision created for a potential pay award) or movement of budget between budget lines where the purpose for which the budget was allocated has not changed; and

- enactment of structural change within the organisation. Where organisational change has been approved by the Change Management Board and/or the Executive team which necessitates the reallocation of budget this will not also be subject to the Virement rules (example – consolidating budgets which are currently split across cost centres into one single budget).

21.10 Once the Board has approved the budget, plans and performance target for the year and taken account of all reserves and anticipated contingencies, the Directors and Budget Holders will be responsible for managing their affairs within the budget allocated to them and in line with NES' Strategic Financial Principles. This will include dealing with planned or unplanned expenditure on an individual basis and virement within the rules stated above. The virement rules stated above may be suspended with the agreement of the Chief Executive and Executive Team.

21.11 Any savings generated during the year must be quantified and disclosed to the Executive Director of Finance as soon as possible to support achievement of efficiency target savings or for ET agreement as per scheme of delegation for virement

21.12 The Chief Executive in consultation with the Executive Director of Finance should set authorisation limits for any other expenditure.

22. ENDOWMENT FUNDS

22.1 The Review of Governance of NHS Endowment Funds, November 2019, was developed to ensure that all Scottish Endowment funds are managed appropriately using a standard regulations and procedures and this review reported in October 2021.

22.2 Should the Board ever receive an endowment (NHS-linked charity), an endowment fund should be set up following regulations set out in 21.1 above. These were put in place to safeguard the use of NHS-linked charitable funds within the Scottish NHS.

23. GENERAL NURSING COUNCIL (GNC) FUND: REGISTERED CHARITY: SC015662

23.1 The GNC is a charitable trust and is registered with OSCR (SC015662)

and constituted by deed which includes provision for the appointment and resignation of Trustees who manage the fund in the deliverance of its charitable purpose.

- 23.2 The GNC Fund was set up with the net proceeds from the sale of the former General Nursing Council for Scotland premises in Darnaway Street, Edinburgh by the National Board for Nursing, Midwifery and Health Visiting for Scotland, a predecessor body of NHS Education for Scotland, in 1983.
- 23.3 The management of The Fund is the responsibility of the Trustees. The Trustees rely on the GNC Fund project team and disbursement panel to distribute information concerning The Fund to potential beneficiaries and to make recommendations to the Trustees concerning awards. The day to day financial management of the charity is delegated to the Executive Director of Finance at NHS Education for Scotland.
- 23.4 The Trustees of the GNC may include NES Executive and Non-Executive Directors and Board Members whose appointment will be endorsed by the NES Board Chair. All Trustees act independently of the NES Board.
- 23.5 The Trustees shall ensure appropriate arrangements are in place to maintain such accounts and records as may be necessary to record and protect all transactions and funds of the GNC Fund, including an Investments Register consistent with the current statutory requirements (Law Reform (Miscellaneous Provision) (Scotland) Act 1990).
- 23.6 The Trustees shall ensure that annual accounts are prepared within 9 months of the year end and in accordance with the Charities and Trustee Investment (Scotland) Act 2005 and the Charities Accounts (Scotland) Regulations 2006 (as amended), and that proper arrangements are made for these to be either independently examined or audited by a separately appointed External Auditor and submitted to the Office of the Scottish Charity Regulator (OSCR).
- 23.7 All share and stock certificates and property deeds shall be deposited either with the trustee body's Bankers or Investment Advisers, or in a safe, or a compartment within a safe, to which only a designated responsible officer will have access.

24. JOINT WORKING ARRANGEMENTS

- 24.1 NES has entered a joint arrangement with the NHS Golden Jubilee for the provision of the NHS Scotland Academy (NHSSA). The NHSSA is held accountable through the existing parent Board scrutiny and reporting arrangements.
- 24.2 Financial allocations for the NHSSA work are made to and managed by the respective parent Boards. Expenses and liabilities, and the accounting treatment of these, are recorded and reporting within each parent Boards own records. [IAS 31]
- 24.3 Participation or investment in any legal entity (e.g. joint venture) is subject to prevailing legislation and SGHSC guidance and is subject to approval by the Minister. Before proceeding, legal and procedural advice is required, and any activity in this area must be advised to and approved by the Executive Director of Finance.
- 24.4 Joint working with pharmaceutical companies is permitted within certain parameters set out in the Scottish Government's guidance – A Common Understanding 2012 Working Together for Patients. The guide on joint-working between NHS Scotland and the pharmaceutical industry, should be applied to any such joint-working arrangement and will assist in developing local joint-working, governance, monitoring, and project arrangements. Such arrangements should also be reviewed in line with sponsorship and Intellectual property policies
- 24.5 Joint working is also permitted with voluntary organisations, in the form of funding arrangements, subject to certain conditions. NES can only directly fund a third sector organisation; whose role was in line with NES's statutory purpose, strategic direction and roles and responsibilities.

25. SPONSORSHIP

- 25.1 All sponsorship arrangements, entered into by NES, must comply with the NES Sponsorship policy and MEL(2000)13: "Fund Raising, Income Generation and sponsorship within the NHSiS" at all times and be in accordance with the NES Sponsorship Policy, as amended for arrangements within the NHS Scotland Academy (NHSSA).
- 25.2 Where sponsorship arrangements are entered into, they should be appropriate and discreet and not call into question NHS in Scotland (NHSiS) funding of core business.
- 25.3 If sponsorship arrangements are agreed, the requirements set out in the income sections 9.23 to 9.26 of the is document, should be followed.

26. INTELLECTUAL PROPERTY

- 26.1 The registration, other forms of protection, management, and exploitation of Intellectual Property Rights (e.g. a brand, patent, domain name, etc.) is subject to compliance with HDL(2004)09 A framework and Guidance on the Management of IP in NHSS, MEL (1998) 23 Policy Framework for the Management of IP within NHSS and current [NES Intellectual Property Policy](#) the IP Policy and Scheme of Delegation.
- 26.2 Where we wish to exploit our right or potential right commercially, it is NES policy to take appropriate advice from legal and IP experts in concluding any agreements or licences necessary to deal with the commercial exploitation of IP owned or being developed by NES. All proposals to commercially exploit our IPR must be fully costed, taking into account NES policies on income generation, and must have the approval of the Executive Director of Finance and the relevant Director.
- 26.3 Any request by a third party for permission to exploit NES IPR commercially must be given reasonable consideration in compliance with the Re-use of Public Sector Information regulations, and any refusal must be recorded together with the rationale for refusal. NES will, whenever appropriate, ensure that IP resulting from projects funded in whole or in part by NHS funds is exploited to the benefit of NES and ultimately NHSScotland.
- 26.4 As per the NES Standard Terms of Purchase, where development forms part of a contract for supply of goods or services, right of ownership of any invention, design or IP arising from such development shall be transferred to NES as soon as any such right arises.
- 26.5 If the sale of any intellectual property rights is being considered, the requirements set out in the income sections 9.23 to 9.26 of the is document, should be followed.

Strategic Financial Principles



Appendix 3

NHS Education for Scotland

Audit and Risk Committee

Terms of Reference

1. Constitution and Context

1.1 The NHS Education for Scotland (NES) Board has established a Committee to be known as the Audit and Risk Committee; hereafter referred to as the Committee, which will operate within the terms of the Board's Standing Orders; Standing Financial Instructions and the Board Code of Conduct.

1.2 The Committee will fulfil its duties in line with the Scottish Public Finance Manual and the Scottish Government Audit and Assurance Committee Handbook (3 April 2018).

2. Role

2.1 The Committee independently supports the Accountable Officer and the Board by reviewing the comprehensiveness and reliability of assurances provided in relation to: the governance, the risk management, the control environment and the integrity of the Annual Report and Accounts, Finance, Procurement and Properties and Facilities.

2 Membership

2.1 The Members and Chair of the Committee are appointed by the Board who ensure members are sufficiently independent. The Chair of the Board is not a member but is invited to attend. The Board ensure that the Committee has a balance of skills including recent financial experience.

2.2 Full membership of the Committee shall include a minimum of four non-executive directors of the Board including the Audit and Risk Committee Chair.

2.3 The Board may co-opt independent external members for up to one year if additional skills are needed to meet the assurance requirements.

2.4 The Committee may procure specialist ad-hoc advice at the expense of the organisation, subject to budgets agreed by the Accountable Officer.

4. Quorum

4.1 – 4.7 [Quorum Generic ToRs](#)

5. Attendees

5.1 – 5.2 Attendees Generic ToRs

5.3 The external auditor, internal auditor, Chief Executive and Executive Director of Finance shall normally attend all meetings.

6. Private Member Meetings

6.1 Private Member Meetings Generic ToRs

6.2 The Committee may also meet in private with the internal auditors and external auditors at any time but should ensure that it does so at least annually.

6.3 There are mutual rights of access between the Committee Chair and the Accountable Officer, Chief Internal Auditor, and the External Auditors.

6.4 The Chief Internal Auditor will report functionally to the Committee Chair.

6.5 In the interests of developing relationships, the Committee Chair may elect to have private individual meetings with the Accountable Officer, Director of Finance, Chief Internal Auditor, and the senior representative of the External Auditor.

7. Frequency of Meetings

7.1 The Audit and Risk Committee will meet four times a year.

8. Authority

8.1 Authority Generic ToRs

8.2 The Committee has delegated authority from the Board on the following matters, so that it may carry out its responsibilities and duties:

- Oversight of the process to appoint the Chief Internal Auditor and making a recommendation to the Board. The appointment of the Chief Internal Auditor is a matter reserved to the Board.
- Approving the fee of the external auditor within the scale defined by the Auditor General.

9. Responsibilities and Duties

The Committee will generally discharge its responsibilities and duties through:

9.1 Assurance

(an evaluated opinion, based on evidence from review, on the organisation's governance, risk management and internal control framework).

- 9.1.1 Clear articulation of the level and type of assurance required across all areas within the remit of the Committee through review of the Assurance Framework and the recommendation of an optimum mix of assurance.
- 9.1.2 Reviewing and challenging the assurances that have been provided, as to whether their scope meets the needs of the Accountable Officer and the Board.
- 9.1.3 Ensuring effective mechanisms are in place to provide assurances that are reliable and adequately evidenced.
- 9.1.4 Drawing attention to potential weaknesses in systems of risk management, governance and internal control.
- 9.1.5 Commissioning further assurance work for areas that have not had sufficient review.
- 9.1.6 Reviewing annual reports from the other Committees of the Board to ensure they have obtained appropriate assurance to enable them to discharge their duties and responsibilities and give assurance to the Accountable Officer and Board.
- 9.1.7 The Audit and Risk Committee will also periodically review its own effectiveness and report the results of that review to the Board and Accountable Officer.

In practice the Committee will carry out the following activities:

9.2 Internal Control, Risk Management and Corporate Governance

- 9.2.1 Assess the scope and effectiveness of the risk management processes.
- 9.2.2 Review the system of internal control and evaluate the control environment and decision-making processes. This will include annual review of the Board's Standing Orders, Standing Financial Instructions, Scheme of Delegation and Risk Management Strategy.
- 9.2.3 On an annual basis, review the Board's attitude to and appetite for risk across the agreed risk areas of *Strategy/Policy; Financial; Operational/Service Delivery; Accountability/Governance and Reputational/Credibility*, to ensure these are appropriately defined and consider if these are aligned to the strategic and delivery plans.
- 9.2.4 Receive and review reports from management on the effectiveness of internal controls – seek assurance that policies, procedures, and processes are appropriately designed and effectively implemented.
- 9.2.5 Seek assurance on the risk and control environment where services are outsourced to external providers, including shared service arrangements.
- 9.2.6 Review and recommend for approval by the Board, the corporate governance disclosures on audit and risk management in the annual accounts (Governance Statement).
- 9.2.7 Review internal arrangements by which staff may raise concerns about possible improprieties such as anti-fraud policies and arrangements for special investigations.
- 9.2.8 Review counter fraud activity and outcomes.

9.3 External Audit (including review of the Annual Accounts)

- 9.3.1 Review the External Audit strategy and plan.

- 9.3.2 Review the previous External Audit letter to those Charged with Governance and review management responsiveness to any recommendations.
- 9.3.3 Consider planned external audit activity and review the level of coordination and engagement between internal and external audit to ensure there is no unnecessary duplication of audit work.
- 9.3.4 Review the proposed accounting policies before management present them to the Board for its approval.
- 9.3.5 Review the draft Annual Accounts including areas of substantial estimates and judgements and the Governance Statement.
- 9.3.6 Review the clarity and completeness of disclosures in the draft Annual Accounts.
- 9.3.7 Consider any items raised in the external Audit letter to those charged with Governance in reaching a view on whether the committee should recommend that the Board approve the draft Annual Accounts.
- 9.3.8 Review management's letter of representation to the external auditors.
- 9.3.9 Provide the Board and Accountable Officer with an Annual Report, timed to support finalisation of the accounts and the Governance Statement, summarising its conclusions from the work it has done during the year.
- 9.3.10 Approve the annual fee of the external auditor.
- 9.3.11 Review the performance of External Audit on an annual basis.
- 9.3.12 On appointment of a new External Auditor by the Auditor General for Scotland, ensure completion of all required assurance checklists.

9.4 Internal Audit

- 9.4.1 Approve the appointment and termination of Internal Audit and advise on the purchase of non-audit services from the suppliers of audit services.
- 9.4.2 Review and approve the Internal Audit strategy and annual Internal Audit in order to assess their access their accuracy in reflecting the risk exposure of the organisation.
- 9.4.3 Monitor and check that Internal Audit Strategy, annual Internal Audit and adequate resources are being made available to Internal Audit enable the Head of Internal Audit to provide an annual audit opinion.
- 9.4.4 Review the arrangements which the Internal Auditors have in place to implement the requirements of the Public Sector Internal Audit Standards (such as the internal audit charter).
- 9.4.5 Review the results of Internal Audit work, including reports on the effectiveness of systems for governance, risk management and internal control.
- 9.4.6 Review management responses to issues raised.
- 9.4.7 Review the annual Internal Audit opinion and annual report.
- 9.4.8 Review the performance of Internal Audit, including conformance with the applicable standards, expected performance measures, and the results of both Internal and external quality assessments.

9.5 Financial Management

- 9.5.1 Review the draft financial strategy which sets out the financial assumptions and approaches to strategic financial planning which will underpin the draft budget.

- 9.5.2 Review draft financial Plans (Budgets), considering if they support delivery of the Annual Delivery Plan and the NES Strategic objectives, and make recommendations on these to the Board.
- 9.5.3 Provide detailed scrutiny of the estimates of income and expenditure associated with significant new developments requiring formal Business Case approval.
- 9.5.4 Consider the year-end financial report and in particular the financial performance analysed therein and make recommendations to the Board.
- 9.5.5 Consider and make recommendations to the Board on matters relating to the financial management of NES, including efficiency programmes and resource allocation and the financial arrangements governing relationships with other organisations.
- 9.5.6 Monitor compliance of finance activities with statutory duties, NHSScotland policy and NES priorities in relation to equality and diversity.
- 9.5.7 Consider the financial implications of matters relating to accommodation, maintenance of premises and provision of services. This will include reviewing the content of the Property and Asset Management Strategy (PAMS).

9.6 Procurement

- 9.6.1 Review quarterly reports on Procurement activity including compliance with the Procurement Reform (Scotland) Act 2014, the Scottish Government Procurement Journey and the utilisation of National Contracts.
- 9.6.2 Approve the 3-year Procurement Strategy and associated action plan.
- 9.6.3 Review the NES Procurement Annual Report and approve for publication.
- 9.6.4 Review the Procurement Annual Equality Duty Report and approve for publication.

9.7 Climate Emergency and Sustainability

- 9.7.1 Review sustainability performance, plans and returns.
- 9.7.2 Review the progress against the NHS Scotland Global Climate Emergency and Sustainable Development Policy as per [DL \(2021\) 38](#)
- 9.7.3 Consider the climate emergency and sustainability implications of matters relating to accommodation, maintenance of premises and provision of services.

9.8 Schedule of Business

- 9.8.1 The Committee will develop a Schedule of Business to discharge its responsibilities and duties, which will determine the information that it requires at meetings and consequently the agenda for those meetings.

10. Reporting Arrangements

10.1 - 10.5 [Reporting Arrangements Generic ToRs](#)

11. Review

11.1 [Review Generic ToRs](#)

11.2 The Committee will undertake an annual assessment of their performance, highlighting any steps for further improvement to the way they conduct business.

12. Conduct of Business

12.1 As per the [Board Standing Orders](#)

Della Thomas
Board Secretary
January 2024

NHS Education for Scotland

Technology and Information Committee

Terms of Reference

1. Constitution/context

1.1 The NHS Education for Scotland (NES) Board has established a Committee to be known as the *Technology and Information Committee*; hereafter referred to as the Committee, which will operate within the terms of the Board's Standing Orders; Standing Financial Instructions and the Board Code of Conduct.

1.2 The Committee will provide governance and scrutiny within the context of "*Technology*" as defined as the application of technology to deliver business services through the public and private cloud.

1.3 The Committee will provide governance and scrutiny within the context of "*Information*" in relation to the technical aspect of information and cyber security and will provide governance and scrutiny within the context of the NES legal obligations.

2. Role

2.1 The role of this Committee is to provide oversight, scrutiny and assurance of the People, Partnerships and Performance aspects of the NES Strategy 2023-26 that relate to digital and innovation work, and the areas of the Scottish Government's Digital Health and Care Strategy refreshed October 2021 on which NES leads.

3. Membership

3.1 Full membership of the Committee shall include the following:

- four non-executive directors of the NES Board;
- and may include one co-opted member with non-voting rights.

4. Quorum

4.1 – 4.7 [Quorum](#)

5. Attendees

5.1 – 5.2 [Attendees](#)

5.3 The Executive Lead, (Director of NES Technology Service) will attend all meetings. With the prior approval of the Chair of the Committee, the Director of Technology will be able to provide a deputy on an exceptional basis.

5.4 The NES Chief Executive may attend any meetings.

5.5 The Committee may require relevant officers to attend at meetings, where specific advice and/or guidance is required on relevant topics.

5.6 The Committee may co-opt additional advisors as required.

6. Private Member Meetings

6.1 [Private Member Meetings](#)

7. Frequency of Meetings

7.1 The Committee shall normally meet four times per year.

7.2 The Chair of the Committee, may within reason, convene additional meetings if they deem this necessary, in consultation with the relevant executive lead.

8. Authority

8.1 [Authority](#)

9. Responsibilities and Duties

The Committee shall act for the Board to:

9.1 provide assurance to the Board as to the effective strategic management and delivery of NES's technology work in relation to strategic key performance indicators, resource allocation, strategic risk identification and mitigation and service delivery.

9.2 provide scrutiny and oversight of the corporate governance processes for incorporating in-year commissions into the overall strategic work programme.

9.3 ensure that effective and coherent strategic engagement and communications is progressed with the relevant stakeholders particularly Scottish Government, NHS Boards, Integration Joint Boards, COSLA, third sector and suppliers to increase confidence in using digital ways of working.

9.4 ensure compliance with statutory and regulatory requirements including, clinical and technical assurance and in line with lawful and ethical processing of patient identifiable data, cybersecurity, safety and user acceptability and as per policies and guidance from the Scottish Government and other organisations as appropriate.

9.5 horizon scan so that the Board is kept informed of emerging policies, research, data, technical, clinical or other innovative developments as might have a bearing on the organisation's approach to development and delivery of its strategies and work programme for digital.

9.6 establish such sub-committees it considers appropriate to ensure its work is suitably informed and supported.

9.7 collaborate effectively and interact constructively with the governance structures of other external organisations as appropriate, as well as the across the internal Committee structures of NES.

9.8 deal with any such matters as may be assigned to the Committee by the Board or other Standing Committee. In particular the Audit and Risk Committee may assign activity related to Internal Audit Reports and the Board has assigned specific equality outcomes.

10. Reporting Arrangements

10.1 - 10.5 [Reporting Arrangements](#)

11. Review

11.1 [Review](#)

11.2 The Committee will undertake a self-assessment of their performance and effectiveness after every meeting and highlight any steps for further improvement to the way they conduct business.

12. Conduct of Business

12.1 As per the [Board Standing Orders](#)

Della Thomas, Board Secretary

NES

January 2024

Appendix 5

NHS Education for Scotland

Remuneration Committee

Terms of Reference

1. Constitution/context

1.1 The NHS Education for Scotland (NES) Board has established a Committee to be known as the Remuneration Committee; hereafter referred to as the Committee, which will operate within the terms of the Board's Standing Orders; Standing Financial Instructions and the Board Code of Conduct.

1.2 The Committee will fulfil its duties in line with relevant statutory and regulatory requirements.

1.3 The Committee will be a Sub-Committee of the Staff Governance Committee.

2. Role

2.1 To provide assurance to the Board, through the Staff Governance Committee, that appropriate arrangements are in place to ensure that the Board meets the statutory requirements laid out in the Staff Governance Standard in respect of the remuneration of individual Executive Directors and Directors (and any other staff employed under Executive Managers' or Consultants' pay arrangements).

2.2 The Committee will also review submissions from the Chief Executive for any settlement agreements.

3. Membership

3.1 Membership of the Remuneration Committee will include, as a minimum, three non-executive Directors of the NHS Board, one of whom should, in normal circumstances, be the Employee Director.

3.2 Membership will include:

The Non-Executive Chair will in normal circumstances be the Board Vice Chair.

- i. Non-Executive Board Vice-Chair (and Chair of Education and Quality Committee)
- ii. Non-Executive Chair of the Staff Governance Committee

- iii. Non-Executive Board Chair (and Chair of Digital and Information Committee)
- iv. Non-Executive Chair of the Audit and Risk Committee
- v. Non-Executive Employee Director

4. Quorum

4.1 – 4.7 [Quorum \(generic ToRs\)](#)

5. Attendees

5.1 – 5.2 [Attendees](#) (generic ToRs)

- 5.3. The Chief Executive and Director of Workforce will be in attendance throughout to provide advice and support (apart from during their review). A senior member of the Workforce Directorate will deputise for the Director of Workforce in their absence, as appropriate, to ensure specialist HR advice is always available to the Remuneration Committee.
- 5.4. The Chief Executive and Director of Workforce will leave the meeting when their own remuneration and terms and conditions are to be discussed, and at other times, at the discretion of the Chair.

6. Private Member Meetings

6.1 [Private Member Meetings \(generic ToRs\)](#)

7. Frequency of Meetings

- 7.1 The Committee will be scheduled to meet three times per annum, and with the Chair's discretion, conduct business by correspondence on occasion where this provides a more timely or effective mechanism.
- 7.2 Remuneration issues may arise between meetings and will be brought to the attention of the Remuneration Committee Chair by the Chief Executive or the Director of Workforce. The Chair may call a special meeting of the Remuneration Committee to address the issue.

8. Authority

8.1 [Authority \(generic ToRs\)](#)

8.2 No director or senior manager shall be involved in any decisions as to their own remuneration outcome.

9. Responsibilities and Duties

9.1 In relation to Executive Directors and Directors, to:

9.1.1 review and approve all Terms and Conditions of Employment, including job descriptions, terms and conditions of employment, basic pay, performance pay (if applicable), and all benefits associated with each post.

9.1.2 seek assurance that remuneration, benefits and employment related terms and conditions are in line with and fair, (whether on an individual or collective basis), in relation to the national system and the arrangements for determining those matters and to seek redress if this is determined to not be the case.

9.1.3 confirm that individual annual SMART performance objectives are in place aligned to the organisations corporate vision, goals, purpose and values.

9.1.4 review and approve individual annual SMART performance objectives, including overseeing the review of performance against these objectives at the mid-year point and agreeing any revisions to the objectives during the course of the year.

9.1.5 consider and approve proposals on the assessment of performance at the year-end (taking into account any factors which the Committee consider to be relevant and which may not have been known by the relevant parties at the time when objectives, including their weighting were agreed or at the mid-year point) and any changes to the remuneration or the Terms and Conditions of Employment arising from this assessment of performance during the review period. The Remuneration Committee will sign off the final versions, following discussion, which will then be sent to the National Performance Management Committee (NPMC). Following the initial assessment by the NPMC, the Remuneration Committee will sign off any documents which have been returned for amendment.

9.1.6 delegate responsibility to a sub-group of the Committee to act as a final appeals body for the Chief Executive and Executive Directors who have raised a grievance regarding their remuneration, benefits, performance grading or terms and conditions of employment.

9.1.7 seek assurance on application of the performance review and development process.

9.2 In relation to any other staff employed under Executive Managers' or Consultants' pay arrangements to: maintain an overview of remuneration arrangements for staff falling within these categories.

- 9.3 Comply with any Scottish Government Health Directorates directions and take into consideration any relevant guidance on remuneration, benefits or terms and conditions of employment, including the guidance contained in the [Remuneration Committee Self-Assessment Pack](#) published by the Scottish Government and Audit Scotland in 2007.
- 9.4 Review NES policy as appropriate regarding the remuneration, benefits, terms and conditions in the light of any guidance issued by Scottish Government or NHS Scotland.
- 9.5 Provide assurance to the Board, through the Staff Governance Committee, that systems and procedures are in place to manage the issues set out in Scottish Government guidance so that overarching staff governance responsibilities can be discharged. The Staff Governance Committee will not be given the detail of confidential employment issues that are considered by the Remuneration Committee.
- 9.6 Review submissions from the Chief Executive for the terms of any Settlement Agreement. Such agreements may also require the approval of the Scottish Government, in accordance with procedures applicable across the public sector.
- 9.7 All proposals for redundancy leading to contractual entitlement for a payment in excess of £95,000 must have been approved by the accountable officer before being submitted to the Remuneration Committee for review and approval.
- 9.8 Receive for noting an anonymised annual report on voluntary severance agreements and any other voluntary resignations with a financial consideration that have been approved through the extant Scottish Government business case process and authorised by the NES CEO as Accountable Officer. The Committee shall receive this report in advance of the inclusion of the associated data in the Annual Accounts.
- 9.9 Subject to the limits laid down in the Scheme of Delegation, all early retirements, that meet the requirement for a two-year maximum payback period and result in additional costs being borne by the employer will be submitted to the Remuneration Committee for consideration and recommendation to the NES Board. Whilst ill health retirements are approved by SPPA and are usually out with the remit of the Remuneration Committee, in any rare and exceptional case where additional costs may be borne by NES, this will be submitted to the Remuneration Committee for consideration and recommendation to the NES Board.
- 9.10 The Remuneration Committee will act in accordance with the applicable

pension scheme rules and regulations, and NHSS pay policy applicable to NES employees.

10. Reporting arrangements

10.1 - 10.5 [Reporting Arrangements \(generic ToRs\)](#)

11. Review

11.1 [Review \(generic ToRs\)](#)

11.2 The Committee will undertake an annual assessment of their performance, highlighting any steps for further improvement to the way they conduct business.

12. Conduct of Business

12.1 As per the [Board Standing Orders](#)

12.2 All business of the Committee will be conducted in strict confidence.

Della Thomas, Board Secretary

NES

January 2024

NHS Education for Scotland

Staff Governance Committee

Terms of Reference

1. Constitution/context

1.1 The NHS Education for Scotland (NES) Board has established a Committee to be known as the *Staff Governance Committee*; hereafter referred to as the Committee, which will operate within the terms of the Board's Standing Orders; Standing Financial Instructions and the Board Code of Conduct.

1.2 The Committee will fulfil its duties in line with relevant statutory and regulatory requirements.

2. Role

2.1 The role of this Committee is to support and maintain a culture within the health system where the delivery of the highest possible standard of staff management is understood to be the responsibility of everyone working within the system and is built upon partnership and collaboration. It will ensure that robust arrangements to implement the Staff Governance Standard are in place and monitored.

2.2 The Committee may also have a role in seeking assurance in relation to staff health, well-being and welfare, as a result of work commissioned directly by Scottish Government, or any other aspect of NES business approved formally through the Annual Delivery Plan.

3. Membership

3.1 Full membership of the Committee shall include the following:

- four non-executive directors of the NHS Board, of which one must be the Employee Director with voting rights;
- two lay representatives, from the trade unions and professional organisations (acting in an ex officio capacity), nominated by the NHS Board Partnership Forum with non-voting rights.

4. Quorum

4.1 – 4.7 [Quorum](#)

5. [Attendees](#)

5.1 – 5.2 [Attendees](#)

5.3 The Director of Workforce will attend to provide Committee with advice, provision of information and guidance. With the prior approval of the Chair of the Committee, the Director of Workforce will be able to provide a deputy on an exceptional basis.

5.4 The NES Chief Executive may attend any meetings.

5.5 The Committee may require relevant officers/partnership representatives to attend at meetings, where specific advice and/or guidance is required on relevant topics.

5.6 The Committee may co-opt additional advisors as required.

6. Private Member Meetings

6.1 [Private Member Meetings](#)

7. Frequency of Meetings

7.1 The Committee shall normally meet four times per year.

7.2 The Chair of the Committee, may within reason, convene additional meetings if they deem this necessary, in consultation with the relevant executive lead.

8. Authority

8.1 [Authority](#)

8.2 The Committee may establish Sub-Committees to support its functions. This, as per the Staff Governance Standard, will include the Remuneration Committee.

9. Responsibilities and Duties

9.1 The Committee shall act for the Board to oversee the commissioning of structures and process which ensure that delivery against the Staff Governance Standard is being achieved. Specifically, the Committee will:

- 9.1.1 monitor and evaluate strategies and implementation plans relating to people management.
- 9.1.2 note once for Scotland staff governance related policies.
- 9.1.3 approve any local staff related policy amendment and consider any funding or resource submission in line with NES expenditure processes to achieve the Staff Governance Standard.
- 9.1.4 take responsibility for the timely submission of all staff governance information required for national monitoring arrangements.

- 9.1.5 provide staff governance information for the statement of internal control.
- 9.1.6 provide assurance that systems and procedures are in place to manage the issues set out in MEL (1993) 114 (amended)
- 9.1.7 receive assurance that the Remuneration Committee discharges its duties.
- 9.1.8 consider any recommendations from the Partnership Forum and receive assurance that the Partnership Forum discharges its duties.

9.2 The Committee will also:

- 9.2.1 review and advise on the Board's whistleblowing policy, procedures and processes.
- 9.2.2 receive assurance that health and safety and wellbeing meet legislative requirements and the implementation of the Safer Staffing Regulations.
- 9.2.3 ensure appropriate governance in respect of Board delegated strategic risks. Review risk identification, assessment and mitigation, in line with the NES Board's risk appetite, and agree appropriate escalation.
- 9.2.4 monitor compliance of staff governance activities with statutory duties, NHSScotland policy and NES priorities in relation to equality and diversity and oversee the implementation of key aspects of Equality legislation in respect of staff e.g. Equal Pay, Equality and Diversity Training.
- 9.2.5 receive assurance in relation to NES Commissions from Scottish Government, regarding wider NHS and/or Health and Social Care workforce data provisions and attraction to related career pathways.

9.3 The Committee will deal with any such matters as may be assigned to the Committee by the Board or other Standing Committee. In particular, the Audit and Risk Committee may assign activity related to Internal Audit Reports and the Board has assigned specific equality outcomes.

10. Reporting Arrangements

10.1 - 10.5 [Reporting Arrangements](#)

11. Review

11.1 [Review](#)

11.2 The Committee will undertake a self-assessment of their performance and effectiveness after every meeting and highlight any steps for further improvement to the way they conduct business.

12. Conduct of Business

12.1 As per the [Board Standing Orders](#)

Della Thomas, Board Secretary

NES

January 2024

Appendix 7

NHS Education for Scotland

Education and Quality Committee

Terms of Reference

1. Constitution/context

- 1.1 The NHS Education for Scotland (NES) Board has established a Committee to be known as the *Education and Quality Committee*, hereafter referred to as the Committee, which will operate within the terms of the Board's Standing Orders; Standing Financial Instructions and the Board Code of Conduct.
- 1.2 The Committee will fulfil its duties in line with relevant statutory and regulatory requirements.
- 1.3 Specifically, the Committee will take cognisance of the fact that most health professional education and training within the UK is governed by UK statutes and overseen by UK regulators, and that many of the curricula and outcomes are determined at a UK level, by Higher Education Institutions, Royal Colleges and Statutory regulators.

2. Role

- 2.1 The role of the Committee is to:
 - provide assurance to the NES Board that effective arrangements are in place to plan, commission, deliver and quality manage all of NES's education and training provision in line with the organisation's Strategic Plan
 - advise the NES Board, when appropriate on where, and how, its education systems and assurance framework may be strengthened and developed further and
 - provide assurance to the NES Board that effective arrangements are in place for the educational and quality governance of the NHS Scotland Academy accelerated education and training activities.

3. Membership

- 3.1 Full membership of the Committee shall include at least four non-executive Directors of the NHS Board and may include one co-opted member with non-voting rights.

4. Quorum

- 4.1 – 4.7 [Quorum](#) (generic ToRs)

5. Attendees

- 5.1 – 5.2 [Attendees](#) (generic ToRs)

6. Private Member Meetings

6.1 [Private Member Meetings](#) (generic ToRs)

7. Frequency of Meetings

7.1 The Committee shall normally meet four times per year. The Chair of the Committee, may within reason, convene additional meetings if they deem this necessary, in consultation with the relevant executive lead.

8. Authority

8.1 [Authority](#) (generic ToRs)

9. Responsibilities and Duties

9.1 Provide assurance to the NES Board that, where NHS education and training is subject to statutory regulatory oversight, the requirements of the relevant regulator are being met.

9.2 Provide assurance to the NES Board regarding the effective management and improvement of the quality of NES's Health and Social Care education and training activities and outcomes; including internally regulated activities, Credit Rated Programmes, clinical assurance and leadership development activities.

9.3 Seek assurance that strategies, policies, structures, responses to consultations and processes for the governance of Health and Social Care education and training have taken a forward looking and strategic view.

9.4 Seek assurance in relation to progress with the implementation of education and learning strategies and policies.

9.5 Seek assurance that arrangements are in place to identify and embed good and innovative practice across NES in ways that enhance the quality of the Health and Social Care education and training provided.

9.6 Seek assurance of the effective performance, monitoring, management and value of Health and Social Care education and training programmes and contracts, including the identification of impact (including outcomes) or intended impact, where possible.

9.7 Ensure appropriate governance in respect of Board delegated strategic risks. Review risk identification, assessment, and mitigation, in line with the NES Board's risk appetite, and agree appropriate escalation.

9.8 Monitor compliance of Health and Social Care education and training activities with the statutory and regulatory requirements of equity, equality legislation, human rights and Government policy and other relevant policies. Monitor compliance in relation to NES priorities of equity, equality and diversity, health inequalities, person-centred care and participation, and educational quality.

- 9.9 Seek assurance as to the effective management of Health and Social Care educational research programmes.
- 9.10 Seek assurance relating to the key strategic engagement of partners and users across Health and Social Care, including approaches to integration that impact on service delivery.
- 9.11 Seek assurance of continuous improvement in relation to Health and Social Care user feedback, including learner satisfaction, fill rate, retention, attainment and progression.
- 9.12 Take steps to ensure there is an acceptable balance between the value of the information received by the Committee and the time and other costs it takes to acquire and process it.
- 9.13 Scrutinise, approve, or note annual reports as appropriate, in relation to the statutory regulation of health and social care education; complaints and feedback; and other areas of responsibilities as delegated by the NES Board.
- 9.14 Provide assurance to the NES Board in relation to the education and quality assurance for the work of the NHS Scotland Academy in line with the educational statutory function of the NES Board. The Education and Quality Committee's NHS Scotland Academy delegated remit is as per Appendix I.
- 9.15 The Committee will deal with any such matters as may be assigned to the Committee by the Board or other Standing Committee. The Audit and Risk Committee may assign activity related to Internal Audit Reports and the Board assigned EQC specific equality outcomes.

10. Reporting arrangements

10.1 - 10.5 [Reporting Arrangements](#) (generic ToRs)

11. Review

11.1 [Review](#) (generic ToRs)

11.2 The Committee will undertake a self-assessment of their performance and effectiveness after every meeting and highlight any steps for further improvement to the way they conduct business.

12. Conduct of Business

12.1 As per the [Board Standing Orders](#)

Della Thomas
Board Secretary
January 2024

Appendix I

NHS Scotland Academy Delegated governance and scrutiny to the NES Education and Quality Committee

Review, scrutinise and approve education and quality developmental and performance reports on behalf of the NES and NHS Golden Jubilee (NHSGJ) parent Boards, to ensure that:

1. key strategic partners are effectively and appropriately engaged and involved including for example, universities, the regulators, and health and social care partners, including young people and school-based pathways.
2. the education and training planned for or provided by, the NHS Scotland Academy, is subject to the appropriate statutory regulatory oversight, and the requirements of the relevant regulators are met.
3. the education and training planned for or provided by, the NHS Scotland Academy, is appropriately accredited.
4. the NHS Scotland Academy education and training activities and outcomes; activities are effectively managed; quality assured; subject to continuous improvement and impact is measured and achieved.
5. arrangements are in place to identify and embed good and innovative practice across NES and NHSGJ in ways that enhance the quality of the education and training provided.
6. continuous improvement in relation to user feedback, complaints, including learner satisfaction, retention, attainment and progression is embedded in the management and delivery of the NHS Scotland Academy education and training programmes.
7. governance processes and quality management controls are in place relating to the delivery of NHS Scotland Academy technology enhanced education and training.
8. educational and quality related risks are identified, mitigated and reported.
9. NHS Scotland Academy educational and quality governance is reported annually to the NES Audit and Risk Committee as part of the Education and Quality Committee Annual Report.

NHS Education for Scotland (NES)

NES/24/13

Item: 11b

Date of meeting: Thursday 08 February 2024

NES Board

1. Title of paper

NHS Education for Scotland (NES) Policy for controlled documents – Policy for the development, approval and management of strategies, policies, and Standard Operating Procedures.

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. The attached draft NES Policy for controlled documents provides a governing approach to the development, approval and management of strategies, policies and Standard Operating Procedures (SOPs). This will enable the development of standardised controlled documents that will be subject to corporate level controls and administration. The attached 'at-a-glance' document accompanies the policy and aims to aid implementation and compliance. The initiation and development plan is also attached for information.
- 4.2. This work stemmed from a recent audit by the Information Commissioner's Office (ICO) (via the Information Governance team). A corporate response was recommended and an overarching policy has been developed.
- 4.3. The NES Board is invited to review and approve the NES Policy for controlled documents.

5. Background and governance route to meeting

- 5.1. Following the ICO audit, a developmental working group was formed and have so far met on six occasions. Members were added to the group as the meetings progressed. As the policy progresses, the group will continue to meet, where required.
- 5.2. The policy and the initiation and development plan were tabled at the Senior Operational Leadership Group (SOLG) meeting on 14 November 2023. Following that meeting, minor updates were added to the policy, and a short document to aid implementation and compliance was produced. Both these documents were thereafter shared with the SOLG for any final comments.
- 5.3. The policy, the initiation and development plan, and the accompanying 'at-a-glance' document were tabled at the Strategic Implementation Group (SIG) meeting on 12 December 2023 (and as delegated by the NES Executive Team). Following that meeting, a flowchart was added to the 'at-a-glance' document. All three documents were thereafter shared with the SIG for any final comments.
- 5.4. On 12 January 2024, the Partnership Forum received the policy, the accompanying 'at-a-glance' document, and the initiation and development plan for noting (by email correspondence).
- 5.5. The policy, the initiation and development plan, and the accompanying 'at-a-glance' document were tabled at the Audit and Risk Committee (ARC) meeting on 18 January 2024. The committee approved the policy for onward sequencing to the NES Board for approval¹.

6. Assessment/key issues

- 6.1. Following the ICO audit, it was recommended that policies and procedures are approved by senior management and subject to routine review to ensure that they remain fit for purpose.
- 6.2. Within NES, controlled documents are defined as strategies, policies and NES-wide Standard Operating Procedures (SOPs). Other documents that are related to team or directorate functions (with no impact on other directorates/NES as a whole) are not subject to such management controls.
- 6.3. The templates which are embedded (or linked) within the policy will enable authors to work through the logistics of developing, approving and implementing controlled documents.

7. Recommendations

- 7.1. The NES Board is invited to review and approve the NES Policy for controlled documents.

¹ As per governance process, all Board papers progress via the NES Executive Team (week commencing 29 January 2024).

8. Checklist

8a) Have educational implications been considered?

- Yes
 No

8b) Is there a budget allocated for this work?

- Yes
 No

8c) Alignment with [Our Strategy 2023-2026 People, Partnerships and Performance](#)

1. People objectives and outcomes
 2. Partnership objectives and outcomes
 3. Performance objectives and outcomes

8d) Have key strategic risks and mitigation measures been identified?

- Yes
 No

8e) 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

8f) Has an Equality Impact Assessment (EQIA) been completed or in progress for this piece of work?

- Yes
 No

8g) Have you considered emergency climate change and sustainability implications as per [DL \(2021\) 38](#)?

- Yes
 No

8h) Have you considered a staff and external stakeholder engagement plan?

- Yes
 No

Author: Nancy El-Farargy

Date: Friday 26 January 2024

NHS Education for Scotland (NES)



NHS Education for Scotland (NES) Policy for the development, approval and management of strategies, policies, and Standard Operating Procedures

January 2024

Version: 1.1.4

Last updated: 26 January 2024

NES Policy for controlled documents document control

Table 1: Document identification.

Name of document	NHS Education for Scotland (NES) Policy for the development and approval of strategies, policies and Standard Operating Procedures
Document status	Draft
Document type	Policy
Version number	1.1.4 (draft)
Author	Nancy El-Faragy, Planning and Corporate Governance
Lead director	Christina Bichan, Director of Planning and Performance
Associated documents	<ul style="list-style-type: none"> • Equality and Diversity Impact Assessment (EQIA) incorporating the Fairer Scotland Duty Assessment. • NES Policy for controlled documents ‘at-a-glance’ guidance document. • Appendix D – Controlled document initiation and development plan. • Appendix E – Implementation plan.
Authorising body (ratification by)	
Approved date	
Date effective from	
Document location	
Review frequency	Three years
Date of next review	

Table 2: Revision and consultation history.

Date	Version	Author	Comments
Friday 18 August 2023	1.0	Nancy El-Faragy	First issue.
18 August 2023 to 07 November 2023	1.1	Nancy El-Faragy	Endorsement and feedback from working group (Tracey Gill, Rob Coward, Lynnette Grieve, Della Thomas, Ryan Reed, Christina Bichan, Alexander Murray, and Monica Halcro).
14 November 2023	1.1.1	Nancy El-Faragy	Senior Operational Leadership Group (SOLG) review and comment. Minor update and request to develop an accompanying guidance document to support implementation and compliance.

Cont. Table 2: Revision and consultation history.

12 December 2023	1.1.2	Nancy El-Faragy	Strategic Implementation Group (SIG). Request to add a flowchart to the accompanying guidance document.
12 January 2024	1.1.3	Nancy El-Faragy	Partnership Forum (for noting by correspondence).
18 January 2024	1.1.3	Nancy El-Faragy	Audit and Risk Committee (ARC) (minor update).
08 February 2024	1.1.4	Nancy El-Faragy	NES Board.

Table 3: Approval groups and authorisation (ratification body) history.

Date	Version	Author	Comments
01 December 2023	1.1.2	Nancy El-Faragy	Senior Operational Leadership Group (SOLG).
22 December 2023	1.1.3	Nancy El-Faragy	Strategic Implementation Group (SIG) (delegated by the Executive Team).
18 January 2024	1.1.3	Nancy El-Faragy	Audit and Risk Committee (ARC).

Table 4: Publication and dissemination history.

Date	Version	Author	Comments

Contents

1. Introduction	6
1.1. Rationale and purpose	6
1.2. Aim	6
1.3. Scope	7
2. Controlled documents – definitions and governance	8
2.1. Controlled documents and governance.....	8
2.2. Strategy.....	8
2.3. Policy	10
2.4. Standard Operating Procedure	11
2.5. Other documents	11
3. Roles and responsibilities	12
3.1. The NES Board.....	12
3.2. The Chief Executive.....	12
3.3. Standing Board Committees	12
3.4. The controlled document author	13
3.5. The document sponsor	13
3.6. The lead director	14
3.7. Approval groups and the authorising body.....	14
3.8. All staff.....	14
4. The controlled document lifecycle.....	15
4.1. Introduction	15
4.2. Controlled document justification and initiation.....	15
4.3. Controlled document development and consultation	15
4.4. Equality	16
4.5. Controlled document approval	16
4.6. Controlled document register.....	17
4.7. Controlled document publication, communication and implementation.....	17
4.8. Controlled document review, amendment and revision.....	18
4.9. Controlled document retirement and archiving	18
4.10. Controlled document monitoring	18
5. Policy and SOP style guide	19
5.1. Formatting and essential content.....	19
5.2. Optional layout elements:	20
5.3. Policy and SOP template.....	20

6. Further information	21
6.1. Contacts.....	21
7. Bibliography	22
8. Appendices	23
8.1. Appendix A: Authorisation routes for controlled documents.....	24
8.2. Appendix B: NES Standing Board Committees	25
8.3. Appendix C: Policy and SOP template.....	27
8.4. Appendix D: Controlled document initiation and development plan	33
8.5. Appendix E: Controlled document implementation plan	34
8.6. Appendix F: Approval/governing groups for policies	35
8.7. Appendix G: Controlled document register.....	36

1. Introduction

1.1. Rationale and purpose

- 1.1.1. NHS Education for Scotland (NES) recognises that a standard process is required for the development, approval and management of controlled documents, such as strategies, policies, and Standard Operating Procedures (SOPs). Such a process will underpin the creation of documents that:
- Sets out the strategic direction of the organisation.
 - Are fit for purpose.
 - Are compliant with legislation and regulatory standards.
 - Enable the delivery of operational activities.
- 1.1.2. This NES Policy for the development, approval and management of strategies, policies and SOPs (hereafter known as “the policy”) therefore outlines an overarching framework for the standard development, approval and renewal of all controlled documents.
- 1.1.3. This policy presents the universal standards that all controlled documents must follow, including the process for development, approval and renewal. With reference to all NES policies and SOPs, consistency qualities include the formatting style and basic/essential content.
- 1.1.4. This policy also outlines the governing sequence and approval routes for all controlled documents.
- 1.1.5. The benefits of this overall approach include increased accuracy and improved legislative and regulatory compliance for all controlled documents. The overall outcome will be increased levels of assurance for the NES Board, Standing Board Committees, the Partnership Forum (PF), the Executive Team (ET), and Directorate Management Groups.

1.2. Aim

- 1.2.1. The aim of this policy is to enable the development of standardised strategies, policies and SOPs that will be subject to corporate level controls and administration. These include the correct level of governance, approval routes and sequencing through the relevant meeting groups, Standing Board Committees, and the NES Board.

1.3. Scope

- 1.3.1. This policy applies to the development of all new controlled documents (strategies, policies and NES-wide SOPs), including those due for review and renewal. These three different document types require different formats and approval routes. The scope applies to all NES staff and functions.
- 1.3.2. NES adopts the NHS Scotland-wide ('Once for Scotland') Partnership Information Network (PIN) policies, which are developed under a separate procedure. However, all such policies would still be subject to NES approval or noting through the required group, as well as their periodic review, where applicable.
- 1.3.3. The NES Standing Financial Instructions document is issued in accordance with section four of the NHS (Financial Provisions) (Scotland) Regulations 1974¹. This document (and other similar documents) would be subject to NES approval through the required governing sequence and annual review by the NES Board as part of the NES Corporate Governance Package.

¹ Crown Copyright (1974) 'The National Health Service (Financial Provisions) (Scotland) Regulations 1974 No. 468 (S.29)'. Edinburgh. Available at: https://www.legislation.gov.uk/uksi/1974/468/pdfs/uksi_19740468_en.pdf.

2. Controlled documents – definitions and governance

2.1. Controlled documents and governance

- 2.1.1. Within NES, strategies, policies, and SOPs are controlled documents and are therefore subject to organisational and management controls. These controls include their:
- Creation, review, and approval (by a designated authority).
 - Publication and distribution.
 - Content, quality, accuracy, and completeness.
 - Document management (for example, revision and version control).
 - Currency and status (for example, draft, final, superseded, and obsolete).
- 2.1.2. When a new controlled document is required (or alternatively, an existing one that is due for review), it is important to consider the correct type of document that should be developed (or revised). In turn, this would determine the most appropriate sequencing and governance route for scrutiny and approval at the correct organisational level.
- 2.1.3. The definitions and governance arrangements for controlled documents are outlined in the following sections (2.2 to 2.5).
- 2.1.4. A summary of the governing sequence for each controlled document is shown in Appendix A: Authorisation routes for controlled documents (p. 24).
- 2.1.5. To help authors identify the most appropriate Standing Board Committee for strategies and policies, the role of each is presented in Appendix B: NES Standing Board Committees (p. 25).

2.2. Strategy

- 2.2.1. A strategy document sets out the organisation's general direction to achieve a desired future state. Within NES, this may be at either corporate level, or in the case of enabling or supporting strategies, in a defined area of strategic operation. In either case, a strategy document is future-focussed on the longer term and will normally present the overall strategic intent, the vision, and corresponding mission. Given that the NES Board is responsible for the overall strategic direction² of the organisation, all strategies require:
- Board agreement for their development.
 - Board input at their informal development stage.
 - Final Board approval.

² Scottish Government (2022) 'The Blueprint for Good Governance in NHS Scotland'. Scottish Government. Available at: <https://www.gov.scot/publications/blueprint-good-governance-nhs-scotland-second-edition/documents/> (Accessed: 4 August 2023).

- 2.2.2. A strategy document will usually require an accompanying plan which will set out how the desired future state will be accomplished. In most cases, this would take the form of annual plans. A prime example is the NES Strategy and its annual plans. Both these documents are signed off by the NES Board and the Scottish Government.
- 2.2.3. All strategies being developed or renewed must be sequenced through the appropriate governance routes. In some cases, this will involve the Partnership Forum (PF), and the appropriate managerial, executive, and Standing Board Committee structures. By virtue of the term “Strategy” in the document title, all such documents must be approved by the NES Board.
- 2.2.4. There will be few strategies developed for NES, as by their nature they set out the whole strategic intent for the organisation. Content might typically include the vision, mission, high-level objectives and key outcomes. However, this will be determined by the purpose of the strategy, its intended audience and impact.
- 2.2.5. New and revised policies and SOPs must be presented using the approved template (see sections 2.3 and 2.4). Whilst it is not mandatory to use the template for strategies, it can be used during the development and drafting stages, where relevant. Finalised strategy documents do not need to be formatted as per the template. In most cases, approved strategies will be re-formatted into an online web resource and/or into a designed pdf document (for example, as per the [NES Strategy 2023-26](#)).
- 2.2.6. To support the strategy development process, it is important to consult with the appropriate individuals (and groups) and to develop a communications plan. The following templates are available to aid these:
- An initiation and development plan (p. 33).
 - An implementation plan (p. 34).
- 2.2.7. Strategies will be communicated to NES staff, the NES Board, stakeholders, and where relevant, the Scottish Government. Other communication groups should also be considered, where relevant.
- 2.2.8. Strategies will be subject to NES’s strategic cycle. It is usual for the development of the corporate strategy to precede the development of any enabling strategies, to ensure alignment within a given strategic cycle. The implementation of this policy will include a process for registering current NES Strategies and the anticipated period of operation.

2.3. Policy

- 2.3.1. A policy document refers to an officially accepted set of rules, statements, plans and standards, which outlines what must be followed (or the decision-making process) regarding a particular situation or set of circumstances. It is applicable to all NES employees, in which compliance is mandatory. In most (if not all) circumstances, compliance is also applicable to contractors, students, volunteers, and anyone else working alongside NES.
- 2.3.2. This policy outlines the requirements that all NES policies must follow throughout their lifecycle. This includes new policies, as well as those due for revision, renewal, and retiral.
- 2.3.3. To support the policy development process, it is important to consult with the appropriate individuals and groups, and to develop a communications plan. The following templates are available to aid these:
- An initiation and development plan (p. 33).
 - An implementation plan (p. 34).
- 2.3.4. All policies being developed or renewed must use the policy (and SOP) template (p.27³). This will ensure that all policies are produced to a consistent quality and standard.
- 2.3.5. With respect to governance routes and approval, all NES policies must be sequenced through the appropriate managerial, executive, and Standing Board Committee structures. All new NES policies must be made available to the relevant Standing Board Committee for either approval or noting for assurance. If the policy relates to staff, then the policy should be sequenced through the Partnership Forum (PF) before the relevant Standing Board Committee.
- 2.3.6. A list of policies that relates to each of the Standing Board Committees and the PF will be made available (Appendix F: Approval/governing groups for policies, p. 35). At that stage, it will be determined if the committee requires the policy for approval, for noting (for assurance), or to be kept informed of its lifecycle.
- 2.3.7. Policies will typically be communicated to NES staff (which automatically includes the NES Board for assurance). Other communication groups should also be considered, where relevant. For instance, these might include volunteers, contractors, NHS Scotland Boards, and other employers (for example, for those wishing to publish on 'TURAS Learn').

³ A separate Microsoft Word document is available via the [intranet](#).

2.4. Standard Operating Procedure

- 2.4.1. A Standard Operating Procedure (SOP) outlines step-by-step instructions that must be followed to reach a desired outcome. These steps are mandatory and in turn, the result or product of someone following the SOP is the same, regardless of the person who processed it.
- 2.4.2. A SOP is developed and used for NES-wide functions. Checklists may also be embedded within SOPs to ensure quality, reliability, consistency, and compliance.
- 2.4.3. Engagement in SOP development should be appropriate for the scope of the procedure and should cover all communication groups who will be impacted by its implementation. To support this process, the following templates are available:
- An initiation and development plan (p. 33).
 - An implementation plan (p. 34).
- 2.4.4. A SOP (and policy) template is available (p. 27⁴) for the development of all SOPs. This will ensure that all SOPs are produced to a consistent quality and standard (and includes the document control sheet for managing version control, etc.).
- 2.4.5. A SOP will not require the approval or noting of the NES Board or a Standing Board Committee. By its very nature, a SOP outlines **operational** instructions for a particular aspect of work. A local SOP will therefore require approval through existing line management and directorate management processes. However, should a SOP be required for an organisational-wide function or that it could implicate on **all NES** directorates, then the lead director should consider review via the Senior Operational Leadership Group (SOLG), for onward approval via the Strategic Implementation Group (SIG) or the Executive Team (ET).

2.5. Other documents

- 2.5.1. A learning briefing, process map, protocol, desktop instruction, question and answer sheet, guideline, local SOP or guidance document (and the like) may be used at team or directorate levels. Therefore, they will not require the same levels of governance and approval as controlled documents.
- 2.5.2. The governance of these documents will be dependent upon their function. For local operational functions, they will normally only require review, agreement and approval for use at team or directorate levels.
- 2.5.3. These documents may also be used to accompany controlled documents to provide further information and/or to assist with their implementation.
- 2.5.4. Consideration should also be given to the required communication groups that these documents would be applicable to.

⁴ A separate Microsoft Word document is available via the [intranet](#).

3. Roles and responsibilities

3.1. The NES Board

3.1.1. The NES Board is responsible and accountable for⁵:

- Setting the strategic direction of the organisation.
- Holding the executive leadership team to account for delivery.
- Seeking assurance about the organisation's performance and management.
- Managing risks to the quality, delivery, and sustainability of services.
- Engaging with key stakeholders, as and when appropriate.
- Influencing the organisation's culture.

3.1.2. Managing risk around the implementation and compliance of strategies and policies is a key governance role of the NES Board.

3.2. The Chief Executive

3.2.1. As accountable officer, the NHS Chief Executive has overall responsibility for the organisation. This includes overseeing the development of an integrated set of controlled documents (such as strategies and policies) that are designed to deliver the organisation's purpose, corporate objectives, and operational priorities and targets⁶.

3.3. Standing Board Committees

3.3.1. Standing Board Committees are responsible for⁷:

- Scrutinising functions, services and matters delegated to them by the NES Board.
- Approving recommendations and escalating any areas of concern or risk to the NES Board.
- Monitoring and evaluating progress towards achieving the Board's purpose, aims, values, corporate objectives, strategic operational priorities, delegated Strategic Key Performance Indicators and delegated strategic risks.
- Providing an annual report of their governance activity to the NES Board.

3.3.2. Standing Board Committees will have a role in approving strategies and either approving or noting policies (p. 25). The relevant committee will be responsible for the scrutiny of the controlled document (for example, that it is relevant, accurate and up to date) and for obtaining assurance that policies are being adhered to and implemented.

⁵ Scottish Government (2022) 'The Blueprint for Good Governance in NHS Scotland'. Scottish Government. Available at: <https://www.gov.scot/publications/blueprint-good-governance-nhs-scotland-second-edition/documents/> (Accessed: 4 August 2023).

⁶ Ditto.

⁷ Ditto.

3.4. The controlled document author

- 3.4.1. Policy and SOP authors must use the standard template (Appendix C: Policy and SOP template, p.27) for all new documents, and for those due for revision and renewal.
- 3.4.2. The author is responsible for creating and developing the controlled document. The author is also responsible for collaborating with the development/working group, developing an implementation plan and for the engagement and consultation process.
- 3.4.3. Authors are responsible for discussing a timeline with the Board Secretary (or the Chief Executive's office) for sequencing a controlled document through the relevant governance route and necessary approval groups. In the case of a strategy, the governance sequence will need to include an opportunity for Board informal discussion (for example, through a Board Development Session).
- 3.4.4. Authors should aim to ensure that the content of a controlled document remains accurate and up to date, where applicable. Critical updates – for example, if Scottish Government policy changes – may warrant an earlier revision date, and this will be at the discretion of the author, document sponsor or lead director.
- 3.4.5. Once approval has been issued by the authorising (ratification) body (section 3.7), authors are responsible for publishing the controlled document in the relevant location.
- 3.4.6. Authors are responsible for the development of implementation plans, and for promoting and communicating the document to relevant audiences. As part of the implementation process, consideration should be given to any additional education and training that may be required. Where applicable, authors may have a role in monitoring and supporting compliance.

3.5. The document sponsor

- 3.5.1. The document sponsor commissions a controlled document. For strategies, this will be the lead director and, in some cases, (for example, the NES Strategy), the Chief Executive. For policies, this could also be the lead director, but may be a deputy director or associate director. For SOPs, the sponsor may be the lead director or their deputy, but it is likely that it would either be a head of department or general manager.

3.6. The lead director

- 3.6.1. With respect to the development of a strategy, the lead director or Chief Executive has overall responsibility for the final draft before it enters the Board governance route. For principal policy areas – for example, health and safety, information governance, staff governance and finance – the lead director or their deputy will have overall responsibility.
- 3.6.2. The lead director is responsible for compliance with a controlled document and is responsible for ensuring that review cycles are adhered to.

3.7. Approval groups and the authorising body

- 3.7.1. Controlled documents must be sequenced through the relevant approval groups prior to their final approval by a relevant authorising (ratification) body. Approval groups are an important part of the overall governing sequence of a controlled document. However, these groups are not held accountable for the controlled document.
- 3.7.2. Authorising bodies include management groups, the Executive Team, Standing Board Committees and the NES Board. The relevant authorising body is responsible for issuing final approval of a controlled document. Thereafter, the authorising body will require assurance that the controlled document is being implemented, that the content continues to be relevant, accurate and up to date, and that the organisation is compliant.
- 3.7.3. By way of example, strategies will always progress through to the NES Board for final approval. Policy routes will vary, and SOPs will normally only progress through operational and management groups.
- 3.7.4. The authorising body for each type of controlled document is set out in Appendix A (p. 24). This scheme is approved, monitored and reviewed by the NES Board.
- 3.7.5. Trade unions and staff side through the Partnership Forum (PF) (and other related groups) have a role in the co-development of some strategies and policies, particularly where they have an impact on staff. The PF may also have a role in either noting or approving a controlled document prior to its onward governing sequence to a Standing Board Committee, for example, the Staff Governance Committee.

3.8. All staff

- 3.8.1. All relevant staff must comply with a controlled document once it has been approved and implemented.

4. The controlled document lifecycle

4.1. Introduction

- 4.1.1. This section focuses on a controlled document's lifecycle; from initiation through to approval, implementation and where relevant, retirement.

4.2. Controlled document justification and initiation

- 4.2.1. The requirement and justification for a new controlled document may be identified from numerous sources, and examples may include a Scottish Government mandate, an internal audit, or a new organisational need. Overall responsibility and decision-making rests with the authorising body for the controlled document. The justification to revise and renew existing policies should also be noted.
- 4.2.2. Where a valid service need is identified, the lead director will identify the controlled document author. The author will initiate the controlled document process. The author should be any member of staff working within the strategy/policy/SOP area, with the relevant skills and knowledge.
- 4.2.3. The requirement for a new controlled document, or significant amendment must be set out in the controlled document initiation and development planning form (Appendix D, p. 33). [The form](#) also outlines the proposed consultation process with stakeholders and the governing sequence of approval groups. It must be submitted to the relevant authorising body in line with the scheme set out in Appendix A: Authorisation routes for controlled documents (p. 24).

4.3. Controlled document development and consultation

- 4.3.1. Information on the development of a controlled document can be seen in section 3.4. The controlled document author, (p. 13).
- 4.3.2. The consultation process should include a wide range of individuals and groups who may use – or be affected by – the controlled document. This process can take place at any stage of the policy development process and repeated, where required.
- 4.3.3. Consultation groups include the working group, stakeholders, the approval groups (part of the governing sequence), and the authorising body (with overall responsibility for the controlled document). If there is an element of staff interest, then consultation should also normally involve staff side through the Partnership Forum.

4.4. Equality

- 4.4.1. NES has a statutory duty to assess the impact of new or revised policies and practices against the needs of the general equality duty⁸. The Equality Impact Assessment (EQIA) process involves aspects of advancing equality of opportunity, fostering good relations, and eliminating any discrimination.
- 4.4.2. The Fairer Scotland Duty⁹ requires NES to actively consider how to reduce inequalities of outcome caused by socio-economic disadvantage. This duty only applies to decisions or proposals that are strategically important.
- 4.4.3. With respect to the accessibility of controlled documents, consideration must be given to alternative formats, differing abilities amongst people, and accessibility on different devices. Given that Microsoft Word is currently the most popular word processing platform, it is recommended to use its accessibility checker function. This will inspect, identify and help repair any accessibility issues, with the aim of making content easier for people with disabilities to read and edit. For any images or diagrams, use the alternative text function. Further information on formatting and styles can be seen in section 5, (p.19).
- 4.4.4. Information to assist in the development of EQIAs and Fairer Scotland Duty assessments is available from the [NES Equality, Diversity and Human Rights Hub](#).

4.5. Controlled document approval

- 4.5.1. Information on the governance, sequencing route and approval of all controlled documents is set out in detail in section 2 (p. 8). This is summarised below.
- 4.5.2. Although there may be some flexibility, by virtue of the controlled document's category, the following approval routes are required:
- Strategy: The Senior Operational Leadership Group (SOLG), the Strategic Implementation Group (SIG), the Executive Team (ET), potentially the Partnership Forum (PF) (if there is significant staff interest), a Standing Board Committee, and the NES Board. All strategies must be sequenced through to the NES Board for subsequent approval. The overarching NES Strategy will also require Scottish Government approval.
 - Policy: The SOLG, the SIG, the ET, potentially the PF (if there is major staff interest), and a Standing Board Committee (and the NES Board if relevant).
 - SOP: The SOLG, through to the SIG and potentially the ET.
 - Learning briefing, question and answer sheet, guideline, guidance document, and other similar local documents: Directorate groups may be sufficient, and where required the SOLG and other groups can be considered.

⁸ EHRC (2023) 'Guidance for Scottish public authorities, Equality and Human Rights Commission'. Available at: <https://www.equalityhumanrights.com/en/advice-and-guidance/guidance-scottish-public-authorities> (Accessed: 10 August 2023).

⁹ Scottish Government (2021) 'The Fairer Scotland Duty: Guidance for Public Bodies'. Edinburgh: Scottish Government. Available at: <https://www.gov.scot/publications/fairer-scotland-duty-guidance-public-bodies/documents/> (Accessed: 10 August 2023).

4.6. Controlled document register

- 4.6.1. A central register of all controlled documents is available via the [intranet](#). Records should include:
- The area/discipline.
 - The document title.
 - Description.
 - Author.
 - Lead director.
 - Status (approved (final)/in review cycle/retired).
 - The review cycle (for example, annually).
 - Governance approval.
 - Date approved.
 - Version number (x.x.x).
 - Last reviewed date.
 - Next review date.
 - Link/location.
 - Any comments/notes.
- 4.6.2. The template is also available at Appendix G: Controlled document register (p. 36).

4.7. Controlled document publication, communication and implementation

- 4.7.1. Following approval and registration, all controlled documents must be published in a relevant location, for example, on the intranet via SharePoint links. Those documents that are relevant to wider audiences must also be published elsewhere, for example, the corporate NES website.
- 4.7.2. All relevant staff must be made aware of a new (or revised) controlled document through appropriate communications. Such channels will normally involve:
- An all-staff email.
 - An intranet news-feed entry.
 - An entry in the all-staff newsletter.
 - Directorate team meetings.
- 4.7.3. Consideration must also be given to any required/identified education and training needs (for example, through e-Learning modules, learning sessions and recorded videos).
- 4.7.4. All new controlled documents must have an accompanying implementation plan (Appendix E: Controlled document implementation plan, p. 34).
- 4.7.5. It is important to retain evidence of when a new controlled document has been published (for example, an all-staff email, an intranet newsfeed, or a screenshot). Such evidence may be useful for any auditing purposes.

4.8. Controlled document review, amendment and revision

- 4.8.1. All controlled documents must be reviewed and updated in a timely manner, and each would have its own typical review cycle (as per the controlled document register). The review cycle should be no longer than three years.
- 4.8.2. A controlled document may be reviewed and updated earlier than its agreed review date. This may be due to a significant change in practice, a change in NHS Scotland policy, or a change to legislation, and the like.
- 4.8.3. When a controlled document's content is significantly updated and renewed, the document must be, once again, submitted to the authorising body for approval. Any minor updates (for example formatting) completed after formal approval should be recorded in the document control sheet (and a resubmission to the authorising body is therefore not required).
- 4.8.4. Upon approval, the controlled document register, and all publications links must be updated.

4.9. Controlled document retirement and archiving

- 4.9.1. Once a controlled document becomes redundant, the following steps must be taken:
 - The controlled document register is updated.
 - The document is moved to an archive folder in SharePoint.
 - All legacy publication links are removed from the NES intranet and elsewhere.
 - The authorising group and relevant stakeholders are updated, where required.

4.10. Controlled document monitoring

- 4.10.1. Monitoring arrangements for a controlled document are:
 - Review of the controlled document registers.
 - Review of the policy and strategy intranet page.
 - Review of newly developed controlled documents.
 - Review of implementation progress and reporting.

5. Policy and SOP style guide

5.1. Formatting and essential content

5.1.1. For standardisation purposes, all policies and SOPs must include the following content and be consistently formatted:

- Title page:
 - The NES logo (two-colour version), the text “NHS Education for Scotland (NES)” and the title of the policy or SOP (black Arial font, bold and at least size 16).
 - The month and year in which the controlled document was approved (black Arial font, bold and size 12).
 - The policy or SOP version number (black Arial font and size 10).
- Document control:
 - Includes the document control tables (Document identification, Revision and consultation history, Approval groups and authorisation (ratification body) history, and Publication and dissemination history).
- Contents page:
 - Includes at least the level one headings (black Arial font, bold and size 12).
- Level one headings:
 - Chapter headings (numbered (x.), black Arial font, bold and size 14).
- Level two headings:
 - Chapter sub-headings (numbered (x.x.), black Arial font, bold and size 12).
- The format of the main body of text:
 - Paragraphs (numbered (x.x.x.), black Arial font and size 12).
- Introduction (chapter one):
 - Includes the rationale, purpose, risk/mitigation/compliance statement, aim and scope of the policy or SOP.
- The main instructions:
 - Include the policy or SOP mandate/directive and main instructions.
- Lower footer:
 - Includes the policy or SOP title on the left-hand side (black Arial font and size nine).
 - Includes the page numbers on the right-hand side in the format of “Page x of y” (black Arial font and size nine).
- The copyright and alternative formats’ statements (closing page):
 - The NES copyright statement: “© NHS Education for Scotland [year of publication]. You can copy or reproduce the information in this document for use within NHS Scotland and for non-commercial purposes educational purposes. Use of this document for commercial purposes is permitted only with the written permission of NES”.
 - An alternative formats statement: “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 to discuss how we can best meet your requirements”.

5.1.2. Also note the following:

- All policy and SOP paragraphs must be numbered to support ease of referencing.
- The body (main) text must be left justified.
- Aside from proper nouns, brand names and service names, etc., all chapter headings and sub-headings must be in sentence case.
- In Microsoft Word, use the accessibility checker and the alternative text function (for images and diagrams) to inspect and enable accessibility.
- Abbreviations and acronyms should be written out in full at their first instance, followed by their abbreviated version in capitals within brackets. Exceptions to this rule include those widely known (for example, NHS and UK).
- Dates should be written as “xx Month year”, for example, 05 January 2024.

5.2. Optional layout elements:

- 5.2.1. Footnote text may be used to include references and additional contextual information (that would otherwise disrupt the flow of the main text). Footnote text must be numbered, be in black Arial font and in font size nine. Within the body (main) text, footnotes are designated by superscripts.
- 5.2.2. A bibliography can be included for further information (and references cited should normally be added as footnotes). A section on definitions and/or a glossary list may also be included, where required.
- 5.2.3. Chapter headings in the top right-hand corner may be included (black Arial font and size nine).
- 5.2.4. Appendices can be added at the end of the document to provide detailed supplementary details (that would otherwise interrupt the flow of the main text).
- 5.2.5. It is recommended that any feature boxes, tables, figures or diagrams are sequentially numbered for ease of referencing.
- 5.2.6. Strategy documents do not have to use the policy and SOP template. However, at the early-to-final draft stages of a strategy, it might prove useful to use the said template (for example, for document control purposes and for when citing paragraph numbers at meetings).
- 5.2.7. It is acknowledged that each policy or SOP will have its own specific requirements, and therefore there is scope to add any other elements as deemed necessary.

5.3. Policy and SOP template

- 5.3.1. A Microsoft Word template for all policies and SOPs is available in Appendix C: Policy and SOP template (p. 27) and at [this intranet link](#).

6. Further information

6.1. Contacts

- 6.1.1. Further information and guidance may be obtained from Nancy El-Farargy (Planning and Corporate Governance): Nancy.El-Farargy@nhs.scot.
- 6.1.2. For further information on information governance, contact the Freedom of Information and Data Protection Team: FOIDP@nes.scot.nhs.uk.
- 6.1.3. For further information on board governance, governance and assurance sequencing, contact Della Thomas (Board Secretary and Corporate Governance Principal Lead): Della.Thomas@nhs.scot.
- 6.1.4. For further information on equality and diversity, contact the Equality Team: NES.EqualityTeam@nhs.scot.

7. Bibliography

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NHS Scotland (no date) 'Staff Governance Standard'. Available at: <https://www.staffgovernance.scot.nhs.uk/what-is-staff-governance/staff-governance-standard/> (Accessed: 21 September 2023).

Scottish Government (2021) 'The Fairer Scotland Duty: Guidance for Public Bodies'. Edinburgh: Scottish Government. Available at: <https://www.gov.scot/publications/fairer-scotland-duty-guidance-public-bodies/documents/> (Accessed: 10 August 2023).

Scottish Government (2022) 'The Blueprint for Good Governance in NHS Scotland'. Scottish Government. Available at: <https://www.gov.scot/publications/blueprint-good-governance-nhs-scotland-second-edition/documents/> (Accessed: 04 August 2023).

8. Appendices

- 8.1. Appendix A: Authorisation routes for controlled documents, p. 24.
- 8.2. Appendix B: NES Standing Board Committees, p. 25.
- 8.3. Appendix C: Policy and SOP template, p. 27.
- 8.4. Appendix D: Controlled document initiation and development plan, p. 33.
- 8.5. Appendix E: Controlled document implementation plan, p. 34.
- 8.6. Appendix F: Approval/governing groups for policies, p. 35.
- 8.7. Appendix G: Controlled document register, p. 36.

8.1. Appendix A: Authorisation routes for controlled documents

Table 5: Authorisation routes for controlled documents.

Advisory/ authorising group	Strategy	Policy	SOP
Senior Operational Leadership Group (SOLG)	Review and comment.	Review and comment.	Review. Comment in cases of strategic corporate relevance (otherwise this will be taken forward at the operational directorate level).
Strategic Implementation Group (SIG)	Review and comment.	Review and comment.	Approval in cases of strategic corporate relevance (otherwise this will be taken forward at the operational directorate level).
Executive Team (ET)	Approval for onward governance to a Standing Board Committee, Board Development Session, and prior to formal final approval by the NES Board.	Approval for onward governance to a Standing Board Committee.	Approval in cases of strategic corporate relevance (otherwise this will be taken forward at the operational directorate level).
Partnership Forum (PF)	Review and comment, if there is major staff interest.	Approval – for those relating to staff – for onward sequencing to the Staff Governance Committee for final approval or noting.	Not applicable.
Standing Board Committee	Review and approval for onward sequencing to NES Board.	Approval or noting.	Not applicable.
NES Board	Final approval.	Not applicable. For strategic policies, this may be for noting or approval, by exception.	Not applicable.

8.2. Appendix B: NES Standing Board Committees

Table 6: Roles of the Standing Board Committees.

Standing Board Committee	Role ¹⁰
Audit and Risk Committee	<p>The committee is to:</p> <ul style="list-style-type: none"> • Independently support the Accountable Officer and the NES Board by reviewing the comprehensiveness and reliability of assurances provided in relation to: <ul style="list-style-type: none"> ○ Governance. ○ Risk management. ○ The control environment. ○ The integrity of the Annual Report and Accounts, finance, procurement, and property and facilities.
Education and Quality Committee	<p>The committee is to:</p> <ul style="list-style-type: none"> • Provide assurance to the NES Board that effective arrangements are in place to plan, commission, deliver and quality manage all of NES's education and training provision in line with the organisation's strategic plan. • Advise the NES Board, where appropriate, on where, and how, its education systems and assurance frameworks may be strengthened and developed further. • Provide assurance to the NES Board that effective arrangements are in place for the educational and quality governance of the NHS Scotland Academy accelerated education and training activities.
Remuneration Committee	<p>The committee is to:</p> <ul style="list-style-type: none"> • Provide assurance to the NES Board, through the Staff Governance Committee, that appropriate arrangements are in place to ensure that the Board meets the statutory requirements laid out in the Staff Governance Standard – in respect of the remuneration of individual Executive Directors and Directors (and any other staff employed under Executive Managers' or Consultants' pay arrangements). • Review submissions from the Chief Executive for any settlement agreements.

¹⁰ The [NES Committee Terms of References](#) are routinely reviewed.

(Cont. Table 6)

Staff Governance Committee	<p>The committee is to:</p> <ul style="list-style-type: none"> • Support and maintain a culture within the health system where the delivery of the highest possible standard of staff management is understood to be the responsibility of everyone working within the system and is built upon partnership and collaboration. • Ensure that robust arrangements to implement the Staff Governance Standard are in place and monitored. <p>The committee may also have a role in:</p> <ul style="list-style-type: none"> • Seeking assurance in relation to staff health, well-being and welfare, as a result of work commissioned directly by Scottish Government, or any other aspect of NES business approved formally through the Annual Delivery Plan.
Technology and Information Committee	<p>The committee is to:</p> <ul style="list-style-type: none"> • Provide oversight, scrutiny and assurance of the 'People, Partnerships and Performance' aspects of the NES Strategy 2023-2026 that relate to digital and innovation work, and areas of the Scottish Government's Digital Health and Care Strategy (refreshed in October 2021) on which NES leads.

8.3. Appendix C: Policy and SOP template



NHS Education for Scotland (NES) [Title of Policy or SOP]

[Month, year]

Version:

[Title of Policy or SOP] document control

Table x: Document identification.

Name of document	[Title]
Document status	[Draft/final]
Document type	[Policy/SOP]
Version number	
Author	
Lead director	
Associated documents	[EQIA, Fairer Scotland Duty assessment, Controlled document initiation and development plan, Implementation Plan, etc]
Authorising body (ratification by)	
Approved date	
Date effective from	
Document location	
Review frequency	
Date of next review	

Table x: Revision and consultation history.

Date	Version	Author	Comments

Table x: Approval groups and authorisation (ratification body) history.

Date	Version	Author	Comments

Table x: Publication and dissemination history.

Date	Version	Author	Comments

Contents

1. Introduction	X
1.1. Rationale and purpose	X
1.2. Aim	X
1.3. Scope	X
2. Chapter two heading	X
2.1. Chapter two sub-heading (1).....	X
2.2. Chapter two sub-heading (2).....	X
2.3. Chapter two sub-heading (3).....	X
3. Chapter three heading	X
3.1. Chapter three sub-heading (1)	X
3.2. Chapter three sub-heading (2)	X
3.3. Chapter three sub-heading (3)	X
4. Bibliography	X
5. Appendices	X
5.1. Appendix A: sub-title	X

1. Introduction

1.1. Rationale and purpose

- 1.1.1. Compulsory – rationale and purpose.
- 1.1.2. Compulsory – risk/mitigation/compliance statement.
- 1.1.3. Paragraph text.

1.2. Aim

- 1.2.1. Compulsory – aim.
- 1.2.2. Paragraph text.
- 1.2.3. Paragraph text.

1.3. Scope

- 1.3.1. Compulsory – scope.
- 1.3.2. Paragraph text.
- 1.3.3. Paragraph text.

2. Chapter two heading

2.1. Chapter two sub-heading (1)

- 2.1.1. Paragraph text.
- 2.1.2. Paragraph text.
- 2.1.3. Paragraph text.

2.2. Chapter two sub-heading (2)

- 2.2.1. Paragraph text.
- 2.2.2. Paragraph text.
- 2.2.3. Paragraph text.

2.3. Chapter two sub-heading (3)

- 2.3.1. Paragraph text.
 - 2.3.2. Paragraph text.
 - 2.3.3. Paragraph text.
-

3. Chapter three heading

3.1. Chapter three sub-heading (1)

3.1.1. Paragraph text.

3.1.2. Paragraph text.

3.1.3. Paragraph text.

3.2. Chapter three sub-heading (2)

3.2.1. Paragraph text.

3.2.2. Paragraph text.

3.2.3. Paragraph text.

3.3. Chapter three sub-heading (3)

3.3.1. Paragraph text.

3.3.2. Paragraph text.

3.3.3. Paragraph text.

4. Bibliography

Author (date) 'Title of book / journal article'. Place of publication: Publisher. Available at:
http://weblink_here/ (Accessed: XX Month Year).

Author (date) 'Title of book / journal article'. Place of publication: Publisher. Available at:
http://weblink_here/ (Accessed: XX Month Year).

5. Appendices

5.1. Appendix x: sub-title

[Title of document]
[Month, year of publication]

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Please contact us on 0131 656 3200 or email altformats@nes.scot.nhs.uk to discuss how we can best meet your requirements.



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8.4. Appendix D: Controlled document initiation and development plan

Table 7: Initiation and development plan template (and at [this intranet link](#)).

Document title	
Document type	[Strategy/Policy/SOP]
Document justification	
Directorate	
Lead director	
Document sponsor (if different from the lead director)	
Document author	
Working group members	
Consultation groups	
Equality Impact Assessment (EQIA)	
Fairer Scotland Duty assessment (where applicable)	
Risk assessment (if the document is not implemented, what would be the risks?)	
Any climate emergency and sustainability implications	
Any finance implications	
Any tests of the (draft) controlled document	
Governing sequence: approval groups and ratification body (management and/or executive meetings, Standing Board Committees, and NES Board)	
Comments	

8.5. Appendix E: Controlled document implementation plan¹¹

Controlled document title:

Date last updated:

Table 8: Controlled document development plan and record (optional).

Item	Actions	Responsibility	Target completion date	BRAG ¹²	Status
1.	Development of document				
2.	Initial consultation				
3.	Tests				
4.	Governance and approval				

Table 9: Controlled document implementation plan template.

Item	Actions	Responsibility	Target completion date	BRAG	Status and comments
1.	Document registration – central register				
2.	Administrative and system changes, including document location				
3.	Document communications				
4.	Controlled document education and training				
5.	Monitoring and review				

¹¹ This template is also available on the [intranet](#).

¹² BRAG: Blue is action complete; Red is not on track with major issues; Amber is action mainly on track with minor issues; and Green is action on track.

8.6. Appendix F: Approval/governing groups for policies¹³

Table 10: Partnership Forum (PF) policies.

Item	Policy title	Status	Comments
1...			

Table 11: Audit and Risk Committee (ARC) policies.

Item	Policy title	Status	Comments
1...			

Table 12: Education and Quality Committee (EQC) policies.

Item	Policy title	Status	Comments
1...			

Table 13: Remuneration Committee (RC) policies.

Item	Policy title	Status	Comments
1...			

Table 14: Staff Governance Committee (SGC) policies.

Item	Policy title	Status	Comments
1...			

Table 15: Technology and Information Committee (TIC) policies.

Item	Policy title	Status	Comments
1...			

¹³ The master (live) tables are available at this [link](#).

8.7. Appendix G: Controlled document register

**Controlled document register
NHS Education for Scotland (NES)**

Table 16: Controlled document register¹⁴.

Item	Area/ discipline	Document title	Description	Author	Lead director	Status	Review cycle	Governance approval	Date approved	Version number	Last reviewed date	Next review date	Link/ location	Comments

¹⁴ The master (live) registers are available at this [link](#).

NES Policy for the development, approval and management of strategies, policies and Standard Operating Procedures
January 2024

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1. About this guidance

This guidance document accompanies the NHS Education for Scotland (NES) Policy for the development, approval and management of strategies, policies and Standard Operating Procedures (SOPs). It aims to support implementation and compliance with the policy.

2. Identify the type of document to be developed

In NES, strategies, policies and SOPs are controlled documents.

- **Strategy:** The organisation’s long-term general direction to achieve a desired future state.
- **Policy:** A set of rules or standards (and the like) which outlines what must be followed regarding a particular situation or set of circumstances.
- **SOP:** Step-by-step operational instructions that must be followed to reach a desired outcome. A SOP is only required for NES-wide functions or directorate functions that affect the rest of NES.

Other documents (such as desktop instructions, local SOPs or protocols, etc) which are used at team or directorate levels only, do not have the same levels of governance as controlled documents.

3. The controlled document initiation and development plan

An [initiation and development plan](#) must be completed for all controlled documents. As per the plan, the governing sequence of the approval and authorising groups should be identified.

In summary, after the relevant approval groups, the final authorisation (ratification) body for each type of controlled document is:

- **Strategy:** The NES Board.
- **Policy:** A Standing Board Committee.
- **SOP:** The Strategic Implementation Group (SIG) or the Executive Team (ET).

If the controlled document relates to major staff interests, then the Partnership Forum (PF) must be included within the governing sequence.

- **Strategy:** PF reviews and comments.
- **Policy:** PF approves for onward sequencing to the Staff Governance Committee. Where relevant, other policies may be shared via correspondence.

The full policy presents the governing sequence in detail (see policy appendices A and B).

Please liaise with the Board Secretary/Principal Lead Corporate Governance to ensure that the controlled document can be sequenced through existing meeting timetables.

4. Developing the Policy and the SOP

All policies and SOPs must be developed using the [approved template](#).

5. Tests of the controlled document

As noted on the [initiation and development plan](#), it is important to pilot/test the implementation of a controlled document, where appropriate. For example, if a policy or SOP presents a new form or template, etc, then a test would include the relevant audience trying out the new form or template.

6. Implementation, monitoring and review

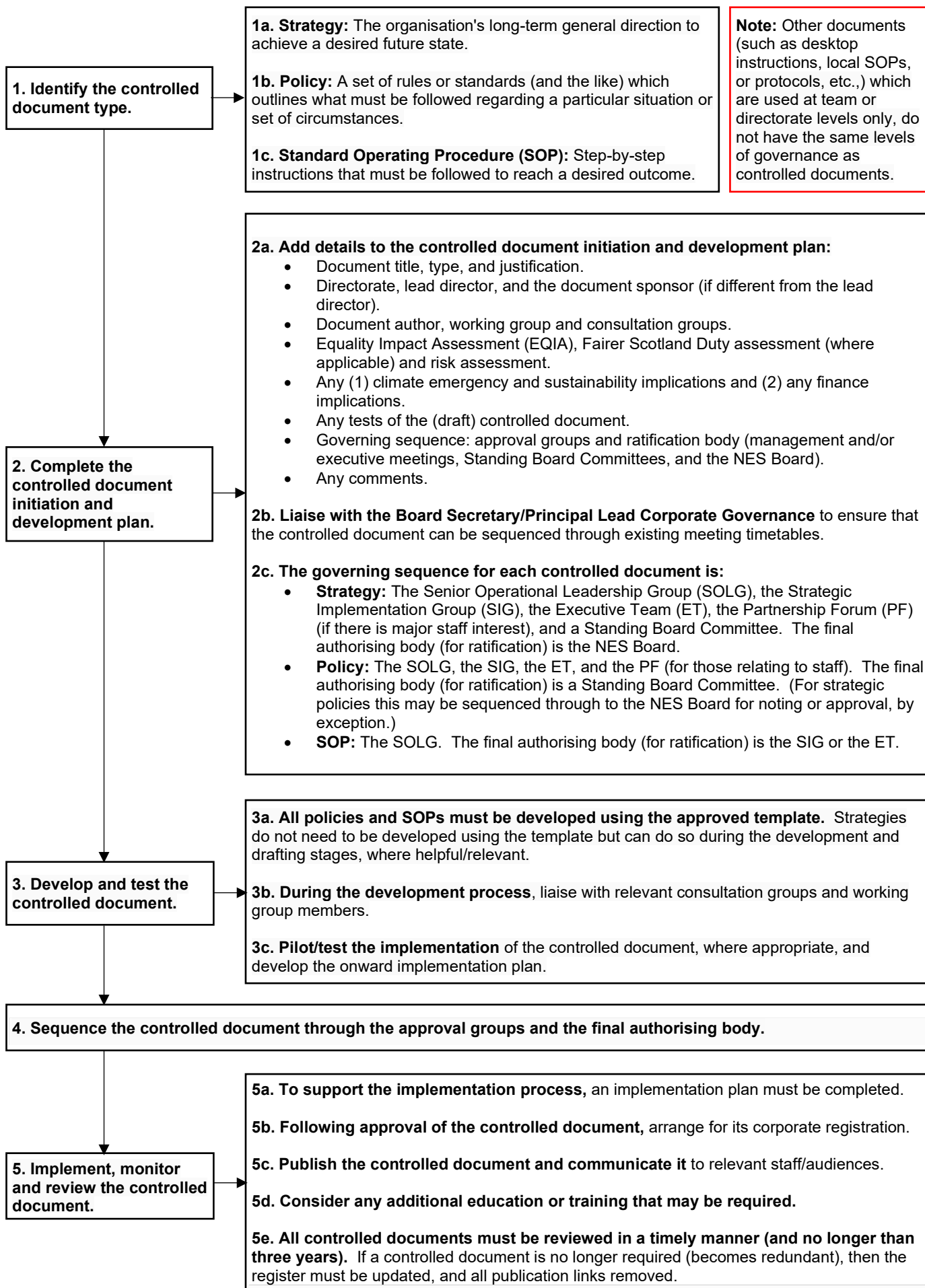
Following approval, the controlled document must be registered (corporately), published and communicated to relevant staff. Any additional training must also be considered. To support this process, an [implementation plan](#) must be completed.

All controlled documents must be reviewed in a timely manner (and no longer than three years). If a controlled document is no longer required (becomes redundant), then the register must be updated, and all publication links removed.

7. Further information

For further information, please see the full NES Policy for controlled documents.

8. Summary flowchart



Appendix D: Controlled document initiation and development plan

Table 1: Initiation and development plan template.

Last updated: 26 January 2024

Document title	NHS Education for Scotland (NES) Policy for the development and approval of strategies, policies and Standard Operating Procedures (NES Policy for controlled documents).
Document type	Policy
Document justification	<p>Further to the Information Commissioner's Office (ICO) audit (via the Information Governance Team), it was recommended that policies and procedures are approved by senior management and subject to routine review to ensure that they remain fit for purpose.</p> <p>This was identified from the fact there was no overarching policy on policies, where the requirements for the renewal, approval and ratification of policies are formally documented. NES was therefore asked to consider creating a document that outlines the universal standards for policies to follow and to ensure that the process of reviewing, approval and ratification is clear.</p> <p>This issue was raised by Tracey Gill (Information Governance) and shared with Della Thomas (Board Secretary). Subsequently, discussion took place with Christina Bichan (Director of Planning and Performance).</p> <p>As the work progressed, the policy was extended to all controlled documents; namely strategies, policies and Standard Operating Procedures (SOPs).</p>
Directorate	Planning and Corporate Resources.
Lead director	Christina Bichan, Director of Planning and Performance.
Document sponsor (if different from the lead director)	
Document author	Nancy El-Farargy, Planning and Corporate Governance.
Working group members	Alexander Murray, Christina Bichan, Della Thomas,

	Lynnette Grieve, Monica Halcro, Nancy El-Farargy, Rob Coward, Ryan Reed, Tracey Gill.
Consultation groups	<ul style="list-style-type: none"> • Working/development group. • Sequencing through the governing approval group meetings and through to the NES Board for ratification. • Senior Operational Leadership Group (SOLG) (14 November 2023). • Strategic Implementation Group (SIG) (12 December 2023) (as delegated by the Executive Team). • Partnership Forum (PF) (12 January 2024). • Audit and Risk Committee (ARC) (18 January 2024) • NES Board (08 February 2024).
Equality Impact Assessment (EQIA)	Assessing against the public sector equality duty.
Fairer Scotland Duty assessment (where applicable)	Assessing for socio-economic disadvantage.
Risk assessment (if the document is not implemented, what would be the risks?)	<ul style="list-style-type: none"> • Audit requirement to meet governance and legislative commitments (otherwise risk of not meeting requirements). • Ensuring a standardised approach to the development of all controlled documents (otherwise risk of variation). • Ensuring a standardised approach to the governing sequence and approval routes of all controlled documents (otherwise risk of variation, lack of governance and inadvertent oversight). • Guidance noted for review cycles/dates (otherwise risk of variation, lack of governance and inadvertent oversight). • Overall corporate overview of the work (otherwise risk of variation, lack of governance and inadvertent oversight). • Centralised access for all controlled documents (otherwise risk of non-compliance). <p>Mitigation: development, approval and implementation of the NES Policy for controlled documents.</p>
Any climate emergency and sustainability implications	<ul style="list-style-type: none"> • Reduced use of paper? • Yet to be identified.

Any finance implications	<ul style="list-style-type: none"> • More efficient use of staff resources and time? • Yet to be identified.
Any tests of the (draft) controlled document	Various teams across NES – currently from working group colleagues.
Governing sequence: approval groups and ratification body (management and/or executive meetings, Standing Board Committees, and NES Board)	Discussion with Board Secretary (and noted on 20231103 Governing sequence and approval groups.docx). SOLG (14 November 2023), SIG (12 December 2023), ET (delegated to SIG), PF (12 January 2024), ARC (18 January 2024) and the NES Board (08 February 2024).
Comments	

NE
NES
31 October 2023

NHS Education for Scotland

EDUCATION & QUALITY COMMITTEE

Approved minutes of the twelfth meeting of the Educational & Quality Committee (EQC) (which is the fifty-first meeting of the Educational and Research Governance Committee) held on Thursday 14 September 2023 as a hybrid meeting, in person at the Westport Office, Edinburgh and via Microsoft Teams

Present: Annie Gunner Logan, Non-Executive Director (Chair)
Olga Clayton, Non-Executive Director
Nigel Henderson, Non-Executive Director

In Attendance: Shona Cowan, Non-Executive Director (Observing)
Karen Wilson, Director of NMAHP, Deputy CEO and joint EQC Executive Lead
Emma Watson, Executive Medical Director and joint EQC Executive Lead
Kevin Kelman, Director of Innovation, Learning and the NHS Scotland Academy (for items 1-8)
Rob Coward, Principal Educator/Executive Secretary
Janice Gibson, Associate Director, Organisational Development Leadership and Learning (ODLL) (For Items 1-9)
Katy Hetherington, Equality, Diversity and Human Rights (For Item 11)
Della Thomas, Board Secretary and Principal Lead for Corporate Governance
Debbie Lewsley, Risk Manager (Observing as part of induction)
Ryan Reed, Head of Programme, NHS Scotland Academy, Learning and Innovation (Observing as part of induction)
David Taylor, Principal Lead, ODLL (Observing as part of personal development)
Nancy El-Faragy, Specialist Research Lead (Observing as part of personal development)
Chris Duffy, Senior Admin Officer/Committee Secretary

1. Welcome and introductions

- 1.1 The Committee Chair welcomed everyone to the meeting. She particularly welcomed Nigel Henderson and Olga Clayton who are two new Non-Executive Director members of this Committee, attending their first meeting as members. She also welcomed Shona Cowan, who is also a new Non-Executive Director, observing the meeting and will become a formal member of the Committee from 1st October 2023. The Committee Chair went on to welcome everyone else observing the meeting.
- 1.2 The Committee Chair requested a change to the order of the agenda to allow Kevin Kelman to attend an urgent meeting later this morning. The

Committee agreed to that the NHS Scotland Academy, Learning and Innovation Directorate Update would be taken immediately after the Executive Lead Report and then the agenda would continue as originally planned.

2. Apologies for absence

- 2.1 Apologies were received from regular attendees, David Garbutt, Board Chair, Karen Reid, Chief Executive 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. However, Nigel Henderson noted a declaration of connection as he is Chair of Institute for Research and Innovation in Social Services (IRISS) and IRISS is mentioned in the Executive Lead report.

5. Draft Minutes of the meeting held on 11th May 2023

- 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 2 completed actions with 1 action in progress and 1 action recommended for closure.
- 6.2 The Committee were content with the completed actions and approved that the action relating to a digital roadmap could be closed.

The Committee Chair invited Emma Watson to give an update on the in-progress action relating to an Annual Deanery Quality Report. Emma Watson reported that in previous years the Committee have received a report of activity, this year the report is not being prepared. She advised that instead the newly formed Medical Quality and Safety Group will look at all issues that pertain to Quality. Emma Watson and Karen Wilson advised that they will work together to determine the best way to report the work of this Group into the December EQC meeting. It was proposed that this could potentially be done by a Chairs report from the Group. The Committee were content with this progress update.

- 6.3 The Committee approved the action report.

7. Education & Quality Executive Lead Report

- 7.1 The Committee Chair invited Karen Wilson and Emma Watson to introduce the report.

Karen Wilson remarked that it had been a busy period since the last meeting of the EQC in May. She thanked Rob Coward for his help in the

preparation of this report. Emma Watson did not have anything further to add by way of introduction.

The Committee Chair opened the report for comments and questions.

7.2 The Committee asked for some more background and explanation on what credentialing is. Emma Watson explained that credentialing creates post graduate medical training pathways for autonomous practice. She highlighted that it is designed to make practice safer and nimbler. Emma Watson reported that Trainees work through the Royal Colleges curricula approved by the General Medical Council (GMC) and are then certified. She advised that this has been a significant move following the “Shape of Training Review” in 2012 and aims to be a quick and responsive way to address patient safety needs. Emma Watson remarked that although it is excellent that the credential in Rural and Remote Health (Unscheduled and Urgent Care) has been established the timescale was 7 years and so Medical Directors have provided feedback to the GMC to advise that this didn’t address the requirement.

7.3 The Committee highlighted section 5.4.1.2 of the report on “Get the guidance in your pocket: Preventing infection in Social Care settings” and asked how many of our products are we making mobile friendly. The Committee went on to ask if there is a way of measuring how much the resource has been used and what we are considering to be a good level of uptake?

Karen Wilson responded, to confirm that NES are developing more bitesize education resources. She remarked that we do receive measurement data. Karen Wilson confirmed that this resource is available as an App, and it is being showcased at the next Board Development meeting on 26 October 2023. She asked if the detailed responses to the questions could be picked up through the Board Development meeting. The Committee agreed this would be helpful.

Action: Karen Wilson

7.4 In relation to 5.4.1.5 “Augmentative and Alternative Communication learning”, the Committee asked how these are being promoted. Karen Wilson responded, to confirm that a digital prospectus is being created and the TURAS refresh will help promote our products further. Kevin Kelman added that collaborative partnerships will be enhanced as part of the new Learning and Education Strategy. Kevin Kelman went on to report that Education Scotland is a key partner and work is ongoing to make NES resources available more broadly in schools, nurseries and universities.

7.5 The Committee referenced the Enhanced Monitoring update and noted that 2 sites have been on Enhanced Monitoring since 2016. The Committee asked if this is a concern to NES. Emma Watson reported that the Quality team have been working hard over the past year in supporting Boards to get off Enhanced Monitoring using a new SMART objective approach. The number of sites on Enhanced Monitoring in the last year has reduced from 13 to 6. The Committee Chair remarked that members of the Committee

may wish to join an Enhanced Monitoring visit as this provides a good opportunity to further understand the process.

7.6 The Committee noted the update on Clinical Physiology training and asked if this meant that the programme may not go ahead. Karen Wilson confirmed that the programme is going ahead with the lower numbers. She advised that the programme may not continue if the numbers remain low. Karen Wilson offered to look into this further after the meeting and provide any additional update. **Action: Karen Wilson**

7.7 The Committee asked what the implications are for the deferral of the Credit Rating application. Karen Wilson advised that NES pursuing Credit Rating status is one of the Transformation Programmes. She reported that the original timeline was unrealistic as it has since been recognised that a lot of background work on developing policies and procedures was required before an application could be submitted.

7.8 The Committee asked if the Knowledge Services is a repository. Karen Wilson explained that it is an electronic library service which NES administers for the whole of the NHS.

7.9 The Committee noted the Lead Executive Report and confirmed that it provided satisfactory assurance. The Committee Chair thanked all those who had contributed to it.

8. NHS Scotland Academy, Learning and Innovation Directorate Update

8.1 The Committee Chair invited Kevin Kelman to provide his update.

Kevin Kelman delivered a PowerPoint presentation that provided an update of the formation of the recently established NHS Scotland, Learning and Innovation Directorate in NES.

8.2 Kevin Kelman presented the five pillars which sit within the Directorate, NHS Scotland Academy; NHS Scotland Youth Academy; Innovation and Workforce Diversification; Learning Strategy and Collaboration and TURAS Refresh. He also detailed the workstreams that sit within these five pillars.

8.3 The Committee asked if NES pay the Scottish living wage to apprentices. Kevin Kelman reported that in NHS Scotland nobody can be paid lower than the Band 2 wage which equates to the living wage. Janice Gibson added that the 4 graduate apprenticeships starting with NES are aligned to Bands 4 and 5.

8.4 The Committee discussed NES' commitment to listening to people with "lived experience" and asked how we are connecting with people this experience. Kevin Kelman confirmed the meetings to date have been with professionals, due to this being at very early stages. He advised that engaging with people with lived experience had formed part of these conversations and that it is very much in the teams focus going forward.

8.5 The Committee noted that there is a large amount of work and change ongoing and asked if it is all achievable? Kevin Kelman reported that this work is routed through the Transformation Group to check that it is achievable and resourced correctly. He remarked that any gaps identified are then brought to the attention of the Executive Team for discussion for additional resource to ensure progress is made. Karen Wilson added that the amount of work is challenging, but assured members that all of this work is currently underway. She advised that in the past work has been reported in a number of different ways and now using a once for NES approach is helping streamline things. Karen Wilson gave the example that all directorates are coming together to work on how to assure quality environments so NES are doing this once and will ultimately be more efficient.

The Committee remarked that they were pleased to see this example of cross-directorate working.

8.6 The Committee asked for more information on NES' strategic approach with Universities and Colleges and what the advantages of this work will be? Karen Wilson reported that we are being very clear that this is not about competing with these organisations. She advised that instead it is about discussing mutual achievable benefits. She remarked that there is a focus on innovation, and this needs to be done collaboratively as we can't do this alone.

8.7 The Committee asked for further detail on workforce diversification. Karen Wilson advised that one of the issues in healthcare is that no matter how many people are trained, there will still be gaps. She reported that a way to address this is through workforce diversification. She reported that an example is the introduction of Medical Associate Professionals, bringing completely new graduates into the profession. Karen Wilson remarked that there is also a focus on enhancing roles, for example maximising the contribution of Band 4 Healthcare support workers roles.

8.8 The Committee Chair thanked Kevin Kelman for his update. The Committee noted the update and confirmed that it provided the necessary assurance.

Kevin Kelman left the meeting.

9. Organisational Development Leadership and Learning Annual Report

9.1 The Committee Chair invited Janice Gibson to introduce the report.

Janice Gibson outlined that the report sets out the activity, progress and impact achieved between September 2022 to August 2023 across the leadership development programmes offered to external audiences.

The Committee Chair opened the meeting to questions.

9.2 The Committee noted that there were only 8 places funded on the Management Training Scheme (MTS) and remarked that this appeared rather a low number and asked if this was NHS and Health and Social Care Partnerships. Janice Gibson reported that MTS is moving towards a region-based approach and NHS Boards have been encouraged to invest more funding into this scheme to increase places. She advised that a full review of MTS has been conducted and a report is available. It was agreed that the report would be circulated to members after the meeting.

Action: Janice Gibson/Chris Duffy

9.3 The Committee noted the NEW Horizons programme and asked if there was any overlap with MTS? Janice Gibson reported that this programme is for those early in their leadership career. She remarked that it is a popular programme and there is funding to expand the programme. Janice Gibson advised that places can be reserved for MTS trainees. She reported that this course has a high demand with 160 applicants for 16 places.

9.4 The Committee referenced the GP (General Practitioner) coaching programme and asked how the numbers accessing it and the feedback offered met expectations for reach and expectation. Emma Watson replied that the feedback should be considered a huge success. She remarked that the programme is delivering coaching to more GPs on smaller budget.

Committee members noted that the programme was good value for money, showed good return on investment and impact on service improvement. Committee members suggested the programme be expanded. Emma Watson agreed with Committee members but the budgetary position in relation to GP coaching is clear and there will be no further investment.

9.5 The Committee made some general points on the report in relation to content and formatting. The Committee asked if future versions of the report, could include more context in relation to the number of hits on a website or the reach of social media explaining anticipated targets and if the reported targets are successful and who each Programme is aimed at NHS and / or Social Care staff. Janice Gibson agreed to take these points into account for future versions of the report.

Action: Janice Gibson

9.6 The Committee confirmed this report provided assurance and noted the progress and impact of the leadership programmes. The Committee Chair thanked Janice Gibson and her team for the report. Janice Gibson then left the meeting.

10. Feedback, Comments, Concerns and Complaints Annual Report 2022-23

10.1 The Committee Chair invited Rob Coward to introduce the report.

Rob Coward reported that feedback, comments, concerns and complaints are considered by the Scottish Government as an important performance indicator, and a mechanism for driving continuous improvement. He

remarked that this is reflected in the requirement for all NHS Boards to publish an annual Feedback, Comments, Concerns and Complaints (FCCC) report as specified by the 2017 Patient Rights (Feedback, Comments, Concerns and Complaints (Scotland)) Directions and national complaints guidance. Rob Coward advised that this states that relevant NHS bodies should prepare an annual report a summarising action taken as a result of feedback, comments and concerns received. NHS Boards are also required to provide an annual return to NHS National Services Scotland (NSS) confirming complaints figures which are included the NHS Complaints Statistics publication.

The Committee Chair opened to the Committee for questions.

- 10.2 The Committee noted that there wasn't currently a way of collating all positive comments into a manageable dashboard, and that feedback mechanisms were all different. The committee asked if there will be a once for NES approach to this? Rob Coward confirmed that this is on the horizon and as part of the learning and education strategy work there will be a focus on co-production and engagement. He advised that future reports will look different due to this piece of work. Karen Wilson added, feedback mechanisms will also be considered as part of ongoing work to measure and meet this Committee's delegated Strategic Key Performance Indicators.
- 10.3 The Committee asked a question on notifications of concern in the medical section of the report and asked why these were different to complaints/comments. Emma Watson explained, notifications of concern are raised with the GMC and then come to NES via the National Training Survey.
- 10.4 The Committee suggested some small improvements for future versions of the report. Firstly, categorising the information by directorate or transparency for where the comment/complaint relates to. The Committee remarked on the positive feedback case studies and asked if there was also learning from any negative feedback we have received. Rob Coward agreed to consider these improvements in the next Annual report.
- Action: Rob Coward**
- 10.5 The Committee approved the report for onward progress to the NES Public Board on 28th September 2023.

The Committee Chair thanked Rob Coward for the report.

11. NES Research Report

- 11.1 The Committee Chair invited Rob Coward to introduce this report.

Rob Coward advised the report has been designed to provide assurance that NES research is complying with UK-wide health and social care principles of good research practice. Also, that research is completed in a reasonable timescale and is generating outcomes and impacts that are making a difference to NES and health and social care in Scotland. Rob

Coward also referred to the development of a NES Research strategy, this will be an opportunity to reflect on how NES govern their research activities.

The Committee Chair opened for questions.

- 11.2 The Committee asked if the development of a NES Research strategy will impact on the style and content of this report? Rob Coward reported that it will potentially change, there will be a focus on evidencing more impact. He remarked that also, NES could review which areas across the health and social care sector resources are invested. Karen Wilson added, the development of a Research strategy is part of the strategic intent role of the Board. The delegated remit of research is to this Committee, so there will be some work on how best to report to this Committee. It is expected there will be more pedagogical research.
- 11.3 The Committee asked if different directorates have different approaches and if that has evolved over time. Rob Coward confirmed in the absence of a Research strategy there is a lot of diversity, but all research must evidence the impact achieved. He remarked that a once for NES approach will be picked up in the development of a Research strategy.
- 11.4 The Committee approved the report and noted the development of a NES Research strategy. The Committee Chair thanked Rob Coward for the report.

12. **Mid-year Equality and Diversity Report 2023-24**

- 12.1 The Committee Chair welcomed Katy Hetherington to the meeting and to introduce this report.

Katy Hetherington advised this report includes progress on NES's Equality Outcomes as well as other activities to progress equality, diversity and inclusion from across the organisation which are relevant to Education and Quality Committee business. The report also provides the Committee with an update on recent equality, diversity and human rights policy and legislative developments for the Committee to note.

- 12.2 The Committee were pleased with the quality of the report and noted the work underway to review NES's Equality Outcomes to ensure alignment with NES's Strategy. The Committee noted the progress on Equality Outcomes and activity in the organisation since the Committee's update in February 2023 and our published 2-year progress report. The Committee agreed that any revisions to Equality Outcomes to align with NES Strategy will be circulated for the approval of the Committee by correspondence prior to the Board meeting in November 2023. The Committee also noted recent policy and legislative developments in this area. The Committee Chair thanked Katy Hetherington for the report. Katy Hetherington then left the meeting.

Action: Katy Hetherington / Chris Duffy

13. **EQC Strategic Key Performance Indicators (SKPIs)**

- 13.1 The Committee Chair invited Karen Wilson to introduce this report which lists the delegated SKPIs for the Education and Quality Committee. Karen Wilson reported work is ongoing to establish data baselines for a number of these SKPIs. Although work is allocated to different directors the Committee can be assured that Directors are working together on this and SKPIs don't sit discreetly with single directors.
- 13.2 The Committee asked about the progress being made with the development of Committee Assurance Frameworks and what the timeline was for this work. Della Thomas reported that an illustrative example of a Committee Assurance Framework was being prepared with the Technology and Information Committee. She advised that the intention was to roll out the development of Committee Assurance Frameworks across the other Committees in a phased way and a timeline had not yet been prepared for this. Della Thomas advised that the Audit and Risk Committee had asked for an update on the Board and the Committee Assurance Frameworks to their 5 October 2023 meeting. She remarked that all Committees will start to receive delegated SKPI reports and also delegated strategic risk reports to each of their 4 Committee meetings. Della Thomas advised that the EQC Terms of Reference (ToRs) are scheduled for the next meeting on 7th December. She highlighted that this will provide the Committee with an opportunity to review the existing ToRs against the delegated SKPIs.
- 13.3 The Committee noted the SKPI report and the ongoing developmental work to provide more data and assurance. The Committee Chair thanked Karen Wilson for the report.

14. Identification of any key risks emerging from this meeting

- 14.1 The Committee identified no new risks emerging from the meeting.

15. Internal Audit – Workforce Analysis

- 15.1 The internal audit report on workforce analysis was noted.

16. Consultations Log and Parliamentary business update

- 16.1 The consultations log was noted.

17. Scottish Government and NES Educational policies

- 17.1 There is no policy to report at this meeting.

18. NHS Scotland Academy Joint Strategic Programme Board Annual Report

- 18.1 The Committee homologated the Annual Report.

19. Committee Effectiveness

- 19.1 The Committee Chair invited the EQC to review Committee effectiveness and reviewed the effectiveness questions. They considered if the reports to the Committee communicated relevant information at the right frequency, time, and in a format that was effective. The Committee agreed that papers assisted governance and scrutiny. The Committee noted the new membership and asked if the scrutiny questions

being asked were at the right level. Karen Wilson and Emma Watson reflected that the questions had been interesting, stimulating and very useful. Della Thomas remarked that it is helpful to have new views within the Committee and many of the questions asked were clear and strategic in nature.

The Committee considered if they benefited from the right level of attendance from Lead Executive or Directors/Authors/Board Secretary/Others? The committee felt that the level of attendance was helpful, and it was good to see other members of staff accompanying lead Directors as appropriate and contributing to the meeting.

The Committee checked if there were any areas where the Committee could improve upon its current level of effectiveness? The Committee didn't highlight any other areas for improvement of effectiveness at this meeting.

20. Any other business

20.1 There was no other business to discuss.

21. Date and time of next meeting

20.1 The next meeting of the Education and Quality Committee will be held on Thursday 7 December 2023, 09:45 a.m. in hybrid format.

CD/DT
September 2023
V.03

Approved Minutes of the Fourteenth NES Audit and Risk Committee held on Thursday 05 October 2023 via Microsoft Teams.

Present: Jean Ford, (JF) Non-Executive Director and Committee Chair
Ally Boyle, (AB) Non-Executive Director
Olga Clayton, (OC) Non-Executive Director
Anne Currie, (AC) Non-Executive Director
Gillian Mawdsley, (GM) Non-Executive Director - Whistleblowing Champion (from item 10)

In attendance: Jenn Allison, (JA) Committee Secretary
Jim Boyle, (JB) Executive Director of Finance
David Garbutt, (DG) Chair of NES
Laura Howard, (LH) Head of Finance
Debbie Lewsley, (DL) Risk Manager
James Lucas, (JL) Internal Audit, KPMG
Kenny McLean, (KM) Procurement Manager (item 12)
Christopher McClelland, (CM) External Audit, Audit Scotland
Karen Reid, (KR) Chief Executive
Della Thomas, (DT) Board Secretary & Corporate Governance Principal Lead (until 11:00)

1. Welcome and introductions

1.1 The Chair welcomed everyone to the Audit and Risk Committee (ARC), particularly Laura Howard, who has recently taken up post of Deputy Director of Finance and Debbie Lewsley, who has recently taken up post as Risk Manager.

1.2 The Committee noted that Kenny McLean would be in attendance for the Procurement items (item 12).

2. Apologies for absence

2.1 Apologies were received from Helen Grant and Carol Russell, Audit Scotland, External Auditors and it was noted that Della Thomas and James Lucas would leave the meeting at 11:00 as they other meetings to attend.

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 There were no other business items identified.

5. Minutes of Audit and Risk Committee 15 June 2023 (NES/AR/23/51)

5.1 The minutes were approved as a correct record.

6. Actions of the Audit and Risk Committee (NES/AR/23/52)

6.1 The Committee noted that 7 of the 11 actions have been marked as complete or closed, the rest remain in progress.

7. Matters arising

7.1 There were no matters arising from the previous minutes.

8. Internal Audit Reports

a) Progress Report (NES/AR/23/53)

8.1 The Chair invited James Lucas to introduce the report.

8.2 James Lucas presented the report which updated the Committee on progress against delivery of the Internal Audit plan for 2023-24 and against the outstanding management actions.

8.3 The Committee noted that fieldwork for two internal audits: Core Financial Controls (CFC) Budget management and Additional Cost of Teaching (ACT) funding are currently in progress. They noted that two further internal audits: NES Technology Service (NTS) Services Strategic Planning and Complaints Handling process are at the planning stage.

8.4 James Lucas informed the Committee that good progress has been made on implementing outstanding management actions. There are 11 outstanding actions in total, 9 of which are not yet due and only two are overdue with revised dates.

8.5 The Committee requested that information on all outstanding actions be included in future reports to provide increased visibility overall on tracking. **Action: JL**

8.6 The Committee asked why due dates to actions relating to the Cloud Disaster Recovery audit had been extended. Karen Reid explained that this is due to reliance on involvement from 3rd parties. It was noted that a further update regarding progress of these actions will be submitted to the Technology and Information Committee at the 30 October 2023 meeting.

8.7 The Audit and Risk Committee were content that the report provided them with assurance. They were also content with the progress of the internal audit plan and progress in implementing outstanding recommendations.

9. External Audit Recommendation Follow up (NES/AR/23/54)

- 9.1 The Chair invited Laura Howard to present the paper to update the Committee on progress of External Audit Recommendations.
- 9.2 Laura Howard informed the Committee that the external audit report from the financial year 2022/23 included two brought forward recommendations. These were regarding provisions calculations and performance targets, and two new recommendations, regarding climate change and performance reporting.
- 9.3 The Committee noted that the recommendations regarding performance targets and performance reporting have both been concluded. The Committee noted that the recommendations regarding dilapidations provision and climate change are ongoing and on track to conclude within the timescale of March 2024.
- 9.4 Discussion took place regarding the climate change action. The Committee members asked that wording of the action is refined to distinguish between National targets and NES targets. **Action: LH**
- 9.5 The update provided the Committee with assurance that External Audit recommendations were being satisfactorily implemented and progressed.

10. Board Assurance Framework and Proposed Committee Assurance Frameworks: Update (NES/AR/23/55)

- 10.1 The Chair invited Della Thomas to introduce the paper to update the Committee on progress with the development of Committee Assurance frameworks and the revised Board Assurance Framework.
- 10.2 The Committee noted that an illustrative Committee Assurance Framework was tested with the Technology and Information Committee (TIC). Della Thomas advised that it might be prudent to pause any further developmental work on Committee Assurance Frameworks until the current strategic review of the NES Committees is undertaken.
- 10.3 The Committee noted that all NES Committees (including ARC) will receive delegated Strategic Key Performance Indicator (SKPI) reports and Strategic Risk reports to each meeting.
- 10.4 The Committee noted the minor changes to the NES Assurance Framework. A query was raised regarding whistleblowing responsibilities and Della Thomas confirmed that whistleblowing is delegated to the Staff Governance Committee with updates provided to the NES Board through the Chief Executive report and annual whistleblowing report.

10.5 The Committee noted that Climate Change is included under Strategic aspects because a Climate Change and Sustainability Strategy will be produced for NES in due course.

10.6 The Committee suggested that links with the delegated Committee SKPIs could be included to strengthen the Board Assurance Framework. The Committee also suggested that information regarding Board Development sessions could be included as appropriate. **Action: DT**

10.7 The Committee were content to approve the amendments to the current Board Assurance Framework for onward sequencing to the 23 November 2023 Board meeting.

10.8 The Committee approved the recommendation to pause work on Committee Assurance Frameworks until the strategic review of the NES Committees has been undertaken.

11. Review of ARC ToRs (NES/AR/23/56)

11.1 The Chair invited Della Thomas to introduce the updated draft Terms of Reference (ToRs) for annual approval.

11.2 Della Thomas highlighted that the approved ARC ToRs will come back to the ARC in January 2024 with the other NES Committee ToRs as part of the Corporate Governance package. She highlighted that this pack also includes the Board Standing Orders, the Standing Financial Instructions, the Board Scheme of Delegation and the Board Code of Conduct.

11.3 The Committee noted that some minor amendments have been made to ensure reference to the new NES Strategy, risk headings and SKPIs.

11.4 Discussion took place regarding Climate Change and Sustainability and whether or not further information is required regarding training and education. It was agreed that operational detail was not required to be included in the ToRs.

11.5 Discussion took place regarding the cover paper, and it was suggested it may be useful to include more guidance regarding Equality Impact Assessments. Della Thomas agreed to review cover papers to identify improvements.

Action: DT

11.6 The Committee asked that the Risk Section is reviewed to be generalised and less exhaustive. **Action: DT**

11.7 The Committee were content to approve the proposed changes to the ToRs as submitted noting that further amendments will be made as requested by the Committee before the Committee ToRs come back to the ARC January 2024 meeting.

12. Procurement

a) 2022/23 Half-Year Procurement Update

(NES/AR/23/57)

- 12.1 The Chair welcomed Kenny McLean to the meeting and invited him to update the Committee on Procurement activity in the first half of financial year 2022/23.
- 12.2 Kenny McLean informed the Committee that NES continue to pay suppliers within the target deadlines, with 91% of suppliers being paid within 10 days and that 16 contracts have been agreed so far this financial year.
- 12.3 The Committee noted that an electric vehicle salary sacrifice scheme has been launched, with 70 people having registered an interest, 5 orders delivered and a further 11 in process. Kenny McLean confirmed that this opportunity extends to all trainees under the Lead Employer programme in NES.
- 12.4 Kenny McLean informed the Committee that the contract for a new Doctorate in Clinical Psychology started last year with Glasgow and Edinburgh Universities, with 30 students enrolled in Edinburgh and 40 in Glasgow.
- 12.5 The Committee noted that the 1st tender in relation to the Turas Refresh programme, regarding the People component, is currently being assessed.
- 12.6 The Committee congratulated Kenny and the procurement team for the accumulative savings made so far, this financial year. The Committee noted they were pleased to read about the efforts to reach out to socially responsible companies.
- 12.7 A query was raised regarding the Executive Coaching programme and Kenny McLean confirmed that tendering companies are now required to have a minimum qualification requirement to Master Coach/Practitioner. It is expected that more tenders will be received for this programme in 2024, once suppliers have reached the level of qualifications required.
- 12.8 Discussion took place regarding Warp-It, which is a customisable online peer to peer redistribution network for organisations, which will allow furniture and other equipment no longer required to be re-purposed within the Community. A query was raised if NES may have medical equipment which could also be re-purposed as part of the Scottish Government (SG) Global Citizen scheme, who work with partners in Africa. Kenny McLean advised the Committee that NES does not have much of these sorts of equipment but will look into this. He added that further information regarding the progress of this

scheme will be reported to the ARC in future sustainability reports.

Action: KM

12.9 The Committee were content with the information in this report.

b) 2022/23 Annual Procurement Report

(NES/AR/23/58)

12.10 The Chair invited Kenny McLean to update the Committee on results of the 2022/23 Annual Report to SG.

12.11 Kenny McLean informed the Committee that they reviewed the detailed annual report at the June meeting and the report to SG only covered regulated procurements which are tenders above £50,000.

12.12 The Committee were content with the information in this report and approved the report for publication.

12.13 Kenny McLean left the meeting.

13. Risk update and Review of Risk Appetite

(NES/AR/23/59)

13.1 The Chair invited Jim Boyle to introduce the paper and highlight any areas of significance, for assurance and to present the current risk appetite for review.

13.2 The Committee noted the 14 strategic risks which have been recently reviewed. Revisions have been made to some net scores and additional actions have also been added. The Committee requested the following revisions:

- Further refine current governance arrangements against risk 14 to include information regarding annual Board and Committee governance reviews.
- Enquire if there was a requirement from SG to add a specific risk in relation to sustainability.
- Correct error to risks that have 'out-with the appetite' marked as red, instead of green.
- Ensure due dates are included in every action.
- Add technological change to risk 10, regarding mitigating the impacts of policy, legislative, economic and societal change.
- Consider how to incorporate risk in the wake of Lucy Letby case and reports of sexual assault against female surgeons. Karen Reid assured the Committee that NES' has a lot of controls already in place and agreed that this could be strengthened within the risk register. The Committee noted that a letter highlighting controls has recently been sent to the Cabinet Secretary of Scotland and this will be forwarded to the Board. **Action: JA**
- It was suggested that more consideration could be given to the importance of NES culture and values in terms of protection of people, given that people are at the heart of the NES Strategy.
- Refine risk 7, regarding cyber security to ensure that it also covers the right people having the right access to information.

13.3 Discussion took place regarding the importance of evidencing that risks are reviewed by the Board and Committees as well as that Board members are given the opportunity to raise risks. Jim Boyle agreed that risks should be able to be raised from any part of the Organisation via the route of the Risk Management Group, the Executive Team and the Board and Committees.

13.4 Discussion took place regarding the NES risk appetite for each of the risk categories, particularly financial and governance risks. In relation to the scoring matrix, it was noted that this seems anomalous when compared with others with an overall in some scores which is unusual. Jean Ford noted she will discuss further offline with Debbie Lewsley. **Action: JF**

13.5 Jim Boyle thanked the Committee for their comments and noted that this will be further reviewed with the Executive Team before a final proposal is submitted to the Board. **Action: JB**

13.6 The Committee noted the progress made in enhancing risk management reports, and processes. The Committee approved the risk register, subject to the further changes agreed during the meeting. The Committee approved the risk appetite acknowledging that further recommendations may be forthcoming to a future ARC/Board.

14. Counter Fraud Update (NES/AR/23/60)

14.1 The Chair invited Laura Howard to present the paper to update the Committee regarding Counter Fraud activity in NES.

14.2 Laura Howard informed the Committee that NES continues to make good progress to fulfill the Counter Fraud requirements, with robust controls in place. Finance colleagues are working through the new Fraud Initiative compliance standards, which were released in April 2022. She reported that 5 targets have already been met and a remaining 7 targets are on track for completion this year.

14.3 The Committee noted that Counter Fraud Services have also issued a risk log and annual action plan which is currently being reviewed. Awareness training is scheduled to take place in relation to this. The National Counter Fraud Strategy is expected to be published in quarter 3 and following this the NES Counter Fraud Strategy will be reviewed.

14.4 The Committee asked for clarification of the acronym DHC and requested that acronyms are written out in full in future reports. Laura Howard confirmed that this acronym stood for Digital Health and Care.

14.5 The Committee noted that there have been no investigations this financial year and no declarations of gifts and hospitality since the April 2023 ARC meeting.

14.6 The Committee noted the information contained in the report. The committee

also noted that a fraud awareness campaign will be launched in November 2023 to all NES employees.

14.7 Della Thomas and James Lucas left the meeting.

15. Climate Emergency & Sustainability

a) Climate Change and Sustainability Report (NES/AR/23/61)

15.1 The Chair invited Jim Boyle to present the paper to update the Committee regarding work in relation to Climate Emergency and Sustainability.

15.2 Jim Boyle informed the Committee that the NES Climate Emergency and Sustainability Group (CESG), which is made up of representatives from each Directorate, continue to take forward work to ensure NES is in full compliance with the National Strategy. The Group will also develop a NES Strategy, which will come through the ARC and Board in due course. The Committee noted the Terms of Reference (ToRs) of the CESG.

15.3 Jim Boyle updated that since April 2023 there has been a focus on how NES can support NHS Scotland to reduce CO2 emissions through our training and education.

15.4 The Committee noted there was a breadth of work ongoing in relation to the Climate Emergency and Sustainability across the organisation.

15.5 The Committee noted ongoing and planned activities across the breadth of all NES regarding Climate Change and Sustainability, including development of a NES Climate Emergency and Sustainability Strategy and targets.

b) Annual Report on the NHS Scotland Global Climate Emergency and Sustainable Development Policy to Scottish Government (SG)

15.6 The Chair invited Jim Boyle to provide a verbal update regarding progress of the annual report on the NHS Scotland Global Climate Emergency and Sustainable Development Policy to SG.

15.7 Jim Boyle explained that this report is submitted by all public bodies that are required to report annually in accordance with the Climate Change (Duties of Public Bodies: Reporting Requirements) (Scotland) Amendment Order.

15.8 The Committee noted that the report is on track for completion in November and will be sent to ARC members via correspondence for review prior to being submitted to the Board for final approval. **Action: JB/JA**

16. Property and Asset Management Strategy (PAMS) Update

(NES/AR/23/62)

16.1 The Chair invited Jim Boyle to present the report to update the Committee on NES Property and Asset Management Strategy (PAMS).

16.2 The Committee noted that the NES PAMS was subsequently incorporated within the combined National Boards PAMS. NES remain open to collaboration opportunities on a case-by-case basis with other boards and organisations to try and create opportunities to reduce costs without a reduction in quality of offering to staff, trainees and stakeholders.

16.3 Jim Boyle informed the Committee that in collaboration with Public Health Scotland (PHS), NES has identified a new property in Glasgow. Colleagues from PHS are currently using the Glasgow office in 2CQ until the move, which is due to take place in 2024. The Board will receive a business case on this for approval.

16.4 Jim Boyle informed the Committee that there is also work ongoing to review space used in Aberdeen and Dundee, to identify if any capacity can be released. The Committee noted that the lease for Westport in Edinburgh is up in 2025 and discussion is already taking place regarding review of this space also.

16.5 The Chair of the Committee queried as to whether this item is required to come to the ARC due to the operational aspect and taking into consideration that any business cases are required to be approved by the NES Board. Karen Reid noted that it may be helpful to continue coming to the ARC due to potential financial risks. Further discussion will take place regarding this including the potential impact on the ARC ToRs. **Action: JB**

16.6 The Committee were content with the update.

17. Review of Meeting Effectiveness

17.1 The Chair invited the Committee to provide feedback regarding the effectiveness of the meeting.

17.2 The Committee agreed that the quality of information provided in reports has helped to provide assurance, with few questions required to be raised during the meeting.

18. Audit Scotland Reports

18.1 The Committee noted the following Audit Scotland Reports:

- Fraud and Irregularity 2022/23
- Approaches to achieving NES zero across the UK

19. Date and time of next meeting

19.1 The next meeting of the Audit and Risk Committee will be held on Thursday 18 January 2023 at 09:30. The Chair advised the Committee that this meeting will be a Hybrid meeting and that a room will be available for attendees to join in person in the Westport office.

NES
November 2023
JA/DT/JF