This agenda has been prepared using a 'Governance Light' approach

NHS
Education
for
Scotland

NHS Education for Scotland   NES/21/07

AGENDA FOR THE ONE HUNDRED AND SIXTIETH BOARD MEETING

Date: Thursday 11 February 2021
Time: 11.40 am – 13.20 pm
Venue: In response to the COVID-19 pandemic and public health protection
               measures, this meeting will be held remotely using Microsoft Teams

1.   **11.40 Chair's introductory remarks**

2.   **11.40 Apologies for absence**

3.   **11.41 Declarations of interest**

4.   **11.41 Minutes of the One Hundred and Fifty-Ninth Board Meeting**   NES/21/08
       26 November 2020 for approval

5.   **11.43 Matters arising from the Minutes and notification of Any
       Other Business**

6.   **11.43 Actions from previous Board Meetings**   NES/21/09
       For review

7.   **11.47 Chair and Chief Executive reports**

       a. **11.47** Chair's Report (verbal report)

       b. **11.57** Chief Executive's Report   NES/21/10

8.   **Governance Items**

       a. Significant issues to report from Standing Committees:

           -   **12.15** Educational & Quality Committee held 10 December
               2020 (S. Walker, verbal update)

           -   **12.18** Audit & Risk Committee held 28 January 2021
               (D. Steele, verbal update)

           -   **12.21** Staff Governance Committee held 4 February 2021
               (L. Dunion, verbal update)

       b. **12.24** Board Committee Terms of Reference (ToRs) for approval   NES/21/11
           (D. Thomas)

       c. **12.27** Standing Financial Instructions for approval (A. McColl)   NES/21/11.1

9. **Annual Items**

   None

10. **Performance Items**

    a. **12.29** Financial Report for assurance and approval (A. McColl)   NES/21/12

    b. **12.40** Risk Register Report for assurance and approval (A. McColl)   NES/21/13

    c. **12.50** 2020/21 'Q3' Performance Report for assurance and approval (D. Cameron)   NES/21/14

11. **Items for Noting**

    13.05 Standing Committee Minutes

    a. Audit and Risk Committee 3 November 2020   NES/21/15

    b. Educational & Research Governance Committee 17 September 2020   NES/21/16

    c. Staff Governance Committee 5 November 2020   NES/21/17

    Other items for noting

    d. 'Our Health, Our Rights, Our NHS' Agreement between NHS Scotland and Scotland's Gypsy / Traveller community   NES/21/18

12. **13.05 Ministerial Reply to the NES Annual Review**

    a. Annual Review Response Letter/Actions (S. Irvine)   NES/21/19

    b. Mental Health and Trauma Informed Care Report (J. Thomson and S. Ferguson)   NES/21/20

13. **13.20 Date and Time of Next Meeting**

    25 March 2021 at 10.15 a.m.

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Draft for Board approval

NHS Education for Scotland

DRAFT MINUTES OF THE ONE HUNDRED AND FIFTY-NINTH BOARD MEETING HELD ON 26 NOVEMBER 2020

This meeting was held via Microsoft Teams due to the Covid-19 pandemic.

Present:	Mr David Garbutt (DG) (Chair) Ms Anne Currie (AC), Non-Executive Director Mrs Linda Dunion (LD), Non-Executive Director Mrs Jean Ford (JF), Non-Executive Director Ms Lynnette Grieve (LG), Non-Executive Director/Employee Director Ms Gillian Mawdsley (GM), Non-Executive Director/Whistleblowing Champion Prof Stewart Irvine (DSI), Acting Chief Executive Ms Audrey McColl (AMcC), Director of Finance Mrs Vicki Nairn (VN), Non-Executive Director Prof Rowan Parks (RP), Acting Director of Medicine Dr Doreen Steele (DS), Non-Executive Director (Vice Chair) Ms Sandra Walker (SW), Non-Executive Director Mrs Karen Wilson (KW), Director of NMAHP
In attendance:	Ms Tracey Ashworth-Davies (TAD), Director of Workforce Mr Colin Brown (CB), Head of Strategic Development, Chair's Office ((joined meeting at 10.31am during item 7a) Mr Donald Cameron (DC), Director of Planning & Corporate Resources Dr David Felix (DF), Postgraduate Dental Dean Mr Geoff Huggins (GH), Director of NDS (left meeting at 12.59 pm during item 10b) Mr John MacEachen (JMacE), Head of Communications Ms Alison Shiell (AS), Manager, Planning & Corporate Governance (Minute Taker) Ms Della Thomas (DT), Board Secretary & Principal Lead – Corporate Governance Prof Anne Watson (AW), Postgraduate Pharmacy Dean (left meeting at 12.24pm after item 9b) Mr Christopher Wroath (CW), Director of Digital (left meeting at 12.54pm after item 10a)

1. Chair's Introductory Remarks

1.1. The Chair welcomed everyone to the meeting. He extended a particular welcome to Anne Watson, who was attending for item 9b (Medical/Dental/Pharmacy Recruitment).

1.2. The Chair began by noting the very sad news regarding the recent death of David Ferguson, who was NES's Board Secretary from the organisation's inception until his retirement in December 2019. On behalf of the Board and the Executive Team, Stewart Irvine conveyed his sincere condolences to David's wife Margaret, who also worked at NES until her retiral at the end of September, and David's children and their families.

1.3. The Chair recognised that this meeting marked Stewart Irvine's final Board as NES's Acting Chief Executive. On behalf of the Board, he thanked Stewart Irvine for his excellent leadership over the past 12 months, and also acknowledged Audrey McColl and Rowan Parks in their roles as Acting Deputy Chief Executive and Acting Director of Medicine respectively.

1.4. For the public record the Chair noted that the Board last met on 29 October 2020 for an informal private development session. This session covered horizon scanning, including COVID pandemic future implications; the beginning of discussions on the iterative process of developing strategic key performance indicators, linked to the Board's strategic context and the business of the Board's Committees and an update on the Once for Scotland work on the Active Governance project.

2.   Apologies for absence

2.1. Apologies for absence were received from Douglas Hutchens (Non-Executive Director).

3.   Declarations of interest

3.1. Vicki Nairn contacted the Chair in advance of the meeting to re-iterate her standing declaration of interest as an employee of Robert Gordon University in Aberdeen, in relation to item 9b. The Chair confirmed there was no conflict of interest with respect to the content of the paper and thanked Vicki Nairn for seeking clarification.

4.   Minutes of the One Hundred and Fifty-Eighth Board Meeting   (NES/20/112)

4.1. The minutes of the Board meeting held on 24 September 2020 were approved, subject to the following two amendments:
   a. Item 7b (Chief Executive's Report): For clarity, Rowan Parks provided an amendment to minute 7.6f, specifically to differentiate between the undergraduate and postgraduate responses: 'In response to a further query from Sandra Walker about the impact of COVID-19 on undergraduate medical clinical placements. Rowan Parks advised that Medical Schools have modified undergraduate clinical placements, including reduction of the size of student groups and utilising longer clinical days. Tracey Ashworth-Davies also highlighted that work is underway in NES to develop technology solutions to address the current impact on postgraduate training'.
   b. Item 10b (Risk Appetite), regarding the action to change the operational service delivery risk appetite from 'open' to 'hungry'. In reviewing the minutes against the other agreed risk appetites, Audrey McColl felt that this change would not be required. The Board confirmed their agreement and the Board Chair asked for the Minutes and Action List to be updated.

4.2. With the two amendments set out above, the minutes of the last Board meeting were approved.

5.   Matters arising from the minutes and notification of Any Other Business

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

6.   Actions from previous Board Meetings   (NES/20/113)

6.1. The Board received the rolling Board action list for review and agreement. The Board noted that all action points are now complete, with the exception of four.

6.2. The following points were discussed:
   a. 24 September 2020 Board meeting, Minute 8.6e: The Chair confirmed he had provided feedback to Scottish Government regarding Digital governance arrangements, however a response has not yet been received. The Chair advised the Board that he would follow this up when an opportunity arose and asked the

Board if they were content for this to now be marked as complete. The Board signalled their agreement. **Action: AS**

b. 24 September Board 2020 meeting, Minute 10.6: Further to the discussion under Minute 4.1, the Board noted that this action point can now be updated as complete as the Board have agreed that the operational service delivery risk appetite should remain as 'open'. **Action: AS**

c. 30 July 2020 Board meeting, Minute 10.12: In response to a query from Gillian Mawdsley, the Chair agreed to circulate the response he had received from Christopher Wroath regarding the policy process that staff must follow if any NES devices are lost. **Action: AS/Board Services**

d. 27 February 2020 Board meeting, item 7a: Audrey McColl confirmed that the action relating to the 2020-21 Financial Plan could be removed from the action list as it is no longer applicable due to events and sequencing resulting from the COVID-19 pandemic. **Action: AS**

e. 26 September 2019 Board meeting, item 10b: The Chair reminded Board members that this action focused on the NES's role as a corporate parent and the possibility of NES co-opting a care-experienced young person onto a Board committee(s) and/or appointing one to a training position on the Board. Scottish Government (SG) are currently working with NHSS Board Chairs and Chief Executives to look at how to attract a wider range of citizens to sit on public sector Boards. The Chair suggested that it would be helpful to review the outcomes of this work before moving forward with this specific Board action. The Board agreed to close the action and come back to the issue in the future, following as and when the Scottish Government position becomes available. **Action: AS**

6.3 The Action list was agreed with the above amendments.

7. Chair & Chief Executive Updates

a. Chair's Report

7.1. The Chair gave a verbal update on recent meetings and activity since the September Board in his roles as Chair of the NES Board and Chair of the NHSS Board Chairs Group. The following meetings were highlighted:

a. The Chair has continued to attend meetings of the Mobilisation Recovery Group chaired by the Cabinet Secretary for Health and Sport. Recent meetings have discussed the COVID-19 vaccination programme (which NES is providing digital support to) and winter planning, particularly in relation to Urgent Care.

b. The Chair, Stewart Irvine and members of the NES Executive Team have held a number of meetings with colleagues from NHS Golden Jubilee to discuss the ongoing development of the NHSS Academy proposal.

c. The Board Chairs Group meet with the Cabinet Secretary for Health and Sport on a bi-monthly basis. Recent discussions have focused on winter planning and the uptake of the flu vaccination, particularly amongst NHSS staff. The Board Chairs also held a virtual 'away day' and received a presentation from Derek Feely (Chair of the Independent Review into Adult Social Care). Both the Board Chairs and Board Chief Executives Group have submitted feedback reports on the review proposals.

d. The Chair and Stewart Irvine meet monthly with Gillian Russell (Director of Health Workforce) and other SG colleagues as part of NES's sponsorship arrangement. Recent meetings have been useful, and it has been agreed that members of the NES Executive Team could join future meetings to discuss particular agenda items. Colin Brown is currently working on a refreshed version of NES's sponsorship arrangement documentation.

e. The Chair noted his involvement in the virtual 2020 NES Stars ceremony, which celebrated individual staff and teams who have exemplified the organisation's

values and ways of working over the past 12 months. On behalf of the Board, the Chair thanked NES staff for their continued work and support, particularly in relation to the ongoing response to the COVID-19 pandemic.

f. In his role as Chair of the Board Chairs Group, the Chair and his Vice-Chair have met with their equivalents on the Integrated Joint Board (IJB) Group to discuss current issues and opportunities going forward.

g. The Chair attended a Scottish Clinical Leadership Fellowship (SCLF) consolidation event and heard reflections from SCLF fellows regarding their positive experiences of the NES leadership programme.

h. The Chair and Tracey Ashworth-Davies attended a meeting of the Talent Management Board. Items for discussion included the creation of a new agenda for succession planning.

7.2. The Chair invited questions from the Board, and the following point was discussed:

a. Linda Dunion noted the low uptake of the flu vaccination amongst NHSS staff and asked what was being done to resolve this and whether there could be a future role for NES in this area. The Chair noted that awareness campaigns have already been developed and that SG are investigating the reasons behind the lower uptake. It was confirmed that there was not a role for NES in this area.

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

b. <u>Chief Executive's Report</u> (NES/20/114)

7.4. Stewart Irvine made initial opening remarks highlighting to the Board the increasingly challenging operating environment that all NHSS staff are working in. NHSScotland continues to remain on an emergency footing, with Territorial Boards managing ongoing COVID-19 demand and elective care alongside the planning and delivery of a mass vaccination campaign.

7.5 Within NES, directorates are continuing to manage business as usual, whilst also contributing to the COVID-19 response via the development of educational resources and digital support to the COVID-19 vaccination programme whilst also working to resolve the ongoing impact of the pandemic on undergraduate and postgraduate learner progression. He predicted that the next two to three months will be very challenging for the NES workforce.

7.6 Stewart Irvine noted this was his last Board meeting as Acting Chief Executive and took the opportunity to record his grateful thanks to the Board and Executive Team for their support during his time in the role. The Board noted that Karen Reid (current Chief Executive of Perth & Kinross Council) has been appointed as the new Chief Executive for NES, with effect from 1 February 2021

7.7. Stewart Irvine then highlighted the following items within the report:

a. The Board noted with sadness the recent death of Heather Stronach, who worked in the Medical Directorate.

b. The NES Annual Review took place on 18 November and was overseen by the Minister for Mental Health, Clare Haughey. NES's presentation reflected on the 2019-20 year, the organisation's COVID-19 response and looking ahead to 2020-21. Stewart Irvine confirmed that the Annual Review was received positively and that Clare Haughey thanked NES staff for their work, particularly in response to the COVID-19 pandemic.

c. Stewart Irvine reiterated the comments of the Chair regarding the 2020 NES Stars virtual award ceremony and thanked those involved for helping to celebrate the achievements of NES staff over the past 12 months.

7.8. The Chair opened up to questions. During discussion, the following points were raised:

a. In response to a query from Gillian Mawdsley, Stewart Irvine agreed to share the NES Annual Review presentation in confidence with Non-Executive Board Members.
Action: Chair and CE Office

b. In relation to the minutes of the Chief Executive's Report in the 24 September Board minutes, Gillian Mawdsley asked for an update on Minute 7.6f which outlined the Technology Enabled Learning (TEL) initiative as a potential solution to the impact of COVID-19 on postgraduate education and training. Tracey Ashworth-Davies confirmed that the cross-directorate TEL Short-Life Working Group has been meeting to progress this work and a pilot area has been identified. Directorates have been asked to identify priorities with a view to creating cross-directorate TEL solutions. The Board agreed it would be helpful to receive a more detailed update on the TEL initiative, with particular reference to funding and how it will be evaluated.
Action: TAD/DT

c. Gillian Mawdsley asked if there was an update on the situation for Dentists in training. David Felix highlighted that the COVID-19 safety procedures necessary in Dentistry have had a significant impact on the availability of experience for trainees. This in turn may have an impact on undergraduate output and this is currently under discussion.

d. In response to a query from Gillian Mawdsley regarding the current role of lay members within the Medical Directorate, Rowan Parks confirmed that online interviews will be used as part of the 2021 recruitment process and that lay members will be invited to be part of these, depending on the requirements of each individual specialty. Lay members are also being asked to be involved in the Medical trainee Annual Review process.

e. In relation to the numbers of NES staff accessing the weekly video updates from the Executive Team during the pandemic, Jean Ford asked if any action was being taken to increase these numbers. John MacEachen noted that the 30-40% response rate has decreased slightly since the early part of the pandemic, however overall staff engagement with corporate messaging had increased. Alongside the weekly videos, information is posted on the NES intranet and via line managers' briefings.

f. Jean Ford praised the recent improvements to the NES corporate website and asked whether users were consulted in advance of the updates being made. John MacEachen confirmed that the website was updated using best practice public sector principles which emphasise the need to ensure content is stored in the most relevant location. For NES, this meant moving all educational content to the Turas Learn digital platform and ensuring the website focuses on informing the stakeholders and the public about the work of NES. Users will be consulted in due course regarding their experiences of using the website. Karen Wilson noted that directorates follow a set of document retention standards for Turas Learn resources and this is will be reported through the Education and Quality Committee.

g. In reference to meetings with NHS Golden Jubilee and the NHS Scotland Academy, both Sandra Walker and Vicki Nairn raised questions about NES's role and how the Academy is being funded. Stewart Irvine and the Chair responded by advising that the Academy's development is still at an early stage, however some progress is starting to be made. It was concluded that the Chair and Stewart Irvine would determine the best way to brief the Board on these developments.
Action: Chair/DSI

h. The Chair also suggested that the NHSS Academy may be an area for a future Board Development Session with NHS Golden Jubilee colleagues in attendance. Della Thomas will update the rolling list of Board Development topics.   **Action: DT**

i. Sandra Walker commented on the Chief Nursing Officer's aim to formalise the supervision of NMAHP staff by 2030, and asked for NES's position on this. Karen Wilson acknowledged the challenges of implementing this change in certain NMAHP professions but given the length of time this has been an issue for, felt that 2030 was a reasonable deadline .

j. Doreen Steele asked for an update on the 2021 National Scottish Medical Education Conference. Rowan Parks confirmed that NES will deliver the event virtually on 27-28 May 2021 in partnership with the Edinburgh International Conference Centre (EICC), who have previously hosted these events. NES has a two-year contract with the EICC and planning and procurement discussions for the 2021 conference are ongoing.

k. Doreen Steele asked what a 'small' number of staff meant in relation to NES staff who have been temporarily seconded to support NHSS contact tracing work? She asked if data could be presented as a proportion and what is the impact on those remaining? Tracey Ashworth-Davies confirmed that between ten to twenty staff have been seconded and the majority will be returning to NES in January 2021.

l. Doreen Steele commented on the 59% of doctors in training employed by NES who responded to the Everyone Matters pulse survey, in comparison to the 77% response rate from NES non-training grade staff. Stewart Irvine and Rowan Parks noted that the structure of the NHSS iMatter survey process is not suited to doctors in training due to their movement between NHSS Boards for their placements, and that feedback has previously been given to Scottish Government, by NES and by Medical Directors in other Boards.

m. Anne Currie noted the update from the Medical Directorate regarding facilitator comments about the use of online training and whether the difficulties in reading participant body language and engagement could have a negative impact on employee wellbeing. Rowan Parks responded highlighting that the TEL short-life working group are aiming to consider this and exploring how virtual training experiences might be made more dynamic and involving.

n. Vicki Nairn thanked Stewart Irvine and the Executive Team for the weekly video updates and asked whether consideration could be given to including other NES staff in future video communications.

7.9. The Chair thanked Stewart Irvine and the Executive Team for their answers to Non-Executive Director questions and the Board moved onto the next agenda item.

8. Governance Items

Significant issues to report from Standing Committees

a. <u>Educational & Research Governance Committee held 17 September 2020</u>

8.1. Douglas Hutchens had submitted his apologies so there was no update received under this item.

b. <u>Audit & Risk Committee held 5 November 2020</u>

8.2. Doreen Steele gave a brief overview of the key issues discussed at the most recent meeting of the Audit & Risk Committee:

a. In line with the changes to NES governance arrangements, the Committee received its first financial report since the dissolution of the Finance & Performance Management Committee. It was agreed that going forward the Audit & Risk Committee should receive a detailed financial report, with the Board receiving a briefer, summary update. Committee members have been asked to provide feedback to Audrey McColl regarding the content of future reports. Audrey McColl confirmed

that the first set of updated financial reports will be submitted to the 28 January 2021 Audit & Risk Committee and the 11 February 2021 Board meeting.

c. Staff Governance Committee held 5 November 2020

8.3 Linda Dunion gave a brief overview of the key issues discussed at the most recent meeting of the Staff Governance Committee (SGC):

   a. As per the Staff Governance Standard, two ex-officio members have joined the SGC, as nominated by the Partnership Forum: David Cunningham (British Medical Association representative) and James McCann (Unison/Staff-Side representative). Their term is for a two year period from 5 November 2020 - 4 November 2022.
   b. The Committee approved the draft SGC Terms of Reference.
   c. The Committee approved two policies: Information Governance and Volunteering.

d. Committee Terms of Reference: Generic components   (NES/20/115)

8.4. Della Thomas introduced this paper, which sought Board approval of the generic components of the Standing Committee Terms of Reference (ToRs). Following the Audit and Risk Committee workshop held on 26 August 2020, it was recognised that there were aspects of the ToRs that should be standardised across all Committees. 12 Standard Committee headings were approved by the Audit & Risk Committee on 3 November. Subject to the approval the Board, NES Standing Committees will adopt these generic components and develop Committee-specific text as appropriate.

8.5 The Board welcomed the Committee Terms of Reference report. During discussion, the following points were raised:

   a. Doreen Steele asked that an exemplar generic ToRs document is produced. Della Thomas confirmed this will be actioned and that hyperlinks will be used to avoid repetition/repletion.   **Action: DT**
   b. In response to a comment from Doreen Steele on the Quorum section of the Committee ToRs, Della Thomas will amend the final sentence of section 4.5 to read 'The member will not be counted as participating in that **part of the** meeting for quorum or voting purposes'.   **Action: DT**

8.6 After discussion, the Board approved the generic components of the Board Committee Terms of Reference and the Chair thanked Della Thomas for her paper.

9. Annual Items

a. Progress against NES 2019-24 Strategic Outcomes   (NES/20/116)

9.1. Donald Cameron presented a report on progress against NES's five strategic themes to the Board for approval. This is an annual progress report on progress towards the organisation's strategic objectives and is the first report of the 2019-24 NES Strategy. The report provides a retrospective summary of progress during the 2019-20 year and highlights specific areas of NES's work, including key challenges and case studies. Donald Cameron highlighted that the report's production had been delayed due to the COVID-19 pandemic.

9.2 The Chair opened up to questions. During discussion, the following points were raised:
   a. In response to comments from Sandra Walker and Gillian Mawdsley, paragraph 2.3h of the report will be amended to include further context regarding the number of complaints that NES receives and to differentiate between the separate complaints and whistleblowing processes. The Chair noted that the implementation of national whistleblowing standards had been delayed as a result of the pandemic and that it would be helpful to include reference to this.   **Action: DC**

b. Sandra Walker and Linda Dunion noted that the 2019-20 report included many examples of good practice. The Psychology of Parenting Project (PoPP) case study (section 4.7) was highlighted as a particularly useful example of impact and evaluation and asked if these elements could be considered for inclusion in other case studies in future reports. Donald Cameron will hold a debrief meeting with the report authors regarding the 2019-20 report and discuss how the content of future reports can be enhanced.

Action: DC

c. Jean Ford commented that future reports will be strengthened by the inclusion of the strategic Key Performance Indicators (KPIs) that were discussed at the 29 October Board Development Session.

d. In response to a comment from Anne Currie, Christopher Wroath noted that NES had used the lessons learned from the national eRostering procurement process (paragraph 2.4), and the importance of a collaborative approach, to inform discussions with Scottish Government in relation to the COVID-19 Accelerated Recruitment Portal (CARP), which NES delivered during the early part of the pandemic.

9.3. After discussion, the Board approved the progress report for publication on the NES website and the Chair thanked Donald Cameron and his team for their work.

b. <u>Medical/Dental/Pharmacy Recruitment Update</u> (NES/20/117)

9.4. The Chair again welcomed Anne Watson to the meeting for this item. Rowan Parks introduced this report by noting that in previous years the Board received separate updates on Medical and Dental recruitment. The COVID-19 pandemic delayed the production of these reports and a decision was taken to submit both professions' updates together, and to include an update from Pharmacy for the first time.

9.5. As a consequence of the change in remit of the Education and Research Committee to the Education and Quality Committee the Board was asked to consider a proposal for the Education and Quality Committee to receive future annual Medical, Dental and Pharmacy Recruitment reports along with two other reports: the annual Medical and Dental Progress Outturn and Modelling report and the Medical Revalidation report, both of which are currently scheduled to come to the 11 February 2021 Board meeting.

9.6. Rowan Parks, David Felix and Anne Watson highlighted the key messages from each profession's update. The overall vacancy fill rates for all three professions remains very high in 2020.

9.7. The Chair opened up to questions. During discussion, the following points were raised:
a. Sandra Walker raised a question about vacancy fill rates. Rowan Parks highlighted that concerns relating to gaps in training programmes have decreased as a result of increased vacancy fill rates. He confirmed that any gaps in programmes do not necessarily mean that a post has not been filled, it could be due to a trainee being on parental leave or participating in out-of-programme training.
b. The Chair commented on Appendix 7 of the report (Scotland Vacant Posts Fill Rates compared to the rest of the UK) and asked if further consideration will be given to the recruitment to specialties that may be affected by the ongoing COVID-19 pandemic. He highlighted Rehabilitation Medicine which has filled three out of its four posts in 2020 as an example. Rowan Parks advised that this is being reviewed in relation to 2021 establishment posts and related discussions with Scottish Government will take place in due course.
c. The Chair emphasised the value of the Scottish Clinical Leadership Fellowship programme for trainees and both David Felix and Anne Watson confirmed that positive feedback has been received from Dental and Pharmacy fellows involved in the programme.

9.8.   After discussion, the Chair thanked Rowan Parks, David Felix and Anne Watson for their report and the Board approved the proposal to route future annual Medical, Dental and Pharmacy Recruitment updates, Medical and Dental Progress Outturn and Modelling and Medical Revalidation reports via the Education and Quality Committee before these reports then come to the Board for noting.   **Action: Board Services**

10.   Performance Items

a.   <u>Digital Progress Report</u>   (NES/20/118)

10.1   Audrey McColl introduced this report which had been submitted to the Board for assurance and approval in light of the decision to stand down the Digital & Information Committee until the Scottish Government have reviewed the current Digital Health & Care Strategy. The content of the report builds on a previous progress update that was submitted to the 24 September Board meeting.

10.2   Audrey McColl highlighted the report's key issues including the current NES Digital and NES Digital Service (NDS) deliverables, both in the context of the COVID-19 response and progress against NES's 2019-24 strategic objectives, and the directorate financial positions. The Digital Executive Group has held its first meeting and discussed the implementation of a new compliance framework checklist that aims to support the digital section of the NES Corporate Assurance Framework.

10.3   Audrey McColl then handed over to Christopher Wroath who provided an update on current NES Digital priorities. He highlighted the team's work to support the digital side of the COVID-19 vaccination programme via the development of a tool to support the collection of essential data at the point of vaccination. NES Digital also developed and launched two apps during the earlier part of the pandemic: the COVID-19 Case Assessment tool and the Care Home 'Safety Huddle' app. The Case Assessment Tool, which is used by clinicians to share COVID-19 symptoms and risk factors remotely is currently being tested in a pilot programme across three territorial Health Boards. The possibility of a variant version of the tool for use in Care Homes is currently being explored, however Christopher Wroath is in discussions with Scottish Government to ensure that relevant clinical governance procedures are in place first.

10.4   In relation to NDS, the team continue to support the COVID-19 response through the continued provision of the Scottish Government's SMS shielding service, the Protect Scotland Proximity App and are also now supporting two components of the COVID-19 vaccination programme: cohort creation and information management.

10.5   Geoff Huggins also confirmed that the transfer of the Scottish Care Information Diabetes Collaboration (SCI-Diabetes) team from NHS Tayside to NES is now complete. The SCI-Diabetes platform provides a fully integrated shared electronic patient record to support treatment of NHSScotland patients with Diabetes. The team will now start to focus on developing a roadmap to move the current SCI-Diabetes hosting arrangements with Atos to the NDS environment. This will allow the current stand-alone product to potentially link with other clinical data to provide improved patient care.

10.6. The Chair opened up to questions. During discussion, the following points were raised:
   a. In response to a query from the Chair, Audrey McColl confirmed that that the Digital Executive Group will consider whether the compliance framework checklist could transfer to other areas of work within NES.
   b. Doreen Steele asked if agency staff are included in the priority groups for the COVID-19 vaccination programme. Geoff Huggins confirmed that employment records from the Scottish Social Services Council have been provided to Public Health Scotland for prioritisation.

c. In relation to the delivery of the Recommended Summary Plan for Emergency Care and Treatment (ReSPECT) product as part of NDS's work on Anticipatory Care Planning, Doreen Steele asked if NDS has sufficient staff to deliver this work. Geoff Huggins confirmed that ReSPECT is expected to be delivered in January 2021, which is ahead of the March deadline. Further to this response, the Chair asked future Digital Progress reports to include a calendar of future digital outputs for the Board's information.   **Action: AMcC/CW/GH**

d. Sandra Walker commented on the potential reputational risk for NES in relation to its digital contribution to the COVID-19 vaccination programme and advocated for the use of clear communications to clarify NES's role and the addition of further mitigating measures in the COVID-19 Risk Annex. This will be reviewed and added to as appropriate.

e. In response to a query from the Chair, Karen Wilson provided an update on the educational resources that are being prepared to support the COVID-19 vaccination programme. Public Health colleagues are producing resources and working with staff in NMAHP to develop webinars in advance of the first vaccinations planned for early December. She commented that training materials cannot be finalised until the vaccine is approved and this is creating pressure, however NES is trying to be as agile as it possibly can be.

10.7 After discussion, the Board approved the Digital Progress report and the Chair thanked those involved for their work. The Board will continue to receive progress reports until the Digital and Information Committee is stood back up.

b. <u>Financial Report</u>   (NES/20/119)

10.8 Audrey McColl presented the financial results for the first seven months of the year to 31 October 2020 and also provided an update on the anticipated costs of the NES response to the COVID-19 pandemic.

10.9. Audrey McColl made some introductory remarks in relation to the content of the report and highlighted the following key point:
a. The Finance team are currently developing plans to reallocate the current underspend within the non-Medical Training Grade areas of the NES budget, in line with 2019-24 strategic objectives. This will include new investments in response to the COVID-19 pandemic, including the delivery of Technology Enabled Learning.

10.10 The Chair opened up for questions. During discussion, the following points were raised:
a. In response to a query from Doreen Steele, Audrey McColl confirmed that the increased Apprenticeship Levy costs (paragraph 3.25), that are a direct result of NES employing additional students and learners during the COVID-19 pandemic, will be added to the overall anticipated COVID-19 costs.
b. The Board discussed the ongoing National Boards savings requirement that NES has always contributed to. Audrey McColl is continuing to discuss this issue with Scottish Government, with a view to resolving the requirement for future budgets.
c. In response to a query from Linda Dunion, Audrey McColl confirmed that COVID-19 costs will be reimbursed by Scottish Government. The NES Finance team are working with directorates to confirm their additional COVID-19 costs and details of any activities that have not taken place.

10.11 After discussion, the Board approved the financial results to 31 October 2020 and the Chair thanked Audrey McColl and her team for her work. As per minute 8.2a, the Board will receive a less detailed and more strategic Finance report at future Board meetings.

| c. | Risk Register Report | (NES/20/120) |

10.12 Audrey McColl presented the NES Risk Register and associated COVID-19 Risk Annex as at November 2020 to the Board for assurance and approval. As a result of the discussions at this Board meeting, the Risk Register and COVID-19 Risk Annex will be further updated to include reference to the current risks to future Dental undergraduate output (minute 7.8c) and the need for effective communications and additional mitigating measures in relation to NES's contribution to the COVID-19 vaccination programme.

Action: AMcC

10.13 The Chair thanked Audrey McColl for her work and the Board approved updates to the NES Corporate Risk Register and COVID-19 Risk Annex.

11. Items for Noting

Standing Committee Minutes

| a. | Audit and Risk Committee 11 June 2020 and 16 July 2020 | (NES/20/121) |

11.1. The Board received and noted the minutes of this meeting.

| b. | Staff Governance Committee 6 August 2020 | (NES/20/122) |

11.2 The Board received and noted the minutes of this meeting.

Other Items for Noting

| c. | NES Remobilisation Plan (1 August 2020 – 31 March 2021) | (NES/20/123) |

11.3 The Board received and noted the NES Remobilisation Plan (RMP) for the period 1 August 2020 – 31 March 2021. This RMP was submitted to Scottish Government on 6 August and shared with the Board in private session on 30 July. The RMP has been published on the NES website and was submitted to this Board meeting to form part of the public record.

11.4 In response to a query from Jean Ford, Donald Cameron confirmed that the detail within the RMP has been consolidated into the NES operational and financial planning system for the 2020-21 year. The first performance report for the RMP will be presented at the 11 February 2021 Board meeting.

| d. | Virtual/e-Learning Training & Development Opportunities for Board Members | (NES/20/124) |

11.5 The Board received and noted this paper.

| e. | Board Standing Orders – Implementation Action Plan | (NES/20/125) |

11.6. The Board received and noted the Board Standing Orders Implementation Action Plan, which had previously been circulated to the Board for approval via correspondence and quorate approval was received. The Action Plan is now being progressed and will be reported through the Audit and Risk Committee.

12. Any Other Business

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

13. Date and Time of Next Meeting

13.1 The next Public Board meeting will take place on 11 February 2021.

13.2 The Chair thanked everyone for their attendance and closed the meeting at 1.15 pm.

NES
December 2020
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Actions arising from Board meetings: Rolling list

Minute	Title	Action	Responsibility	Date required	Status and date of completion
Actions agreed at Board meeting on 26 November 2020					
6.2a	Actions from previous meetings	Mark 24 September 2020 Minute 8.6e action, relating to Scottish Government Digital governance arrangements, as complete.	Alison Shiell	December 2020	**Complete**
6.2b		Update 24 September 2020 Minute 10.6 action to complete.	Alison Shiell	December 2020	**Complete**
6.2c		Circulate policy process for lost NES devices to Board members for information	Alison Shiell / Board Services	December 2020	**Complete** Sent 18 Dec 2020
6.2d		Remove 27 February 2020 Item 7a action, relating to 2020-21 Financial Plan, from rolling Board Action List	Alison Shiell	December 2020	**Complete**
7.8a	Chief Executive's Report	Share NES Annual Review presentation with Non-Executive Board Members	Chair & CE Office	December 2020	**Complete** Sent 17 Dec 2020
7.8b		Explore how the Board could receive an update on the Technology Enabled Learning (TEL) initiative	Tracey Ashworth-Davies / Della Thomas	December	**Complete** Session on TEL to be delivered as part of 25 March 2021 Board Development Session.
7.8g		Decide how the Board should receive information relating to the NHS Scotland Academy.	Chair & Stewart Irvine	January 2021	**In Progress** Discussions regarding the NHS Scotland Academy continue to progress. Positive meetings have been held

Minute	Title	Action	Responsibility	Date required	Status and date of completion
					with NHS Golden Jubilee (NHS GJ) and the NES sponsor team at Scottish Government. The appointment of the NHS Scotland Academy director was announced jointly by NES and NHS GJ on 3 February. Karen Reid and Jann Garden (Chief Executive, NHS GJ) will hold a joint briefing session with Board members in due course.
7.8h		Include NHSS Scotland Academy on rolling list of Board Development topics	Della Thomas	December 2020	**Complete** Added to rolling list
8.5a	Committee Terms of Reference (ToRs): Generic Components	Prepare exemplar ToRs document and include hyperlinks as required.	Della Thomas	December 2020	**Complete** Document sent to Vice Chair on 4 Jan 2021
8.5b		Amend final sentence of section 4.4 to read: 'The member will not be counted as participating in that **part of the** meeting for quorum or voting purposes'.	Della Thomas	December 2020	**Complete**
9.2a	Progress against NES 2019-24 Strategic Outcomes	Amend paragraph 2.3h of the report to include further context regarding the number of complaints that NES receives and differentiate between complaints and whistleblowing processes.	Donald Cameron	December 2020	**Complete** Amended report published on the NES corporate [website]().
9.2b/c		Hold debrief meetings with report's key authors and discuss content of future reports including increased reference to NES impact and future strategic KPIs.	Donald Cameron	December 2020	**Complete**

Minute	Title	Action	Responsibility	Date required	Status and date of completion
9.8	Medical, Dental & Pharmacy Recruitment Update	Following Board's approval to route future Medical / Dental / Pharmacy annual reports to the Education & Quality Committee (E&Q), update the Board Schedule of Business and E&Q Committee workplan to reflect changes	Board Services	December 2020	**Complete** E&Q Committee workplan updated.
10.6	Digital Progress Report	Include calendar of future digital outputs in future Digital Progress Reports	Audrey McColl / Christopher Wroath / Geoff Huggins	March 2021	**In Progress** Next Digital Progress Report currently planned for 25 March 2021 Board.
10.12	Risk Register	Update Risk Register to include reference to current risks to undergraduate Dental output and the need for effective communications in relation to NES's contribution to the COVID-19 vaccinations programme.	Audrey McColl	January 2021	**Complete**
Actions agreed at Board meeting on 24 September 2020					
10.6	Risk Appetite	Amend operational service delivery risk appetite to 'hungry'.	Audrey McColl	November 2020	**Complete** Decision taken at 26 November Board not to amend risk appetite. Minutes of 26 November Board meeting set out reasons behind this decision.
Actions agreed at Board meeting on 26th September 2019					
10b	Corporate Parenting	Give consideration to co-opting a care-experienced young person onto a Board committee(s) and/or appointing one to a training position on the Board.	David Garbutt and Stewart Irvine	To be agreed post COVID-19	**Action Closed** Following on from the discussion at the 26 November Board meeting, the Board agreed to close this action and come back to this issue in the future when the outcomes of Scottish Government work into how

Minute	Title	Action	Responsibility	Date required	Status and date of completion
					public sector Boards can attract a wider range of citizens to sit on their Boards becomes available.

CHIEF EXECUTIVE'S REPORT

Karen Reid, Chief Executive (from 1 February 2021)
Professor Stewart Irvine, Acting Chief Executive (until 31 January 2021)

February 2021

1. INTRODUCTION

1.1. The agenda for our February Board meeting has been prepared using a 'Governance Light' approach given that NHS Scotland continues to operate in a very challenging environment as a result of the most recent wave of the COVID-19 pandemic.

1.2. Karen Reid commenced her role as NES's Chief Executive on 1 February 2021. On behalf of the Board, I would like to take this opportunity to welcome Karen to NES as one of my final acts as Acting Chief Executive.

1.3. The Board will receive the Board Committee Terms of Reference for approval as the single substantive Governance item on this agenda. These have been developed jointly by Committee Chairs and Executive Leads and were submitted to the Audit & Risk Committee on 28 January before being presented at this Board meeting.

1.4. The Board will also receive the first performance report of the 2020-21 financial year. Board members will note that performance reporting against the 2020/21 Annual Operational Plan (AOP) was suspended during the first and second quarters of the year due to COVID-19 and the AOP was subsequently replaced by the Phase 2 Remobilisation Plan (1 August 2020 – 31 March 2021).

1.5. Finally, the Board will receive a copy of the response from Scottish Government regarding our 2019-20 Annual Review and a related paper and presentation setting out NES's contribution to Mental Health and Trauma Informed Care.

2. ANNOUNCEMENTS

2.1 **Director of NES Digital Service (NDS)**

a. It was agreed in December 2020 that Geoff Huggins, Director of NDS, would end his secondment to NES and return to Scottish Government. Geoff was seconded to NES in May 2018 when Scottish Government set out its intention to deliver a Scottish health and care 'national digital platform'. Since then Geoff has attracted and built a highly skilled and committed team whose achievements have included establishing the idea of a national infrastructure - an important concept that is now being translated into action, particularly in relation to the NHS Scotland COVID-19 response.

b. Christopher Wroath (Director of NES Digital), is now working across both the NES Digital and NDS directorates and will continue to focus on the critical priorities for NES and NHS Scotland. There will be no other immediate changes in the short term and focus will be given to ensuring staff wellbeing throughout any future changes. A full and consultative evaluation of the future direction and priorities for NDS will be considered between NES, Scottish Government and the wider health and care system.

c. Geoff has been an invaluable member of the executive team in NES, and we are grateful for all he has achieved during his time with us.

3. STRATEGIC UPDATES

3.1. The Board will be aware that we continue to operate in a challenging environment in relation to the continuing COVID-19 pandemic. All of mainland Scotland has been living under Tier 4 restrictions since 26 December 2020 and the Health and Care system has faced very significant pressures during January 2021. NES have been in discussion with colleagues from Scottish Government regarding the potential redeployment of clinical and administrative staff to support the Territorial Board COVID-19 response.

3.2. **Caroline Lamb**
a. The Board will wish to note that Caroline Lamb, former NES Chief Executive, has been appointed to the role of Chief Executive of NHS Scotland and Director-General of Health and Social Care. Caroline's appointment was announced on 23 December 2020 and she took up post on 11 January 2021.

b. Caroline was previously seconded to Scottish Government in November 2019 as the Director of Digital Reform and Service Engagement, however the COVID-19 pandemic meant that from March 2020 she supported the COVID-19 response by overseeing Test and Protect and the Vaccination Programme. On behalf of the Board, we send our congratulations to Caroline and look forward to working with her in her new, permanent role.

3.3. **NHS Board Remobilisation Plans 2021/22**
On 21 December, Scottish Government issued a letter confirming the process for the next iteration of NHS Board Remobilisation (RMP) Plans. In light of the COVID-19 pandemic, the next set of RMPs cover the period from April 2021 to March 2022 and are a further iteration of existing Remobilisation Plans that covered the period August 2020 – March 2021. The deadline for draft plans to be sent to Scottish Government is 28 February 2021.

4. MEDIA INTEREST & COMMUNICATIONS ACTIVITY
This period saw a continued high volume of communications activity. This included design and video support for COVID-related training materials, and communications support for national vaccination messages. We have also just published our Year in Review 2020 web pages, which will be promoted in February. Internally, we supported the Chief Executive handover, continued to publicise COVID-related messages to staff using all the available channels, and rolled out Trickle, a staff feedback and engagement app.

5. DIRECTORATE UPDATES

5.1 Dental/Optometry/HCS

a. **Dental Vocational Training**
Fragility of delivering Dental Vocational Training remains a major issue. The continuing requirement for mitigation procedures, including social distancing and measures to prevent spread of infection *via* aerosols, has significantly reduced the volume of operative care being provided across the sector with many general dental practices operating at greatly reduced capacity. This impacts throughout the workforce pipeline. Ongoing discussion with Scottish Government on developing a way forward.

c. **Dental Core & Specialty Training and Recruitment**
Dental Core Trainees typically rotate in March and it is anticipated that this will proceed as normal.

d. Recruitment to Dental Core Training and Dental Specialty Training posts is currently underway. Interviews using an online platform are scheduled for April/May and it is hoped that these will proceed without the need to resort to contingency plans.

e. In light of the increased restrictions we have cancelled all face to face training events and deliver a range of CPD course online.

f. **Healthcare Science**
Consultant scientist training is a very new venture in partnership with Scottish Government. We are keen to explore whether this will be continued for a 2021 cohort. The initiative followed our business case submission at the end of 2019 to SG and has been propelled by the pandemic and role extension of scientific staff in underpinning diagnostics.

5.2 NES Digital

a. **Scottish Government (SG) COVID-19 Response**
The **Vaccine Management Tool (VMT)** continues to be developed in response to evolving requirements of the Vaccinations Programme. These are being driven by changes in the demands from the overall programme as different cohorts of citizens come into scope for scheduling of vaccinations. The VMT has been very well received and there are discussions in the programme as to whether SG should require its use in all vaccination settings. Work has commenced on the connection from the NSS Service Now platform delivering scheduling and appointment management records in addition to testing data. This will allow access by vaccination teams to appointment data and "close the loop" between scheduled vaccination events and the realisation event.

b. The **COVID-19 Case Assessment tool,** which is live in NHS Greater Glasgow & Clyde in assessment centres and A&E departments is due to go live in NHS Forth Valley in the second week of February. The roll out is

being structured to inform the DHI/Clinician/NES Team on how to accelerate rollout on all subsequent territorial Boards. In addition, work has commenced on future development to make the tool more "generic" and capable of supporting multiple conditions/circumstances post C-19.

c.   The **Care Home Safety Huddle** continues to be developed in support of the care sector. The latest release allows care home managers the functionality to load their workforce data (registered and unregister staff) which is passed through to the vaccination, National Clinical Data Store (NCDS). This is used to CHI seed data and create cohorts for vaccination as part of the JCVI priority one group. The programme can schedule and monitor progress against this denominator data set.

d.   **Network and Information Security Audit**
The Scottish Government (SG) mandated Network and Information Security (NIS) audit process was completed on time in December 2020. After a second round of evidence provision NES has obtained a status in the highest bracket in NHS Scotland. The recent SEPA (Scottish Environment Protection Agency) cyber-attack has heightened SG's awareness of cyber activities against the public sector and additional awareness campaigns have been developed for NES.

5.3   NES Digital Service (NDS)

a.   **Scottish Government COVID-19 Response**
The National Clinical Data Store (NCDS) has been developed at high speed to act as the "single source of truth" for vaccination data from across the system. This has meant significant integration work with PHS CHI seeded cohort datasets, GP IT systems, the VMT, the NSS (Denodo) reporting layer and the Service Now platform delivering scheduling services. These have been built from scratch with fast changing requirements. All this work does have "future state" design built in to allow post mass vaccination use as the core vaccination system for all NHS Scotland future vaccination plans (flu, meningitis etc).

b.   In agreement with Scottish Government, NDS continues to broadcast COVID-19 updates by Local Authority area following the change in Covid-19 restriction levels. The service has also resumed priority shopping for people who are shielding, as well as being used to broadcast COVID-19 vaccination updates. An evaluation report on the Shielding Service has been published by Public Health Scotland. The report describes the 'added value of the support offer' and includes the capabilities provided by the Shielding SMS Service. Among conclusions and limitations of the offer, 'there was also clear evidence that the support offer had addressed real needs'.

c.   As part of our continued development of the digital ReSPECT, NDS has been engaging with colleagues across primary, secondary and unscheduled care settings, including the Scottish Ambulance Service. NDS colleagues

have also been considering the impact of 'barriers to access' on its work, ensuring this is embedded in its equality and design thinking. This approach will be used across the team's interactions to ensure our products and services are inclusive.

5.4 Medicine

a. **The Scotland Deanery continues to focus on supporting trainees during the pandemic.**
This year the Mental Health specialties have developed a virtual course bringing trainers and International Medical Graduate trainees together to foster greater understanding of specific IMG issues with the aim of developing an improved trainer-trainee working relationship. This course is a modification from the GP STEP course (Scottish Trainee Enhanced Programme) adjusted for secondary care. The Psychiatry STEP course (Psych STEP) will be evaluated, and it is hoped will provide a blueprint for other secondary care specialties. Initial trainee and trainer feedback is very positive.

b. The Scottish Foundation School have had to amend plans for national roll out of the TiME course (Thriving in Medicine) considering the effect of the pandemic on formal education. This has involved moving course material online and training facilitators using MS Teams. The General Medical Council are very interested in this work as the focus of the course is to encourage foundation doctors to identify ways to support their own resilience. GMC visitors attended the facilitator training session and were very positive about the process.

c. **Medical Recruitment**
Recruitment for August 2021 is underway, currently only 2 specialties (Internal Medicine Training and Intensive Care Medicine) have triggered their contingency recruitment arrangements. IMT applicants will be ranked and assessed using verified self-assessment and application scoring. In addition, application form questions on commitment to and suitability for specialty will be scored. ICM will use the self-assessment of portfolio scoring with subsequent verification by a team of Consultant Intensivist assessors. The switch to plan B and cancellation of the interview process also gives candidates two extra weeks in which to upload their evidence to the self-assessment portal - this is vital as applicants are also extremely busy with clinical commitments at the moment, with many of them working on surge rotas. There will also be more time allocated for the Consultant Intensivist assessors to access the training material for the verification process and a longer window for them to carry out the verification of the self-assessment portfolio scores.

d. **February rotations**
The plan to rotate trainees to new placements occurred as planned across all geographies, except for Foundation trainees in Dumfries & Galloway Royal Infirmary whose internal rotation locally will be delayed until March. There are also plans in place to ensure that any trainees that rotated to a

different Health Board receive their second Covid vaccination and this has been communicated to all Doctors in Training.

5.5 NMAHP

a. **Highlights from the Public Health Programme Immunisation update - COVID-19 vaccination programme.** The Public Health Team within NMAHP (working in close collaboration with Public Health Scotland and stakeholders) continues to lead the workforce education workstream of the COVID-19 vaccination programme, including both the AstraZeneca and the Pfized BioNTech vaccines. Six webinars have been held with a total of over 8,000 participants, with recordings available on TURAS Learn. Educational resources relating to COVID-19 vaccination programme core information, e.g. adverse events framework and consent published. These include slide sets, proficiency documents and learning resource for registered practitioners and healthcare support workers. TURAS Learn COVID-19 vaccination programme pages have been created and populated.

b. **COVID-19 Swab Testing –** NES with support from key stakeholders has produced a number of resources in the form of videos, posters, slide sets, information leaflets, guidance documents and competency frameworks to support those undertaking upper respiratory tract swab samples to test for COVID-19. These resources can be found on TURAS Learn at https://learn.nes.nhs.scot/41569/covid-19-diagnostic-swabbing-for-health-and-social-care-staff

c. **Infection Prevention and Control – Supporting Care Homes** To support Infection Prevention and Control within care homes a number of webinars for all care home staff were held during December 2020 (428 attendees in total) with further dates arranged and published for January 2021. These educational webinars are based on the published Scottish COVID-19 Care Home Infection Prevention and Control Addendum to the National Infection Prevention and Control Manual and the (not yet published) ARHAI Scotland Infection Prevention and Control Manual for Older People and Adult Care Homes. Details of these webinars are published via flyer on TURAS Learn, NES Facebook, NES Twitter, NMAHP Twitter, Scottish Social Services Council (SSSC) and Scottish Care. A recording of a webinar will be published on Turas Learn.

d. **NMAHP Student Placements**
The RAPOG (Rapid action placement oversight group), which reports directly to the SG strategic oversight group for healthcare students' placement recovery is meeting monthly identifying emerging issues around NMAHP placements, possible solutions and identifying aspects that would benefit from a national approach. Nursing and midwifery supernumerary placements have resumed and a total of 4,708 students will (some have already) commence placement in January 2021. Allied health professions have recommended available practice learning experiences. Abbreviated

notes from the RAPOG meetings can be found at
https://www.nes.scot.nhs.uk/our-work/rapid-action-placement-oversight-group-rapog/.

e. Ongoing NES NMAHP host strategic groups (e.g. National Strategic group for practice learning, AHP placement recovery group) which support communication between universities, further education colleges and practice placement providers and enables generic NMAHP practice placement concerns to be discussed and good practice to be shared. Monthly Practice Education Facilitator, and two weekly Care Home Education Facilitator events are facilitated by NES to identify educational needs of staff supporting students in practice.

5.6   Pharmacy

a. **NES Recruitment of Pre-registration Pharmacy Trainees for Scotland during COVID-19**
During COVID-19, Pre-registration recruitment moved to online in 2020 for the 2021/22 cohort of trainees. The fill rate for the increase to 235 (previously 200) training posts in Scotland is currently 89.8%.

b. **NES support of Provisionally Registered Pharmacists during COVID-19**
The General Pharmaceutical Council (GPhC) have arranged for the COVID-19 postponed 2020 registration assessment for Pharmacists to be online via Pearson Vue centres in March 2021. The current 'provisionally registered pharmacists' from the 2019-20 cohort should be able to take this registration assessment in line with the GPhC contingency plans for the ongoing pandemic. NES are continuing to support these pharmacists through regular support webinars, online resources, a dedicated Turas Learn page and an online mock GPhC registration assessment with follow up support.

c. **Resilience Support for Pre-registration Pharmacy Trainees and Provisionally Registered Pharmacists during COVID-19**
Increasing concerns for the wellbeing and resilience of our pre-registration pharmacist trainees during this challenging time were identified through our Senior Educator support mechanisms. Concerns were also highlighted by the 'Wellbeing survey 2020' conducted by the Royal Pharmaceutical Society which identified that 89% of all respondents were at high risk of burnout. In response NES Pharmacy are providing current Pre-registration trainees and the `provisionally registered pharmacists` with a facilitated, interactive resilience workshop which will explore stress management and how to build resilience. These sessions are delivered in conjunction with Pharmacist Support, an independent, trusted charity with a proven track record of providing a wide variety of support services. Sessions will introduce tools to help build resilience, consider mindfulness, create new habits and positive affirmations.

d. **Professional Development Support for Pharmacy Teams during COVID-19** NES Pharmacy has developed a range of educational resources to support community pharmacy teams to respond to increased service demands, and complexity of presenting conditions, as a result of COVID-19.

e. **Common Clinical Conditions** - a series of common clinical conditions webinars have been organised to support community pharmacists to respond quickly and confidently to conditions which would normally present at a General Practice. These include Winter Illnesses (Nov 2020), Skin conditions (Jan 2021) and GI conditions (Feb 2021).

f. **Community Pharmacy Services** - NES plan to launch e-learning to support the roll out of the refreshed Medicines Care and Review service in January 2021. This includes education to support serial prescribing to minimise unplanned peaks in demand for prescriptions as seen during the pandemic. In addition, we will be launching new e-learning to allow pharmacists to supply medicines under Patient Group Directions, as part of an extension to the NHS Pharmacy First Scotland service, and e-learning to support the new Sexual Health Service which is planned for April 2021.

5.7 Workforce

a. We have continued to provide strong support to our staff through the pandemic with key focus on safe working, communication and staff wellbeing. In the NHSS Everyone Matters Survey, NES's scores for 'overall experience of working in the organisation' and 'recommendation of the organisation as a good place to work' were highest amongst Boards. We have recently launched the 'Trickle' App to allow close monitoring of employee sentiment, idea sharing and support.

b. NES has worked closely with the NSS Occupational Health Service (OHS) given its usual role in servicing NES employees with flu vaccinations. All staff, including doctors in training, have been reviewed against the SG agreed Covid-19 NHSS priority framework. NES Workforce Directorate has also worked closely with placement Boards and GP placement providers to understand local plans for vaccination of all doctors in training and asked all doctors in training to reply to a communication, confirming their vaccination status. A named point of contact for any concerns has been provided and FAQs developed for the Turas Hub site. Other NES staff are, in the main, expected be vaccinated via community programmes, not via NSS OHS.

c. Data on clinically registered staff has been provided to Scottish Government in response to its recent request of national boards, for potential redeployment. The impact of releasing each member of staff to assist front line services has been documented and the risks to delivering NES business priorities communicated. A process has been implemented by the Deanery for any redeployment of doctors in training and communicated across all Boards. Of sixteen NES staff redeployed to NSS as Contact Tracers in 2020, seven remain redeployed. Details of Covid-19 Accelerated Recruitment Portal (CARP) candidates, with completed pre employment checks processed by

NES in 2020, have been collated and issued by the Central Allocations Team (on behalf of Scottish Government) to NHS Scotland Boards allowing Boards to make direct contact with candidates to assist meeting their specific demands.

d. Further to discussion with Scottish Government, preparatory work is underway to transition Dental Core and Specialty trainees onto NES Lead Employer arrangements, if possible by September 2021. Scottish Government has also agreed to investigate the regulatory changes required to support transitioning vocational dental practitioners in general dental practice to the lead employer model, aimed for August 2022.

CALENDAR from 19 November 2020 – 29 January 2021

This section of the report provides an overview of the meetings I have attended since 19 November 2020. I have followed a set structure, so rather than list every date individually, where possible meetings have been grouped and additional context provided.

NES [Extended] Executive Team (EET)
Since the last updated provided in the November CE report to the Board, the EET have been meeting to share directorate updates and take any decisions as required. Meeting frequency increased during late December 2020 and January 2021 as a result of the most recent wave of the pandemic and are currently meeting twice a week

NES Executive Team
The core Executive Team now meet on a monthly basis to discuss strategic and governance issues in detail.

NHS National Board Chief Executives
BCEs of the national Boards and Public Health Scotland now meet fortnightly via Microsoft Teams.

NHS Board Chief Executives (BCEs) + Scottish Government
All Board CEs meet fortnightly with the senior team from Scottish Government to discuss the COVID-19 response.

4 Nations (NES, Health Education England, Health Education & Improvement Wales and Northern Ireland Medical & Dental Training Agency)
The weekly Skype calls with the Chief Executives of the 4 Nation statutory Education and Training organisations now take place on a fortnightly basis. Discussions at these meetings co-ordinate our response to COVID-19, with a focus on our shared responsibilities for education and training in the UK.

Meetings since 19 November 2020 – 4 February 2021

23 November - Meeting with Jann Gardiner, NHS Golden Jubilee
I met with the Chief Executive of NHS Golden Jubilee to discuss the ongoing development of the NHS Scotland Academy in advance of a joint meeting on 24 November.

24 November

NHS Scotland Academy
The Executive Directors of both NES and NHS Golden Jubilee met to discuss a joint framework document for the NHS Scotland Academy.

NHS BCEs COVID-19 Meeting
Items on this agenda included the redesign of Urgent Care, updates on Contact Tracing, Vaccinations, winter planning and a discussion on the Scottish General Medical Services (GMS) contract.

25 November - David Wylie, NES
I met with David Wylie who has recently joined NES as an Associate Director in NMAHP.

27 November – NHS Scotland National Planning Board Meeting
Items on this agenda focused on national NHS Scotland initiatives, including cardiac surgery, IJB strategic plans and robotic assisted surgery.

30 November - NES Executive Team Pandemic Planning
The Executive Team met to discuss the COVID-19 pandemic and current contingency plans for NES, particularly in relation to support for the vaccination programme.

2 December - Charlie Massey, General Medical Council (GMC)
I had a meeting with the Chief Executive of the GMC to discuss the continuing impact of COVID-19 on medical education and training, with a particular focus on the challenges of recruitment and retention.

NHS Scotland Academy
The Executive Directors of both NES and NHS Golden Jubilee met again to progress the development of a joint framework document for the NHS Scotland Academy.

7 December – Board for Academic Medicine (BfAM) Chair Interviews
I was involved in the recruitment process to appoint a new Chair of the BfAM. A candidate was successfully appointed as a result of these interviews.

8 December

NHS BCEs COVID-19 Meeting
Key items on this agenda included updates on Contact Tracing, Vaccinations, the redesign of Urgent Care and winter planning.

Gillian Russell, Scottish Government
David Garbutt, the NES Executive Directors and I had our monthly sponsor meeting with various colleagues from the Health Workforce directorate. Items for discussion included the NHS Scotland Academy, student placements, potential implications of the COVID-19 vaccination programme, Turas Appraisal and Medical Associate Professionals.

9 – 10 December
David Garbutt and I were on the selection panel for the Director of the NHS Scotland Academy post with colleagues from NHS Golden Jubilee.

15 December
NBC Programme Board
Items for discussion at this meeting included the National Boards' continued contribution to recovery and renewal, including an update on estates rationalisation.

NHS BCEs Private Meeting
Items relating to the COVID-19 response included updates on the redesign of Urgent Care, Test and Protect, vaccinations, winter planning and a progress report on the National Laboratories Programme. Other agenda items included papers on the Scottish Access Collaborative and the Infected Blood Inquiry.

16 December

NHS BCEs Strategy Meeting
At this meeting BCEs discussed NHS Scotland workforce modelling and wellbeing and 2021 strategic priorities. They also received presentations on emerging plans for Health and Social Care innovation and the Scottish Disability Assistance Benefits Programme.

6 January – Mark McCarey, Northern Ireland Medical & Dental Training Agency
I met with the Acting Chief Executive of NIMDTA to discuss their future organisational structure.

12 January - NHS BCEs Private Meeting
Items relating to the COVID-19 response included updates on the redesign of Urgent Care, Test and Protect, vaccinations and winter planning. Other key items included an update on NHS Board Remobilisation Plans and the development of an NHS Scotland Cyber Security Centre.

14 January – NDS and NES Digital Webinar
Myself, Audrey McColl, Tracey Ashworth-Davies, Christopher Wroath and Geoff Huggins were joined by Caroline Lamb and Jonathan Cameron from Scottish Government to answer questions from NDS and NES Digital staff in light of the end of Geoff's secondment.

20 January – Scott Wood, Scottish Government
I met with a member of the Health Workforce directorate to discuss the potential redeployment of NES clinical and administrative staff to support the Territorial Board COVID-19 response.

21 January – NES Partnership Forum
The Partnership Forum considered the ongoing impact of the COVID-19 pandemic on NES staff, including Doctors in Training. Members also received the draft NES People and Organisational Development Strategy for approval and received updates on Equality and Diversity and Fair Work.

28 January - Gillian Russell, Scottish Government
David Garbutt, the NES Executive Directors and I had our monthly sponsor meeting with various colleagues from the Health Workforce directorate. Items for discussion included the NES 2021/22 Remobilisation Plan, National Boards redeployment, delayed trainee progression, student placements and NHS Scotland Academy.

NHS Education for Scotland   **NES/21/11**
Item 8b
11 February 2021

NHS Education for Scotland

Board Paper

1.   **Title of Paper**

     Committee Terms of Reference (ToRs)

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

     Della Thomas, Board Secretary & Principal Lead Corporate Governance

3.   **Situation/Purpose of Paper**

     The purpose of this paper is to invite the Board to:

     - Approve the ToRs for the Staff Governance Committee; Audit and Risk
       Committee; Education and Quality Committee and Remuneration Sub
       Committee.
     - Note that as the Digital and Information Committee is currently suspended,
       these ToRs will be developed in due course.
     - Note that the next stages of Board and Committee governance
       development/improvement work are currently paused.
     - Note that further to the Board approval of the Committee ToRs, sections
       9.1 a-d of the Board Standing Orders need to be reviewed and revised
       accordingly.
     - Note that the full corporate governance package will be sequenced
       through Audit and Risk Committee and Board in due course.

4.   **Background**

     4.1   In line with the NES Board Standing Orders (approved at 30 July 2020 Board
           meeting), it was agreed that all Board Committees would develop new ToRs.
           It was also agreed that the changes made to the Responsibilities and Duties of
           the Board Committees post COVID "lessons learnt/governance improvement",
           would also need to be reflected in the ToRs.

     4.2   Each Committee, with the exception of the Digital and Information Committee,
           (which remains suspended), have developed ToRs.

     4.3   The generic headings and key content, applicable to all Committees, were
           approved at 26 November 2020 Board here.

     4.4   Specific content for each Committee has been developed through:
           - A desk-based review including sampling other Board ToRs; relevant
             government policy, directives and related guidance and other good
             practice documents.
           - Committee discussion and workshops.
           - Quorate Committee approval of final versions.

5.   Assessment/Key Issues

5.1   The 28 January 2021 Audit and Risk Committee took an overview of the full set of ToRs for significant gaps or duplication. To assist the Committee with this role, the ToRs had been reviewed against the Board Assurance Framework and findings shared with Committee members.

5.2   With one change to the Audit and Risk Committee ToR, approved at the meeting, the Committee approved all the ToRs for forward sequencing to the 11 February 2021 Board for final approval.

5.3   The next steps of work now required to be progressed, following the development of the ToRs, are detailed in sections 5.3 a) and b). The Audit and Risk Committee noted that due to phase three COVID and the application of the NES "Governance Light" approach, these aspects are currently delayed or paused:
   a. Committee and Board annual schedules of business (it is the intention to develop *draft* schedules).
   b. Identification and allocation of strategic KPIs in relation to each Committee and the development of the Committee level assurance framework and the alignment with strategic risk and the establishment of the executive Risk Management Group (executive led next phase development work paused).

5.4   As part of the work on the development of the Committee ToRs, the Audit and Risk Committee Chair, identified that a paragraph of the generic ToRs is missing. As the generic ToRs had already been approved by the Board, paragraph 11.2 has been added to all ToRs and will be included with the generic ToRs when they are next reviewed.

5.5   Paragraphs 9.1 a-d were included in the July 2020 Board Standing Orders from the previous version of the Board Standing Orders, whilst the Committee ToRs were under development. This section of the Board Standing Orders will now need to be reviewed and revised accordingly. It will be brought through Audit and Risk Committee, prior to Board for final approval. In the interim the quorate set out for Committees set out in the generic ToRs is taking precedence.

5.6   In the future, it remains the intention to bring the full corporate governance package (as per the Board Standing Orders) through Audit and Risk Committee and then Board for final approval as one product/paper on an annual basis. This will include the Board Model Code of Conduct; Board Standing Orders; Standing Financial Instructions; Board Scheme of Delegation; all Committee ToRs.

6.   Recommendations
   - Approve the ToRs for the Staff Governance Committee; Audit and Risk Committee; Education and Quality Committee and Remuneration Sub Committee.
   - Note that as the Digital and Information Committee is currently suspended, these ToRs will be developed in due course.
   - Note that the next stages of Board and Committee governance development/improvement work are currently paused.

"Governance Light" Board/Committee paper

- Note that further to the Board approval of the ToRs, sections 9.1 a-d of the Board Standing Orders will be reviewed and revised accordingly.
- Note that the full corporate governance package will be sequenced through Audit and Risk Committee and Board in due course.

For completion by author:

a) Have Educational implications been considered?
- ☒ Yes
- ☐ No

b) Is there a budget allocated for this work?
- ☒ Yes
- ☐ No

c) Alignment with NES Strategy 2019-2024
- ☐ 1. A high-quality learning and employment environment
- ☐ 2. National infrastructure to improve attraction, recruitment, training and retention
- ☐ 3. Education and training for a skilled, adaptable and compassionate workforce
- ☐ 4. A national digital platform, analysis, intelligence and modelling
- ☒ 5. A high performing organisation (NES)

d) Have key risks and mitigation measures been identified?
- ☒ Yes
- ☐ No

e) Have Equality and Diversity and health inequalities issues been considered?
- ☒ Yes
- ☐ No

f) Have you considered a staff and external stakeholder engagement plan?
- ☒ Yes
- ☐ No

Della Thomas
Board Secretary, NES
February 2021

NHS Education for Scotland

Staff Governance 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 *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 Operating 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 Generic ToRs**

5. Attendees

5.1 – 5.2 **Attendees Generic ToRs**

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 Generic ToRs**

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 Generic ToRs**

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.

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 meets legislative requirements and the implementation of the Safer Staffing Regulations;

9.2.3   ensure appropriate governance in respect of risks associated with staff, determined by the Committee and by the Audit and Risk Committee. 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.

9.3   The Committee will pro-actively promote the health and wellbeing of staff particularly as a consequence of the COVID-19 pandemic

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
NES, November 2020

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 five non-executive members of the Board including the Audit 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 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 5 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 operational 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, whistle-blowing processes. 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 draft financial Plans (Budgets), considering if they support delivery of the Annual Operating Plan and the NES Strategic objectives, and make recommendations on these to the Board.

9.5.2 Review quarterly reports on actual and year-end forecast expenditure against budgets and the reasons for variances and make recommendations concerning these reports 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 Sustainability

9.7.1 Review sustainability performance, plans and returns.

9.7.2 Consider the sustainability implications of matters relating to accommodation, maintenance of premises and provision of services.

9.8 Workplan

9.8.1 The Committee will develop a work plan 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
February 2021

NHS Education for Scotland

Education and Quality 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 *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 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 and
- advise the Board, when appropriate on where, and how, its education systems and assurance framework may be strengthened and developed further.

3.   Membership

3.1 Full membership of the Committee shall include at least four non-executive Directors of the NHS Board.

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 Board that, where education and training is subject to statutory regulatory oversight, the requirements of the relevant regulator are being met.

9.2 Provide assurance to the Board regarding the effective management and improvement of the quality of NES's education and training activities and outcomes; including internally regulated activities, clinical assurance and leadership development activities.

9.3 Seek assurance that strategies, policies, structures, responses to consultations and processes for the governance of education and training have taken a forward looking and strategic view.

9.4 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 education and training provided.

9.5 Seek assurance of the effective performance, monitoring, management and value of education and training programmes and contracts, including the identification of impact (including outcomes) or intended impact, where possible, and the management of and identification of related risks.

9.6 Monitor compliance of education and training activities with statutory and regulatory requirements, of equity, equality legislation, human rights and Government policy and other relevant policies and NES priorities in relation to equity, equality and diversity, health inequalities, person-centred care and participation, and educational quality.

9.7 Seek assurance as to the effective management of educational research programmes.

9.8 Seek assurance that governance and quality controls are in place relating to the delivery of technology enhanced education and training.

9.9 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.

9.10 Seek assurance of continuous improvement in relation to user feedback, including learner satisfaction, retention, attainment and progression.

9.11 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.

9.12 Scrutinise, approve or note annual reports as appropriate, in relation to the UK Education statutory regulatory reports; the annual complaints and feedback report; and other reports as delegated by the Board.

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 2021

NHS Education for Scotland

Remuneration Sub-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 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 the 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 shall include the:
- Non-Executive Chair
- Non-Executive Board Chair
- Non-Executive Board Vice-Chair
- Non-Executive Employee Director
- Non-Executive Chair of the Audit & Risk Committee
- Non-Executive Chair of the Education and Quality Committee
- Non-Executive Chair of the Staff Governance Committee
- Non-Executive Chair of the Digital and information Committee

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).

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 meet at least three times per annum.

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 in terms of the national system and 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) and any changes to the remuneration or the Terms and Conditions of Employment arising from this assessment of performance during the review period.

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. (currently under review).

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.

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 2021

NHS Education for Scotland

Board Paper

1.   **Title of Paper**

      Standing Financial Instructions - Review

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

      Janice Sinclair, Head of Finance and Fraud Liaison Officer (FLO)

3.   **Situation/Purpose**

      Board Standing Financial Instructions (SFIs) are issued to provide a sound basis for the control of NES financial affairs to ensure that NES acts within the law and that financial transactions are in accordance with the financial directions issued by the Scottish Government. The SFIs are required to be reviewed at least annually by the Audit & Risk Committee (ARC) and forwarded to the Board for approval.

4.   **Background**

      The ARC reviewed the existing SFIs at the meeting on the 28th January 2021.

      The SFIs were last updated in April 2020 to reflect changes in governance required as part of the Board's response to the Covid pandemic.

      Given that the majority of the SFIs were written in such a way as to cover most eventualities, there were few changes made to the SFIs at that time.

      Amendments were made to some authorisation tables to increase limits for particular officers to ensure that contracts, purchase orders and payments could be progressed when required by removing potential bottlenecks.

      Other changes were minor and reflected the need to be able to process credit card payments for suppliers and the ability to loan equipment to other public bodies. This facility was used to enable NES to provide laptops to both NHS Lothian and Disclosure Scotland to support remote working in these organisations.

      The SFIs were approved by the Board in May and are noted in board Paper NES/20/54.

      The ARC confirmed that changes approved by the Board in May 2020 were still relevant.

      Assessment/Key Issues

      Early Retirals

      At the ARC meeting, a question was raised as to whether the wording in Section 9.49 relating to the reporting of early retirals to the Remuneration committee, required to be updated.

The existing wording is:

"Subject to the limits laid down in the Scheme of Delegation, all early retirals which result in additional costs being borne by the employer will be submitted to the Remuneration Committee for consideration and recommendation to the NES Board. The Chair shall personally authorise payments in respect of Chief Executive and the Chief Executive shall personally authorise payments in respect of all other employees, following approval by the NES Board"

However, following the introduction of a new severance policy by SG, effective from Sept 2019, the Remuneration Committee approved a revised process to be followed when progressing either Settlement Agreements or Voluntary Resignations with financial considerations (to include voluntary early severance and voluntary early retirement).

Settlement Agreements are very infrequent and have been used in settlement of Employment Tribunal cases or where the employment relationship is continuing, but issues are unresolved.

The revised process is:

- Voluntary Resignation requests are approved by the Chief Executive as Accountable Officer based on the recommendations of the Directors of Finance and Workforce, and after submission of a business case to the Scottish Government. On an annual basis, anonymised data covering these arrangements is reported to the Remuneration Committee.

- Business cases covering Settlement Agreements require to be approved by the Chief Executive and Remuneration Committee before submitting them for final approval to the Scottish Government.

The initial SG policy stipulated a cap of £95,000 on severance payments, however, SG subsequently confirmed that if someone has a contractual entitlement to a payment above £95,000 the cap cannot apply.

It has not been possible to finalise the changes required to the SFIs at this time as it has become apparent that we need to ensure alignment with the ToRs for the Remuneration Committee. A proposal will be taken to the April Audit Committee.

Any further changes required to the SFIs as a result of any significant changes to the ways of working within NES will be reported to the ARC as soon as possible, and then forwarded to the Board for final approval. This will include any decision to remove the amendments put in place to deal with the COVID pandemic. A further formal review by the ARC will be scheduled for January 2022.

5. Educational Implications

N/A

6. Financial Implications

It is essential that all financial activities are carried out within a strong internal control environment.

7. Which of the 5 Key Areas of Focus in the NES Strategy for 2019-24 does this align to?

A High Performing Organisation

8. Impact on Quality Ambitions

As above

9. Key Risks and Proposals to Mitigate the Risks

There is no expectation of a change in the level of risk as there have been no changes to the SFIs.

10. Equality and Diversity

Not directly applicable to this paper.

11. Health Inequalities

Not directly applicable to this paper.

12. Communications Plan

Not directly applicable to this paper.

13. Recommendations

The Board is asked to confirm that they are content that the changes made to the SFIs in May 2020 are still relevant, and to note that changes required to clarify the reporting of Settlement Agreements and Voluntary Resignations will be considered by the Audit committee in April.

Janice Sinclair
NES
February 2021

STANDING FINANCIAL INSTRUCTIONS

JANUARY 2020
(Amended for Covid arrangements – April 2020)

Approved by the Board: January 2020/May 2020

APPENDIX 2A – RECORDS RETENTION SCHEDULE

APPENDIX 2B – GENERIC RECORDS RETENTION SCHEDULE

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 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 NHS EDUCATION FOR SCOTLAND (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 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.
- 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 these 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 shall be regarded as a disciplinary matter.

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 the masculine gender shall be read as equally applicable to the feminine 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.
The Accountable Officer must ensure that the NES Board, the Executive Team, and all other relevant decision making bodies as may be constituted from time to time, have drawn to their attention and take account of all relevant financial considerations, including any issues of propriety, regularity or value for money, in considering policy proposals relating to expenditure or income.

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 the Public Audit and Post-legislative Scrutiny Committee of the Scottish Parliament 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.

2.3.3 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 proper financial systems are in place and applied, and that procedures and controls are reviewed annually to ensure their continuing relevance and reliability, especially at times of major changes;

2.4.2 Sign the Accounts assigned to them, and in doing so accept personal responsibility for ensuring that they are prepared under the principles and in the format directed by Scottish Ministers.

2.4.3 Ensure that proper financial procedures are followed incorporating the principles of separation of duties and internal checks and that accounting records are maintained in a form suited to the requirements of the relevant Accounting Manual, as well as 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 and other assets are properly managed and safeguarded.

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.

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 effective management systems appropriate for the achievement of the organisation's objectives, including financial monitoring and control; systems have been put in place;

2.4.9 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;

2.4.10 Ensure that best value from resources is sought, by making proper arrangements to pursue continuous improvement having regard to economy, efficiency and effectiveness, and in a manner which encourages the observance of equal opportunities requirements;

2.4.11 Ensure that managers at all levels have a clear view of their objectives, and the means to assess and measure outputs or performance in relation to those objectives;

2.4.12 Ensure that managers at all levels are assigned well-defined responsibilities for making the best use of resources including a critical scrutiny of output and value for money;

2.4.13 Ensure that managers at all levels have the information, training and access to the expert advice which they need to exercise their responsibilities effectively.

2.4.14 Make judgements and estimates on a reasonable basis and prepare the accounts on a going concern basis.

2.5 REGULARITY AND PROPRIETY OF EXPENDITURE

2.5.1 The Accountable Officer has a particular responsibility for ensuring compliance with parliamentary requirements in the control of expenditure. A fundamental requirement is that funds should be applied only to the extent and for the purposes authorised by Parliament in Budget Acts (or otherwise authorised by section 65 of the Scotland Act 1998). Parliament's attention must be drawn to losses or special payments by appropriate notation of the organisation's accounts. In the case of expenditure approved under the Budget Act, any payments must be within the scope and amount specified in that act.

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 when employing management consultants and their staff.

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 his/her advice to the contrary, the Board or other decision making body is contemplating a course of action which he/she considers would infringe the requirements of regularity or propriety, and that, as a result, he/she would be required to take action that is inconsistent with the proper performance of their duties as Accountable Officer, he/she 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 his/her objection to the proposal and the reasons for the objection. If his/her advice is overruled, and the Accountable Officer does not feel that he/she would be able to defend the proposal to the Audit Committee of the Scottish Parliament, as representing value for money, he/she should obtain written instructions from the Board and send a copy of his/her 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 is identified to act on their behalf if required.

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

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 NHSScotland, 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 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 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 IN NES

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 value for money, and by defining specific responsibilities placed on officers.

4.3 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 Director of Finance may issue.

4.4 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.

4.5 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 Director of Finance on all such matters.

4.6 Without prejudice to the functions of any other officers of NES, the duties of the 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.

4.7   The 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 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 Director of Finance.

4.8   Where a fundamental organisational change occurs the 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.

4.9   Wherever the titles Chief 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.   REVENUE RESOURCE LIMIT

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 measures which NES must operate within are the:

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

5.2   The Director of Finance shall ensure that all income and expenditure is identified correctly and accounted for in the relevant financial year.

5.3   The 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 Director of Finance shall ensure that amounts drawn for NES against the agreed cash limit are required for approved expenditure only.

5.5 The Director of Finance will ensure that the cash balances held by NES are not excessive but are sufficient to meet immediate liabilities. The 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. Payments of due debts shall not be delayed artificially to a following financial year where the expenditure is properly attributable to the current year.

5.6 In submitting the final requisition for a fiscal year, the 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.

5.7 The Director of Finance will review the RRL/CRL and Cash positions regularly to ensure that NES remain on target to meet its financial objectives.

5.8 The Director of Finance shall provide monthly reports to the Scottish Government Health and Social Care Directorate in the form requested.

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 limits 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 Corporate Resources, shall compile and submit to NES Board and the Scottish Government Health and Social Care Directorate, an Annual Operating Plan in accordance with the guidance issued by the Scottish Government Health and Social Care Directorate.

6.3 Officers shall provide the Director of Finance with all financial, statistical and other relevant information as necessary for the compilation of such estimates and forecasts that the Director of Finance may need to fulfil the requirements of NES and the Scottish Government Health and Social Care Directorate.

6.4 The Director of Finance shall, on behalf of the Chief Executive, prepare and submit budgets (by Directorate and category, within the limits of available funds) to NES Board for its approval.

6.5 The Director of Finance shall provide periodic reports to the Chief Executive and NES Board, comparing actual expenditure and income with approved budgets. The 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.

6.6 The 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 Director of Finance shall have a right of access to all budget holders on budgetary related matters.

6.7 The 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.

6.8 The Chief Executive may delegate responsibility for budgets to officers to permit the performance of defined activities. The terms of delegation shall include a clear definition of individual and group responsibilities for control of expenditure, exercise of virement, achievement of planned levels of service and the provision of regular reports upon the discharge of these delegated functions to the Chief Executive. The 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.

6.9 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;
- the Chief Executive may vary the budgetary limit of an officer within the Chief Executive's own budgetary limit.

6.10 Except where otherwise approved by the Chief Executive, taking account of advice of the 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 19.

6.11 Expenditure, for which no provision has been made in an approved budget and not subject to funding under the delegated powers of virement, shall only be incurred after authorisation by the Chief Executive or NES Board, as appropriate.

6.12 The 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 19.

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 Director of Finance shall maintain proper accounting records which allow the timeous 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 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.

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 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 production and circulation of an Annual Report for NES in such form as may be determined by the Scottish Government Health and Social Care Directorate. The Annual Report, together with an audited financial statement, shall be presented at a public meeting which must take place no later than six 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.

8.2 NES is obliged to comply with instructions from Scottish Ministers and Her Majesty's Treasury in relation to the operation of bank accounts. All bank accounts will only be opened on the instruction of the Director of Finance. The Scottish Government commercial banking arrangements provide for public bodies to hold a commercial bank account with the Royal Bank of Scotland. During financial year 2015/16, HM Treasury implemented new arrangements for the Government Banking Service (GBS). Previously, Public Sector organisations were obliged to use both Citibank and RBS, however under the revised arrangements, all NHSScotland bodies are obliged to use accounts provided by NatWest, part of RBS Group As at 31st December 2018 the following bank accounts were 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; BACS rejects and recalls; Income receipts from Portal; and Local Pay-Ins
NatWest	Account provided under existing GBS contract	Payable Orders (cheques); BACS payments; Receipt of Income from Debtors; 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 Director of Finance.

8.3 Payable Orders are printed with the signature of the Assistant Paymaster General added at the time of processing.

8.4 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, manual payments which exceed £50,000 require on-line approval from two authorisers. The Director of Finance will specify all officers approved to authorise payments and BACS files

8.5 The signatory(ies) will satisfy themselves that payments are correctly substantiated and are in respect of sums properly payable by NES.

8.6 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.

The 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.

8.7 The 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

9.   FINANCIAL ARRANGEMENTS

9.1 The 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 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 of the Director of Finance before payment.

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 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 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 Director of Finance and suitable receipts obtained. The loss of any key shall be reported immediately to the Head of Finance. The 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 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 Central Finance. Finance will bank the income and issue a cheque to the Charity. Cash will be banked by finance, no later than the following working day. Any cash held overnight will be kept in the safe.

9.8 The opening of mail and the counting and recording of any takings shall be undertaken by two officers together.

9.9 Official monies shall not under any circumstances be used for the encashment of private cheques.

9.10 All cheques, postal orders, cash etc. shall be banked intact promptly in accordance with the approved procedures of the Director of Finance. Disbursements shall not be made from cash received, except under arrangements approved by the Director of Finance.

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 PHYSICAL 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. Items falling into the following categories are capital by definition:

- 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.

- In cases where a new development would face an exceptional write off of items of equipment costing individually less than £5,000 the Board has the option to capitalise initial revenue equipment costs with a standard life of 10 years.

- Assets of lesser value may be capitalised where they form part of a group of similar assets purchased at approximately the same time and cost over £20,000 in total, or where they are part of the initial costs of equipping a new development and total over £20,000.

9.17 The items on the register shall be physically checked at least annually by the designated officer and all discrepancies shall be notified in writing to the 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.

9.18   A separate register of items of a specialist nature which do not meet the formal definition of capital assets e.g. Laptops, PCs, mobile phones shall be maintained by nominated officers. The Director of Finance shall approve the form of all registers and the methods of updating.

9.19   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).

9.20   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 during the Covid Pandemic will be approved by the DoF and the Director of Digital.

9.21   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.

9.22   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.

INCOME

9.23   The 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 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 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).

9.26   In relation to Income Generation Schemes, the 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 Director of Finance.

All fees and charges must be reviewed annually by the Budget Holder to ensure they are still appropriate and agreed by the Director of Finance.

PAYMENT OF ACCOUNTS

9.27 The Director of Finance shall ensure that up to date lists of authorised signatories are maintained and reviewed regularly, at least annually.

9.28 The 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.

9.29 All officers shall inform the Director of Finance promptly of all monies payable by NES arising from any transactions related to leases or tenancy agreements. All expenditure should be consistent with approved spend from the budget process. Suppliers shall be informed to send all invoices to the Finance Department for processing, quoting a valid Purchase Order number where appropriate. Is this still the case?

9.30 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.

9.31 The 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 were 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

9.32   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.

9.33   The 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)

9.34   Where an officer certifying accounts or claims relies upon other officers to do preliminary checking, he/she 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 Director of Finance must approve the list of officers authorised to certify invoices, non-invoice payments and payroll schedules, including where required by the Director of Finance, financial limits to their authority. The Director of Finance will maintain details, together with their specimen signatures.

9.35   In the case of contracts for building or engineering works which require payment to be made on account during progress of the works, the 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 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. To assist financial control, a contracts register should be created.

9.36 The 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 policy on culling and retention of documents.

9.37 When commissioning contractors to carry out work on behalf of NES, the responsible officer must check the employee/employer status of the individual concerned. Claims of self-employed status on behalf of the individual need to be verified for every project undertaken. The 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 asked to complete a fee form and will be paid through the NES payroll.

9.38 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 Director of Finance

9.39 The budget holder is responsible for ensuring that all items due under a payment in advance contract are received and they must inform the Director of Finance immediately problems are encountered.

9.40 NHSScotland operates a "Payment on Behalf" process which eliminates the need for the transfer of cash between 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 on behalf of Scottish Government and the transfers are processed monthly. Where payments to other Boards are managed through this process, the 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 Head of Finance/Deputy Director of Finance

has delegated authority to approve the Transfer request to NSS on behalf of the Director of Finance.

9.41 The issue of NHS Credit/Purchasing cards will be managed by the Director of Finance who will delegate authority to the Head of Finance to amend credit/purchasing card limits as appropriate during the COVID-19 pandemic to ensure that suppliers are paid timeously

PAYMENT OF STAFF

9.42 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

9.43 Each employee shall be issued with a contract which shall comply with current employment legislation and be in a form approved by NES.

9.44 Completion and signing of engagement forms and such other documents necessary for the payment of staff as they may require shall be co-ordinated by appropriate HR Officers and approved forms forwarded, as close to the new member of staff commencing with NES, to NSS Payroll and copied to the Operational Advisor within the Finance Department.

9.45 A termination of employment form and such other documents as may be required, for payment purposes, shall be completed, signed and approved through the appropriate Line Manager and HR Officers and submitted to NSS Payroll and copied to the Operational Advisor within the Finance Department. Where an employee fails to report for duty in circumstances which they have left without notice and this has been confirmed, NSS Payroll and Payroll Liaison Officer shall be informed immediately.

9.46 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 forwarded, as close to the effective date of change to NSS Payroll and copied to the Payroll Liaison Officer within the Finance Department.

9.47 Where the personnel and payroll systems are connected by an electronic interface the requirement for contract/engagement forms, termination of employment forms and notification of change forms to be sent to the Head of Payroll Services may be altered to allow for such information to be transmitted by electronic means providing always that appropriate procedures for such transmissions are agreed by the Director of Finance.

9.48 All time-records, staff returns, and other pay records and notifications shall be in a form approved by the 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.

9.49 Subject to the limits laid down in the Scheme of Delegation, all early retirals which result in additional costs being borne by the employer will be submitted to the Remuneration Committee for consideration and recommendation to the NES Board. The Chair shall personally authorise payments in respect of Chief Executive and the Chief Executive shall personally authorise payments in respect of all other employees, following approval by the NES Board.

9.50 The Director of Workforce and the 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 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 Data Protection Act, 1984;
- 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;

- A system to ensure the recovery from leavers of any sums due by them to NHS Education.

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

9.52   After approval by the Remuneration Committee, the Chair will personally authorise for payment the Performance Related Pay (PRP) of the Chief Executive and the Chief Executive will personally authorise for payment the PRP of all other NES staff.

9.53   The 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 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 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 PURCHASING

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 Governments Scottish Procurement Policy Handbook 2008, and the Scottish Governments published Procurement Journey, including any subsequent revisions.

11.2   In all circumstances officers of NES shall seek to obtain Best Value through the application of the NES Policy and Procedures.

11.3   NES shall comply as far as is practicable with the Scottish Capital Investment Manual and Scottish Procurement Policy Notes.

11.4 European Union Procurement Directives shall have an effect as translated through Public Contracts (Scotland) Regulations 2015 and any subsequent revisions

11.5 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 Head of Procurement and Commissioning, the Head of Finance or the Director of Finance, based on the scheme of delegation, can goods or services be ordered out-with such agreements.

THRESHOLDS FOR PURCHASING/ORDERING

11.6 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 value for money 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), Public Contracts Scotland (PCS), including PCS Quick Quote and the EU/GATT 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

	≥123*	OJEU	OJEU	OJEU	OJEU	OJEU
	>50 <123*	PCS-T	PCS-T	PCS-T	PCS-T	PCS-T
Spend £k	>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				

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

11.7   The Chief Executive, acting with the 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

11.8   The limits for delegation for the acceptance of tenders shall be approved by NES Board and the Executive Team from time to time.

11.9   Formal tendering procedures may be waived with the recorded approval of the Director of Finance where;
- For values below the OJEU 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
- Article 19 of the EU public procurement directive 2004/18/EC enacted by Part 2, Section 2, 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.

11.10   Competitive tendering can only be waived in specific, limited circumstance by the Chief Executive, Director of Finance, Head of Procurement, or Head of Finance per the maximum contract values in the table below. The waiver and the reasons should be documented, and the record retained by Procurement.

SINGLE TENDER

11.11 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

11.12 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 Head of Finance or the Director of Finance.

11.13 Official orders shall be issued by the NES Purchase Order system in a form approved by the Director of Finance and shall include such information concerning prices or costs as he/she may require. All orders shall incorporate an obligation on the contractor to comply with NES terms and conditions as regards delivery, carriage, documentation, variations etc.

11.14 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 Director of Finance.

11.15 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 Director of Finance.

11.16 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 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 Director of Finance in advance of commitment being made.

MANAGEMENT CONSULTANTS

11.17 NHS Circular MEL (1994) 4 advises NHS Boards and Special Health Boards of the results of a review of the use of Management Consultants and sets out a course of action to be adopted. Management Consultants should only be used when documentary evidence of a benefit to NES has been prepared.

11.18 In choosing a Management Consultant, steps should be taken to ensure that they are capable of carrying out the assignment; that Best Value 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;
- EU 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.
- 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 Best Value. All tenders are awarded on the basis of MEAT (Most Economically Advantageous Tender) All supporting evidence is documented and held in accordance with Appendix 2: 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;
- Recover all losses in full or enforce specific performance where goods or services are not delivered in line with contract terms.

11.25 The 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 SCOTCONCODE and SCIM. The Technical audit of these contracts shall be the responsibility of the relevant Director.

IN HOUSE SERVICES

11.26 The Chief Executive 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 NHS Education for Scotland Hospitality 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.

- 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.

- 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 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.

12.3 Losses are classified according to details issued by the Scottish Government Health and Social Care Directorate.

12.4 In accordance with the Scheme of Delegation, the Chief Executive, acting together with the 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 number	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 / Corruption / Theft (where documentation has been falsified) & attempts to perpetuate any of these activities	
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
15	**Claims Abandoned**	
	(a) Private Accommodation	10,000
	(b) Road Traffic Acts	20,000
	(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
	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	Comp payments – ex-gratia –Clinical	250,000

Item number	Category		Delegated Authority (per case) £
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-regulationary Payments**		Nil
32	**Gifts in cash or kind**		10,000
33	**Other losses**		10,000

12.5 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 Committee identifying which powers have been exercised and the amount involved.

12.6 The Audit Committee will formally consider and approve all Losses annually when recommending adoption of the Statutory Annual Accounts.

12.7 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.

12.8 The Director of Finance shall be authorised to take any necessary steps to safeguard NES's interests in bankruptcies and company liquidations.

12.9 All articles surplus to requirements or unserviceable shall be condemned or otherwise disposed of by an officer authorised for that purpose by the Director of Finance.

12.10 The condemning officer shall satisfy himself as to whether or not there is evidence of negligence in use and shall report any such evidence to the Director of Finance and the Chief Executive who shall take the appropriate action.

13. RISK MANAGEMENT

The Chief Executive Officer shall ensure that NES has a Risk Management Strategy that is approved and monitored by the Audit 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
Definition of responsibilities with regard to risk management

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

The 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 remit of all committees will be reviewed annually and is published within the Corporate Induction Handbook

15. SPECIFIC ROLES & RESPONSIBILITIES

ROLE OF THE DIRECTOR OF FINANCE

15.1   The 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 Committee and meets the NHS mandatory audit standards;
- 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 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;
- 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 Manual.

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 and poor value for money or other causes;

(d) The suitability, reliability and integrity of management information systems;

(f) The adequacy of follow-up action to their reports.

15.5 The Internal Auditors shall be accountable to the Audit Committee of NES. The reporting and follow up systems for internal audit shall be agreed between the Director of Finance, the Audit 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 Director of Finance shall be notified immediately. (See also Section 13 – Losses and Special Payments).

15.7   The Director of Finance, normally via the Internal Auditor, shall investigate cases of fraud, misappropriation or other irregularities, in compliance with the approach agreed in the partnership agreement with NHS Counter Fraud Services.

15.8   The Internal Auditors shall issue reports to the 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 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 Committee.

15.10   At each meeting of the Audit 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 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 himself 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;

- 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 Digital shall be responsible for the overall maintenance and security of networked systems within NES. The 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 Digital shall devise and implement any necessary procedures to protect NES and individuals from inappropriate use or misuse of any financial or other information held on computer files for which they have responsibility and shall take account of the provisions of the Data Protection Act 1998.

16.3 The Director of Finance shall satisfy himself that such computer audit checks and reviews as they may consider necessary are being carried out.

16.4 The 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 Director of Finance shall ensure that contracts for computer 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 computer service for financial applications, the Director of Finance shall periodically seek assurances that adequate controls are in operation.

16.7 Where computer systems have an impact on corporate financial systems the Director of Finance shall ensure that:

(a) Systems acquisition, development and maintenance are in line with corporate policies such as an Information Technology Strategy;

(b)   Data produced for use with financial systems is adequate, accurate, complete and timely, and that a management (audit) trail exists; and

(c)   Director of Finance staff have access to such data.

17.   FIXED ASSETS

17.1   The Chief Executive and 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 each organisation.

17.2   The 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;
- Complies with the guidance in the NHSiS Scottish Government Scottish Capital Investment Manual and subsequent disclosure complies with International Financial Reporting Standards (IFRS).

17.3   Consideration should be given to the use operating leases where appropriate.

17.4   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.

17.5   Where capital assets are sold, scrapped, lost or otherwise disposed of, their value must be removed 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, together with any subsequent amendments, shall be followed.

17.6   There is a requirement to achieve best value when disposing of assets belonging to NES. Competitive Tendering should normally be undertaken in line with requirements of the organisation's tendering procedure.

17.7 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 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;
- Land or buildings concerning which Scottish Government guidance has been issued but subject to compliance with such guidance.

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

17.9 All assets must be disposed of in accordance with MEL (1996) 7 "Sale of Surplus and obsolete goods and equipment". The Director of Finance shall be notified of the disposal of any fixed assets. All proceeds from the disposal of fixed assets are notified to the Director of Finance.

17.10 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 (Section 13) as issued by the Scottish Government Health and Social Care Directorate. The organisation shall maintain a register of assets held under the operating leases or PFI contracts.

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

- recording managerial responsibility for each asset;
- identification of additions and disposals;
- identification of all repairs and maintenance expenses;
- physical security of assets; periodic verification of the existence of, condition of and title to assets recorded;
- Identification and reporting of all costs associated with the retention of an asset.

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

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

17.14 The value of each asset shall be indexed to current values in accordance with methods specified in the Capital Accounting Manual

17.15 The value of each asset shall be depreciated using methods and rates as specified in the Capital Accounting Manual.

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

18. FINANCIAL IRREGULARITIES

This section should be read in conjunction with the NES Fraud and Corruption policy.

18.1 Guidance on the approach to various forms of financial irregularities is contained in the following Scottish Government Health and Social Care Directorate Circulars which draw a clear distinction between treatment of suspected (a) theft and (b) fraud, embezzlement, corruption and other financial irregularities (hereafter referred to as "fraud etc"):

- CEL(2010)10 Revised Scottish Financial Return (SFR) 18: Enhanced reporting of NHS frauds and attempted frauds 29/03/2010
- NHSScotland Counter Fraud Services: National Services Scotland: partnership agreement with health boards 27/08/2009
- CEL(2009)18 Partnership agreement between NHSScotland Counter Fraud Services and NHS Boards and Special Health Boards 05/05/2009
- CEL(2008)03 Strategy to combat NHS fraud in Scotland 28/01/2008

Fraud is defined as:

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

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.

18.2 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.

18.3 The Fraud Liaison Officer will also prepare a report for the first appropriate meeting of the Audit 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.

18.4 Careful consideration should be given to payment claims which arise from organisations or individuals who are under investigation or against who proceedings are being taken for suspected fraud, etc. Legal advice should be sought where necessary.

18.5 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.

19.   AUTHORISATION LIMITS

19.1 The purpose of Standing Financial Instructions is to ensure adequate controls exist for the committing and payment of funds on behalf of the Board.

SCHEME OF DELEGATION FOR SERVICE LEVEL AGREEMENTS

19.2 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 the following:

OFFICER	AUTHORISATION LIMIT
Senior Managers and Assistant Directors	Up to or equal to £25,000
Associate Directors	£25,000 to £50,000
Directors and Post Graduate Deans	£50,000 to £250,000
Director of Finance	Over £250,000
Chief Executive	Over £500,000

19.3 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 the following:

OFFICER	AUTHORISATION LIMIT
Senior Managers and Assistant Directors	Up to or equal to £25,000
Associate Directors	£25,000 to £50,000
Directors and Post Graduate Deans	£50,000 to £250,000
Director of Finance	Over £250,000
Chief Executive	Over £500,000

SCHEME OF DELEGATION FOR CONTRACTS

19.4 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 the following table. The "List of Authorised Buyers" will be held by the Finance Department. The total contract value must also be verified by the designated Finance Manager to ensure this is in line with Operational Plans and budgets.

OFFICER	AUTHORISATION LIMIT
Administrator, Coordinator, Officer	Up to the level of their designated authority, which shall be no greater than £10,000
Senior Managers and Assistant Directors	£10,000 to £25,000
Associate Directors	£25,000 to £50,000
Directors and Post Graduate Deans	Over £50,000

AUTHORISED BUYER	AUTHORISATION LIMIT
Procurement Officer	Up to the level of their designated authority, which shall be no greater than £50,000
Procurement Manager	Up to or equal to £100,000
Head of Procurement	Up to or equal to £200,000
Director of Finance	£200,000 to £500,000
Chief Executive	Contractual and other commitments over £500,000

Contractual and other commitments with non-NHS Bodies over £1,000,000 in total should be reported to the Board.

SCHEME OF DELEGATION FOR PURCHASES (PURCHASE ORDERS AND INVOICES)

19.5 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 up to the following levels:

OFFICER	AUTHORISATION LIMIT
Administrator, Coordinator, Officer	Up to the level of their designated authority, which shall be no greater than £10,000
Senior Managers and Assistant Directors	Up to or equal to £25,000
Associate Directors	Up to or equal to £50,000
Directors and Post Graduate Deans	Up to or equal to £250,000
Director of Finance	Up to or equal to £500,000
Chief Executive	Contractual and other commitments over £500,000

19.6 All orders (or invoices without a purchase order) over £100k require second authorisation to provide assurance that the spend is in line with contractual and other commitments and ensures that orders have already been authorised by another senior member of staff, responsible for the budget concerned.

SECONDARY APPROVAL	AUTHORISATION LIMIT
Procurement Manager	Up to or equal to £250,000
Head of Procurement	Up to or equal to £500,000
Head of Finance	Up to or equal to £500,000
Director of Finance	Up to or equal to £500,000
Chief Executive	Contractual and other commitments over £500,000

19.7 In order to ensure that Purchase Orders can be processed through eFinancials and PECOS, it will be necessary to give Directors and Post Graduate Deans a higher limit of £500,000 within the background tables of the Finance Systems. This enables the system workflow to operate in a way that assures the buyer (providing the second level of approval) that the order has been approved by the person responsible for the budget. However, the controls in both systems will ensure that all Purchase Orders above £100,000 will require approval by a buyer, thus ensuring that the above limits are applied in practice. The same limits and dual authorisation process apply to all invoices without purchase orders.

19.8 Special arrangements exist for payments to other Boards in relation 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 Head of Finance before being processed.

SCHEME OF DELEGATION FOR VIREMENTS

19.9 It is the responsibility of the Chief Executive and the Director of Finance to ensure all financial commitments entered into on behalf of the Board are in line with approved budgets and management plans. The authority to vire between budgets is covered through a scheme of financial delegation as set out below.

Virement is the agreed transfer of revenue budget provision from one income or expenditure line to another within a financial year, within the same Directorate.

During the operational planning process, the Executive Team approve the allocation of budgets on the basis of the information on inputs, outcomes and impact 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.

The following adjustments are not subject to the Scheme of Delegation for Virements:

- 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 and approved at the next Executive team meeting.
- 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.

- Budget allocations made by finance to release pre-agreed provisions (example – a provision created for a potential pay award).
- 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).

OFFICER	VIREMENT LIMIT	AUTHORITY REQUIRED
Chief Executive	0 to £250,000	Totally Delegated (inform DoF)
	£250,000 to £500,000	Delegated but inform the Board
	over £500,000	Seek prior approval from Board
Director of Finance	0 to £100,000	Totally delegated (Inform Relevant Finance Manager)
	£100,000 to £250,000	Delegated but report to Chief Executive
	over £250,000	Seek prior approval from Chief Executive
Principal Lead, Finance Business Partnering (FBP) and Head of Finance	0 to £25,000	Delegated (Inform Relevant Finance Manager)
	£25,000 to £100,000	Delegated but report to Director of Finance
	Over £100,000	Seek prior approval from DoF
Budget Holders	0 to £25,000	Delegated (Inform Finance Manager)
	£25,000 to £100,000	Seek prior approval from Principal Lead FBP or Head of Finance
	over £100,000	Seek prior approval from Director of Finance

The base materiality level for the use of virement will be 10% of the original budget allocation. For example, where a cost
 centre/project has an original budget of £10,000 it is not envisaged that budget virements would be carried out for sums less than £1,000.

19.10 Once the Board has approved the budget, plans and performance targets 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. 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 Executive Team

19.11 Any savings generated during the year must be quantified and disclosed to the Director of Finance as soon as possible prior to distribution under the virement rules stated above.

19.12 The Chief Executive in consultation with their Director of Finance should set authorisation limits for any other expenditure.

RESERVATION OF POWERS AND SCHEME OF DELEGATION

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

- Policy;
- Strategy, business plans 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;
- Financial and performance reporting arrangements;
- Investment Policy for exchequer and endowment funds;
- Constitution and Terms of Reference for statutory Committees.

19.14 Powers delegated by the Board to the committees are detailed in the Corporate Governance Handbook which is available here

19.15 All other decisions other than those referred to in paragraphs mentioned above, are delegated by the Board to officers of the Board through the Chief Executive as detailed in Appendix 1.

Authorisation limits related to the scheme of delegation and, where indicated, details of the officers who have been delegated responsibility are included within the Standing Financial Instructions.

20. ENDOWMENT FUNDS & GENERAL NURSING COUNCIL (GNC) FUND

20.1 The foregoing sections of these Standing Financial Instructions shall also apply equally to the GNC fund and the Endowment funds of the NES's Post Graduate Centres, except that expenditure from Endowment Funds shall be restricted to the purposes of the appropriate Fund and made only with the approval of the respective Trustees.

20.2 All Members of NES appointed by Scottish Ministers, are "ex officiis" Trustees of the Endowment Funds. The NES Board is responsible for the appointment of the Trustees of the GNC Fund.

The Trustees have specific responsibilities:

- Acting together and individually with all other trustees;
- Control cannot be delegated to staff or fund holders;
- Must have an understanding of ideals and purposes of the Endowment Fund;
- Cannot carry out activities beyond the remit within the appropriate legislation;
- Money can only be spent for charitable purposes within the remit of the charity or the purposes of a restricted fund;
- Transactions entered into by Trustees, which although legal but are out with the Charity's objectives and are deemed "ultra vires", could lead to the trustees being personally liable for any loss incurred by the Endowment Fund and the GNC Fund.

20.3 Under the Law Reform (Miscellaneous Provisions) (Scotland) Act 1990 the Trustees have a responsibility to:

- Provide on request an up to date annual report and set of accounts in a form and content consistent with the requirements of the Act;
- Control and manage the finances of the GNC Fund and the Endowment Fund, ensure proper accounts are kept as required by the Office of the Scottish Charity Regulator.
- Control the investment policy and monitor the performance of the investments within that policy on a regular basis;
- Prepare an annual statement of accounts comprising an Income and Expenditure Statement, Balance Sheet and Cash Flow Statement,

together with additional information by way of notes, all consistent with the requirements laid down by the Officer of the Scottish Charity Regulator.

- The annual statement of accounts must be approved by the Trustees and signed by one of their members on their behalf and as authorised by them;

20.4 Trustees of Endowment Funds within NES may appoint an Endowment Advisory Committee to provide advice to Trustees of all funds in the exercise of all their responsibilities.

20.5 The Director of Finance shall ensure that annual accounts are prepared as soon as possible after the year end and in accordance with the Charities and Trustee Investment (Scotland) Act 2005 and the Charities Accounts (Scotland) Regulations 2006, and that proper arrangements are made for these to be audited by a separately appointed External Auditor, and submitted to the Office of the Scottish Charity Regulator (OSCR).

20.6 The Director of Finance shall maintain such accounts and records as may be necessary to record and protect all transactions and funds of the Trustees as trustees of Endowment Funds and the GNC Fund, including an Investments Register consistent with the current statutory requirements (Law Reform (Miscellaneous Provision) (Scotland) Act 1990).

20.7 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.

20.8 The ownership of all shares and stock certificates, if managed by a commercial concern, shall be periodically verified by the auditors appointed by the Trustees.

20.9 All gifts, donations and proceeds of fund raising activities which are intended for Endowment Funds and the GNC Fund shall be handed immediately to the Director of Finance, or an officer nominated by him/her for the purpose, to be banked directly into the appropriate Endowment Fund or the GNC Fund, subject to the local use of smaller amounts as agreed from time to time.

20.10 All gifts accepted shall be received and held in the name of appropriate Trustees and administered in accordance with the Trustees' policy, subject to the terms of specific Funds. As Trustees may accept gifts for specific and non-specific purposes relating to the health service, officers

shall, in cases of doubt or where there are material revenue expenditure consequences, consult the Director of Finance before accepting any gifts.

20.11 The Director of Finance shall be required to advise the appropriate Trustees on the financial implications of any proposal for fund raising activities which NES may initiate, sponsor or approve under the guidance contained in Circular No MEL (2000)13.

20.12 The Director of Finance shall be kept informed of all enquiries regarding legacies and shall keep an appropriate record. After the Death of a testator all correspondence concerning a legacy shall be dealt with on behalf of the appropriate Trustees by the Director of Finance who alone shall be empowered to give an executor a good discharge.

20.13 Where it becomes necessary for the appropriate Trustees to obtain a grant of probate, or make an application for Confirmation of Executor, in order to obtain a legacy due to the Trustees under the terms of a will, the Director of Finance who alone shall be empowered to give an executor a good discharge.

20.14 Where it becomes necessary for the appropriate Trustees to obtain a grant of probate, or to make an application for Conformation of Executor, in order to obtain a legacy due to the Trustees under the terms of a will, the Director of Finance shall be the Trustee's nominee for the purpose.

20.15 Endowment Funds and the GNC Fund shall be invested subject to the following considerations subject to statutory requirements:

- The policy regarding the treatment of accumulated balances;
- Division of funds between narrow and wide range investments as defined in the Trustees Investment Act 1961 (amended 1995); and
- Agreements of the Trustees after considering any advice received from the Trustees Investment managers.

APPENDIX 1
Scheme of Delegation

Delegated Issue and Scope of Delegation	Responsible Officer	Deputy
Chair all Board meetings and associated responsibilities	Chair	Vice Chair
Risk Management	Chief Executive	Director of Finance
Demonstrate best value for money for all services	Chief Executive	Director of Finance
Disciplinary and Grievance arrangements	Chief Executive	Director of Workforce
Standards of business conduct for staff	Chief Executive	Director of Workforce
Register of Interests - Members - Staff	Chief Executive Chief Executive	Director of Planning and Corporate Resources Director of Workforce
Approve and sign all legal documents which will be necessary in legal proceedings related to staff	Chief Executive	Director of Workforce
Complaints	Chief Executive	Director of Planning and Corporate Resources
Freedom of Information	Chief Executive	Director of Digital
Educational Quality Assurance Systems	Chief Executive	Director of Medicine
Operation of all detailed financial matters including bank accounts and banking procedures.	Director of Finance	Head of Finance
Implementing the Board's financial policies and co-ordinating corrective action and ensuring detailed financial procedures and systems are prepared and documented	Director of Finance	Head of Finance
Delegation of budgets and approval to spend funds within delegated limits	Chief Executive	Director of Finance
Recording and monitoring of payments under the	Director of Finance	Head of Finance

Delegated Issue and Scope of Delegation	Responsible Officer	Deputy
losses and compensation regulations		
Procedures for the procurement, ordering and receipt of goods	Director of Finance	Principal Lead, Procurement
Payment of staff	Director of Finance	Head of Finance
Procedures for the payment of travel, subsistence, study course and other expenses	Director of Finance	Head of Finance
Procedures for the payment of accounts	Director of Finance	Head of Finance
Management of Non-Exchequer funds	Director of Finance	Head of Finance
Liaison with Internal Audit service	Director of Finance	Head of Finance
Issuing Tenders	Director of Finance	Principal Lead Procurement
Receiving and Opening of Tenders	Director of Finance	Authorised personnel
Devise and maintain systems of budgetary control	Director of Finance	Principal Lead, Finance Business Partnering (FBP)
Annual Accounts and reports	Director of Finance	Head of Finance
Banking Arrangements	Director of Finance	Head of Finance
Risk Management Processes	Director of Finance	Head of Planning and Performance
Management and control of computer systems and facilities including data protection	Director of Digital	Principal Lead for Corporate Digital
Investigate any suspected cases of fraud and other irregularity	Director of Finance	Counter Fraud Services

Delegated Issue and Scope of Delegation	Responsible Officer	Deputy
Review, appraise and report in accordance with NHS Internal Audit Manual and best practice	Chief Internal Auditor	
Information Governance	Director of Digital	Principal Lead for Corporate Digital
Caldicott Guardianship	Postgraduate Dental Dean	Deputy Director of Medicine
HR Management	Director of Workforce	Depute Director of HR
Procedures for employment of staff	Director of Workforce	Depute Director of HR
Leave: annual, compassionate, special leave and leave without pay.	Director of Workforce	Depute Director of HR
Grievance and disciplinary procedures for staff	Director of Workforce	Depute Director of HR
Health and Safety arrangements	Director of Workforce	Depute Director of HR
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.	

APPENDIX 2a:
Records Retention Schedule

Reference	Directorate/Activity	Records Series	Retention/Disposal	Drivers/Notes
			General	
G001	General	Meeting papers - External	Current year + 1year – Destroy (May be retained longer but for reference needs only. Not to be retained as a NES record.)	Originals available from meeting administrator if required
G002	General	Meeting papers - Administered by the Directorate	Cy + 5 years – Destroy (For NES administered meetings, a master set of the minutes and papers should be retained by the directorate/team who administer the meeting. Where possible these should be stored electronically in a shared space.)	Prescription and Limitation (Scotland) Act 1973.
G003	General	Meeting papers - Internal - not administered by the Directorate	Destroy after meeting or when no longer required for immediate requirements.	Originals available from meeting administrator or Intranet if required
G004	General	General official correspondence files (Only significant business correspondence should be held on file. Circulars, invitations etc. should be destroyed when no longer required)	Current year + 5 years - Destroy	Prescription and Limitation (Scotland) Act 1973.
G005	General	NES Policy/procedure documents	Superseded + 5 years - Destroy	Prescription and Limitation (Scotland) Act 1973. Business requirement
G006	General	NES Policy development files	Current year + 5 years – Destroy. (Select most significant policy files for possible transfer to The National Archives in co-operation with the Corporate Records Manager.)	Prescription and Limitation (Scotland) Act 1973.
G007	General	Copy financial records.	Current year + 1year - Destroy	Originals with Finance.
G008	General	Copy travel claims	Current year + 1year - Destroy	Originals with Finance.
G009	General	Procurement tenders	Award of contract + 6 years - Destroy	Standing Financial Instructions.

Reference	Directorate/Activity	Records Series	Retention/Disposal	Drivers/Notes
G010	General	E-mails forming part of another significant record or file.	As per the retention schedule for that record, activity or file.	
G010	General	E-mails of ephemeral value	Delete as soon as no longer required.	
G012	General	Litigation/tribunal/formal complaint files	10 years after last action - Destroy	Significantly increased risk of follow-up action or litigation. Data Protection Act 1998. Scots Law Society practice.
G013	General	MP/MSP enquiries	10 years - Destroy	Business use. Significantly increased risk of follow-up action.
G014	General	Copies of external (non-NES) reports and publications.	While in current use - Destroy	Can be obtained again from original source. (**NOTE:** Storage on the network of electronic copies of third-party publications without permission may be in breach of copyright.)
Dental Directorate				
D001	Dental Training - Vocational Trainees –	Vocational Trainee files including**:**	Duration of VT + 5 years – Destroy	GDC CPD cycle, Prescription and Limitation (Scotland) Act 1973
D002	Dental Training - Vocational Trainees	Copy of contract	Duration of VT + 5 years – Destroy	GDC CPD cycle, Prescription and Limitation (Scotland) Act 1973
D003	Dental Training - Vocational Trainees	Copy of practice visit forms	Duration of VT + 5 years – Destroy	GDC CPD cycle, Prescription and Limitation (Scotland) Act 1973
D004	Dental Training - Vocational Trainees	Education agreement	Duration of VT + 5 years – Destroy	GDC CPD cycle, Prescription and Limitation (Scotland) Act 1973
D005	Dental Training - Vocational Trainees	Monthly absence returns	Duration of VT + 5 years – Destroy	GDC CPD cycle, Prescription and Limitation (Scotland) Act 1973
D006	Dental Training - Vocational Trainees	Copies of certificates	Duration of VT + 5 years – Destroy	GDC CPD cycle, Prescription and Limitation (Scotland) Act 1973

Reference	Directorate/Activity	Records Series	Retention/Disposal	Drivers/Notes
D007	Dental Training - Vocational Trainees	Copies of audit	Duration of VT + 5 years – Destroy	GDC CPD cycle, Prescription and Limitation (Scotland) Act 1973
D008	Dental Training - Vocational Trainees	Copy of project	Duration of VT + 5 years – Destroy	GDC CPD cycle, Prescription and Limitation (Scotland) Act 1973
D009	Dental Training - Vocational Trainees	Claims correspondence	Duration of VT + 5 years – Destroy	GDC CPD cycle, Prescription and Limitation (Scotland) Act 1973
D010	Dental training – Vocational Trainees	Vocational Trainee files – Trainees with difficulties/ complaints. (VDP/Hospital)	Last action + 10 years - Destroy	Increased risk of legal action. Data Protection Act 1998. Law Society guidance.
D011	Dental Training - Vocational Trainees	Record of Progress and Achievement (paper file until Aug 2007)	Transfer to trainee at end of programme	Portfolio is 'property' of trainee. Where NES is holding on trainee's behalf, this should be transferred on completion of VDT.
D012	Dental Training - Vocational Trainees	Record of Progress and Achievement (e-portfolio)	Duration of VT + 5 years – Destroy	Trainee may download their own copies at any point. 5-year period covers first GDC CPD cycle.
D020	Dental – HQ	Dental equivalence committee papers	5 years - Destroy	GDC CPD cycle, Prescription and Limitation (Scotland) Act 1973
D021	Dental- HQ	Dental Dashboard university data	Current + 1 year - Destroy	Cleanse superseded data on annual upload of new data.
D030	Dental training - Dental nurses	Dental nurse portfolio - paper	Transfer to trainee at end of programme	Portfolio is 'property' of trainee
D031	Dental training - Dental nurses	Trainee files	Duration of training + 5 years – Destroy	GDC CPD cycle, Prescription and Limitation (Scotland) Act 1973
D040	Dental training – Trainers	Trainer files (including applications, qualifications,	6 years after training role ends – Destroy	HR practice

Reference	Directorate/Activity	Records Series	Retention/Disposal	Drivers/Notes
		accreditation, contracts, correspondence)		
D050	Dental training - Administration	Section 63 course files	Current year + 5 years - Destroy	GDC CPD cycle, Prescription and Limitation (Scotland) Act 1973
D051	Dental training - Administration	Training course files	Current year + 5 years - Destroy	GDC CPD cycle, Prescription and Limitation (Scotland) Act 1973
D052	Dental training - Administration	Vocational Training practice files	Current year + 5 years - Destroy	GDC CPD cycle, Prescription and Limitation (Scotland) Act 1973
D053	Dental training – Administration	Determination X Applications	Current year + 3 years - Destroy	Cycle of Dental Practice approval.
D060	General Dental Practitioner - CPD course administration	Request for overnight accommodation	1 year after event - Destroy	In case of queries
D061	General Dental Practitioner - CPD course administration	Approved courses	Current year + 5 years - Destroy	GDC CPD cycle, Prescription and Limitation (Scotland) Act 1973
D062	General Dental Practitioner - CPD course administration	Signed registers	Delete once data is entered on Pinnacle database.	Pinnacle becomes principal record.
D063	General Dental Practitioner - CPD course administration	Course evaluation form	1 year after event - Destroy	In case of queries. Statistical data captured.
D064	General Dental Practitioner - CPD course administration	Lecturer evaluation forms	1 year after event - Destroy	In case of queries. Statistical data captured.
D065	General Dental Practitioner - CPD course administration	Speakers contracts - annual	Current year + 5 years - Destroy	GDC CPD cycle, Prescription and Limitation (Scotland) Act 1973
D066	General Dental Practitioner - CPD course administration	Course information	Current year + 5 years - Destroy	GDC CPD cycle, Prescription and Limitation (Scotland) Act 1973

Reference	Directorate/Activity	Records Series	Retention/Disposal	Drivers/Notes
D067	General Dental Practitioner - CPD course administration	Speaker correspondence	Current year + 5 years - Destroy	GDC CPD cycle, Prescription and Limitation (Scotland) Act 1973
D068	General Dental Practitioner - CPD course administration	Course attendee's info	Current year + 5 years - Destroy	GDC CPD cycle, Prescription and Limitation (Scotland) Act 1973
D069	General Dental Practitioner - CPD course administration	Equal Opps Monitoring forms	Current year + 1 year – Destroy	Data captured for statistical purposes. No requirement for individual forms.
D070	Continuing Education Programmes	As for CPD above.		
D080	Dental clinical audit	SEA form GP216/ audit and SEA	Returned to Practitioners – Not retained by NES	Practitioners are responsible for maintaining their own records.
D081	Dental clinical audit	Audit Reports/SEA report and minutes	Returned to Practitioners – Not retained by NES	Practitioners are responsible for maintaining their own records.
D090	Dental - Hospital Training	Trainee files - SHO	End of training + 5 years – Destroy	GDC CPD cycle, Prescription and Limitation (Scotland) Act 1973
D091	Dental - Hospital Training	Trainee files – SPR	End of training + 5 years – Destroy	GDC CPD cycle, Prescription and Limitation (Scotland) Act 1973
D092	Dental - Hospital Training	Specialist Training Committees - minutes and papers	Current year + 5 years - Destroy	GDC CPD cycle, Prescription and Limitation (Scotland) Act 1973
D093	Dental - Hospital Training	Recruitment files - SHOs, SPRs	1 year – Destroy	In case of queries. Main record with employing Board
D100	Dental VT recruitment	Unsuccessful applications	End of recruitment + 1 year - Destroy	HR practice. Data Protection Act 1998
D101	Dental VT recruitment	Successful applications	Transfer to Health Board. Retain copy for 1 year – Destroy	HR practice. Data Protection Act 1998

Reference	Directorate/Activity	Records Series	Retention/Disposal	Drivers/Notes
D111	Dental Assessment	Assessments – electronic record.	15 years- Destroy	For research and predictive validity. (To be reviewed.)
Finance and Corporate Resources Directorate				
F001	Purchase and payment	Original invoices receivable - Debtors	End of Financial Year + 6 years - Destroy	NHS HDL (2006) 28. HM Customs & Excise
F002	Purchase and payment	Original invoices payable - Creditors	End of Financial Year + 6 years - Destroy	NHS HDL (2006) 28. HM Customs & Excise
F003	Purchase and payment	Copy invoices	End of Financial Year + 1 year - Destroy	Business use
F004	Purchase and payment	Purchase orders	End of Financial Year + 6 years - Destroy	NHS HDL (2006) 28
F005	Purchase and payment	Purchase order database	End of Financial Year + 6 years - Delete time-expired records from database	Business use
F010	Funds receivable	Original invoices receivable - Debtors	End of Financial Year + 6 years - Destroy	NHS HDL (2006) 28. HM Customs & Excise
F012	Funds receivable	Income sheets	End of Financial Year + 6 years - Destroy	NHS HDL (2006) 28
F020	Financial control	General Ledger	End of Financial Year + 6 years - Delete time-expired records from database	NHS HDL (2006) 28
F021	Financial control	General Ledger - reports	End of Financial Year + 6 years - Destroy	Business use
F022	Financial control	General Ledger prints - initialled	End of Financial Year + 6 years - Destroy	NHS HDL (2006) 28
F023	Financial control	Budget monitoring reports	End of Financial Year + 3 years - Destroy	NHS HDL (2006) 28
F024	Financial control	Financial plans, estimates and recovery plans	End of Financial Year + 6 years - Destroy	NHS HDL (2006) 28
F025	Financial control	Costings	End of Financial Year + 6 years - Destroy	Business Use - NES Standing Financial Instructions (Oct 2006)
F030	Financial claims administration	Study Leave Trainee Application Form	End of Financial Year + 6 years - Destroy	Business Use
F031	Financial claims administration	Study Leave Trainee Claim Form	End of Financial Year + 6 years - Destroy	Business Use
F032	Financial claims administration	Study Trainee claim receipts	End of Financial Year + 6 years - Destroy	NHS HDL (2006) 28

Reference	Directorate/Activity	Records Series	Retention/Disposal	Drivers/Notes
F033	Financial claims administration	Primary Care Claim Forms	End of Financial Year + 3 years - Destroy	Business Use - NES Standing Financial Instructions (Oct 2006)
F040	Banking	Cheque counterfoils	Completion of audit + 3 years - Destroy	NHS HDL (2006) 28
F041	Banking	Bank statements	Completion of audit + 3 years - Destroy	NHS HDL (2006) 28
F050	Procurement	Signed contracts and arrangements	End of contract + 6 years - Destroy	Business Use - NES Standing Financial Instructions (Oct 2006)
F051	Procurement	Tenders (accepted and unaccepted)	End of Financial Year + 6 years - Destroy	NHS HDL (2006) 28
F052	Procurement	Invitation to Tender	End of Financial Year + 6 years - Destroy	NHS HDL (2006) 28
F053	Procurement	Service Level Agreement with supplier	End of Financial Year + 6 years - Destroy	Business Use - NES Standing Financial Instructions (Oct 2006)
F054	Procurement	Tender evaluation matrix	End of Financial Year + 6 years - Destroy	Standing Financial Instructions
F055	Procurement	Contracts database	Delete life expired records from database	Business use
F056	Procurement	Procurement review - ledger print	Review + 1 year – Destroy	Useful for auditors although not a primary record
F057	Procurement	Procurement review - ledger spreadsheets	Review + 6 years - Destroy	Useful for reference although not a primary record
F060	Audit	Internal Audit Reports	End of Financial Year + 6 years - Destroy	Business Use - NES Standing Financial Instructions (Oct 2006)
F061	Audit	External Audit Reports	End of Financial Year + 6 years - Destroy	Business Use - NES Standing Financial Instructions (Oct 2006)
F070	Taxation	VAT returns	End of Financial Year + 6 years - Destroy	NHS HDL (2006) 28. HM Customs & Excise
F081	Accountability	SFR returns	End of Financial Year + 6 years - Destroy	NHS HDL (2006) 28

Reference	Directorate/Activity	Records Series	Retention/Disposal	Drivers/Notes
F082	Accountability	Scottish Government returns	End of Financial Year + 6 years - Destroy	Business Use - NES Standing Financial Instructions (Oct 2006)
F083	Accountability	Statutory Accounts (Signed copy)	End of Financial Year + 6 years - Destroy	NHS HDL (2006) 28
F084	Accountability	Working papers for audit of Annual Accounts	End of Financial Year + 10 years - Destroy	Business Use - NES Standing Financial Instructions (Oct 2006)
F090	Payroll	Fiche copy of payroll	End of Financial Year + 10 years - Destroy	Business Use - NES Standing Financial Instructions (Oct 2006)
F091	Payroll	Manual files	End of Financial Year + 6 years - Destroy	Business Use - NES Standing Financial Instructions (Oct 2006)
F092	Payroll	Record of unpaid salaries and wages	End of Financial Year End of Financial Year + 6 years - Destroy	Business Use - NES Standing Financial Instructions (Oct 2006)
F093	Payroll	Staff returns and supporting records	End of Financial Year + 2 years - Destroy	Business Use - NES Standing Financial Instructions (Oct 2006)
F100	Risk Management	Corporate Risk Register	Superseded + 10 years – Destroy	Business value
F101	Risk Management	Departmental Risk Register	Superseded + 6 years - Destroy	Business value
F102	Risk Management	Management of Risk 'Champion' Files	1 year - Destroy	Business need
F103	Risk Management	Risk Register supporting correspondence and minutes	3 years - Destroy	Business need
F110	Communications	Press releases	Permanent	Historical value
F111	Communications	Media enquiries	3 years - destroy	Business use
F112	Communications	NES Publications	Permanent	Historical value
F113	Communications	Events file	18 months	Business use
F114	Communications	Publications files	3 years	Business use
F115	Communications	Publications	Copies of each publication to be sent to the Deposit Libraries and e-Library. Stocks retained while	Legal Deposit Libraries Act 2003

Reference	Directorate/Activity	Records Series	Retention/Disposal	Drivers/Notes
			current. Sample kept for 5 years after current - Destroy	
F120	Board administration	Board minutes - signed	Permanent – Transferred to National Archives of Scotland	NHS HDL (2006) 28
F121	Board administration	Board minutes - electronic	Permanent	Business value
F122	Board administration	Board papers - master set	Permanent – Transferred to National Archives of Scotland	NHS HDL (2006) 28
F123	Board administration	Board papers - electronic	Permanent	Business value
F130	Committee Administration	Committee minutes - signed	Permanent	NHS HDL (2006) 28
F131	Committee Administration	Committee minutes - electronic	Permanent	Business value
F132	Committee Administration	Committee Papers - master set	Permanent	NHS HDL (2006) 28
F133	Committee Administration	Committee papers - electronic set	Permanent	Business value
F140	Senior Management administration	SMT/Business Group minutes	Permanent	NHS HDL (2006) 28
F141	Senior Management administration	SMT/Business Group papers	Permanent	NHS HDL (2006) 28
F150	Board/Comm/SM administration	Event/Away-Day files	1 year	Business value
F151	Board/Comm/SM administration	Standing orders	Permanent	Business value
F152	Board/Comm/SM administration	Correspondence	3 years	Business value
F153	Board/Comm/SM administration	Board/Committee membership correspondence	Permanent	NHS HDL (2006) 28
F160	Senior management	Directorate Executive/Management teams' minutes and papers	10 years	Business value

Reference	Directorate/Activity	Records Series	Retention/Disposal	Drivers/Notes
F170	Office Services	Property files	Permanent	NHS HDL (2006) 28
F171	Office Services	Fit-out works files	Current + 10 years - Destroy	Business value
F172	Office Services	Accommodation issues files	Current + 10 years - Destroy	Business value
F173	Office Services	Environmental management files	Current + 10 years - Destroy	Business value
F174	Office Services	Health and Safety/Security procedure files	Current + 10 years - Destroy	NHS HDL (2006) 28
F180	Knowledge Services Group/e-library	Awaiting survey		
F190	Information Management and Technology	Systems development records	Lifetime of system + 5 years – Destroy	Joint Information Systems Committee
F191	Information Management and Technology	Systems development records – system not implemented	Last action + 5 years – Destroy	Joint Information Systems Committee
F192	Information Management and Technology	ICT Project Management	End of project + 5 years – Destroy	Joint Information Systems Committee
F193	Information Management and Technology	ICT Strategy	Superseded + 5 years - Destroy	Joint Information Systems Committee
F194	Information Management and Technology	Software licenses	Lifetime of use of software – Destroy	Joint Information Systems Committee
F195	Information Management and Technology	User requests/fault reporting	Last action + 1 Year – Destroy	Joint Information Systems Committee
F196	Information Management and Technology	Routine network management	Current year + 1 year - Destroy	Joint Information Systems Committee
F197	Information Management and Technology	Routine system testing/monitoring	Current year + 1 year - Destroy	Joint Information Systems Committee

Reference	Directorate/Activity	Records Series	Retention/Disposal	Drivers/Notes
F198	Information Management and Technology	Security /Acceptable Use breach evidence and actions	Last action + 5 years - Destroy	Prescription and Limitation (Scotland) Act 1973.
Human Resources Directorate				
H001	Employee administration	Personnel Files – Central HR file (Contains letters of application and appointment; confirmation of qualifications; contracts; joining forms; references; correspondence; termination form)	End of service + 6 years - Destroy	NHS HDL (2006) 28
H002	Employee administration	Personnel Files - Regional copy. (Contains letters of application and appointment; confirmation of qualifications; contracts; joining forms; references; correspondence; termination form)	End of service – Destroy immediately	Duplicate of central record
H003	Employee administration	Timesheets/Clock cards	2 years - Destroy	NHS HDL (2006) 28
H004	Employee administration	Annual leave records	2 years - Destroy	NHS HDL (2006) 28
H005	Employee administration	Summary information (e.g. name, NI number, dates of service, position) (Core data from Workforce database.)	70th birthday of employee - Destroy	Records Management: NHS Code of Practice. In case of pension disputes. (Review once shared services central database in use.)
H010	Staff governance - Discipline	First written warning	6 months - Destroy	NHS HDL (2006) 28
H011	Staff governance - Discipline	Final written warning	12 months - Destroy	NHS HDL (2006) 28
H012	Staff governance - Discipline	Letter of dismissal	End of service + 10 years - Destroy	NHS HDL (2006) 28

Reference	Directorate/Activity	Records Series	Retention/Disposal	Drivers/Notes
H013	Staff governance - Grievance	Grievance records	Conclusion of grievance or end of services + 6 years - Destroy	Limitations Act
H020	Recruitment	Applications - unsuccessful	Completion of recruitment + 1 year - Destroy	NHS HDL (2006) 28
H021	Recruitment	Applications - successful	See Personnel files above	
H022	Recruitment	CVs for non-executive directors - successful applicants	End of service + 5 years - Destroy	NHS HDL (2006) 28
H023	Recruitment	CVs for non-executive directors - unsuccessful applicants	Completion of recruitment + 2 years - Destroy	NHS HDL (2006) 28
	Payroll - see Financial Administration			
Medical Directorate				
M001	Medical training	Trainee portfolios - electronic	5 years after end of training programme- Destroy	Prescription and Limitation (Scotland) Act 1973 (as amended), GMC FTP, Revalidation period
M002	Medical training	Trainee portfolios - paper	Transfer to candidate at end of training	
M003	Medical training	Pinnacle database	Retain core events for career - FY2 + 40 years. Strip out other data after 5 years	Core career record. Data Protection Act 1998
M004	Medical training	Doctors Online Teaching System (DOTS)	Delete data after 5 years	Business value. Prescription and Limitation (Scotland) Act 1973 (as amended), GMC FTP, Revalidation period. Data Protection Act 1998
M005	Medical training	Recruitment	Completion of recruitment + 1 year - Destroy	In case of queries. Data Protection Act 1998. MTAS guidance. (Successful applicants details transferred to form part of their record.)
M006	Medical training – All areas	Trainee records – Trainees with difficulties or formal complaints	Destroy 10 years after last action	Significantly increased risk of follow-up action or litigation. Data Protection Act 1998. Scots Law Society practice.

Reference	Directorate/Activity	Records Series	Retention/Disposal	Drivers/Notes
				(Overrides normal retention of 5 years after training ends.)
M010	Medical training - Hospital	Training post Start Form	3 years - Destroy	Business value
M011	Medical training - Hospital	Training post Termination Forms	3 years - Destroy	Business value
M012	Medical training - Hospital	Contract Structures	3 years - Destroy	Business value
M013	Medical training - Hospital	SHO files	End of training + 5 years - Destroy	Prescription and Limitation (Scotland) Act 1973 (as amended), GMC FTP, Revalidation period
M014	Medical training - Hospital	SPR files	End of training + 5 years - Destroy	Prescription and Limitation (Scotland) Act 1973 (as amended), GMC FTP, Revalidation period
M020	Medical training - Foundation	Certificate of Performance	End of FY2 + 5 years - Destroy	Prescription and Limitation (Scotland) Act 1973 (as amended), GMC FTP, Revalidation period
M021	Medical training - Foundation	RITA (Record of In-Training Assessment	End of FY2 + 5 years - Destroy	Prescription and Limitation (Scotland) Act 1973 (as amended), GMC FTP, Revalidation period
M022	Medical training - Foundation	Significant Event Analysis	End of FY2 + 5 years - Destroy	Prescription and Limitation (Scotland) Act 1973 (as amended), GMC FTP, Revalidation period
M023	Medical training - Foundation	Educational Log	End of FY2 + 5 years - Destroy	Prescription and Limitation (Scotland) Act 1973 (as amended), GMC FTP, Revalidation period

Reference	Directorate/Activity	Records Series	Retention/Disposal	Drivers/Notes
M024	Medical training - Foundation	Work based assessment	End of FY2 + 5 years - Destroy	Prescription and Limitation (Scotland) Act 1973 (as amended), GMC FTP, Revalidation period
M025	Medical training - Foundation	Multi-source feedback	End of FY2 + 5 years - Destroy	Prescription and Limitation (Scotland) Act 1973 (as amended), GMC FTP, Revalidation period
M026	Medical training - Foundation	Certificate of Satisfactory Service	40 years - Destroy	Requested by overseas employers.
M027	Medical training - Foundation	Trainee assessments of post and trainer	End of FY2 + 5 years - Destroy	Prescription and Limitation (Scotland) Act 1973 (as amended), GMC FTP, Revalidation period
M028	Medical training - Foundation	Record of Progress	End of FY2 + 5 years - Destroy	Prescription and Limitation (Scotland) Act 1973 (as amended), GMC FTP, Revalidation period
M029	Medical training - Foundation	Trainee files - paper based. (Including: Records of discussion form; General correspondence; E-mails; RITA section; Study leave claims; CVs; Application forms; References; Appointment to Unit; Copies of sick lines.	End of FY2 + 5 years – Destroy **OR if trainee continues to specialist training** Transfer to Specialist Trainee file	Prescription and Limitation (Scotland) Act 1973 (as amended), GMC FTP, Revalidation period
M040	Medical Training	Trainer courses/workshops	1 year - Destroy	For local reference.
M041	Medical Training	Trainer/Tutor files (including General correspondence, Approval, Annual reports, Offers of training posts)	End of contract as trainer + 5 years - Destroy	Prescription and Limitation (Scotland) Act 1973 (as amended), GMC FTP, Revalidation period

Reference	Directorate/Activity	Records Series	Retention/Disposal	Drivers/Notes
M042	Medical Training	Rotations files	5 years - Destroy	Prescription and Limitation (Scotland) Act 1973 (as amended), GMC FTP, Revalidation period. Existing practice.
M043	Medical Training	Royal Colleges/PMetB Hospital Visits	5 years - Destroy	5-year visit cycle. Prescription and Limitation (Scotland) Act 1973 (as amended).
M044	Medical Training	PMETB Deanery Visit records	5 years - Destroy	5-year visit cycle. Prescription and Limitation (Scotland) Act 1973 (as amended).
M050	GP Training	GP Training Practice Visits	Retain until accredited - Destroy	Organisational value.
M051	GP Training	GP Training Practice/Trainer file. (Including: Approval; Appointments to training posts; Visits; Reports; General Correspondence.)	End of role as Training Practice + 5 years - Destroy	Prescription and Limitation (Scotland) Act 1973 (as amended), GMC FTP, Revalidation period
M052	GP Training	GP Registrar/Trainee files	End of training + 2 years - Destroy	Organisational value
M053	GP Training	Summative Assessment (successful)	3 years – Destroy	National Office of Summative Assessment protocol
M054	GP Training	Summative Assessment (incomplete or unsuccessful)	5 years – Destroy	National Office of Summative Assessment protocol
M055	GP Training	COGPED audits	3 years – Review	National Office of Summative Assessment protocol.
M056	GP Training	Training practices - problem trainees	Destroy 10 years after last action	Significantly increased risk of follow-up action or litigation.

Reference	Directorate/Activity	Records Series	Retention/Disposal	Drivers/Notes
				Data Protection Act 1998. Scots Law Society practice.
M057	GP Training	Poorly performing doctors	Destroy 10 years after last action	Significantly increased risk of follow-up action or litigation. Data Protection Act 1998. Scots Law Society practice.
M058	GP Training	GP CPD database	Delete records 5 years after current	CPD Revalidation period. Prescription and Limitation (Scotland) Act 1973 (as amended). DP Act 1998.
M059	GP Training	GP CPD forms	1 year - Destroy	In case of queries. Data Protection Act 1998.
M060	GP Training	Retainer scheme files	5 years - Destroy	GMC Revalidation period. Prescription and Limitation (Scotland) Act 1973 (as amended). Data Protection Act 1998.
M070	Medical training - Study leave	Study leave applications (yellow copy)	Current year + 1 - Destroy	Can be retrieved from Finance if required.
M071	Medical training - Study leave	Study leave applications (pink copy)	Current year + 6 - Destroy	Financial audit. (Retained by Finance)
M072	Medical training - Study leave	Study leave claims and receipts	Current year + 6 - Destroy	Financial audit
M080	Medical training - CPD course administration	Course database - Details of participants and courses attended.	Delete records after 5 years	CPD Revalidation period. Prescription and Limitation (Scotland) Act 1973 (as amended). DP Act 1998. Payment details (such as credit card numbers) removed after training event
M081	Medical training - CPD course administration	Booking forms	1 year - Destroy	Data Protection Act 1998
M082	Medical training - CPD course administration	Course administration records. (Inc: correspondence, fees, bank	2 years - Destroy	For local reference

Reference	Directorate/Activity	Records Series	Retention/Disposal	Drivers/Notes
		details of presenters, presentations/handouts (paper copies of handouts destroyed after course).		
M083	Medical training – CPD course administration	Attendance registers	5 years - Destroy	CPD Revalidation period. May require to provide proof of attendance.
M090	GP appraisal	Appraiser file (including:) Acceptance form, Credibility statements, Shortlisting notes, CVs, Training outcome summary note, Yearly performance management appraisal.	Destroy 5 years after individual cease to be an appraiser.	GMC Revalidation period. Prescription and Limitation (Scotland) Act 1973 (as amended). Data Protection Act 1998.
M091	GP appraisal	Withdrawn and unsuccessful applications to be appraisers	3 years - Destroy.	In case of queries or reapplication. Data Protection Act 1998.
M092	GP appraisal	Applications database	Delete records after 20 years.	Basic information only. Historical statistical and audit.
M093	GP appraisal	Scottish Online Appraisal resource database	Delete records after 20 years	Basic information only. Historical statistical and audit. Appraisal information not held by NES.
M094	GP appraisal	Documents generated for appraisal Process (GP Scot forms)	Held by employing board, appraiser and appraisee Not held by NES.	
M095	GP appraisal	Feedback on appraisals	5 years - Destroy	GMC Revalidation period. Prescription and Limitation (Scotland) Act 1973 (as amended). Data Protection Act 1998.
M100	Medical - HQ	Medical Advisory Group	10 years - Destroy	Organisational value
M101	Medical - HQ	Transitional Boards	5 years - Destroy	Organisational value

Reference	Directorate/Activity	Records Series	Retention/Disposal	Drivers/Notes
M102	Medical - HQ	Specialist Committees - minutes and correspondence	10 years - Destroy	Organisational value

Nursing, Midwifery and Allied Health Professionals Directorate

Reference	Directorate/Activity	Records Series	Retention/Disposal	Drivers/Notes
N001	NMAHP – CATCH	Successful course applications	Pass to HEI if required. If not, destroy after 6 months.	Data Protection Act 1998. HEI has records.
N002	NMAHP – CATCH	Unsuccessful course applications	18 months - Destroy	In case of queries or challenges
N003	NMAHP – CATCH	Database - 2 years after current	Current + 2 years - Delete record	Data Protection Act 1998.
N004	NMAHP – CATCH	Statistical returns	10 years - Destroy	Reference use.
N005	NMAHP – CATCH	Application files – Complaints, disciplinary or fraud cases	Last action + 10 years - Destroy	Significantly increased risk of follow-up action or litigation. Data Protection Act 1998. Scots Law Society practice.
N010	NMAHP - Chaplaincy	Organisation/policy files	Current + 5 years - Destroy	Prescription and Limitation (Scotland) Act 1973.
N011	NMAHP - Chaplaincy	Spiritual Care Policies	Until superseded - Destroy	Originals held by Boards.
N012	NMAHP - Chaplaincy	Chaplain Database	Remove non-current records on an annual basis.	Data Protection Act 1998.
N013	NMAHP - Chaplaincy	Subject reference folders	Current - for reference use. Weed	Not records. Reference value only.
N014	NMAHP - Chaplaincy	Events files	2 years - Destroy	In case of queries and to assist future events.
N015	NMAHP - Chaplaincy	Data entry forms	1 year - Destroy	In case of queries
N020	NMAHP - SMMDP	Trainer details - Paper copy	Current + 5 years - Destroy	Prescription and Limitation (Scotland) Act 1973 (as amended.). Data Protection Act 1998
N021	NMAHP - SMMDP	Candidates details - Paper copy	Current year + 3 years - Destroy	Data Protection Act 1998. 3-year currency of training. 3-

Reference	Directorate/Activity	Records Series	Retention/Disposal	Drivers/Notes
				year NMC and Paramedic CPD cycle.
N022	NMAHP – SMMDP	Database - courses and candidates	Remove personal details 4 years after last contact	Data Protection Act 1998.
N023	NMAHP – SMMDP	Contact list - Lead Midwifes	While Current. Weed out superseded entries.	Data Protection Act 1998.
N024	NMAHP – SMMDP	Course files - Course attendance	Current year + 3 years - Destroy	Data Protection Act 1998. 3-year currency of training. 3-year NMC and Paramedic CPD cycle.
N030	NMAHP - Publications	Publications	Copies of each publication to be sent to the Deposit Libraries and e-Library. Stocks retained while current. Sample kept for 5 years after current - Destroy	Legal Deposit Libraries Act 2003
N040	NMAHP - Project Management	Project files	Life of project + 5 years - Destroy	Prescription and Limitation (Scotland) Act 1973.
N041	NMAHP - Project Management	Original contracts	Held by Finance	Audit. Standing Financial Instructions.
N042	NMAHP - Project Management	Original tenders.	Award of contract + 6 years	Audit. Standing Financial Instructions.
N043	NMAHP	Data entry forms	Current + 1 year - Destroy	In case of queries
N044	NMAHP	Student records database	Remove personal data 3 years after current. (**To be reviewed.)**	Data Protection Act 1998. Data required for statistical purposes by SGHD. NMC 3-year registration cycle. NMC retain full records for all registered nurses.
N045	NMAHP	Healthcare Associated Infection course records	Current + 3 years - Destroy	Data Protection Act 1998. Data required for statistical purposes by SGHD.
N046	NMAHP	Registration forms	Current + 1 year - Destroy	In case of queries
N047	NMAHP	Healthcare Associated Infection course records	Current + 3 years - Destroy	DP Act 1998. Required for statistical purposes by SGHD.

Reference	Directorate/Activity	Records Series	Retention/Disposal	Drivers/Notes
		Pharmacy Directorate		
P001	Pharmacy Training administration	Pharmacists database	Delete records 3 years after last contact	Data Protection Act 1998. Business value.
P002	Pharmacy Training administration	Application forms for programmes	End of current year - Destroy	Data is captured to database.
P003	Pharmacy Training administration	Completed register (returned by tutor)	3 years - Destroy	Data Protection Act 1998. Business value.
P004	Pharmacy Training administration	Q&A sheets returned by students	Current year + 6 months - Destroy	In case of queries after annual letter issued.
P005	Pharmacy Training administration	Distance learning - MCQs	Sample set for 5 years	Prescription and Limitation (Scotland) Act 1973.
P006	Pharmacy Training administration	Reminder letters	1 year - Destroy	In case of queries.
P007	Pharmacy Training administration	Completed course appraisals	Destroy after data-entry	Original forms not required after data entry.
P008	Pharmacy Training administration	Procedure documents	Superseded + 5 years	Prescription and Limitation (Scotland) Act 1973.
		Psychology Directorate		
S101	Psychology HQ	HEI Course information	Current + 5 years - Destroy	Prescription and Limitation (Scotland) Act 1973.
S102	Psychology HQ	Project files	End of Project + 5 years - Destroy	Prescription and Limitation (Scotland) Act 1973.
S103	Psychology HQ	Training officer contracts	End of service + 6 years - Destroy	NHS HDL (2006) 28. HR practice.
S201	Training Office	Records of recruitment and selection of trainees	End of recruitment cycle + 1 year - Destroy	NHS HDL (2006) 28. HR practice. In case of query. HEI and employers hold record of successful applicants.
S202	Training Office	Selection process review records.	Review + 5 years - Destroy	Prescription and Limitation (Scotland) Act 1973.
S203	Training Office	Feedback forms	1 year - Destroy	For reference.
S204	Training Office	Event files.	Event + 2 years - Destroy	For reference and use of precedent in future events.

Reference	Directorate/Activity	Records Series	Retention/Disposal	Drivers/Notes
			Research function	
R001	Research activity	Primary research records	10 years - Destroy	Quality Assurance. JISC Guide to Managing Research Records. Note – Discretion should be used to identify high value records worthy of 10-year retention.
R002	Research activity	Research results and reports	10 years - Destroy	Reference value. Note – Copies of formally published reports must be placed with the statutory deposit libraries. See NES Information Governance Guidance 5.

APPENDIX 2b
Generic Records Retention Schedule

This summary schedule gathers the main functional retention periods which underpin the more detailed corporate schedule. It is intended to give guidance in cases where there are gaps in the fuller corporate schedule.

Function	Examples of records	Retention	Drivers
Project/programme management	Minutes of project meetings; Correspondence;	5 years - Destroy	Prescription and Limitation (Scotland) Act 1973 as amended.
Research management	Correspondence, minutes of programme meetings, questionnaires, literature searches, draft reports	5 years - Destroy	Prescription and Limitation (Scotland) Act 1973 as amended. Publications should be deposited with legal deposit libraries and the NES eLibrary.
Financial management	Invoices, ledgers, accounts	Current financial year + 6 years - Destroy	Taxes Management Act 1970, HMCE guidance, audit
Contract Management	Successful tenders, signed contracts	6 years - Destroy	Taxes Management Act 1970, HMCE guidance, audit
Personnel management	Personal files	Termination of employment + 6 years - Destroy	Taxes Management Act 1970, Data Protection Act 1998
Recruitment	Unsuccessful applications	1 year - Destroy	Data Protection Act 1998
Education governance and quality assurance of education	Correspondence, accreditation visits, course approvals	Current + 5 years - Destroy	Prescription and Limitation (Scotland) Act 1973 as amended. 5-year CPD/registration cycle for GDC and GMC. 3-year CPD/registration cycle for NMC.
Delivery of education	Course content, records of application and attendance, trainee correspondence, successful applications for training.	Current + 5 years - Destroy	Prescription and Limitation (Scotland) Act 1973 as amended. 5-year CPD/registration cycle for GDC and GMC. 3-year CPD/registration cycle for NMC.
Administration	General correspondence	Current + 5 years - Destroy	Prescription and Limitation (Scotland) Act 1973 as amended.

	Ephemeral emails	Delete as soon as no longer required	Corporate requirements.
Policy development	Final policy documents, key policy discussion records	Superseded + 10 years	Corporate requirements.
Meetings management	External meetings minutes and papers	Until actions completed - Destroy	Records kept by organiser of meeting
	NES meetings - minutes and papers	Organiser - Retain 5 years - Destroy	Records kept by organiser of meeting
		Other recipients - Until actions completed - Destroy	Records kept by organiser of meeting
	Main set of Board Minutes and papers	Transfer to The National Archives for permanent preservation	Public Records (Scotland) Acts

NHS Education for Scotland

Board Paper Summary

1. **Title of Paper**

   Finance Report as at 31st December 2020.

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

   Lizzie Turner, Head of Finance Business Partnering
   Janice Sinclair, Head of Finance
   Audrey McColl, Director of Finance

3. **Purpose of Paper**

   The purpose of this paper is to:

   a) present the key information relating to the financial results for the first 9 months of the year to 31st December 2020 and to indicate the current forecast outturn as at 31st March 2021.

4. **Key Items**

   4.1 As we move into the final quarter of the year the focus of financial management moves to managing the year-end position. By this point in the year the key factors which are likely to impact on achieving our desired position of an underspend of £0.5m or less are understood but the quantum by which these factors may change requires continued review and management. A full review process has been undertaken for the December month-end, but this is a summarised report due to current work pressures across the organisation. However, it builds on the more detailed reports previously presented to Board, and focuses on key new information available since the position as at the end of October was last presented to the Board in November 2020.

   4.2 As shown in the table below the overall current year-end forecast is an £0.4m underspend against an anticipated budget of £539.5m. The Medical Training Grade Salaries (MTGS) overspend of £1.6m is underwritten by Scottish Government (SG) and is offset by a £2.0m underspend across the rest of NES (this is detailed by directorate in Appendix 1).

MONTHLY REPORTING FOR DECEMBER 2020				Period 09				
	Year to Date			**Full Year**				
Directorate	**Current Budget**	**Outturn**	**Variance**	**Current Budget**	**Outturn**	**Variance**	**M7 Variance**	**Movement from M7**
Training Programme Management - MTG Salaries	206,989	206,706	283	274,001	275,588	(1,587)	(2,528)	941
NES - Non MTG Salaries	189,586	187,393	2,193	265,445	263,484	1,960	807	1,154
TOTAL NES	**396,575**	**394,099**	**2,476**	**539,445**	**539,072**	**373**	**(1,721)**	**2,095**
SG allocation required to balance historic funding gap				1,587	0	1,587		
Forecast Year-end Total NES	**396,575**	**394,099**	**2,476**	**541,096**	**539,072**	**2,024**		

4.3 In reporting the NES financial position, we separate Medical Training Grades salaries (MTGS) from other areas of the NES budget. This is to identify the estimated amount of additional *in-year* funding required to address the impact of the historic recurrent funding gap on MTGS. The final amount required is calculated at year-end as the multiple factors influencing these costs fluctuate throughout the year. Further detail on the in-year movement is found in Appendix 2.

The underlying deficit in MTG has reduced by £0.9m since the 31st October figures reported to the Board in November as we received £1m of the underwritten SG gap, relating to GP Trainee Pay, in our January Allocation Letter.

4.4 The Non-MTGS underspend has increased from the £0.8m underspend forecast at the end of October, to £2.0m. Significant movements within this include:

4.4.1 Vacancy Lag – increased by £0.6m. When reporting the October numbers, it was highlighted that although £1.8m was reflected in the reported numbers, the vacancy lag expected by year end was likely to increase by up to £0.8m. Based on current estimates an increase of £0.6m has now been reflected in the figures to give a total forecast Vacancy lag of £2.4m. It should be noted that this could still fluctuate before 31st March depending on staff movement in and out of the organisation.

4.4.2 A £0.8m underspend in Dental ACT has been reported by Boards during December. This is due to reduced training activity taking place throughout the year as a result of restrictions in place over what clinical tasks undergraduate Dental students can complete during the pandemic.

4.4.3 An underspend of £0.3m has been confirmed within the Transformation funding carried forward from last year. This is largely due to work by ATOS on an interface between the NHSS Scottish Standard Time System and the new national e-Rostering system being paid for by NSS.

4.4.4 Finalisation of NDS staffing figures have created a forecast underspend of £0.2m which has arisen as it is taking longer to fill posts than originally

anticipated (these do not form part of the vacancy lag discussed above as the service is funded by SG non baseline funding).

4.4.5 These underspends have been partially offset by additional forecast expenditure of £0.8m, requested by Directorates, as reported to the Board in November 2020. This additional funding will be used to employ temporary staff supporting Technology Enabled Learning (TEL) and Digital work, the purchase and installation of a new room booking system and the purchase of 4 Endoscopic Simulators for placement in boards to improve training opportunities for General Surgery, Paediatric, Gastroenterology and Nursing Trainees. Appendix 1 (table 2) includes a summary of the current forecast additional expenditure by Directorate.

4.5 The current forecast underspend is likely to move in the final quarter of the year due to the current uncertainty facing boards and their ability to release staff for training and use allocated funding (including Medical ACT) as well as technical accounting adjustments including Capital adjustments, Deprecation charges and accruals. All directorate requests for additional spend have now been approved.

4.6 As the MTG budget is treated separately, there are a range of measures under consideration to reduce the current forecast outturn underspend of £2m on the non-MTG budget closer to our target outturn of £0.5m or less. These include:

4.6.1 utilising the Dental ACT underspend within Outreach Centres to fund an on-going capital replacement programme for Dental chairs, the majority of which are at least 10 years old and subject to increasing repairs, (in discussion with the Chief Dental Officer but may not be possible within this financial year due to lead times). If this is not possible return the funding to SG as part of our COVID savings,

4.6.2 not drawing outstanding funding allocations from the Digital Directorate, primarily for work on Vaccinations and the Care Management System App (£0.6m),

4.6.3 do not drawdown the remaining underwritten Training Grade Gap (£1.6m),

4.6.4 recognising that the additional £0.5m contribution to the National boards savings from the other national boards will not be received and

4.6.5 considering the impact of potential technical accounting adjustments as noted previously.

These measures total more than £2m. Following a meeting with SG on 22nd January and further internal discussions we propose to utilise the Dental ACT underspend (£0.7m), not draw down the Digital funding of £0.6m and not request any further funding from SG towards the national boards savings (£0.5m). This will reduce the year-end forecast underspend on the Non-MTG element of our budget down to around £0.3m.

4.7 Within our anticipated funding for the year we have outstanding allocations of £12.2m. The majority of this comprises:

4.7.1 the £7.5m MEP funding gap for which we are still awaiting final figures from Universities before we can confirm the final allocation with SG,

4.7.2 £4.0m being the 2nd tranche of Mental Health funding expected this month following confirmation of amounts w/c 18th Jan and

4.7.3 the return of £1.5m National Boards savings (see paragraph 4.10)

4.8 Before our final allocation is confirmed in April, adjustments will be made to move the Capital & Depreciation currently within our revenue budgets to the appropriate categories. These technical accounting adjustments do not impact on our overall position as reported above.

4.9 The current estimated net cost of the NES response to COVID-19 is £9.6m for 2020/21 (detailed by directorate in Appendix 3) after recognising savings relating to activities no longer anticipated to take place or which will be significantly reduced over the year. This figure has reduced by £0.9m since figures reported in November as we have increased savings by £0.7m and decreased anticipated spend by £0.2m. Savings are due to the current pressures in directorates, boards and lock down restrictions that have resulted in cancelled courses/training, activity and travel which was scheduled to take place before the end of the financial year. We have also decreased anticipated spend on temporary staff based on current staffing levels (£0.2m).

4.10 Board members will be aware that Scottish Government confirmed that the additional National Boards saving of £1.5m allocated to NES in 2019/20 will remain allocated against the NES budget until agreement is reached by the National Boards on how it should be correctly allocated. Within the current financial plan, it has been assumed that the full £1.5m will be brought back into our recurrent baseline. However, recognising the risk that NES may be asked for a further contribution, the Board, in March 20, approved an additional contribution of £1m on a non-recurrent basis. Following the meeting with SG we propose to reflect the full £1.5m being funded by NES on a non-recurrent basis in order given our projected year end position.

5. Educational Implications

The funding provided to NES by Scottish Government underpins and supports all of our education and training activity.

6. Financial Implications

NES has three financial targets which need to be met on an annual basis. This report focuses on the requirement to meet the Revenue Resource Limit (RRL). Following discussion with SG we will take measures which will result in a forecast year end underspend of between £0 and £0.5m.

7. Which of the 5 Key Areas of Focus in the NES Strategy for 2019-24 does this align to?

A High Performing Organisation

8. Impact on Quality Ambitions

Delivering a break-even outturn will ensure that NES meets its Quality Ambitions.

9. **Key Risks and Proposals to Mitigate the Risks**

The key risk is unanticipated movement within the final year end position. There are several factors which are still unknown which could impact on this including movements in Training Grades – in particular from the February rotation, the ability of boards to use funding provided and release staff for training, technical accounting adjustments and changes to COVID related activity. To manage this risk, we will continue to work closely with the relevant budget holders and monitor the list of measures which can be undertaken to influence the year end position.

10. **Equality and Diversity**

We currently anticipate an underspend of less than £0.5m by the year end. The recommendations within the report will not create any equality and diversity risks.

11. **Communications Plan**

We are in regular communication with the Policy and Finance teams at Scottish Government. No further external communication plan is required.

12. **Recommendations**

Board Members are invited to review the information contained in this report.

NES
February 2021
AMc /JS/ LT

Appendix 1 – Table 1 is a breakdown of Year to Date and Full year budget, outturn and forecast by Directorate and includes the movement in the full year forecast from M7 (October) to M9 (December). The key elements are noted in Paragraph 4.4. All COVID costs and saving are included within these figures with a matching budget meaning all variances relate to non Covid activity. Table 2 details the current forecast for the spend bids which are included within Table 1.

Table 1: Financial position by Directorate

MONTHLY REPORTING FOR DECEMBER 2020				Period 09				
Directorate	Year to Date			Full Year				
	Current Budget	Outturn	Variance	Current Budget	Outturn	Variance	M7 Variance	Movement from M7
Quality Management	63,886	63,865	21	89,419	89,420	(1)	3	(4)
Strategic Planning and Directorate Support	4,530	4,130	401	6,085	5,998	88	87	1
Training Programme Management Excl Training Grades	19,200	19,036	164	23,948	24,036	(88)	(121)	33
Professional Development	4,208	3,944	264	6,285	6,560	(276)	44	(320)
Pharmacy	8,264	8,170	94	13,028	13,028	0	(36)	37
Medical Total	**100,088**	**99,145**	**943**	**138,766**	**139,042**	**(276)**	**(23)**	**(253)**
Dental	33,046	32,122	924	44,621	43,421	1,200	508	691
NMAHP	10,386	10,296	90	16,103	16,173	(70)	(86)	16
Psychology	19,568	19,298	271	27,532	27,687	(155)	(34)	(121)
Healthcare Sciences	2,290	2,220	69	3,127	3,032	94	51	44
Optometry	847	827	20	1,127	1,150	(22)	10	(32)
NDS	2,585	2,504	81	4,197	4,002	195	0	195
Digital	10,276	9,736	540	14,334	14,223	111	(35)	147
Workforce	4,450	4,180	270	5,929	5,983	(54)	61	(115)
Finance	1,979	1,760	219	2,668	2,687	(19)	(15)	(4)
Planning & Corporate Resources	4,660	4,555	104	6,114	6,078	36	(66)	102
Net Provisions	(588)	749	(1,337)	927	6	921	437	485
NES Total (exc MTG)	**189,586**	**187,393**	**2,193**	**265,445**	**263,484**	**1,960**	**807**	**1,154**

All figures are in £000s

Table 2: Forecast spend relating to bids for additional funding. These figures are included within table 1 above.

Directorate	Spend	Detail
Medical - Professional Development	390	5 Endoscopic Simulators
Dental	17	Training Equipment (X-ray machines)
Digital	195	£128k temporary staffing and £60k room booking
Workforce	8	System integration support
Technology Enabled Learning	145	Temporary staffing (costs are currently reported within Workforce)
Total	**754**	

All figures are in £000s

Appendix 2 – Table of Training Grade Movement since the opening funding gap. This table summarises the key movements in the training grade underspend since the opening position agreed by Board at the beginning of the year. We expect this gap to be met from 2 funding sources;

  a) SG underwriting of the residual historic funding gap £1,587k
  b) SG COVID allocation £755k

Medical Training Grades	SG Funding Gap
Opening Funding Gap as at 1st April 2020	**2,471**
Consolidated Movement April- December	
Higher Pay Costs for GP Practice Trainees	1,042
Increased costs due of Pay Award at 2.8%	775
Higher number of ST3 trainees (6 wte)	421
Reduction In Paid GP100 Posts	(1,506)
Fewer GP Remedial Trainees 8 wte (higher exam pass rates)	(573)
Other Movements of less than £150k each	(43)
Revised Requirement for additional funding (Exc Covid)	**2,587**
SG GP Rate Uplift allocation	(1000)
Outstanding Funding Gap to be met by SG as at Dec 20	**1,587**
Covid Related CCT Extensions	755

All figures are in £000s

Appendix 3 – This table details both Year to Date and Full year forecast COVID Spend and Savings by Directorate. These figures are also built into the figures in Appendix 1. Significant movement from October is detailed in Paragraph 4.9.

Directorate	COVID YTD Costs	COVID YTD savings	COVID YTD Net		COVID FY Costs	COVID FY Savings	COVID FY Net
Quality Management	0	59	59		0	80	80
Strategic Planning and Directorate Support	0	291	291		(15)	323	308
Training Programme Management Excl Training Grades	(6,448)	1,200	(5,248)		(6,497)	1,382	(5,115)
Professional Development	95	803	898		39	1,100	1,139
Pharmacy	(131)	113	(18)		(183)	132	(51)
Medical Total	**(6,484)**	**2,466**	**(4,018)**		**(6,656)**	**3,017**	**(3,639)**
Dental	(593)	1,432	839		(786)	1,690	904
NMAHP	(2,873)	101	(2,772)		(2,931)	314	(2,617)
Psychology	(110)	89	(21)		(184)	125	(59)
Healthcare Sciences	(15)	61	46		(40)	80	40
Optometry	(11)	51	40		(11)	75	64
NDS	(297)	0	(297)		(418)	0	(418)
Digital	(2,138)	35	(2,103)		(2,550)	65	(2,485)
Workforce	(713)	104	(609)		(700)	143	(557)
Finance	(29)	12	(17)		(31)	12	(19)
Planning & Corporate Resources	(98)	111	13		(102)	149	47
Net Provisions	(111)	0	(111)		(119)	0	(119)
NES Total (exc Medical Training Grades)	**(13,471)**	**4,462**	**(9,009)**		**(14,528)**	**5,670**	**(8,858)**
Medical training Grades	(530)	29	(501)		(795)	40	(755)
NES Total	**(14,001)**	**4,491**	**(9,510)**		**(15,323)**	**5,710**	**(9,613)**

All figures are in £000s

NHS Education for Scotland

Board Paper

1.   Title of Paper

NES Corporate Risk Register, including COVID-19 Risk Annex

2.   Author(s) of Paper

Audrey McColl – Director of Finance
Lorraine Turner – Manager, Planning and Corporate Resources

3. Purpose of Paper

The purpose of this paper is to present to the NES Board the NES Risk Register and COVID-19 Risk Annex as at 3 February 2021.

4.   Key Issues

4.1   The paper presents the NES Corporate Risk Register as at 3 February 2021 which incorporates re-scoring, where appropriate, to reflect the impact of the COVID-19 pandemic on *existing* risks.

4.2   Since the Board meeting on 26 November 2020, the Corporate Risk Register has been amended as follows:

4.3   Strategic/Policy Risks

   Risk 11 The UK fails to achieve a trade deal with the EU by the end of 2020 and this results in disruption to NHS services
   This reputational risk has been updated to reflect that scoping of the impact to NES of the new points-based UK immigration system UK has been completed and an action plan is being progressed to address further financial and operational changes to NES sponsorship arrangements in 2021.

4.4   An annex detailing the *additional* key risks identified for the organisation as a result of the impact of, and the NES response to, the COVID-19 pandemic is included.

4.5   Changes made to the COVID-19 Annex since the 26 November 2020 Board meeting and 14 December 2020 Executive Team meeting are as follows:

4.6   Operational Risks

4.6.1 **Risk 1 - Interruption/delay/adverse impact to training programme delivery including Scottish Government mandated training**

- **Dental: Interruption to supply of workforce (major negative impact on undergraduate dental student progression and Dental Vocational Training and to a lesser extent Dental Core and Specialty Trainees as well as pre-registration Dental Nurse Training)**

  The mitigation measures have been updated to include reference to regular meetings of the Board for Academic Dentistry in response to concerns over undergraduate dental student progression and output from the Dental Schools in Scotland. In addition, regular discussions at UK level with all stakeholders including the other Statutory Education Bodies to develop recruitment plans. There will also be increased flexibility for Specialty training start dates. Mandatory training for new entrants to NHS Scotland dental workforce has been moved to online delivery.

- **Medical: Trainee Progression**

  This risk has been updated to reflect: i) the impact of the postponement of a number of essential Royal College examination diets due to the ongoing nature of the pandemic; ii) ongoing concerns in relation to the impact of the reduction in elective clinical activity across many specialities; and iii) increasing concern that significant numbers of trainees will not achieve their expected curricular requirements to achieve satisfactory progression, necessitating extensions to training, potentially impacting trainee output and completion of core training programmes.

4.6.2 **Risk 7 - Failure to Recruit Staff through the COVID-19 Accelerated Recruitment Portal (CARP)**

Mitigation measures have been updated to reflect the conclusion of pre-employment checking for CARP candidates and that provision of supply lists of candidates, via CARP with completed pre-employment checks processed by NES, have been shared with Boards for their direct use to meet local demand. Boards have direct access to Turas to review checks (also added to Reputational Risk 11 COVID-19 Accelerated Recruitment Portal (CARP).

It was agreed at the Audit and Risk Committee on 28 January 2021 that the portal element of risk 7 can now be closed however there remains a risk in relation to the perception within the Service that NES still have an active role in relation to CARP. This residual risk is now reflected in reputational Risk 11.

4.7   Finance Risks

4.7.1 **Risk 9 - Maintenance of Financial Governance / Internal Control Mechanisms.**

The controls have been updated to reflect the revised NES Governance structures.

4.8   Reputational Risks

4.8.1 **Risk 10 - Unable to respond to demands and needs of the service**

Unable to respond to the needs of students to catch-up on placements missed due to COVID as the responsibility for placements rests with the Education provider.

This risk has been updated to reflect that pressure is increasing on placements, particularly AHP placements, but impact is mitigated through actions being progressed to maximise placements with Health Boards and monthly meetings of the Rapid Action Placement Oversight Group (RAPOG).

4.8.2 **Risk 11 - Vaccination Programmes**

The risk mitigation measures have been expanded to include the additional controls implemented to support the commencement of the Vaccination Programme in early December 2020. These comprise engagement of the Scottish Government Vaccination Programme at Sliver Command level and across multiple operational level forums to ensure common understanding of outcomes and delivery roles; deployment of significant resource to ensure clarity of business process and technical requirements; and successful delivery of required first-cut architecture to meet the target implementation date.

In managing expectations of the service in relation to CARP, clear communication about the contribution NES is making is included as a mitigation measure.

4.9   Accountability/Governance Risks

4.9.1 **Risk 12 - Ability and Capacity to meet Board Governance Standards**

This risk has been updated to reflect that in response to the third wave of COVID-19 and Scottish Government directives, a Governance Light approach has been adopted by the Board.

4.9.2 **Risk 14 - The implementation of COVID-19 health protection measures could result in an unintended adverse impact on staff health and wellbeing**

The actions have been updated to reflect current operating procedures in relation to staff working from home.

4.9.3 **Risk 16 - Students employed by NES, deployed to non-NHS placement such as care homes, where the rate of COVID-19 is higher than the general population.**

All outstanding additional hours payments have now been made therefore this risk will now be closed.

4.10 The current situation continues to develop at pace, such that these risk evaluations are at a point in time and will continue to evolve. In order to ensure regular management review, the COVID-19 risk register is a standing item at each formal Executive team meeting.

5. Educational Implications

Much of NES's normal education and training activity was paused as a result of the pandemic. Directorates continue to focus on contingency planning to ensure that appropriate arrangements are put in place in order that currently suspended activities can resume once the pandemic is over, if this is appropriate.

6. Financial Implications

A robust governance system is essential to ensure that the Board continues to discharge its responsibilities to ensure that financial governance is maintained at all times, particularly so during this unprecedented period of uncertainty.

7. Which of the 5 Key Areas of Focus in the NES Strategy for 2019-24 does this align to?

A High Performing Organisation

8. Impact on Quality Ambitions

Not directly applicable to this paper.

9. Key Risks and Proposals to Mitigate the Risks

During the pandemic phase, the risks to normal NES business are clear and substantial, and the corporate risk register has been amended to reflect this.

10. Equality and Diversity

Equality and diversity are at the heart of the NES strategy. Throughout our response to this emergency, we have sought to have due regard to our duties under the equalities legislation.

11. Communications Plan

A formal COVID-19 communications plan has been published on the NES intranet.

12. Recommendations

The NES Board is asked to approve the NES Corporate Risk Register and COVID-19 risks and provide any further feedback as appropriate.

AMcC/LT
NES
February 2021

Risk No.	Description	Risk Owner (Lead Director)	I x L	Inherent Risk	I x L	Residual Risk	Mitigating measures	NES Risk Appetite		I x L	Residual Risk
			Current Period							**Last Period**	
	Strategic Policy Risks										
R1	Pressures on the system result in education and training being considered as less important.	NES Chief Executive Karen Reid	4 x 4	**Primary 1**	4 x 4	**Primary 1**	1. NES Board to advocate and promote the importance of education and training 2. Revised NES Strategic Plan clearly articulates the importance of education and training to a sustainable workforce. This has been well received. 3.The residual scoring of this risk remains as Primary 1 and now reflects the risk associated, across the professional groups, with the effective restart of educational professional programmes. Detailed measures are reflected in Risk 1 and 2 of the attached COVID register.	**OPEN (Score Range 10-12)**		4 x 4	**Primary 1**
R2	Scottish Government budgetary decision results in an uplift for NES that is less than cost pressures which in turn could mean NES Board are unable to balance expenditure	NES Executive Team (Audrey McColl)	5 x 5	**Primary 1**	4 x 4	**Primary 1**	1. NES Board approves annual budget which includes measures required to reach a balanced position. Monthly management accounts show actual performance against budget projections ahead of year-end 2. Monthly management accounts are reviewed by Directors and the Director of Finance allowing mitigating action to be taken to manage any overspend/ underspend 3. Close working underway 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.. 4. Although the expectation is that the training grade deficit will continue to be funded - the national cost of COVID is expected to exceed the consequentials available from UK Treasury therefore there is a possibility of budget reductions for 2020/21 especially in relation to non-recurrent funding.	**OPEN (Score Range 10-12)**		4 x 4	**Primary 1**
R3	Policy development UK-wide and within Scotland (including as a result of COVID-19 pandemic), may have negative impact on NES's capacity to support attraction, recruitment and retention of the workforce; potential future workforce supply; and training progression.	NES Chief Executive Karen Reid	4 x 4	**Primary 1**	3 x 3	**Contingency**	1. NES Directors maintain strong engagement with relevant leads at Scottish Government 2. NES to maintain an evidence bank to support ability to influence policy decisions 3. Chief Executive and NES Directors to maintain links with other UK organisations 4. The ability to agree decisions on a 4 nation basis has been key during the COVID response. The detail of these decisions is included in the COVID appendix.	**OPEN (Score Range 10-12)**		3 x 3	**Contingency**
R4	Challenges that Boards and other organisations have in meeting demand for staffing result in a negative perception of NES's involvement in the attraction, recruitment and retention of the workforce	NES Chief Executive Karen Reid	4 x 4	**Primary 1**	3 x 4	**Primary 2**	1. Maintain clarity in relation to NES's role and influence - recent example is presenting a paper on PGMET to Chief Executives. A further paper was discussed at a Management Steering Group in September 2019. 2. Work with Boards to ensure optimal deployment of staff	**OPEN (Score Range 10-12)**		3 x 4	**Primary 2**
R5	Changes in the landscape of health and social care and pressures in the system result in a risk that NES is unable to manage constructive relationships with key partners	NES Chief Executive Karen Reid	4 x 4	**Primary 1**	3 x 4	**Primary 2**	1. Chief Executive and/or NES Directors maintain open and collaborative relationships/arrangements with counterparts in partner organisations 2. Ensure Chair is well briefed to manage relationships with other Board/organisational Chairs - Chair's regular Newsletter now being issued to other Chairs.	**OPEN (Score Range 10-12)**		3 x 4	**Primary 2**
R16	The UK fails to achieve a trade deal with the EU by the end of 2020 and this results in disruption to NHS services	NES Chief Executive Karen Reid	4 X 5	**Primary 1**	3 x 5	**Primary 1**	1. The main impact of a 'no deal' Brexit is likely to be felt by Territorial NHS Boards rather than directly by NES. We would seek to mitigate the impact on those Boards by the same means as for a major incident/flu etc 2. The impact to NES of the new points-based UK immigration system has been scoped and the NES sponsorship (formerly Tier 2) system updated. An action plan is in place to address further financial and operational changes to NES sponsorship arrangements in 2021. 3. Regular updates from SG at CEs and HRD meetings	**OPEN (Score Range 10-12)**		3 x 5	**Primary 1**
R17	The National Digital Platform is not delivered in line with the Digital Health and Care Strategy.	NES Executive Team (Christopher Wroath)	4 X 4	**Primary 2**	4 X 3	**Primary 2**	1. Working with SG to agree an 'Interim Commision' to give clarity on expectations re deliverables and timelines 2. Continued engagement with key stakeholders, despite challenges 3. Moving governance arrangements from a sub-Committee to a Standing Committee	**OPEN (Score Range 10-12)**		4 x 3	**Primary 2**

Risk No.	Description	Risk Owner (Lead Director)	I x L	Inherent Risk	I x L	Residual Risk	Mitigating measures	NES Risk Appetite	I x L	Residual Risk
				Current Period					**Last Period**	
Operational/Service Delivery Risks										
R6	In the face of new and existing demands, NES is unable to allocate resources to support priority activities in an agile and responsive manner	NES Chief Executive Karen Reid	5 x 5	Primary 1	3 x 4	Primary 2	1. Joint Senior Leadership & Senior Operational Group meeting has taken place to discuss efficiencies plan 2. Continued focus on improving processes to release capacity - with plans to support this with QI coaching 3. At a Strategic Level argument to be made about requirement to invest in workforce organisation.	**OPEN (Score Range 10-12)**	3 x 4	Primary 2
R7	Turnover in key roles leads to loss of expertise/corporate knowledge resulting in negative impact on performance	NES Chief Executive Karen Reid	4 x 4	Primary 1	3 x 3	Contingency	1. Key roles and succession plans to be reviewed by the Executive Team 2. Executive Team reviewing approach to Talent Management linked to workforce planning	**OPEN (Score Range 10-12)**	3 x 3	Contingency
R8	Organisational or other changes lead to dissatisfaction and disengagement of staff	NES Chief Executive Karen Reid	4 x 4	Primary 1	3 x 3	Contingency	1. Strong partnership working arrangements in place and maintained through regular contact with the Employee Director and via the Change Management Programme Board.	**OPEN (Score Range 10-12)**	3 x 3	Contingency
R9	Major adverse incident impacting on business continuity	NES Executive Team (Christopher Wroath)	4 x 4	Primary 1	2 x 4	Housekeeping	1. Disaster Recovery Plan and Business Continuity Plans have been approved by the Executive Team 2. The plans have been tested in a desk top exercise and recommendations have been written up and considered by the ET. 3. How this have been implemented is reflected in the covid Annex.	**OPEN (Score Range 10-12)**	2 x 4	Housekeeping
Finance Risks										
R10	The complexity of the NES budget results in year-end underspend giving the impression that NES Is overfunded	NES Executive Team (Audrey McColl)	4 x 5	Primary 1	3 x 3	Contingency	1. Early engagement with the Audit and Risk Committee and NES Board to give indication of likely financial position. 2. Directorates given indicative budgets to plan own activities and expenditure 3. Ongoing programme of identifying efficiency savings 4. Final budget approved by NES Board by end of March each year. For 2020/21 the Annual Operating Plan was superceded by the Remobilisation plan which has now been agreed by SG (October 20). The financial impact of COVID on the 2020/21 budget is being monitored closely and the first trache of additional funding has been received. 5. The NES budget is now managed and reported in two separate elements which highlights the underlying recurrent deficit on Medical training grade salaries which is underwritten by SG.	**AVERSE (Score Range 1 - 3)**	3 x 3	Contingency
R11	NES is unable to identify in year savings required to balance budget and therefore has year-end overspend	NES Executive Team (Audrey McColl)	4 x 5	Primary 1	3 x 3	Contingency	1. Early engagement with the Audit and Risk Committee and NES Board to give indication of likely financial position. 2. Directorates given indicative budgets to plan own activities and expenditure 3. Ongoing programme of identifying efficiency savings 4. Final budget approved by NES Board by end of March each year. For 2020/21 the Annual Operating Plan was superceded by the Remobilisation plan which has now been agreed by SG (October 20). The financial impact of COVID on the 2020/21 budget is being monitored closely and the first trache of additional funding has been received. 5. The NES budget is now managed and reported in two separate elements which highlights the underlying recurrent deficit on Medical training grade salaries which is underwritten by SG.	**AVERSE (Score Range 1 - 3)**	3 x 3	Contingency

Risk No.	Description	Risk Owner (Lead Director)	I x L	Inherent Risk	I x L	Residual Risk	Mitigating measures	NES Risk Appetite	I x L	Residual Risk
				Current Period					**Last Period**	
Reputational/Credibility Risks										
R12	NES is not able to demonstrate the impact from the interventions that it has developed and delivered: Scottish Government guidance has required necessary reprioritisation of organisational activities in response to Covid-19.	NES Chief Executive Karen Reid	4 x 5	Primary 1	3 x 4	Primary 2	1. Directorates have focused on contingency planning and arrangements for paused work. 2. UK based guidance from Statutory Education Bodies has informed education and training remediation responses. 3. Some core areas of education and training have been maintained/adapted to mitigate long-term impact to workforce supply. 4. Scottish Government guidance to NHS Boards will shape recovery phase requirements. 5. NES Recovery Plan will focus on three-phased approach: to prioritise delivery of critical activities in short-term; resume delivery in medium term; and consider improvements to business model in longer-term. 6. Annual Operational Plan, incorporating desire outcomes, will form baseline for organisational activities post-COVID-19. 7. Planning systems require all activities to include anticipated desired outcome 8. Desired outcome measured 9. Readiness to 'fail fast' rather than pursue initiatives that aren't working. 10. Development of focused communication plans as a pro-active measure to ensure awareness of NES activity.	CAUTIOUS (Score Range 4 - 9)	3 x 4	Primary 2
R13	NES does not deliver leading to a loss of reputation and confidence from stakeholders. Uncertainty in health and social care as a result of COVID-19 may lead to difficulties responding to service demands and needs.	NES Chief Executive Karen Reid	4 x 5	Primary 1	3 x 3	Contingency	1. NES organisational activity has been refocused to support frontline services and implementation of the NES Local Mobilisation Plan (addendum to draft NES Annual Operational Plan). 2. 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. 3. In consultation with statutory bodies across the four nations, recruitment procedures have been put into place to enable recruitment to operate effectively under current restrictions and support workforce supply chain. 4. Management of stakeholder expectations in relation to NES capability to deliver and support new systems developments. 5. Review of Operational Plan targets to identify and plan priorities in the recovery phase. 6. Ensure targets set are SMART and also have resources allocated to them to support delivery 7. Ensure Chief Executive, NES Directors, Board and standing committees have access to regular management reporting. 8.Development of focused communications to support management of stakeholder expectation in relation to NES capacity to deliver and support new systems development.	CAUTIOUS (Score Range 4 - 9)	3 x 3	Contingency
Accountability/Governance Risks										
R14	Failures in Board processes lead to corporate governance non-compliance and loss of credibility with Scottish Government e.g. failure to comply with statutory and/or other requirements, failures in financial/audit/staff governance/educational quality procedures	NES Executive Team (Donald Cameron)	5 x 5	Primary 1	2 x 2	Housekeeping	1. Standing committees responsible for each governance domain 2. Each committee provides annual report to Audit Committee 3. Comprehensive programme of internal audit 4. An Assurance framework has been developed in line with the 'Blue Print for Governance' and the Assurance and Audit Committee Handbook 5. Whistleblowing arrangements are in place with information and resources available to staff via the Intranet including Whistleblowing standards, policy and process.	AVERSE (Score Range 1 - 3)	2 x 2	Housekeeping
R15	NES has a breach of Information Governance requirements resulting in loss of data and/or negative publicity	NES Executive Team (Christopher Wroath)	4 x 5	Primary 1	4 x 2	Contingency	1. Statutory and relevant data security processes in place, with specific reference to the new General Data Protection Regulations. 2. Specific additional policies, procedures and practices being put in place to ensure robust security applies to the National Digital Platform. 3. Whistleblowing arrangements are in place with information and resources available to staff via the Intranet including Whistleblowing standards, policy and process.	AVERSE (Score Range 1 - 3)	4 x 2	Contingency

Risk No.	Description	Risk Owner (Lead Director)	I x L	Inherent Risk	I x L	Residual Risk	Mitigating measures	NES Risk Appetite	I x L	Residual Risk
				Current Period					**Last Period**	
R18	Impact to NES operations, staff and stakeholders as result of Coronavirus pandemic.	NES Chief Executive Karen Reid	5 x 5	**Primary 1**	4 x 5	**Primary 1**	1. Immediate implementation of emergency planning arrangements including NES Business Continuity Plan, Mobilisation Plan and Communications Plan. On-going review, monitoring and update in response to UK and Scottish Government guidance and latest developments. 2. NES Resilience Co-ordinating Team in place and operational. 3. Strategic deployment and enablement of remote access technology to support meetings and decision-making; operational activities; and staff working from home 4. Reporting protocols agreed and implemented. 5. Dissemination and cascade of organisation-wide communications across key platforms.	**AVERSE (Score Range 1 - 3)**	4 x 5	**Primary 1**

Operational/Service Delivery Risks

Risk No.	Directorate	Risk Title	Cause	Effect	Inherent Priority I x L	Residual Priority I x L	Mitigation Measures (Controls/Actions)	NES Risk Appetite
1.	NES Clinical Directorates: • Medical • NMAHP • Dental • Pharmacy • Optometry • Healthcare Science • Psychology **Risk Owner:** Karen Reid	Interruption/delay /adverse impact to training programme delivery including Scottish Government mandated training	• Cancellation of required courses • Cancellation of required professional examinations • Reduced clinical experience and training capacity due to: cancellation of routine clinical activities; redeployment of trainees to different clinical duties; absence from work due to self-isolation or illness • Due to the ongoing nature of the pandemic, a number of essential Medical Royal College examination diets are now being postponed (Surgical, Medical, Pathology, Radiology, Paediatric). Hopefully, many will be rescheduled within this training year, but this will introduce further lag into the system. • Ongoing concern about the significant impact of reduction in elective clinical activity in many craft specialties (Surgical, some Medical, Pathology). • There is increasing concern that significant numbers of trainees, especially in some specialties (Surgery) will not achieve their expected curricular requirements in order to achieve satisfactory ARCP (Annual Review of Competence Progression) outcomes and therefore will need extensions to training in August. The impact may affect CCT (Certificate of Completion of Training) output and completion of core training programmes. **Cont'd over/**	• Disruption to training leading to delays in training progression • Slippage to recruitment and training plans • Financial implications as a result of extensions to training and support • Training capacity issues • Negative impact on service delivery • Potential future workforce supply issues/gaps • Uncertainty around non-recurrent funding	**Primary 1** **4 x 4**	**Contingency** **3 x 3**	**Medical: Cancellation of professional examinations** **Control**: Scottish Government funding secured for 6-month extension to training for 86 trainees unable to complete RCGP (Royal College of General Practitioners) examination. Four-nations and RCGP collaboration to develop an alternative method for completion of this examination via video recordings. Agreement reached on alternative examination to be held in July and a submission is being made to the GMC on 6 May 2020 for approval. Scotland Deanery will provide support for trainers and trainees on the alternative examination. **NMAHP: Delay to pre and post registration commissioned programmes (by NES or Scottish Government).** **Control**: Questionnaire issued to the Nurse Directors and Clinical Education Leads seeking their priorities and risks associated with delayed programmes. Following return of questionnaire, NMAHP will talk to CNOD (Chief Nursing Officer's Directorate) about priorities and funding availability. This early anticipation of issues should assist with forward planning to reduce effect of risk. **Dental**: **Interruption to supply of workforce (major negative impact on undergraduate dental student progression and Dental Vocational Training and to a lesser extent Dental Core and Specialty Trainees as well as pre-registration Dental Nurse Training).** **Control (1)** In response to the concerns over undergraduate dental student progression and the risk of no output from the Dental Schools in Scotland, the Board for Academic Dentistry has been meeting on a regular basis over the past seven months. The Postgraduate Dental Dean is fully involved in these discussions. The CDO has submitted a briefing paper to the Cabinet Secretary with recommendations on a way forward. **Control (1)** Vocational Training: Online resources have been identified/developed to provide alternatives to study day activities and requirements, as well as some aspects of evidence required for Satisfactory Completion. **Action (1)** Adjust existing students' training plans. **Action (2)** Review the teaching and assessment schedules. **Action (3)** Delay commencement of new Dental Care Professionals (DCP) programmes **Action (3)** Revise financial planning predictions in relation to the Modern Apprenticeship in Dental Nursing funding. **Action (4)** Confirm numbers of staff who are still in employment and require training when new programmes can commence. **Action: (5)** Adapt teaching and assessment approaches utilising online technologies in line with awarding bodies requirements. **Action (6)** Extension of training where necessary to allow trainees to gain required competences and sit the appropriate examinations required for completion of training. **Action (7)** Regular discussions at a UK level with all stakeholders including the other Statutory Education Bodies to develop recruitment plans. There will also be increased flexibility for Specialty training start dates. **Action: (8)** Trainee progression will be monitored through existing processes **Action (9)** Mandatory training for new entrants to NHS Scotland dental workforce has been moved to online delivery. **Pharmacy: Potential workforce gaps and extended training support required for the 2019/20 200 PRPS (Pre-registration Pharmacist Scheme) trainees** **Control (1)** Continuing dialogue with General Pharmaceutical Council and relevant partners/stakeholders to influence direction and outcome. **Control (2)** Continuing to work with Finance colleagues and Scottish Government on the financial impact of all potential scenarios under review. Funding options request being submitted to Scottish Government by 22 May 2020.	**OPEN** **(Score Range 10 – 12)**

| 1. / Cont'd | NES Clinical Directorates:
• Medical
• NMAHP
• Dental
• Pharmacy
• Optometry
• Healthcare Science
• Psychology

Risk Owner: Karen Reid | Interruption/delay /adverse impact to training programme delivery including Scottish Government mandated training | | • Disruption to training leading to delays in training progression
• Slippage to recruitment and training plans
• Financial implications as a result of extensions to training and support
• Training capacity issues
• Negative impact on service delivery
• Potential future workforce supply issues/gaps
• Uncertainty around non-recurrent funding
• Due to the ongoing nature of the pandemic, a number of essential Medical Royal College examination diets are now being postponed (Surgical, Medical, Pathology, Radiology, Paediatric). Hopefully, many will be rescheduled within this training year, but this will introduce further lag into the system.
• Ongoing concern about the significant impact of reduction in elective clinical activity in many craft specialties (Surgical, some Medical, Pathology).
• There is increasing concern that significant numbers of trainees, especially in some specialties (Surgery) will not achieve their expected curricular requirements in order to achieve satisfactory ARCP (Annual Review of Competence Progression) outcomes and therefore will need extensions to training in August. The impact may affect CCT (Certificate of Completion of Training) output and completion of core training programmes. | **Primary 1**
4 x 4 | **Contingency**
3 x 3 | **Control (3)** Continuing to review communications from and with trainees and employers, particularly recognising the additional strain on the frontline service at this time.
Control (4) Continuing to engage with a three-nation response to impact across the Pharmacy profession.
Pharmacy: Potential workforce issues due to alternative recruitment arrangements required for 2021/22 PRPS (Pre-registration Pharmacist Scheme)
Control (1) Plan now agreed with the National Directors of Pharmacy (DoPs) Group and Community Pharmacy Scotland for the alternative PRPS recruitment this year due to COVID-19. Alternative to the traditional recruitment model has been agreed with access confirmed to Situational Judgement Tests (SJTs) through Health Education England for Oriel recruitment (online recruitment model) enabling NES Pharmacy/NES HR to run effective recruitment processes compliant with likely requirement for social distancing.
Control (2) Ongoing communication programme in place with employers, potential candidates, and relevant stakeholders.

Optometry: Service delivery impact due to reduction in training and support
Action (1) Sourcing/using as many online skills training materials as possible.
Action (2) Potential for implementation of socially distanced skills training with newly acquired Eyesi simulator: dependent on ability to set up equipment and gain access to hospital clinic, and lockdown restriction easing.
Action (3) Regular touching base with the team, and encouragement around lockdown protocols, to reduce risk to health.

Healthcare Science: Slippage to recruitment
Control: Measures being put in place to facilitate virtual recruitment selection for September 2020 Clinical Science trainee intake.

Healthcare Science: Slippage to Training Plans
Action: Discussions with training leads to be progressed.
Control: Financial implication for employment/SLA (Service Level Agreement) extensions - worst case scenario modelled and submitted to Finance.

Psychology: Interruption to Workforce Supply of Clinical and Applied Psychologists
Control (1) NES Psychology, Higher Education Institutes (HEIs) and Health Boards to meet weekly as part of wider Psychology Services meetings. Regular discussions to discuss COVID-19 impact on training placements.
Action (2) Adjustment made to training plans to take account of COVID-19. | **OPEN**

(Score Range 10 – 12) |

Operational/Service Delivery Risks cont'd over/

Operational/ Service Delivery Risks (cont'd)

Risk No.	Directorate	Risk Title	Cause	Effect	Inherent Priority I x L	Residual Priority I x L	Mitigation Measures (Controls/Actions)	NES Risk Appetite
2.	NES Clinical Directorates: • Medical • Dental • Optometry • Psychology • NMAHP **Risk Owner**: Karen Reid	Reduced capacity (human and financial) to deliver appropriate education and training once clinical services are re-established	• Significant backlog of clinical work • Service delivery may not resume in line with previous mode of delivery • Pressure to regain lost ground • Surge in clinical demand	• Reduced capacity to deliver upskilling for roles in certain areas to maintain and improve the quality of patient care • Methods of workplace education and training may need to be revised • Potential implications from adapting to online delivery • Training environment is compromised • Significant requirement to release clinical trainers to deliver mandatory training/courses and professional examinations to remediate critical missed elements required for training progression, including Certificate of Completion of Training (CCT) • Impact on availability of clinical placements for undergraduate teaching across disciplines.	**Primary 1** **4 x 4**	**Contingency** **3 x 3**	**Medical: Ability to deliver education and training due to backlog of clinical work** **Control (1)** Medical Directorate Executive Team (MDET) is in discussions with Health Board Directors of Medical Education (DMEs). **Control (2)** Regular discussions at UK level with all stakeholders including other Statutory Education Bodies, the GMC (General Medical Council), Royal Colleges and others, to address this risk. **Control (3)** A new Scotland Deanery COVID-19 risk survey is under development to assess impact on trainee experience. **Control (4)** Medical Directorate has commenced a wide-ranging Business Recovery Programme that will also tackle this risk in all its aspects, including the availability of clinical placements for undergraduate teaching. **Dental: Reduced Capacity to Deliver Upskilling of Existing Dental Workforce** **Action (1)** Prioritise the delivery of specific programmes depending on workforce demands and access to relevant practical cases required for assessment. **Action (2)** Adapt teaching and assessment approaches utilising online technologies in line with awarding bodies requirements. **Action (3)** Delivery of some CPD online, using tools such as GoTo Webinar, will enable access to key CPD topics by a large proportion of the dental team. **Action (4)** Keep under review Enhanced Practitioner for Domiciliary Care - training is currently suspended and will be unable to re-start until it is clear when access to care homes for mentoring is once again possible. This will also be dependent on the capacity of the Public Dental Service (PDS) to provide the PDS mentors. **Optometry: Inability to deliver NES Glaucoma Award Training (NESGAT) in 2020/21** **Action (1)** Discussions and proposals around moving to a remote supervision set up, which could be activated once patients return to clinics. **Action (2)** Extended deadlines for portfolio delivery. **Psychology: Training and education delivery compromised** **Action (1)** Adjust method of delivery to Digital webinars and virtual training environments. **Action (2)** Work closely with Board colleagues and offer flexible support to mitigate effect. **Action (3)** Through regular contact with stakeholders, ensure that our work is aligned with their priorities. **NMAHP: Training and education delivery compromised** **Action (1)** adapt delivery methods as far as possible towards technology enabled learning **Action (2)** ongoing contact with key stakeholders to ensure training & education meeting needs **Action (3)** continue face to face teaching methods where absolutely necessary (eg. SMMDP) to meet service demands **Action (4)** establish a Rapid Action Placement Oversight Group to ensure progression of recommendations from the NES report "Provision of Nursing, Midwifery and Allied Health Professions (NMAHP) placements in the 2020-21 Academic Session" .	**OPEN** **(Score Range 10 – 12)**

Operational/ Service Delivery Risks (cont'd)

Risk No.	Directorate	Risk Title	Cause	Effect	Inherent Priority I x L	Residual Priority I x L	Mitigation Measures (Controls/Actions)	NES Risk Appetite
3.	NES Digital	Impact on BAU (Business As Usual) delivery which has had to be prioritised and the workforce realigned to the immediate requirements to support COVID-19. **Risk Owner (Lead Director):** Christopher Wroath	• Scottish Government in combination with NHS Scotland determine new, amended or existing services which need to be developed and deployed in support of the wider COVID-19 response. These services require a significant proportion of the available resources within NES Digital effectively suspending or cancelling BAU services or delivery against agreed deadlines	• NHSS services are not deployed in a timely fashion causing detrimental effects to services and service users • Training programmes and outcomes are delivered on time to the detriment of the individual learner or the service expecting their completed outcome • Financial loss due to disrupted services and the need for remedial action • Reputational risk	**Primary 2 4 x 3**	**Contingency 4 x 2**	**Action (1)** Stakeholders of the agreed BAU outcomes communicated with to indicate the NES Digital resource reallocation and expected timeframes for the resumption of BAU developments and delivery**.** **Action Owners: Product Owners** **Action (2)** Assessment and interweaving of BAU functionality/service requirements into COVID-19 responses to reduce the time to delivery of BAU outcomes on resumption of services **Action Owners: Product Managers/ Digital Senior Team** **Action (3)** Accelerate (within quality limits) the development and deployment timetables of COVID-19 responses to more quickly end the redeployment of BAU resources**.** **Action Owners: Principle Leads Development/ Delivery**	**OPEN** **(Score Range 10 – 12)**
4.	NES Digital	Delivery and development of COVID-19 related work such as the requests upon Turas People and Turas Learn to support Scottish Government initiatives around returners to the workforce and redeployment of the workforce. **Risk Owner (Lead Director):** Christopher Wroath	• Rapid and fast changing requirements from the Scottish Government Workforce initiative to develop/redevelop Turas based applications (Trainee Programme Management, People, and Turas Data Intelligence (reporting) in support of the COVID-19 Rapid Recruitment Portal, initially for the employment of students and returners. • Associated outcomes (Test, Trace, Isolate, Support).	• COVID-19 Accelerated Recruitment Portal services not able to deliver to 'expectation' through misunderstanding of what the current systems landscape can deliver, poor communication of timetables and changing Scottish Government priorities • Significant data reconciliation required as organisations reuse inappropriate BAU data processes. Requirements for manual input, and redeployed staff unused to the systems, tasks and technology • Data breaches • Reputational risk	**Primary 2 4 x 3**	**Contingency 4 x 2**	**Action (1)** Daily communications with Scottish Government to manage expectations and check and cross check requirements, expected deliverables and timeframes. **Action Owner: Director NES Digital** **Action (2)** Daily meetings with key NES and external stakeholders to identify, discuss and co-author responses to Scottish Government, Board and COVID-19 Accelerated Recruitment Portal applicants' expectation. **Action Owner: Director NES Digital** **Action (3)** Co-ordinate NES staff across all Directorates to bring to bear increased, appropriate and targeted resources to increase available resource to assist timely delivery at expected quality. **Action Owner: Director NES Digital** **Action (4)** Introduce as much technology support as practicable in an iterative manner, to reduce/remove manual processes as understanding of them matures and time is allowed to develop and implement. **Action Owner: Associate Director, NES Digital**	**OPEN** **(Score Range 10 – 12**

Operational/ Service Delivery Risks (cont'd)

Risk No.	Directorate	Risk Title	Cause	Effect	Inherent Priority I x L	Residual Priority I x L	Mitigation Measures (Controls/Actions)	NES Risk Appetite
5.	NES Digital Service (NDS)	National clinical data landscape is further fragmented by short-term COVID-19 digital solutions **Risk Owner (Lead Director):** Christopher Wroath	• Responsiveness to a complex and ever-changing health and social care landscape; serial development of short-term Minimum Viable Product digital solutions that are adopted to address the pandemic.	• Short term digital solutions further exacerbate the fragmentation of clinical data and make the objective of delivering national infrastructure more challenging, compromising ability of NDS to deliver agreed outputs. • Overall reduction in project impact.	**Primary 2** 3 x 4	**House-keeping** 2 x 3	**Control (1)** Through meetings with the Scottish Government and eHealth leads and by feeding into national policy work, continue to make the case for data integration and availability, with a view to the longer term, while understanding that there are some short-term requirements **Control (2)** Continual delivery monitoring to ensure emergency digital solutions are robust, with product lifespan agreed at initiation of project. e.g. will this be used post COVID-19?	**OPEN** (Score Range 10 – 12)
6.	NES Digital Service (NDS)	Digital product demand exceeds what the available resources can support **Risk Owner (Lead Director):** Christopher Wroath	• Expectations and demands from external bodies in respect of new digital products exceed what the available NDS resources can support.	• NDS medium- and long-term business as usual work is impacted, resulting in delayed or absent platform roll-out. • Weakened external credibility	**Contingency** 3 x 3	**House-keeping** 2 x 2	**Action (1)** Develop short-term objectives for 2020/21 with clarity on required commitments to temporary COVID-19 projects and how this impacts longer-term work. **Action Due Date:** 31 May 2020 **Action Owners:** Geoff Huggins, Alistair Hann **Action (2)** Increase available resource, subject to agreement with Scottish Government. Recruitment of software engineers and product team continues, using a remote recruitment model developed by NES HR and NDS Principal Lead for Recruitment. This will increase capacity within the directorate on a long-term basis. **Action Due Date:** 30 June 2020 **Action Owners:** Geoff Huggins, Matthew Hill **Control (1)** NDS attend regular scheduled meetings with internal and external stakeholders (E-Health Leads, NDS Senior Management Team, NES Digital Standing Committee) to ensure continuous evaluation and reflection on short-term COVID-19 objectives.	**OPEN** (Score Range 10 – 12)
7.	Workforce	Failure to Recruit NES Staff and Trainees. • Failure to Recruit Staff through the COVID-19 Accelerated Recruitment Portal (CARP) This element of the risk to be closed following discussion at the Audit	Due to a lack of resource and/or systems support leading to a failure to recruit: • Returners and students to the NHSS through COVID-19 Accelerated Recruitment Portal (CARP); • Trainees across NHSS through usual vocational training recruitment activity, and	• For the trainees and CARP any failure to recruit will affect frontline service provision, impacting of patient care. • A failure to recruit vocational trainees will result in workforce supply issues. • The impact of the inability to recruit staff to NES would impact on delivery of the NES operational plan.	**Primary 1** 5 x 4	**Primary 2** 3 x 4	**Control (1)** The CARP has now been closed to new applicants due the excess supply of returners and students now in the system. The Boards' demand informs clearance of applicants. **Control (2)** Redeployment of NES staff, approx 170 staff (approx 100 WTE on average), redeployed in some measure to support CARP high volume processing. **Control (3)** Development of Turas platform to support CARP processing. **Control (4)** Directorate leads are linked to national discussions on trainee recruitment across all relevant professional groups, including the suite of national systems such as Oriel, and continue to work with HR in progressing vocational training recruitment for trainee groups in Scotland. **Cont'd Over/**	**OPEN** (Score Range 10 – 12

| 7/ Cont'd | Workforce | and Risk Committee 28 Jan 2021. | NES staff through usual recruitment processes.

• Continuing requirement to clear all remaining applicants in the Portal | • Delays the NES staff redeployed to support this work from returning to their substantive roles therefore causes potential delays to the remobilisation plan. | | | **Control (5)** Establishment control processes refined to enable more fluid response to Directorate demand for recruitment activity for NES staff.

Control (6) Guidance on remote interviews developed and available to hiring managers, including support from HR. Jobtrain recruitment management system now embedded into NES recruitment processes.

Action (1) NES is seeking direction from SG on communications with portal applicants to manage expectations. This was received and communications have been issued.

Action (2) Following conclusion of pre-employment checking for CARP candidates, those colleagues redeployed to support this work have either returned to their Directorate, been deployed to other parts of the organisation to provide additional support where there is a demand identified via the Senior Operational Leadership Group, or have been deployed to support contract tracing work. Work continues across Directorates to identify any releasable staff to support demand across NHSScotland Boards during the pandemic, this is coordinated by the Workforce Directorate with direction from the Executive Team.

Action (3) Supply Lists of candidates, via CARP with completed pre employment checks processed by NES, have been shared with Boards for their direct use to meet local demand. Boards have direct access to Turas to review checks. | |

Finance Risks

Risk No.	Directorate	Risk Title	Cause	Effect	Inherent Priority I x L	Residual Priority I x L	Mitigation Measures (Controls/Actions)	NES Risk Appetite
8.	Finance	Payment of NES Staff and Suppliers **Risk Owner (Lead Director):** Audrey McColl	• Staff absence. • Requirement to work from home. • Increased fraud risk as business processes have been amended in response to the COVID-19 pandemic.	• Data not available in time to meet payroll deadlines – especially for new NES employees as a result of COVID-19 i.e. Interim FY1's and student nurses deployed in non-NHS placements. • Expenses not paid as the system needs to be accessed via the SWAN network. • Staff not available to approve business usual processes for suppliers (Purchase orders/Goods received notes/ Invoice matching) resulting in payments issued incorrectly or not issued on a timely basis. **Cont'd over/**	**Primary 2** **4 x 3**	**Contingency** **3 x 2**	**Control (1.1)** Members of the Senior Finance team are involved in twice weekly Payroll Contingency meetings with NHS NSS payroll and NES Workforce colleagues. **Control (1.2)** NHS NSS payroll are represented on the daily COVID Accelerated Recruitment Portal meetings to stay informed of the requirements for onboarding students and returners to the NES payroll. This ensures that early discussion of issues which need to be resolved can take place, particularly regarding student nurses and Interim Foundation Year 1 trainee doctors. **Control (1.3)**: NES staff have been identified to support NHS NSS if required. They will need access to the various systems and training from NHS NSS along with clear guidance and procedure notes. **Control (1.4)** Where a payroll deadline cannot be achieved a process is in place to enable an advance of salary to be made into the individuals bank account. **Control (2):** A supplementary process has been agreed for the submission and approval of expenses where access to the SWAN network is not possible. **Control (3.1)** Fraud alerts are being circulated to relevant staff. **Control (3.2)** The same level of rigor to the controls are being applied before any supplier bank details are accepted and amended. **Control (3.3)** NES Finance are now also verifying supplier details with Directorates and the Procurement Team to ensure Bank details are legitimate and from a trustworthy source. **Control (3.4)** All directorate staff have been provided with SWAN VPN access to support working from home and social distancing.	**AVERSE** **(Score Range 1 -3)**

							Control (3.5) The frequency of cheque payment runs has been reduced to limit the requirement to attend the office. **Control (3.6)** Suppliers have been contacted and requested to email invoices. **Control (3.7)** A member of staff is going into the office once a week to collect post and scan invoices. **Control (3.8)** Currently there are three members on each of the teams. The service can temporarily function with one staff member for a short period of time. **Control (3.9)** Before the period of Lockdown, procedure notes were refreshed and adapted to suit remote working to ensure teams have the necessary resources available to them. This will enable staff from other areas to be deployed into the payment function. **Control (3.10)** System authority levels have been amended to enable more flexibility in the number of authorisers and their authority levels. The required amendments to the SFI's have been approved.	
9.	Finance	Maintenance of Financial Governance / Internal Control Mechanisms. **Risk Owner (Lead Director):** Audrey McColl	• The interim Governance arrangements in place do not enable appropriate oversight of the Financial position • Business as usual control mechanisms are ineffective. • Staff absence	• Effective scrutiny and assurance will be compromised • Regular reporting and monitoring is impacted reducing the effectiveness of the internal control environment and Scottish Government reporting requirements. • It is not possible to produce a set of annual accounts which is a statutory requirement.	**Primary 2** **4 x 3**	**Contingency** **3 x 2**	**Control (1)** Although the Finance and Performance Management Committee no longer exists any financial monitoring papers have been routed through the Audit Committee and the full NES Board. **Control (2)** The regular NES Executive team meeting once every 2 weeks continues in addition to the twice weekly management meetings. This longer meeting enables a focus on key operational issues to continue – including Financial decision-making and review of the current financial position. **Control (3)** NES staff attend all weekly Corporate Finance Network and Director of Finance meetings to ensure that we are aware of the latest requirements from SG in terms of monthly reporting and Annual Accounts. **Control (4)** Standing Financial Instructions and desktop procedures have been reviewed and amended, where appropriate, to enable robust control measures in the current home working environment. Changes to the SFI's have been endorsed by the Audit Committee. **Cont'd over/** **Control (5)** We have met with External Audit to agree a revised approach to the field work required for the audit of the annual accounts. **Control (6)** Where required, Board committees have agreed to review the Annual Reports of committees remotely to enable the necessary assurance processes to be carried out in the development of the Governance Statement. **Control (7)** As we are not currently experiencing a high staff absence level we have continued to work with External Audit to agree an audit approach in line with the existing annual accounts timetable so that, if this risk does materialise, we should still be able to meet reporting deadlines.	**AVERSE** **(Score Range 1 -3)**

Reputational/Credibility Risks

Risk No.	Directorate	Risk Title	Cause	Effect	Inherent Priority I x L	Residual Priority I x L	Mitigation Measures (Controls/Actions)	NES Risk Appetite
10.	NES Clinical Directorates: NMAHP	Unable to respond to demands and needs of the service	Uncertainty in health and social care during the recovery phase from COVID-19.	• Potential negative effect on forward planning and ability to respond to, as yet, unknown demands/workload and potential broader impact on the health and wellbeing of staff due to the uncertainty for staff over a prolonged period of time. • Lack of clarity in relation to future activity and workload and this may impact on visibility and perceived relevance of our work.	**Contingency 3 x 3**	**Contingency 3 x 3**	**NMAHP: Ability to respond to service demands and needs** **Control (1)** Strong links with Scottish Government to minimise uncertainty. **Control** (**2**) Reviewing remobilisation plans from Boards/Regions to understand plans and priorities. **Control (3):** Ensuring strong networking with professional bodies, regulators and Scottish Government, Boards, and partners such as Scottish Funding Council, Scottish Social Services Council, etc. **Control (4)** Good communication internally and externally. **Control (5)** NMAHP have started a COVID-19 debrief process which will continue and will reduce uncertainty and assist with flexibility and agility of response. **Control (6)** NES Health and Wellbeing work for staff to reduce effect of uncertainty. **Control (7)** Listening Service from Spiritual Care Service in NMAHP for staff.	**CAUTIOUS** **(Score Range 4 - 9)**
		Unable to respond to the needs of students to catch-up on placements missed due to COVID as the responsibility for placements rests with the Education provider. **Risk Owner (Lead Director):** Karen Wilson	Unable to respond to the needs of students to catch-up on placements missed due to COVID as the responsibility for placements rests with the Education provider.	• SG have asked NES to take a leadership role working with education providers and placement providers to minimise the backlog of placements but this can only be a facilitation role as the Education providers, not NES, are directly responsible for the placements.			**Action (1)** On the 22 June 2020, Chief Nursing Officer Directorate commissioned NES to develop a detailed report setting out comprehensively the range of issues affecting placement provision for NMAHP students currently and the issues that will emerge as the new academic term commences in September. The report, entitled Provision of NMAHP Placements in the 2020-21 Academic Session, was submitted to Chief Nursing Officer Directorate on 17 July 2020. **Action (2)**The Scottish Government has requested NHS Education for Scotland's leadership, through a Rapid Action Placement Oversight Group (RAPOG), to facilitate discussions, support the building of relationships locally, regionally and nationally across Scotland, and co-ordinate a range of measures to manage placement issues from now and throughout the coming academic session at a minimum. RAPOG meets monthly, pressure is increasing on placements particularly AHP placements but actions are being progressed to maximise placements with Boards and Council of Deans for Health Scotland.	
11.	**Workforce/ Digital/NDS/ Finance**	(i) COVID-19 Accelerated Recruitment Portal and (ii) Vaccination Programmes **Risk Owner (Lead Director):** Tracey Ashworth-Davies / Christopher Wroath/ Audrey McColl/ Karen Wilson	• The development of the Portal was at the request of Scottish Government and required to be available in a week. • The initial ask was that all successful applicants would be employed, paid and deployed by NES across Health and Social Care. • The pace of changing requirements/decisions meant that not all	• Perception that NES is not processing applicants via the COVID portal for deployment in NHSS in a timely way. • Perception that NES is not providing data to support Boards payroll for Nursing students in a timely way. **Cont'd over/**	**Primary 1 4 x 4**	**Primary 2 3 x 4**	**Control (1)** Regular meetings with Scottish Government to ensure common understanding of requirements as they developed/were amended. **Control (2)** Daily MS Teams meetings with Stakeholders as the Portal developed to provide the opportunity to ask questions. **Control (3)** Work with Scottish Government to develop the communications which were issued to ensure greater clarity of understanding. **Control (4)** Development of agreed reporting mechanisms so that progress and demand from Boards was visible. **Control (5)** Regular meetings with Universities to obtain data on where students had been placed.	**CAUTIOUS** **(Score Range 4 - 9)**

| . | | (i) COVID-19 Accelerated Recruitment Portal | stakeholders were aware of the extent to which this initial ask had moved, nor of the processes involved in deploying medical and nursing students, creating unrealistic expectations. | | | | **Control (6)** Data reconciliation between what the nursing students themselves had provided via the portal/ data held by Boards and data provided by Universities to establish where students had been placed.

Control (7) twice weekly meetings with payroll leads in Boards to agree the data required by Boards to support their local payroll processes.

Control (8) Agreement from Scottish Government that all students placed on or after 27 April would remain 'on placement' until all pre-employment checks has been completed and would then transition to employment.

Action (1) NES to take instruction from Scottish Government on communications to CARP applicants.

Action (2) Supply Lists of candidates, via CARP with completed pre employment checks processed by NES, have been shared with Boards for their direct use to meet local demand. Boards have direct access to Turas to review checks. | |
| | | (ii)Vaccination Programmes | • The current Vaccination programmes require multiple stakeholders to agree and implement a solution. NDS and NES Digital are both involved in developing different aspects of the enabling technology to support this programme.
• NES role and contribution via CARP incorrectly represented in Scottish Government communications to NHS Boards | • Wider challenges in respect of this high-profile vaccination programmes may adversely impact the reputation of NES, given NES's role in supporting the technology.
• NES is perceived within the service to continue to have a role in provision of candidate information from CARP | | | **Action (1)** Ensure clear communication about the contribution which NES is making and the elements which are completely within our control.
Control (1) NES engagement of SG Vaccination programme at Silver Command and via multiple operational level forums to lead understanding of programme outcomes and delivery roles.
Control (2) Significant resource applied to ensure clarity of requirement at business process and digital and data layers of the programme.
Control (3) Delivery by NES digital group on time and to spec of first-cut architecture to meet go live in early December 2020. | |

Accountability/Governance Risks								
Risk No.	Directorate	Risk Title	Cause	Effect	Inherent Priority I x L	Residual Priority I x L	Mitigation Measures (Controls/Actions)	NES Risk Appetite
12.	Planning and Corporate Resources	Ability and Capacity to meet Board Governance Standards **Risk Owner (Lead Director):** Donald Cameron	• The agreed interim governance approach may fail to provide sufficient oversight of the business of the Board and effective scrutiny and assurance will be compromised. • Acting Chief Executive and his team come under increasing pressure to meet governance requirements when they are required to manage the NES response to	• NES as an organisation fails to meet some governance standards **Cont'd over/**	**Contingency 4 x 2**	**House-keeping 2 x 2**	**Control (1)** The NES Board, Staff Governance and Audit committees will continue to meet and ensure the smooth running of board business and scrutiny of decision making during the COVID-19 pandemic . **Control (2)** The NES Executive Team will continue to meet formally every two weeks and have enacted the **COVID-19: NES Contingency Plan** which includes a NES Executive Team (Extended) (meeting daily) and NES Internal Coordinating Group: COVID–19 (always on-call) using MS Teams for communication, incident management and decision making - all recorded and reported to the NES Board. **Control (3)** We have submitted a **NES Local Mobilisation Plan** and reported our temporary governance arrangements to Scottish Government - all planning and corporate governance arrangements that have been paused have been done so on the basis of letters from Scottish Government or advice from the responsible organisation.	**AVERSE** **Score Range (1 – 3)**

					Primary 1	House-keeping		
			the public health emergency. • Health and wellbeing of staff and board members if NES continues to hold face to face meetings. • Suspension of some governance processes and committees. • Meetings held without key stakeholders and public involvement.				**Action (1)** Review NES standing committees, management groups and planning/performance functions, considering the governance arrangements put in place for COVID-19, and re-start corporate governance with agreed changes where appropriate. **Action Owners**: Della Thomas and Donald Cameron **13/10/20 Update**: A review of NES Board standing committees and management groups has been completed and new arrangements (taking the best practice from wave 1 of COVID-19) have been implemented in October 2020. **20/1/21 Update:** In response to COVID-19 third wave and Scottish Government directives, the NES Board have adopted a Governance Light approach effective from 5 January 2021 – 31 March 2021.	
13.	**Planning and Corporate Resources**	Current NES properties and facilities will not be fit for purpose in the 'post COVID-19' world in terms of training, meeting and office space **Risk Owner (Lead Director):** Donald Cameron	• NES will be unable to provide training, meeting and office facilities which comply with the requirements (still to be formulated) of a post COVID-19 world.	• Ability to deliver NES activities, in line with our current modes of business delivery and workplace utilisation, is compromised.	**Primary 1** **4 x 5**	**House-keeping** **2 x 3**	**Control (1)** The ability to work remotely using cloud-based systems and communications technology is already in place **Control (2)** The ability to reconfigure NES facilities in line with new guidance while NES staff continue to work remotely **Action (1)** Engage professional space design support and design the new NDS space to meet new/emerging 'post COVID-19' national guidance/policy for meetings and office space and apply these approaches to other NES sites. **13/10/20 Update**: Put all NES property transactions on hold and prepare to put in place a short-term extension to the Phase 1 lease at CfHS to coincide with the Phase 2 lease expiry. This is to give us time to consider post-COVID property requirements and ensure our total property needs in Inverness are considered together when it becomes clearer (post COVID-19). **Cont'd over/** **Action Owner**: Nicola Todd **Action Due Date**: 31/3/21 **Action (2)** Compile common standards for all NES sites in line with post COVID-19 national guidance/policy and for locally managed sites, PFM will support their reconfiguration as required working with local facilities management colleagues in dental and medical so that NES sites are prepared and signed off as COVID-19 secure in line with a Facilities Recovery Plan. **Action Owner**: various –PFM, local site Facilities Managers (Medicine and Dentistry)and staff side. **Action Due Date**: 30/11/20	**AVERSE** **(Score Range 1 – 3)**

Accountability/Governance Risks/ (cont'd)

| 14. | Workforce Directorate | The implementation of COVID-19 health protection measures could result in an unintended adverse impact on staff health and wellbeing

Risk Owner (Lead Director): Tracey Ashworth-Davies | • Sustained home working as result of COVID-19 pandemic mitigation measures | • Staff feel disconnected and/or isolated from organisation and workplace.

• Health and safety issues as a result of lack of suitable equipment/space or ergonomic workstation set-up. | **Primary 2**
4 x 3 | **Contingency**
3 x 2 | **Control (1.1)** Regular communications from the Chief Executive are posted on the intranet. Regular corporate communications issued to all NES staff and a series of FAQs developed.
Control (1.2) Guidance issued to managers on the importance of keeping touch and regular virtual team and individual check-ins. Strong partnership links have been maintained to inform these communications.
Control (1.3) Monthly management matters e-newsletters now issued weekly to support managers to mitigate staff health and well-being challenges.
Control (1.4) Guidance and training resources on using Microsoft Teams and remote working are available on Turas Learn.
Control (1.5) The NES Healthy Working Lives Strategy Group promotes a focus on health and wellbeing in the current context.

Control (2.1) The Executive Team, through the Internal Coordinating Group, are supportive of staff health and wellbeing, and implementing reasonable adjustments in the home working environment, by taking steps to provide staff with the required or appropriate computing equipment, other elements of digital infrastructure (phones, access, etc) and also making available for their home workstations, customised chairs or other equipment previously purchased for them. Update of homeworking policy underway to take account of the current context.
Control (2.2) Support is available from Health and Safety Adviser including workstation ergonomics self-assessment support.
Control (2.3) Agile Working Health and Safety module available as part of staff essential learning.
Control (2.4) The majority of NES staff are working from home. All NES sites remain accessible for essential staff and those with extenuating circumstances who have the option to work in the office as their key workplace subject to completed risk assessments and return to the workplace approvals from their line manager and HR | **AVERSE**

Score Range
(1 – 3) |
| 15. | Workforce Directorate | Failure to comply with legislative and statutory requirements

Risk Owner (Lead Director): Tracey Ashworth-Davies | • Failure to comply with legislative and statutory requirements these include employment legislation, Equality & Diversity legislation and Health & Safety reporting. | • NES pre employment checking of Covid19 Accelerated Recruitment Portal (CARP) students and returners is not completed to the required standard to ensure staff and patient safety.

• NES staff placed in danger due to NES failure to comply with and fulfil health and safety obligations.

• Employment Tribunal claims where NES has failed to fulfil employment obligations or is found to have discriminated against an employee.

• Inadequate staff governance and reporting.

• Failure to deliver the Directorate's operational plan. | **Primary 2**
4 x 3 | **Contingency**
3 x 3 | **Control (1)** DL 2020/10 sets out the agreed pre employment checking standards for CARP applicants. Additional resource deployed to workforce to deal with high volume of applicants requiring clearance, with business processes, standard operating procedures and training in place.

Control (2) Ensuring robust health and safety arrangements are in place for all NES employees, including those who work in placement organisations.

Control (3) Continued access to sufficient HR expertise to support Directorates in any employee relations cases.

Control (4) Maintenance of data across systems including eESS, SSTS and Turas to inform reporting and performance dashboard.

Control (5) Ensuring compliance with Staff Governance Standard for NES employees across all settings:
Well Informed: via regular Corporate, Directorate and line manager led communications, including Hub and intranet sites.
Appropriately trained and developed: ensuring induction, essential learning and development activity continues to be managed through usual processes including PDP&R activity. Updating materials to reflect new working arrangements.
Involved in decisions which affect them: continued strong working in partnership. Ensuring Directors and line managers have regular two-way communication across teams. Staff survey to collate feedback from staff on impact of Covid19 on work life.
Dignity and respect: promotion of NES values across all communications. HR support to any formal and informal grievance or dignity at work issues.
Health, safety and wellbeing: updated policies to reflect new working arrangements, including refreshed risk assessments. Clear statements on responsibilities (employee, line manager, employer, placement). Healthy Working Lives Strategy Group Campaigns.   **Cont'd over/** | **AVERSE**

Score Range
(1 – 3)

AVERSE

(Score Range 1 - 3) |

					Primary 2 4 x 3	Contingency 3 x 3	Control **(6)** Manage any compliance risk, by publishing a brief report by the statutory date of 30 April 2021 which describes equality progress; equality outcomes; workforce KPIs; workforce data statistics, including occupational segregation analysis; overview of existing equal pay statement, and plans for equality outcomes and equal pay statement review in the following year.	
15 Cont'd)	Workforce Directorate	Failure to comply with legislative and statutory requirements **Risk Owner (Lead Director):** Tracey Ashworth-Davies	• Failure to comply with legislative and statutory requirements these include employment legislation, Equality & Diversity legislation and Health & Safety reporting				Control **(7)** Regular review and updating of progress against the operational plan, flagging any areas not being progressed for a further risk assessment.	
16.	NMAHP/ Workforce	Students employed by NES, deployed to non-NHS placement such as care homes, where the rate of COVID-19 is higher than the general population. **Risk Owner (Lead Director):** Karen Wilson/Tracey Ashworth-Davies	• Potential lack of PPE and/or incorrect use of PPE. • Infection control (current knowledge of COVID-19 related control – staff *and* students). • Psychological health and wellbeing of students. • Staffing levels in placement areas falling below normal standards/requirements. • Identified that some non-NHS placements are not covered by Care Home Education Facilitators (CHEFs) therefore arrangements need to be put in place with the Practice Educator network. • BAME – risk and guidance **Cont'd Over/**	• NES has minimal control in the employment relationship and if tested, for example, in an employment tribunal claim, it could be found that the purported employment arrangement is a sham and the employer is deemed to be the care home. As a result, care homes may be reluctant to agree to the terms of the Placement Agreement. • NES could be found to be the employer of the students but given the lack of operational control in relation to the employee, it is deemed to be an Employment Business. In the development of the arrangements between NES, the employee and the non-NHS placement, NES has tried to comply with the associated regulations for an Employment Business as far as possible, however if this was challenged NES would be found to be in breach of those requirements and there could be a fine imposed. • NES is employing these staff on a fixed term basis, although they may not all be required for the duration of the full fixed term, creating a financial risk. • As the employer, NES is responsible for the health and safety of its	Primary 1 5 x 4 Primary 1 5 x 4	Primary 2 3 x 4 Primary 2 3 x 4	Control **(1)** Legal: • Contract of employment – with NES/Student and identified NES Line Manager. • Secondment Agreement – with NES/Student/Placement Area • Placement Agreement – with NES/placement area Control **(2)** Educational audit, including Health & Safety risk assessment. Control **(3)** Infection Control: essential learning must be undertaken by students in relation to COVID-19 specific infection control measures. Control **(4)** HEI support for students Control **(5)** Support from NES Care Home Education Facilitator (CHEF) network Action **(1)** NES to support the CHEF network Action **(2)**: Extended engagement with Placement Areas to get completed Placement Agreements returned. Council of Deans for HEI's asked to support NES with this by 31 July 2020. Review outstanding returns w/b 3 August 2020 and engage with partners on next steps. **26/8/20 Update**: Nurse student Placement Agreements now signed off. **20/10/20 Update**: Student nurses no longer in employment however work is still ongoing to make final payment for excess hours worked during their employment. 4/02/21 Update All outstanding payments have now been made. It is recommended that this risk is now closed.	**AVERSE** (Score Range 1 – 3 **AVERSE** (Score Range 1 – 3)

| 16 /cont'd | NMAHP/ Workforce | Students employed by NES, deployed to non-NHS placement such as care homes, where the rate of COVID-19 is higher than the general population.

Risk Owner (Lead Director): Karen Wilson/Tracey Ashworth-Davies | | employees; including there being safe systems of work, and provision of effective PPE. Although non-NHS bodies to whom the NES staff are deployed to work, may agree to fulfil these responsibilities, as if they were the employer, and to indemnify NES in the event of there being a claim by a member of NES staff, or against NES/its staff member, this does not absolve NES of responsibility and potential liability. In the event of very serious failure, there may be a criminal as well as civil liability. | | | |

NHS Education for Scotland

Board Paper

1.   **Title of Paper**

       2020-21 Quarter 3 Performance Management Report - following 31st December
       2020 progress updates
       .
2.   **Author(s) of Paper**

       Karen Howe, Planning and Corporate Governance Manager
   Donald Cameron, Director of Planning and Corporate Resources

3.   **Purpose of Paper**

       This paper provides a summary of performance using exception reporting (priority
       reds and ambers) against our phase 2 Re-mobilisation Plan (RMP2) for the third
       quarter of 2020/21. This is also the first performance report for 2020/21.

4.   **Key Issues**

4.1   Overall, there are 601 targets, of which 41 are red, 65 are amber, and 495 are
       green. Of the 111 priority targets, 12 are red, 9 are amber and 90 are green.

4.2   Performance reporting against the 2020/21 Annual Operational Plan (AOP)
       performance was suspended during the first and second quarters of the year due
       to COVID 19 and subsequently the AOP was replaced with RMP2 at the end of
       July 2020.

4.3   At that time the organisation took the opportunity to review and revise activities
       and targets for RMP2 within the detailed operational and financial plan which
       underpins the process. This led to the introduction of some new targets, some
       revised targets and others which were removed. For the most part, the
       organisation developed a plan which sought to recover performance levels to
       those of the original AOP. At the time, as the initial wave of Covid-19 subsided to
       very low levels, this seemed appropriate, and was approved by the Board.

4.4   However, RMP2 plans prepared at the end of July 2020 quickly became out of
       date as the COVID 19 situation rapidly deteriorated in the third quarter. RMP2
       therefore represents a quite different environment to the one in which we are now
       working and as a result many of the now red and amber targets relate to activities

which the organisation had hoped to deliver in recovering the original AOP but which have now been delayed or de-prioritised due to COVID 19.
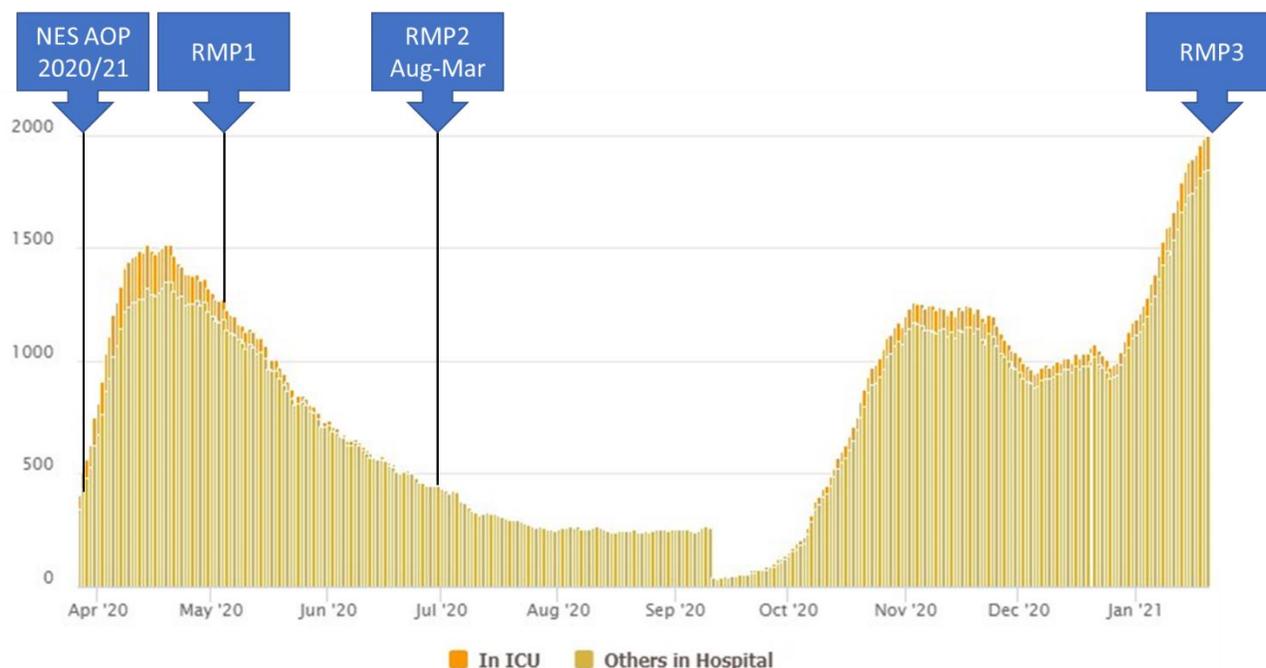
Timing of Operational and Remobilisation Plans with Reference to Pandemic Activity

5. Educational Implications

The performance targets cover all NES planned educational activity.

6. Financial Implications

The performance targets are delivered within the NES budget.

7. Which of the 5 Key Areas of Focus in the NES Strategy for 2019-24 does this aligns to?

A high performing organisation.

8. Key Risks and Proposals to Mitigate the Risks

The performance targets have attached risks to delivery contained within the corporate risk register.

9. Equality and Diversity

Equality and diversity performance targets are included and reported each quarter.

10   Health Inequalities

There are a range of health inequality focused targets included.

11.   Communications Plan

The RMP includes these performance targets and is published on our website.
The AOP was replaced by RMP2 in July 2020.

12   Recommendation(s) for Decision

The Board is invited to note the current performance of NES in relation to RMP2.

KH/DC
NES
January 2021

NHS Education for Scotland – 2020/21 Quarter 3 Performance Report

1. **Summary of Performance**
   There are 601 performance targets for 2020/21, of which 111 (18%) have been identified as priorities and represent key performance indicators. Diagram 1 shows the performance across the 111 priority targets and diagram 2 outlines performance across all 601 targets. Performance is measured using RAG (Red, Amber, Green) ratings, the definitions of which are set out below:

   - **Red** – progress has not been satisfactory. The target is more than 10% off the stated goal and/or delayed by more than 3 months.
   - **Amber** – progress against this target/outcome has not been fully satisfactory. The target is up to 10% off the stated goal AND/OR is delayed by up to (and including) 3 months.
   - **Green** – progress against this target/outcome has been satisfactory, with 100% of the target achieved or exceeded AND meeting all time deadlines.

2. **Corporate Dashboard**
   Full performance data can be found in the Corporate Insights area of TURAS | Data Intelligence which presents corporate metrics in one place.
   *Note: this will require a TURAS user sign in.*

3. **Priority Targets**
   3.1 Of the 111 priority targets, 12 are red, 9 are amber and 90 are green. All priority target updates were reviewed to ensure the updates accurately reflected the content of the target and that the RAG rating was correct. Two targets were moved from amber to red following this review.

   3.2 An audit of performance management recommended that the Planning and Corporate Governance team verify supporting documentation behind a sample of the updates to provide added assurance that they are correct, complete, and representative of the RAG status. Therefore, 5% (n=5) of the priority targets were checked, which involved reviewing meeting agendas/papers, intranet/internet content and screenshots of documentation. All the information collected verified the updates that had been supplied and no changes were made.

   3.2 A spreadsheet with all 111 priority targets along with their quarter 3 updates and RAG status can be found here - further details of the red and amber priority targets are outlined in Tables 1 and 2 below.

Clear all filters

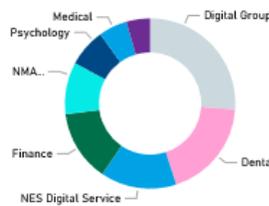**Targets by Directorate and RAG**

DirectorateName	Red	Amber	Green	Total
Dental		2	19	21
Digital Group	9	2	18	29
Finance	1	1	13	15
Medical		1	5	6
NES Digital Service	1	1	14	16
NMAHP		2	9	11
Psychology			8	8
Workforce	1		4	5
Total	**12**	**9**	**90**	**111**
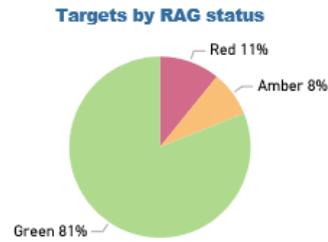
Targets by RAG status

Red 11%
Amber 8%
Green 81%

Targets by Strategic Theme and RAG

StrategicThemeName	Red	Amber	Green	Total
Digital and Data	5	2	21	28
High Performing NES	3	1	23	27
Quality Learning and Employment	4	2	6	12
Recruitment, Training and Retention		2	21	23
Skilled Workforce		2	19	21
Total	**12**	**9**	**90**	**111**

Targets by Directorate

Medical
Psychology
Digital Group
NMA...
Finance
Dental
NES Digital Service

Targets by Theme

Quality Learning an...
Skilled ...
Digital and Data
Recruitment, Trai...
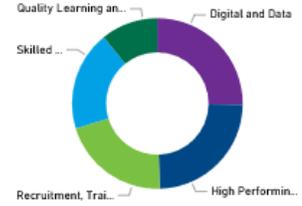High Performin..

WarehouseAlpha

**Diagram 1 – Summary of performance for <u>priority</u> targets (Q3, 2020/21, n=111)**

4. All Targets

4.1 Overall, there are 601 targets, of which 41 are red, 65 are amber, and 495 are green. As part of quality control, all the red and amber targets were reviewed and 10% (n=50) of the green targets were selected to ensure the update accurately reflected the content of the target and that the RAG rating was correct. Following that review, four targets were moved from amber to red and more information was supplied for one other target.

4.2 The remaining red targets are outlined in Table 3 *(Note: priority targets have been excluded from Table 3 to avoid duplication).*
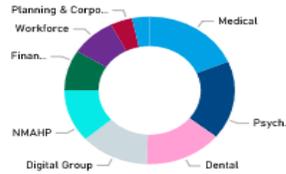
Performance (All Targets)

Targets by Directorate and RAG

DirectorateName	Red	Amber	Green	Total
Dental	2	9	78	89
Digital Group	12	6	60	78
Finance	6	7	40	53
Medical		15	97	112
NES Digital Service	1	2	17	20
NMAHP	4	8	57	69
Planning & Corporate Resources	1	2	22	25
Psychology	11	13	79	103
Workforce	4	3	45	52
Total	**41**	**65**	**495**	**601**

Targets by Strategic Theme and RAG
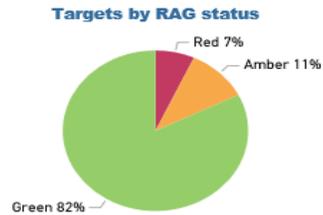
StrategicThemeName	Red	Amber	Green	Total
Digital and Data	7	7	58	72
High Performing NES	9	8	104	121
Quality Learning and Employment	11	13	75	99
Recruitment, Training and Retention	1	16	82	99
Skilled Workforce	13	21	176	210
Total	**41**	**65**	**495**	**601**

Targets by RAG status
- Red 7%
- Amber 11%
- Green 82%

Targets by Directorate

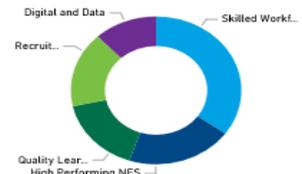**Targets by Theme**

Diagram 2 – Summary of performance for <u>all</u> targets (Q3, 2020/21, n= 601)

5.   Tables

5.1   Priority Red Targets Q3

5.2   Priority Amber Targets Q3

5.3   Remaining Red Targets Q3

Table 1 – Priority red targets Q3 2020/21

Priority Target	Update
Digital - 3 YEAR TARGET Develop a core data model in Turas so that we can accurately store information about an NHS employee, where they work and what they do. Understanding this data will allow us to then improve the employment experience through tailored employment support and advice. (TAR0003458)	Whilst this work has been de-prioritised due to COVID 19 pressures, work has been done in response to the NHS Mail migration to rationalise email address and duplicate accounts.
Digital - 3 YEAR TARGET Build business case to replace the functionality of Kenexa by the end of Q2 20/21. (TAR0003410)	This work has been delayed due to COVID 19 priorities and will be picked up again in 21/22.
Digital - 3 YEAR TARGET Provision of external support to SG eHealth Information Governance Team under an SLA until 31st March 2021. (TAR0003430)	This target has been paused due to COVID 19. Some support will be provided in first quarter of 20/21.
Digital - Enhance the updates of employee information from eESS related to employees joining or leaving NHS employment, or moving employment within the NHS to include line management information which will allow many of the current manual processes of onboarding staff to be automated by March 2021. This will enable improvements to NHSS system security posture, license usage efficiency, free up administrative time. (TAR0003457)	Work not yet started to due change in focus to COVID 19 specific work.
Digital - 3 YEAR TARGET SUBJECT TO PHARMACY FUNDING Support quality management of training by enhancing the current functionality within Turas Quality Management system to allow Healthcare Science and Dentistry to triage training providers that require support (visit, phone call etc.) by providing a list of training providers along with their approval status and RAG rating by November 2020. (TAR0003404)	Turas Quality Management App has gone live for Pharmacy, but no work has started yet for Healthcare science and dentistry as focus has shifted to COVID 19 specific work.

Priority Target	Update
Digital - 3 YEAR TARGET SUBJECT TO FUNDING Support the Lead Employer Model for Hospital Dentists in Training by enhancing the current functionality within Turas People system to allow Dentists to be on boarded (complete Staff Engagement Form, Occupational health checks etc.) 50% faster and relevant information shared with payroll and placement boards by June 2020. (TAR0003413)	Work not started yet due to re-prioritisation of work on COVID 19 specific applications. Work to restart on this in Jan/Feb 2021 planning to be ready for September 2021.
Digital - 3 YEAR TARGET Revise the TPM Security model to allow administrative users to access trainees & students applicable to them by March 2021. TPM was initially an internal system but is now increasingly being used externally to NES, this work will build on the work done in 2019/2020 to audit user creation, views and editing of records within TPM. This will result in increased security and user confidence that data is only accessible by appropriate users. (TAR0003434)	Now deferred until next budget year due to COVID 19 priorities.
Digital - 3 YEAR TARGET Build business case to replace the functionality of SNOW MI Tracker by the end of Q1 20/21 (TAR0003411)	This work has been delayed due to COVID 19 priorities but will be picked up again in partnership with finance in 21/22.
Digital - 3 YEAR TARGET SUBJECT TO FUNDING Operate the solution which integrates the e-Rostering data with Scottish Single Timesheet System for NHS Lothian, Grampian, D&G and Tayside. (TAR0003426)	This integration is still under development. ATOS resource came onstream to work on this with NES Digital in December 2020 after significant delays.
Finance - Work with Digital to develop a process to enable approx. 200 Lecturers per month to submit their claims electronically and export the data to e-payroll. (TAR0003268)	Due to other priorities relating to COVID 19 this has not been started.
NDS - By March 2021, NDS will agree a policy to select and commission the development of a set of capabilities/services such as: community monitoring through devices and sensors; digital communication with citizens and carers; virtual, telephone, and video appointments; digital scheduling and appointments. (TAR0003198)	20/21 commissioning process is now complete, however due to COVID impact, the creation of a policy to agree future commissions is delayed by Scottish Government and will not be in place by March 2021. In the interim, we will continue to manage commissions on an individual basis, collaborating with funders at SG and NES/NHSS colleagues to ensure alignment with national priorities and funding agenda.

Priority Target	Update
Workforce - Support achievement by NES Directorates of key performance targets of 100% compliance by eligible staff with Personal Review & Planning, and Essential Learning through design and delivery of effective development interventions for staff and line managers. (TAR0003489)	Due to COVID impact the focus on setting objectives and personal development plans was de-prioritised. Focus was on staff wellbeing and we issued guidance to managers on the importance of keeping in touch and ensuring regular virtual team and individual check-ins. Staff are asked to agree new objectives (potentially only 2 -4 objectives) based around a revised operational and remobilisation plan for the remainder of 2020/21. At end November 66% of staff had objectives and 67% had an agreed PDP. Completion of the Agile working module was a priority to ensure the health, safety and wellbeing of staff as they continue to work from home for the foreseeable future. 86% of staff had completed this module by end October. By end Oct 71% of staff have completed all H&S modules, 87% completed E&D module, 84% - Information Governance module, 87% and 77% completed the Counter Fraud and Counter Fraud for Managers respectively and 63% of new starts had attended corporate induction.

Table 2 – Priority amber targets Q3 2020/21

Priority Target	Update
Dental - An educational event for up to 100 is planned to coincide with 10th anniversary of Caring for Smiles with a minimum expected uptake of 80%. A further 500 care home staff projected to complete SCQF qualification. (TAR0003549)	Have contributed to the remobilisation plan for the programme which has now been produced and gone to Scottish Government. Have contributed to a guidance document for health boards about reintroducing caring for smiles teams to care homes. The event on 10th March 2021 has been cancelled due to COVID situation. Format and date of future event to be kept under review. An online meeting with 13 coordinators from 10 Health boards has taken place to discuss support with digital delivery and a short life working group established to take this forward. A further 3 learners completed the Caring for Smiles qualification at intermediate level.
Dental - To support and facilitate the delivery of the SCQF level 6 oral health qualification for early years practitioners (nursery nurses) in partnership with health boards, education, and local authority. 11 colleges	In collaboration with the Childsmile Executive developed a newsletter with information on the addendum to the supervised toothbrushing standards to reflect changes necessary due to COVID.

Priority Target	Update
within 9 health board areas will offer the qualification with flexible delivery using a variety of educational models. (TAR0003553)	
Digital - 3 YEAR TARGET Develop link between Turas Learn and Turas Appraisal allowing learning record to be viewed and created as part of the PDP by June 2020. (TAR0003423)	Work was partially completed but then paused due to re-prioritisation to COVID 19 work.
Digital - 3 YEAR TARGET Reduce time taken to triage Pharmacy Education Providers by 25% to identify which need support (activity) by providing a list of Education providers with approval status, RAG status - list to be available by June 2020, and reduction in triage time to be assessed by October 2020. (TAR0003405)	Turas Quality Management is now live and capturing quality information for education providers. However, work still to be completed to assess reduction in triage time.
Finance - Work with Digital to transfer approx. 60 weekly Study Leave payments currently paid by Cheque to be processed by BACS, including the capture of bank details and interface of those into e-financials. (TAR0003269)	Due to COVID 19, Digital have not been able to prioritise this work. However, exploratory meetings have now taken place with the Digital and the National Finance system teams to define requirements.
Medical - To develop Quality Management systems to approve suitable Pharmacy Experiential Learning (EL) sites via site visits with up to 50 visits maximum dependent on social distancing protocols in place for face to face visits potentially by Quarter 4, or replacement virtual visits for remainder of 2020, and feedback mechanisms. This is in conjunction with the two Schools of Pharmacy, Robert Gordon University and University of Strathclyde, and other key stakeholders. We will continue to develop (Once for NES) Quality Management digital solutions in partnership with NES Digital colleagues. (TAR0003726)	Face to face premises approval visits have been paused during this period due to COVID 19 restrictions in place and any essential PRPS required visits have been completed virtually. The feedback mechanisms have remained in place throughout Semester 1 and data reviewed and any relevant issues followed up directly via governance processes, Data will also be used in the next quarter to resume QM visits. The Turas Quality Management App (TQM) release was delayed by COVID 19 until mid-September 2020, this is a minimum viable product and discussions are ongoing regarding any further development work required on a once for NES basis with medical and digital colleagues.
NDS - By March 2021, deploy citizen authentication for NDP products, engage citizens in design and development of products. (TAR0003190)	Digital Identity Scotland remain as external dependencies for this work, however NDS are engaged with this group and a workshop is planned for early 2021, at which DIS and NDS will explore cross-working opportunities to agree a delivery approach and roadmap for citizen authentication, together with a planned approach to user-centred design and testing. This

Priority Target	Update
	will inform the ability for NDS to deploy authentication services as planned, however this may not be complete by March 2021 as originally scheduled.
NMAHP - To support employers to undertake workforce planning for AHPs, data sharing agreements will be negotiated, and data added to data lake in line with NES digital approach with other professions such as nursing, medics and dentists. (TAR0003246)	Following pause on activities due to COVID 19, NES is recruiting to the Allied Health Professions (AHP) workforce via secondment post with closing date early December 2020. An options appraisal detailing relevant data requirements to support AHP workforce across Scotland is scheduled to be developed by end of March 2021.
NMAHP - Subject to funding, we will be strengthening the relationship between education and practice partners to enable preparation of the workforce within health and social care to deliver the activities associated with the Scottish Future Nurse and Midwife (FNM) Programme through engagement (including: launch & embedding of an e-learning resource for the preparation for supervisors and assessors of all Nursing & Midwifery Council (NMC) approved programmes; implementation of the findings and recommendations from the scoping report in relation to the range of practice learning experiences and placement capacity across Scotland; National FNM Programme Board and events; Accountable Officer workplan meetings and 3 regional & 1 national event to support implementation of the NMC Education framework; refreshing existing national approaches in line with the NMC regulatory standards associated with the Future Nurse & Midwife national workplan and agreed 35 deliverables (e.g. memorandum of agreement, raising concerns in practice student guidance). Minimum of 30 stakeholder meetings. (TAR0003285)	e-Resource to support practice supervisor and practice assessor preparation as part of Future Nurse/Midwife workplan - content completed October 2020 and digital team currently working to adapt interactivity due to changes with authoring tool. Digital had expected to have completed and tested before end of October but aim now is for end of December 2020 for launch on Turas. COVID-19 resource development has taken priority with digital team which has held back launch date. The planned 3 regional events and one national event did not take place due to COVID in the format planned, instead at total of five national events have taken place in a virtual format with a total of 404 participants. A total of 31 stakeholder events have taken place. 28 of the 35 deliverables within the national workplan have been completed.

Table 3 – Remaining red targets Q3 2020/21

Target	Update
Dental - By March 2021 a) carry out the development phase* to produce a foundation level leadership development resource; and b) pilot the materials and delivery methods with a multidisciplinary group in the North Region. *The development phase includes scoping, mapping of internal and external resources, stakeholder engagement and a learning needs analysis. (TAR0003721)	Due to the impact of COVID-19 this work has been delayed. A working group has been formed to take forward 'Leadership in practice Scotland (LipS)'. A vision has been agreed and the resource will build on the Leadership Foundations e-learning modules accessible via the Leadership and Management Zone in Turas Learn. A new target has been created for 2021/22 which will see a pilot of the on-line materials and delivery methods with two multidisciplinary groups across the Health & Care System.
Dental - By March 2021 a) carry out the development phase* to produce a foundation level leadership development resource; and b) pilot the materials and delivery methods with a multidisciplinary group in the North Region. *The development phase includes scoping, mapping of internal and external resources, stakeholder engagement and a learning needs analysis. (TAR0003602)	Due to the impact of COVID-19 this work has been delayed. A working group has been formed to take forward 'Leadership in practice Scotland (LipS)'. A vision has been agreed and the resource will build on the Leadership Foundations e-learning modules accessible via the Leadership and Management Zone in Turas Learn. A new target has been created for 2021/22 which will see a pilot of the on-line materials and delivery methods with two multidisciplinary groups across the Health & Care System.
Digital - Improve the discovery of resources on Turas Learn through improvements to search and development of browse functionality by March 2021. (TAR0003443)	This is delayed due to additional pressures on time. Some exploratory work started by the developers to understand structure.
Digital - 3yr target - implementation of an automated service desk response system chat bot, utilising existing knowledge base archives to supplement the support provision provided by Service Desk staff. First year target implement the cloud-based infrastructure to support the bot technology and pilot a limited scope chatbot service Q4. (TAR0003593)	No progress on this due to pandemic/remote support requirements.
Digital - 3 YEAR TARGET Setup and establish Trickle, a web-based feedback system allowing NES staff to provide feedback on a day to day basis. NES roll out by the end of Q3 20/21. (TAR0003401)	This work was delayed by COVID-19 but Workforce colleagues are now looking to re-invigorate the work in Q4.

Target	Update
Finance - Budget letters detailing 3-year budgets are issued by End of October 2020, based on re-mobilisation plans. (TAR0003318)	This has not been completed due to a lack of budget confirmation from SG. Directorates are aware of the level of funding available to them through their annual budget as reported within the VAR. Non-recurrent funding is being managed as it is received. We expect final confirmation of the NES budget in January 2021.
Finance - Facilitate the roll out of tableau to all Budget holders within NES by end of financial year. (TAR0003325)	No plans to complete this in this financial year due to conflicting COVID 19 priorities.
Finance - Develop an internal SLA for the MIS function for use with other parts of Finance and the wider NES (TAR0003328)	No plans to complete this in this financial year due to conflicting COVID 19 priorities.
Finance - Re-run Customer satisfaction questionnaire to review and compare satisfaction levels from 2019/20 (TAR0003296)	Due to conflicting COVID 19 priorities this will not be completed this year
Finance - Complete a review of reporting needs within Finance (TAR0003326)	Some reports have been developed as per Target 3327 (Develop a suite of BOXI Reports which are available to Analysts and Finance Managers to support financial reporting to budget holders), however, the original scope of the project has not been met, nor will it be completed by end of March21 due to conflicting COVID priorities.
NMAHP - By March 2021 we will increase uptake of Flying Start by 10% (baseline figures from April 2018 to March 2019 = 2,328 enrolled) supported by Flying Start Leads. (TAR0003343)	COVID appears to have had a negative impact on the uptake of practitioners registering to the programme. Completion was suspended for two months. Current numbers are 1426 (down 249 on this point last year). A national meeting of the Flying Start Leads Group was held resulting in work to create more robust and useful data to enhance monitoring of registrant's progress through the programme. We are on track to develop a supportive TURAS Flying Start resources hub for practitioners and facilitators to enhance engagement, support completion and measure impact.

Target	Update
NMAHP - Subject to funding, by March 2021 the AHP Careers Fellowship application data for 2018 - 2020 will be analysed to identify if it reflects the national profile of the AHP workforce. (TAR0003357)	As a result of the impact of COVID 19, this work will not be undertaken or completed as capacity and timescales do not allow the required data analysis support required.
NMAHP - By March 2021, we will develop career and educational pathways and resources to enable assistant practitioner radiographers to take on roles which will help free up Advanced Radiographers. (TAR0003355)	Work on Allied Health Professions' Transforming Roles was temporarily paused as a result of COVID. The Scottish Radiology Transformation Programme Board (SRTP) has recently commenced this work completing a national survey to establish the priority areas for the development of Advanced Practice. It is recognised Assistant Practitioners will play key roles in freeing up registered staff to take on this role. One meeting has been held with SRTP to explore how and where assistant practitioner roles may be extended. A second meeting is scheduled for January 2021.
NMAHP - By March 2021, we will review, update and make accessible via Turas Learn the Advanced Practice Toolkit to reflect national developments in Nursing, Midwifery and Health Professions' Advanced Practice education and practice. (TAR0003319)	As a result of the impact of COVID 19, lack of capacity means that this work will be delayed into next financial year (2021/2022)
PCR - Produce a comprehensive Educational Governance schedule for 2021-2024 based on a triennial risk-profiling exercise. (TAR0003379)	The corporate approach to providing assurance on education quality is currently under review, with the expectation that the risk-profiling approach will be discontinued. Alternative arrangements for quality assurance of education and research activities will be instituted in 2021.
Psychology - Work with NES Digital colleagues to finalise reporting functionality within the Trainee Survey. Once this is available, we will present a review of the first year of implementation to stakeholders and agree process for publication of results from year 2 onwards. (TAR0003716)	Progress on Trainee Survey has been paused due to ill health and impact of COVID 19. It is unlikely this will be finalised by end of March 2021.
Psychology - Develop, deliver and evaluate 12 blended skills-based workshops and training for trainers and provide enhanced level training for trainers based on our MAP Programme. We will target health and social care professionals including nurses, care workers and AHPs, where necessary adapting the content for different specialisms or multidisciplinary teams by March 2021.	3 remote learning workshops have been delivered to a total of 12 health and social care professionals since April 2020. Demand has been lower due to continued impacts of COVID-19. Team capacity to deliver has been challenging with staff vacancies. Unlikely to achieve targets by end of Q4.

Target	Update
(TAR0003666)	
Psychology - By March 2021 a) carry out the development phase* to produce a foundation level leadership development resource; and b) pilot the materials and delivery methods with a multidisciplinary group in the North Region. (4 sessions of GR time) *The development phase includes scoping, mapping of internal and external resources, stakeholder engagement and a learning needs analysis. (TAR0003720)	Due to the impact of COVID 19 this work on the development phase of producing a foundation level leadership development resource and pilot of materials has been delayed. A working group has been formed to take forward 'Leadership in practice Scotland (LipS)'. A vision has been agreed and the resource will build on the Leadership Foundations e-learning modules accessible via the Leadership and Management Zone in Turas Learn. A new target has been created for 2021/22 which will see a pilot of the on-line materials and delivery methods with two multidisciplinary groups across the Health & Care System.
Psychology - Embed and consolidate previous Essentials in Psychological Care - Dementia Trainer for Trainer programmes with the addition of Coaching workshops and the launch of the Essentials e-learning module (developed in 19/20). Two Training for Trainer events will be delivered to 30 health and social care staff. Two coaching workshops will be delivered to 40 Essential Trainers to support further implementation of the Essentials programme by March 2021. Promotion of the Essentials e-learning module will be targeted at all Essential Trainers to support implementation of the programme in local areas. Guidance for the use of the module will be developed. (TAR0003675)	Q2: Delivered a remote Essentials Coaching workshop on 30th June & 1st July 2020 with individual Board/HSCP follow up to 18 health and social care staff. Q3: Delayed delivery of Essentials Training for Trainers - request from Boards to adapt Essentials training for remote delivery. Adapted Essentials training using 2 different delivery models to a total of 20 care home staff from GGC and Western Isles. A total of 38 health and social care staff have accessed Essentials training.
Psychology - Deliver 2 Psychological Interventions in Response to Stress and Distress in Dementia coaching workshops to 30 health and social care staff by March 2021. The first coaching workshop will focus on the current cohort of Stress and Distress Trainers, i.e., just those trained in 2020/21, and the second workshop will target all Stress and Distress Trainers trained to date. Adjustments will be made if required to deliver remotely. (TAR0003679)	Q2: a remote S&D coaching workshop was delivered in August 2020 to 8 S&D Trainers. A second workshop is currently being planned for Q4. Demand has been lower due to continued impact of COVID-19 on services.
Psychology - Facilitators guides for Informed Level workshops will be developed by August 2020 and we will support the delivery of 2 virtual	Due to the COVID-19 crisis, this target will not be completed and can be 'closed'.

Target	Update
leaning events by March 2020. (NMAHP Ref TAR0003255) (TAR0003706)	
Psychology - Redesign the advanced TiPS-PH modules to suit online/remote deliver. Offer 2 remote/online training events (40 module places) on each of the advanced TiPS-PH training on: "Improving Adherence/Concordance; Advanced Communication and MI Skills"; "Significant Conversations, Life Limiting Conditions and Palliative care" and "Understanding Persistent Physical Symptoms in Paediatric Healthcare" to paediatric healthcare staff across Scotland by the end of March 2021. (TAR0003660)	One locally planned date was cancelled in Q1 due to COVID-19. The Advanced Modules have not been prioritised for remote delivery due to the difficulties of offering longer training events remotely, the additional work that is needed to transform this training to a remote format, the difficulty in staff being released to attend longer training events and the difficulty for our training network in prioritising the delivery of training during this period. This goal is therefore at risk of not being completed. We will aim to offer two advanced training modules, remotely, later in Q4 although may not complete the second day of any two-day training modules offered, by the end of Q4.
Psychology - Provide supervisor training to supervisors of applied psychology trainees across all funded programmes to ensure consistent level of support, opportunity and evaluation for trainees. Deliver: introductory supervisor training to 55 new supervisors; supervision Continuing Professional Development (CPD) training to 60 experienced supervisors; Cognitive Behavioural Therapy (CBT) supervision skills training to 15 clinical psychologists; competence awareness sessions to 4 Health psychology supervisors. (TAR0003717)	ALL TRAINING DELIVERED REMOTELY. Q1 introductory supervisor training =16; CPD supervision training = 0; CBT supervision skills = 0; supervision Competence awareness to Health Psychology = 3: Q2 Introductory supervisor training = 45 (61); CPD supervisor training = 32 (32); CBT supervisor skills = 0 (0) ; supervision competence to Health Psychology = 1 (4): Q3 introductory supervisor training =17 (78) ; CPD supervisor training = 16 (48) ; CBT supervisor skills =10 (10) ; supervision competence to Health psychology = 1 (5). Lower training numbers have been a result of the impact of the COVID-19 pandemic. Less role out of training has been led by demand and time required to makes adjustments to remote delivery.
Psychology - Provision of 'Train the Trainers' training for 12 psychological therapists in the LD adapted version of Safety & Stabilisation. Support and review of implementation of this with specialist learning disability staff in at least 5 health board areas (n = 60 staff) (TAR0003673)	This has been impacted by COVID. The generic version of Safety and Stabilisation has been updated for digital delivery and a subgroup is meeting in January to ensure this is sufficiently adapted for the LD workforce. it is planned that this will be delivered as a remote delivery pilot in Q4 prior to training for trainers being delivered.
Psychology - Subject to funding, continue with the delivery of Psychological Interventions in Response to Stress and Distress in Dementia Training for Trainers programme. Deliver 1 Stress and Distress Training for Trainers programme to 20 health and social care staff using the revised	Remote delivery of the Psychological Interventions in Response to Stress & Distress in Dementia is planned for the 12th, 13th & 14th Jan 2021. 15 applications from health & social care staff have been received - demand lower due to continued impact of COVID-19.

Target	Update
Stress and Distress training programme by March 2021. Continue to maintain and update the Stress and Distress Trainer register. Adjustments will be made if required to deliver remotely. (TAR0003677)	
Psychology - Continue Leadership development support for Lead Clinicians in CAMHS by offering coaching and support up to 4 times a year. Adjustments to be made to support remote delivery. (TAR0003699)	CAMHS lead clinician coaching has been paused due to impact of COVID-19 and resulting urgent priorities within services. Remote options could be explored but it is likely lead clinicians will be unable to engage in coaching as the pandemic continues.
Workforce - Subject to resources, development of integrated careers and recruitment portal including and applicant tracking system to deliver a talent pipeline from inquiry, education, recruitment and on-boarding. (TAR0003171)	Funding for this objective was not agreed and a national recruitment portal (Jobtrain) has been implemented across NHS Scotland. This target will be closed as it will not be delivered.
Workforce - Deploy Phase 1 of the 'Once for Scotland' Workforce Policies portal with 6 core policies and 125 supporting documents ensuring that they meet content development guidelines by April 2020. Subject to resources, through the course of 2020/21 design and deploy phase 2 policies which include 34 policies (17 PIN policies) and approximately 715 supporting documents by April 2021 which is in line with the OFS Policies Programme Board timelines. Delivering phase 2 policies involves providing content and user experience expertise and providing the website infrastructure to host these policies and the resources to migrate policy content onto the website. (TAR0003168)	'Once for Scotland' Workforce Policies work has currently been put on hold by Scottish Government and a revised timetable for Phase 2 starting in April 2021 has been issued by the Programme Board (subject to review). NES is providing Digital solution for this piece of work and is instructed by SG on timeline of the programme.
Workforce - Subject to National Boards' Programme Board approval, implement a joint approach to provision of OD services to help increase and enhance collaboration between National Boards, and establish viability of a single system approach to OD, Leadership and Workforce Development support by these Boards to the wider health and care system. (TAR0003501)	Activity on this target was paused at the beginning of the pandemic to allow National Boards to focus on priority areas. Discussions will restart when National Boards Collaborative group is able to recommence.

APPROVED

AUDIT & RISK COMMITTEE

Minutes of the Seventy-sixth meeting of the Audit and Risk Committee (which is the first meeting of the Audit and Risk Committee under revised name and remit) held on Tuesday 03 November 2020 via Microsoft Teams.

Present:	Doreen Steele (Chair)
	Anne Currie
	Linda Dunion
	Jean Ford (until item 13)
	Sandra Walker
In attendance:	Jenn Allison, Committee Administrator
	Claire Connor, KPMG
	Rob Coward, Principal Educator
	David Garbutt, Chair of NES
	Stewart Irvine, Acting Chief Executive
	James Lucas, KPMG
	Audrey McColl, Director of Finance
	Kenny McLean, Head of Procurement
	Janice Sinclair, Head of Finance
	Della Thomas, Principal Lead
	Neil Thomas, KPMG
	Lizzie Turner, Principal Lead
	Lorraine Turner, Manager PCG
	Lewis Wilson, Grant Thornton (for item 10)

1. **Welcome and introductions**

1.1. The Chair welcomed everyone to the meeting which was the first of the NES Audit and Risk Committee since the Board approved changes to the NES Standing Committee structure in August 2020.

1.2. The Chair particularly welcomed Jean Ford, who has joined as a member of the Audit and Risk Committee from the Finance and Performance Management Committee, which was formally stood down by the Board in August 2020. The Audit and Risk Committee will receive some Finance and Procurement reports that had been previously submitted to the Finance and Performance Management Committee. Finance reports will also continue to be submitted to the Board.

1.3. The Chair also welcomed Neil Thomas from internal auditors KPMG and Lewis Wilson from external auditors Grant Thornton who were attending the NES Audit and Risk Committee for the first time, and NES managers Kenny McLean and

Lorraine Turner who were attending for the first time for procurement and risk items respectively.

2.   Apologies for absence

2.1   Apologies were received from Grant Thornton External Auditors Joanne Brown. It was noted that Lewis Wilson was unable to attend the full meeting and therefore it was agreed that item 10a would be taken at the beginning of the meeting. Jean Ford informed the Chair that she was unable to attend the full meeting and left after item 13.

3.   Declarations of interest

3.1   There were no declarations of interest.

4.   Any other business

4.1   There was no other business requiring consideration by the Committee.

5.   Minutes of the Audit Committee 11 June 2020   (NES/AR/20/37)

5.1   The minutes of the Audit Committee 11 June 2020 were approved as a correct record.

6.   Minutes of the Audit Committee 16 July 2020   (NES/AR/20/38)

6.1   The minutes of the Audit Committee 16 July 2020 were approved as a correct record, following one minor amendment to further clarify information in relation to Chair and Vice Chair arrangements within the draft Standing Orders.

7.   Action list of the Audit Committee 11 June and 13 July 2020
(NES/AR/20/39)
7.1   Members noted that the actions from the previous meeting were completed or were in progress.

7.2   Discussion took place regarding an action taken at the June Audit Committee requesting that the NES Talent Management Framework includes senior management. Audrey McColl informed members that Director of Workforce, Tracey Ashworth-Davies, has produced a paper which will be submitted to the Executive Team meeting setting out a proportionate approach and timescale for workforce planning, talent management and succession planning that aligns with Scottish government requirements and is intended also to address the risk identified by internal audit. The priority group for succession planning at this stage will be at Director level.

7.3   The Committee noted the completed action in relation to information security and resilience reporting which in line with the new Committee structure will go through the Audit and Risk Committee, with any specific technology elements being reported by the Digital Executive Group to the Digital Committee.

7.4 Sandra Walker raised a concern that there could be a weakness regarding technology reporting arrangements while the Digital and Information Committee remains stood down during the pandemic. Audrey McColl assured the Committee that reporting of risks relating to Digital will continue to be reported through the Audit and Risk Committee via internal audit reports and follow up reports. David Garbutt added that any other relevant Digital reports will also be submitted to the Board. David Garbutt and Audrey McColl will arrange to meet to discuss Digital reporting further. **Action: AMcC**

7.5 David Garbutt raised a query regarding how consistency of Risk evaluation and scoring in NES will be assured, following the Global Risk Maturity Assessment. Audrey McColl confirmed that the requirement to moderate scoring mechanisms to ensure consistency will be included in the remit of the Risk Management Group.

8. Matters arising

8.1 There were no matters arising.

9. Internal Audit Reports

a) Property Transaction Monitoring

9.1 Claire Connor informed the Committee that the Property Transaction Monitoring review is almost complete and will be submitted to the January 2021 Committee. Audrey McColl explained that this is in relation to a historic lease signing and Stewart Irvine informed the Committee that all property transactions have been placed on hold as a consequence of COVID-19.

9.2 NES completed one property transaction in 2019/20 to extend the lease of the Bayes Centre for NES Digital Services (NDS) to October 2020. The delay is due to final signatures required for the lease extension and subsequent completion of monitoring pro forma to Scottish Government. The signatures required are from stakeholders at Bayes Centre who were on furlough earlier in the year. The Central Legal Office are in the process of arranging a sign date.

b) Review of Core Financial Control Framework – COVID19 Financial Controls

9.3 Claire Connor introduced the report which reviewed NES's COVID-19 financial returns submitted to Scottish Government, detailing related expenditure incurred to date and forecast future costs, as well as the details of savings realised and forecast.

9.4 The audit focussed on quality and accuracy of financial information in relation to costs and savings incurred to date and budgeting and financial monitoring processes used by NES to prepare its final year end forecast of COVID-19 costs and savings.

9.5 The report identified that NES has implemented a strong governance structure to support the identification of costs and savings in relation to COVID-19 activity, with robust standardised processes in place for recording, monitoring, budgeting, forecasting and reporting. The report concluded that the return to Scottish Government can be considered accurate and no recommendations were made.

9.6 Anne Currie congratulated NES colleagues and commented that it was a sterling example of the excellent governance processes and effective communication in place. She added it helped to give an insight into how financial governance processes are implemented and how well information is flowing between NES and Scottish Government.

9.7 Audrey McColl noted that some aspects of financial management in relation to COVID-19 have been more complicated than others. For example, finalisation of some nursing student placement costs has relied on confirmation of data from third parties, however Audrey assured the Committee that these areas are closely monitored and followed-up.

9.8 David Garbutt raised concern that due to absence of a key stakeholder on annual leave auditors were unable to run through the process of recording the additional COVID-19 spend and savings for the Nursing Directorate. Claire Connor assured the Committee that key documents evidencing the process for the Nursing Directorate were obtained and that the same governance processes had been walked through with the other key stakeholders supporting other Directorates. Internal Auditors felt this provided sufficient assurance of processes across the Board. James Lucas added that the report will be amended to provide further explanation of this. **Action: JL**

9.9 Sandra Walker and Jean Ford added that this had raised concerns in relation to staff capacity and resilience. Audrey McColl assured the Committee that processes are in place in the Finance Directorate to ensure that there is appropriate cover during any planned or unplanned leave.

9.10 The Audit Committee noted the report and the assurance provided.

c) COVID Governance Review

9.11 Claire Connor introduced the report which reviewed the key changes that NES has implemented across the organisation in response to COVID-19 to identify which changes are considered beneficial to the way in which NES is governed.

9.12 The audit considered key changes to the following areas: governance; financial control; infrastructure and estate; people management; educational governance; IT/digital and planning; and corporate resources.

9.13 The report found that NES has implemented a number of beneficial changes and identified 1 moderate risk recommendation to undertake scenario based planning and 5 low risk recommendations regarding: production of new Committee Terms of Reference; consider retaining extended Executive Team meetings; embed 'agile' working (smarter working), including updating Workforce policy in relation to home working; update clear desk policy; implement timed review of Standing Financial Instructions.

9.14 Sandra Walker welcomed the recommendation in relation to scenario planning, however noted that this is an additional tool to inform better decision making. James Lucas noted this and agreed to strengthen wording of the recommendation to reflect this. **Action: JL**

9.15 Sandra considered there could be potential difficulties in relation to scenario planning due to the threat of shifting baselines and suggested that focus is given to areas that can be influenced. David Garbutt added that scenario planning can be difficult due to the unknown directives that may come from Scottish Government and are therefore out with NES' control.

9.16 Anne Currie queried why the audit did not review areas with the expectation that there would be a similar pandemic or event of this scale. James Lucas explained that the purpose of the audit was to assess the changes made in response to the current pandemic rather than planning for potential similar occurrences.

9.17 The Audit Committee noted the report and the assurance provided.

   d)   IT Review

9.18 Claire Connor provided the Committee with a verbal update regarding progress on the IT Review internal audit. The Committee noted that the report was largely complete. Two workshops have been conducted with Operational teams and Senior Management to create the IT Risk Universe. The initial output from the review have been shared with the NES Digital Directors for comment. The final report, which will highlight which elements of the NES Digital operating environment create the highest risks, will be submitted to the Audit and Risk Committee in January. This will allow internal audit resource to be focused on areas deemed to be high risk.

   e)   Status Update and Follow up Summary

9.19 Claire Connor introduced the report which provided the Committee with an update on progress against the internal audit plan and assurance that during Q2 2020/21, internal audit recommendations have been implemented satisfactorily or are in progress.

9.20 The report highlighted that Internal Audit work is progressing in line with the 2020/21 internal audit plan. The Property Transaction Monitoring report and the IT Review report will be presented to the Audit and Risk Committee at the January 2021 meeting.

9.21 The Committee noted that 9 actions are not yet due,13 are overdue and that 4 actions have been confirmed as closed during the second quarter of 2020/21, resulting in 22 open outstanding actions, 7 of which are classed as high risk, 1 relates to 2016-17, 2 relate to 2017-18 and 4 to 2019-20. The Committee observed that the Business Continuity action from 2016-17 could be closed due to being overtaken by current events.   Audrey McColl agreed that NES management will work with internal auditors and action owners to review all outstanding audit recommendations, in the context of COVID-19.   **Action: AMcC/KMPG**

9.22 The Committee noted the report and were satisfied that NES continues to make good progress in implementing outstanding audit recommendations.

10.   External Reports

a)   Assessment of Effectiveness of External Audit   (NES/AR/20/41)

10.1 Janice Sinclair presented the draft External Audit Effectiveness Assessment which has been updated from the initial assessment in 2019/20. The scoring, of mostly 4 and 5, reflects the maturity of the relationship between NES management and the External Auditors. Grant Thornton were appointed as External Auditors for the period 2016/17 to 2020/21. This appointment had been extended, by the Auditor General for Scotland, to also include 2021/22 due to the impact of Covid-19.

10.2 Janice stated that the annual accounts process for financial year 2019/20 was a positive experience despite the changing circumstances of remote working due to Covid19.

10.3 Members agreed that it was a fair and reasonable assessment, suggesting that item A6 regarding the appropriateness of the engagement partner involvement in audits should be moved from a 4 to a 5 and agreed scoring for questions C8 and E7 at level 5 which focus specifically on the Audit and Risk Committee.

10.4 Members also agreed a score of 5 for A7 in relation to the effectiveness of the private meetings which take place between External Auditors and non-executives. Members agreed that Grant Thornton have an open professional relationship with both NES management and non-executive members. It was noted that due to the Covid-19 pandemic non-executives have not yet had the opportunity to meet with the external auditors this financial year.

10.5 The Committee noted and were satisfied with the Assessment of Effectiveness of External Audit.

b) Follow up of 2019/20 External Audit Recommendations – nil

10.6 The Committee noted that there were no External Audit Recommendations to monitor.

11.   Finance Report as at 30 September 2020   (NES/AR/20/42)

11.1 Lizzie Turner presented the Finance Report which informed the Committee of the financial results for the first 6 months of financial year 2020/21 to 30th September 2020 and to indicate the current forecast outturn as at 31st March 2021, including the anticipated costs of the NES response to the COVID-19 pandemic.

11.2 The current year-end forecast is an overspend of £1.4m. This is made up of a £2.3m overspend in Medical Training Grades, offset by a £0.9m underspend across the rest of NES. However, it was noted that the overspend on Medical Training grades is underwritten by SG. It is anticipated that the underspend could increase to £1.8m due to a likelihood that the expected vacancy lag is exceeded by £0.8m and due to changes from Scottish Government to the treatment of the Annual Leave accrual, resulting in a benefit of £0.4m, which are likely to be offset by additional pressures of £0.3m.

11.3 Directorates have been asked to look at priorities and present proposals for use of the underspend on the non-training grade NES budget. Decisions will be based on alignment with remobilisation plan, the NES Strategic Framework and the capacity to deliver in year. Details of this will be provided in the report to the January Committee. Stewart Irvine added that it is likely that proposals will include developments in Technology enabled learning to support increased on-line delivery.

11.4 The current estimated net cost of the NES response to COVID-19 in financial year 2020/21 is £11m after recognising £5m savings from activities no longer anticipated to take place or which will be significantly reduced. £1.2m of the COVID-19 allocation is for specific projects, of which £0.6m has been received and the remaining balance expected in the next allocation letter. There is also a remaining £1m general COVID-19 allocation which will be agreed with Scottish Government in January 2021. Doreen Steele asked if NES can be assured that this remaining budget will be received, and Lizzie Turner informed the Audit and Risk Committee that there is a meeting with SG scheduled for January at which the final allocation will be agreed.

11.5 The Committee noted that an additional £1.5m saving allocated to NES in 2019/20 as part of the £15m collective savings target allocated to National Boards will remain

allocated to NES until agreement is reached by the National Boards and SG on how it should be reallocated.

11.6 Directorates have recently completed Operational Planning for 2021/22. The continued response to the COVID-19 pandemic has added an extra layer of complexity and Directorates have produced plans aligned to the NES remobilisation plan, however it is likely that some elements will change due to changing requirements from the continued COVID-19 response.

11.7 The Scottish Government budget for financial year 2021/22 is expected in December 2020 and further COVID-19 allocation is expected in January 2021.

11.8 Jean Ford asked if costs and savings in relation to travel and subsistence were being tracked and Lizzie Turner confirmed this is tracked via the COVID-19 reporting.

11.9 Doreen Steele raised a query regarding the impact of the vacancy lag on staff and Lizzie Turner assured the Committee that the vacancy lag is approximately the same as previous years.

11.10 The Committee noted that the report is presented in the same format as was presented to the Finance and Performance Management Committee, which was stood down by the NES Board in August 2020. Lizzie Turner informed the Committee that an amended reporting process is under consideration where the detailed Finance Report would be considered by the Audit and Risk Committee and a summary report presented to the Board. It was agreed that Finance will produce a proposed summary report, in addition to the detailed report, to be considered by the Audit and Risk Committee prior to consideration by the full Board either at a Board Development session or via correspondence. **Action: AMcC**

11.11 To inform this development process, Members were asked to consider any key information they consider should be included in either the detailed or summary report.

12. Procurement Annual Report (NES/AR/20/43)

12.1 Kenny McLean presented the annual Procurement Report to update the Committee on NES's regulated procurement activities for the financial year 2019/20 and seek approval to publish the report in accordance with the Procurement Reform (Scotland) Act.

12.2 Kenny McLean informed the Committee that the Act requires a contracting authority to publish its regulated procurement activities, which are any commitments of or

above £50k. Kenny added that NES also implements a full tender process for anything between £25k and £50k.

12.3   The Committee noted that the report was previously submitted to the Finance and Performance Management Committee and that Scottish Government have extended submission dates to account for added pressures due to the COVID-19 pandemic.

12.4   Kenny informed the Committee that tenders where possible will seek opportunities to deliver community benefits. For example, the successful supplier of the on-line digital coaching platform for Project Lift will, for every digital coaching session requested by NES, provide a pro-bono coaching session for a young adult in Scotland.

12.5   Linda Dunion felt that the pro-bono coaching arrangement was a creative and proactive approach to providing community benefits.

12.6   Sandra Walker asked if there may be opportunities to make savings by amending contracts where requirements may have changed due to COVID-19. Kenny McLean noted that this would depend on the contract in place and assured the Committee that options relating to this would be discussed where appropriate.

12.7   The Committee noted the Procurement Principles listed in the report and in relation to principle 10, fraud awareness and prevention, Sandra Walker asked if there could be a fraud risk if the fraud prevention essential learning had not been completed by a member of staff. Kenny assured the Committee that as there is no delegated Procurement authority in NES the processes in place within the centrally managed Procurement team ensure the correct Procurement procedures are followed therefore mitigating this risk.

12.8   Anne Currie raised a query regarding the arrangements in the contract in relation to delivery of training in the management of Medical Emergencies for Vocational Dental Practitioners. Kenny McLean assured the Committee that this training is being delivered and therefore will be paid for.

12.9   David Garbutt asked if there was a directive to support Scottish businesses and Kenny McLean informed the Committee that the regulations dictate that procurement exercises need to be equitable to any company in Europe and added that the post Brexit equivalent of the regulation has not yet been published however is likely to be similar. However, it was noted that there is a focus on supporting Small and Medium sized enterprises.

12.10   The Committee noted the report and approved it for publication.   **Action: KMcL**

13.   Counter Fraud Update

a) Annual Counter Fraud Report to Counter Fraud Services   (NES/AR/20/44)

13.1   Janice Sinclair presented the draft annual counter fraud report which details NES compliance with the Counter Fraud Services (CFS) Partnership Agreement and summarises the level of engagement with counter fraud activities throughout 2019/20. The report provides assurance that NES is complying with its responsibilities in relation to the Strategy to Combat Financial Crime in NHS Scotland.

13.2   The Committee noted that the annual report is usually submitted to the June Committee meeting, however submission of reports has been delayed due to the COVID-19 response.

13.3   The Committee noted that NES has met its obligation to combat financial crime and reduce fraud within NHS Scotland and approved its submission to Counter Fraud Services.   **Action: JS**

b) Counter Fraud Update   (NES/AR/20/45)

13.4   Janice Sinclair presented the paper to update the Committee regarding activities underway in NES since 01 April 2020 which are aimed at supporting the Strategy to Combat Financial Crime in NHS Scotland. This is the first report in financial year 2020/21 due to the necessity to re-direct resources within NES to meet the demands of responding to COVID-19.

13.5   The Counter Fraud Services awareness programme has been significantly affected by COVID-19, with face to face training being cancelled and plans being made to provide training sessions virtually.

13.6   The Committee noted that two new referrals were made to Counter Fraud Services this financial year and that the review of the Gifts & Hospitality Registers has revealed no new declarations received from staff or board members.

13.7   The Committee also noted two Audit Scotland reports in relation to counter fraud activities, from which NES has taken the decision to review the IT asset register process and to implement a COVID-19 fraud checklist. An action plan for any gaps identified from completion of the checklist will be presented to the next Audit committee.   **Action JS**

13.8   The Committee noted the report and progress of actions in NES to support the Strategy to Combat Financial Crime in Scotland.

c) National Fraud Initiative (NFI) Update   (NES/AR/20/46)

13.9 Janice Sinclair presented the paper to update the Committee on the outcomes of the 2019/20 National Fraud Initiative and provide an update on the work already started in NES to comply with the requirements of the 2020/21 exercise.

13.10 All public sector bodies across the UK, are required to participate in the National Fraud Initiative (NFI) which compares electronic data about individuals to identify potential errors or fraud. The NFI in Scotland runs every two years and the data collection exercise is now underway and matches are due to be released to organisations at the end of January 2021.

13.11 The Committee noted the report and progress of actions in NES to support the National Fraud Initiative.

14.   Risk Management – Corporate/COVID Risk Register   (NES/AR/20/47)

14.1 Audrey McColl presented the NES Corporate and COVID-19 Risk Registers as at 23rd October 2020, and highlighted recent changes made by the Executive Team. The Committee noted and were satisfied with the changes made to the NES Corporate and COVID-19 Risk Register.

15.   Standing Orders Draft Implementation Plan   (NES/AR/20/48)

15.1 Della Thomas presented the Standing Orders Draft Implementation Plan to seek comments from the Audit and Risk Committee.

15.2 The Committee noted that NES Standing Committees are each developing draft Terms of Reference and Strategic KPIs will also be developed for each Committee in due course.

15.3 The Committee were satisfied with the draft Standing Orders Implementation Plan and noted it will be submitted to the Board for approval at the Board meeting on 26th November or via correspondence.

16.   Committee Terms of Reference   (NES/AR/20/49)

16.1 Della Thomas presented the draft standard Terms of Reference which will apply to all Board Committees and the draft Terms of Reference of the Audit and Risk Committee for comment and approval.

16.2 The Committee noted that the draft Terms of Reference of the Audit and Risk Committee have incorporated elements from the former Finance and Performance Management Committee remit.

16.3 Linda Dunion requested that paragraph 4.4 is amended to clarify the term from the NES standing Orders "excluded from the meeting", in line with the NES Code of

Conduct. Sandra Walker suggested that wording could be strengthened in some areas to emphasise the strategic overview of the Committee and to add a new section to specify the matters a private member meeting might consider. Anne Currie suggested that further clarification in paragraph 5.1 was given to "others" in attendance at meetings. **Action: DT**

16.4 The Committee agreed the importance of ensuring the generic Terms of Reference are assimilated into each of the Committees Terms of Reference.

16.5 The Committee noted and were satisfied with the draft generic Terms of Reference for all Committees which will be submitted to the Board for approval and were satisfied with the draft Audit and Risk Committee Terms of Reference which will be submitted to the Audit and Risk Committee in January 2021 and to the Board for approval in February 2021

17. NES Assurance Framework   (NES/AR/20/50)

17.1 Rob Coward presented the Assurance Framework which incorporates minor changes that were suggested by the Committee at the last meeting, including the addition of a new column indicating the responsible Committee.

17.2 David Garbutt added that once the Terms of Reference are approved each Committee will use the Assurance Framework to satisfy themselves that the elements of their remit are adequately covered.

17.3 The Committee noted the minor agreed amendments made to the Assurance Framework and the progress against the agreed actions.

18. Items for information

18.1 The following papers were noted by the Committee:

  a) COVID19 How public audit in Scotland is responding
  b) COVID19 Guide for Audit and Risk Committees
  c) COVID19 Financial Impact

19. Date and time of next meeting

19.1 The next meeting of the Audit Committee will be held on Thursday 28th January at 09:15 via Microsoft Teams.

19.2 Doreen Steele thanked contributors of papers to the Audit and Risk Committee noting that she is pleased with the NES performance, particularly considering that colleagues are working under extraordinary circumstances.

NES
Nov 2020
JA/amcc/ds
Approved 28 January 2021

APPROVED

NHS Education for Scotland

EDUCATIONAL & RESEARCH GOVERNANCE COMMITTEE

Minutes of the thirty-ninth meeting of the Educational & Research Governance Committee held on Thursday 17 September 2020 via Microsoft Teams

Present:	Douglas Hutchens, Committee Chair
	Doreen Steele, Non-Executive Director
	Sandra Walker, Non-Executive Director
	Vicki Nairn, Non-Executive Director
In attendance:	Stewart Irvine, Acting Chief Executive
	David Garbutt, Chair of NES Board
	Karen Wilson, Director of Nursing Midwifery & AHPs/Executive Lead
	Rowan Parks, Acting Medical Director
	Gillian Mawdsley, Non-Executive Director
	Rob Coward, Principal Educator/Executive Secretary
	Helen Allbutt, Principal Lead
	Della Thomas, Board Secretary/Principal Lead Corporate Governance
	Chris Duffy, Senior Admin Officer/Committee Secretary

1. Welcome and introductions

Douglas Hutchens welcomed everyone to the meeting and went on to particularly welcome Gillian Mawdsley who is to become an Education and Quality Committee member, once this membership has received Board approval.   He pointed out that as the Committee has been suspended for several months this meeting is conducting business in line with the previous business schedule. He highlighted the need for the Committee to come together in informal workshop session to agree the role of the new Education and Quality Committee. Thereafter the Terms of Reference would be developed for agreement. This had initially been scheduled to follow on from today's formal Committee meeting, however a new date and time will be found to allow for a more informed discussion.

Action: Chris Duffy

2. Apologies for absence

No apologies were given for this meeting.

3. Notification of any other business

There were no notifications of any other business.

4. Declarations of interests

There were no declarations of interest in relation to the items of business on the agenda.

5. Minutes of the Educational & Research Governance Committee

The minutes of the Educational & Research Governance Committee meeting held on 20 February 2020 were approved by correspondence in May 2020 and have been through the NES Board for noting.

The Committee noted the approved minutes without comment.

6. Action Status Report

Rob Coward was invited to take the Committee through the action status report. Points were raised on the specific actions below:

- Page 1, Action 7 - It was confirmed that a Lead Officer's Report including an update on TURAS Learn will come to the Education and Quality meeting scheduled for December.
- Page 1, Action 14 - The NES Volunteering Policy and Handbook will be submitted to the November Staff Governance Committee and this could therefore be marked as complete.
- Page 2, Action 3.2 – It was confirmed that a Board member report template had been created. Della Thomas was asked to review this and determine how this could be used for Members. Vicki Nairn provided a verbal update and the Committee were content to mark that part of the action as complete.
- Page 3, Action 12 – It was noted that this action has been overtaken by the KPMG report and has been discussed at the Board Workshop held on 27th August 2020. This action is now complete.
- Sandra Walker commented that the Lead Officer's report had been very useful in the past and if this would be reinstated going forward. She also asked if the sharing of good practice report can be given a new completion date. Douglas Hutchens confirmed that the Lead Officer Report will be included as an agenda item at the next meeting and future meetings. Rob Coward advised that the good practice report is contingent on the Educational Leadership Group meeting regularly and this group has been stood down throughout COVID-19. Rob Coward will provide a new completion date.

The Committee noted the tracker report and were in agreement that the completed actions can be removed from the report.

7. Feedback, Comments, Concerns and Complaints annual report 2019-2020

Rob Coward introduced the report remarking that feedback, comments, concerns and complaints are considered by NHSScotland as a performance indicator and this is reflected in the requirement for all NHS Boards to publish an annual Feedback, Comments, Concerns and Complaints (FCCC) report. In the light of service disruption following the COVID-19 pandemic, the Scottish Government issued guidance to Health Boards giving an extension for the submission of FCCC reports. The guidance further indicated that an abbreviated report covering concerns and complaints only will be accepted given resource constraints.

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NES continues to receive very few complaints requiring investigation using the agreed corporate complaints handling process. There were only seven such complaints received during the year, plus five expressions of concern from individuals on general issues which were investigated by the Complaints Team or relevant directorates. Of the complaints, three were fully upheld although apologies were given and/or remedial action taken in response to three of the expressions of concern.

Douglas Hutchens thanked Rob Coward for the report and invited Committee members to raise any comments or questions.

Sandra Walker suggested that the report should be clearer in its content and context at the very start, before the table on page 5, to include a clearer explanation that this has been revised due to the COVID-19 context and as per Scottish Government guidance.

David Garbutt enquired if NES receive information from the Care Opinion website and if the website is monitored. Karen Wilson responded to confirm that NES receive a regular report informing if there have been any comments/complaints relating to NES, but there has been a nil return. David Garbutt asked that the nil return is entered into the report. This was agreed.

Sandra Walker suggested that the section on Accountability and Governance should be revised to include the COVID-19 governance context.

Gillian Mawdsley noted that this report links with her role as Whistleblowing Champion.

The Committee asked that the changes were incorporated to the report before the report was progressed to full Board for noting on Thursday 24th September and on this basis the Committee approved the report.

Action: Rob Coward

8. Annual Research Governance Report 2019-20

Helen Allbutt gave a brief summary of the report highlighting that it includes information about research-related work, research governance arrangements, and research impact case studies. This compilation of evidence helps NES to demonstrate its use of funds in terms of research activity, outcomes and benefits.

Before the detail of the report was discussed, the Committee sought to understand in what governance context the report was coming to the Committee. It was clarified that the purpose of the report was for Committee assurance that the research activity NES has conducted is appropriate for the business programme and for their approval.

It was agreed that Della Thomas and Board Services, would work more closely with the authors of papers for this Committee to help sharpen up the governance terms and language.

Action: Della Thomas/Board Services

The report was then opened to Committee members for any questions or comments.

Sandra Walker noted that two current research projects are at risk and asked what proportion of research projects are unsuccessful? Helen Allbutt replied that although some projects are

more protracted than others they do not fail. Some projects are cut short and this is decided through the Educational and Research Governance Executive Group (ERGEG).

Douglas Hutchens asked how can the Committee understand the difference the research has made to the service?

Doreen Steele suggested that part of the report should reflect achievements in the Research Strategy.

Helen Allbutt explained that the research impact assessments are conducted to try and determine the differences made and the assessments do provide pertinent information. Case studies also provide good insight into the differences made. Helen Allbutt agreed to incorporate all the feedback and comments made today into next year's report, in particular to work on the transparency of the report and to link with the Research Strategy.

Action: Helen Allbutt

Helen Allbutt was then thanked for an excellent and helpful report. The Committee members were content with the assurance the report provided and the report was approved.

The Committee also commended the number of publications and the very successful authors who have produced a large amount of research on modest resources. David Garbutt suggested that published authors should be celebrated more through internal communications in NES to increase their visibility. Helen Allbutt and Rob Coward agreed to get in touch with John MacEachen (Head of Communications) to explore this further.

Action: Chris Duffy/Rob Coward

9. Any other Business

As the Committee transitions into the Education and Quality Committee any legacy issues will be carried forward and will be re-shaped into the Committee's schedule of business as appropriate.

10. Date of next meeting

A meeting of the Education and Quality Committee is scheduled for Thursday 10 December 2020 at 10:15 via Microsoft Teams.

CD/DT/DH/KW
v.03
September 2020

Approved 10 December 2020

NHS Education for Scotland **NES/SGC/21/02**

Minutes of the Seventieth Meeting of the Staff Governance Committee held on Thursday 05th November 2020 via Microsoft Teams

Present:	Linda Dunion, Committee Chair
	Anne Currie, Non-executive Board member
	Jean Ford, Non-executive Board member
	Gillian Mawdsley, Non-executive Board member
	Lynnette Grieve, Non-executive Board member
	David Cunningham, Ex-Officio member, Staff Side (BMA)
In attendance:	Tracey Ashworth-Davies, Director of Workforce/Executive Lead (Left meeting during item 10)
	Stewart Irvine, Acting Chief Executive (Left meeting after item 11)
	David Garbutt, Board Chair (Left meeting after item 14)
	Morag McElhinney, Principal Lead HR
	Della Thomas, Board Secretary and Principal Lead for Governance
	Ameet Bellad, Senior Specialist Lead, Workforce Infrastructure
	Anne Campbell, Head of Programme
	Nancy El-Farargy, Manager, Planning & Corporate Resources (attended part of the meeting and left meeting after item 14)
	Kristi Long, Senior Specialist Manager, Workforce
	Chris Duffy, Senior Admin Officer

1.   Chair's welcome and introduction

1.1   Linda Dunion highlighted a change in the agenda running order as Tracey Ashworth-Davies needed to speak to certain agenda items before leaving the meeting early. The minutes are written in the original agenda order.

2.   Apologies for absence

2.1   Apologies were received from James McCann (Staff Side – Unison). James was due to attend the committee for item 7 on the agenda – Staff Governance Committee Ex-Officio members.

3.   Declaration of interests

3.1   There were no declarations of interest in relation to the items on the agenda, other than those logged previously.

4.   Minutes of the meeting held on 6th August 2020   (NES/SGC/20/44)

4.1   One correction was highlighted in the minutes. Under item 12 Lead Employer, the sentence "Anne Currie added, it is important to categorise the exact support required and to endorse this the findings from the KPMG audit" required the input

of the word "given" to read, "Anne Currie added, it is important to categorise the exact support required and to endorse this given the findings from the KPMG internal audit".

4.2   The Committee then approved the minutes as an accurate record of the meeting.

5.   Action Status Report   (NES/SGC/20/45)

5.1   Committee members were content with the completed actions. Two actions remained open.

* TURAS E+D Zone – this was initially listed as an action for the committee to receive a presentation of the E+D leadership zone. The Committee agreed that this was a legacy item and can now be closed. The TURAS E+D Zone is open and available to all, https://learn.nes.nhs.scot/3480/equality-and-diversity-zone

* Smarter Working Project – this was an action for the Committee to receive an update on the Smarter Working Project at the February 21 Committee. After a brief discussion it was agreed that the project will be subsumed into the ongoing recovery and renewal work which will be reported regularly to the Committee and therefore this action can also be closed.

5.2   All actions on the Action Status Report are now complete.

6.   Matters arising from the minutes

6.1   There were no matters arising from the minutes.

7.   Staff Governance Committee Ex-Officio members

7.1   Lynnette Grieve informed the Committee that at the Partnership Forum on 21st October 2020, two nominations to join the Staff Governance Committee as Ex-Officio members were put forward and approved by the Partnership Forum. These were David Cunningham (Staff Side – BMA) and James McCann (Staff Side – Unison). The appointment period will be 2 years, after which the members can be re-appointed or new nominations may be put forward.

7.2   The Committee accepted these nominations and David Cunningham and James McCann were appointed as Ex-Officio members of the Board. Della Thomas will now start the formal Committee Induction process.

Action: Della Thomas

8.   Staff Governance Committee Terms of Reference Update   (NES/SGC/20/46)

8.1   Della Thomas introduced this paper, which invited comments on and approval of the specific terms of reference for the Staff Governance Committee. It was noted that the terms of reference had been produced following a focussed and purposeful workshop.

8.2   David Garbutt made the following points;

- The Terms of Reference should have numbered sections to align with The Blueprint for Good Governance.
- The bullet point referring to "approve any policy amendment" should be re-phrased to state NES/Local policies that are subject to Staff Governance. This takes into account that Once for Scotland policies are not amendable.
- The bullet point referring to "receive recommendations from the Partnership Forum", receive should be changed to discuss/consider.
- The bullet point referring to "ensure appropriate governance in respect of risks" should be, as determined by the Staff Governance Committee AND as allocated to the Committee by the Audit and Risk Committee.
- A suggestion that something stronger is required on "promoting health and wellbeing" considering today's environment. Could a reference be made to 'Our Way' and the NES values.

8.3   Two further points were raised in the discussion following suggested amendments.

- There are certain products which could sit under the Staff Governance or Education and Quality Committee (for example Project Lift). It was agreed that the governance of products like this needs to be identified and which Committee they sit under needs to be clarified. Linda Dunion will take this forward with the Chair of the Education and Quality Committee.
- It was confirmed that Whistleblowing will sit under the Staff Governance Committee and will be reviewed after the next Scottish Parliamentary election in May 2021.

Action: Linda Dunion

8.4   The Committee approved the specific terms of reference subject to the recommendations suggested today. Della Thomas will take the recommendations forward. The Committee also noted the generic headings and standard text which will go through Audit and Risk Committee and full Board.

Action: Della Thomas

9.   Director of Workforce Update   (NES/SGC/20/47)

9.1   Tracey Ashworth-Davies introduced a new report which has been designed to update the Committee on matters relevant to ensuring that the NHS Scotland Staff Governance Standard is implemented and monitored in the carrying out of NES business. The information contained in the report is presented 'for information'. It is proposed that the Director of Workforce update will now be a standing item on the Committee agenda.

9.2   The report updated the Committee in the following areas;

- COVID-19 Accelerated Recruitment Portal (CARP)

- Recovery and Renewal
- Contact Tracing Support
- Lead Employer
- People and OD Strategy
- NES Workforce Planning
- Values Based Recruitment (VBR)
- Fair Work Practices
- NES STAR Awards
- Employment Tribunals

9.3 Anne Currie thanked Tracey Ashworth-Davies for a very helpful paper and asked three questions.

- Where the learning exercises undertaken during CARP have been documented and shared with partners? Tracey Ashworth-Davies confirmed that they have been documented and shared, noting that the learning exercise on Student Nurses was the largest.
- Is the number of NES staff contributing to contact tracing likely to increase? It was confirmed that NES don't have many more staff they are able to submit and high numbers of contact tracing staff from NES are not expected.
- Was VBR used in the recruitment process for the new NES Chief Executive Officer? It was confirmed that VBR was used.

9.4 Lynnette Grieve thanked Tracey Ashworth-Davies for the helpful condensed paper and all the work associated with CARP. The NES addendum to the homeworking policy to allow staff access to resources and equipment has been welcomed by NES staff and Lynnette Grieve expressed some concern that some of the really good points implemented by NES may be lost on a national level if a 'Once for Scotland' Homeworking policy is introduced. The Trickle app will be welcomed as it appears more and more staff across the whole of the NHS are starting to experience burnout. Lynnette Grieve also thanked Morag McElhinney for her role in CARP (which was supported by members of the Committee) and enquired if any of the staff contained in CARP have been used for contact-tracing? Tracey Ashworth-Davies confirmed that the Executive Team are very aware of the burnout issue and consider this when allocating work, looking to cut out things where possible to allow staff to move at pace. Staff for contact tracing can be sourced from CARP but this is now a job for the Central Allocation Team and not NES.

9.5 Jean Ford supports the new format of the paper as it showcases key work and provides an opportunity to raise issues. Jean Ford asked if Non-Executives can attend the NES Stars Event? It was confirmed that Non-Executive Board members can attend the event and email invitations of how to join have been sent to NES email addresses. NES Stars will be recorded, and this will be made available to Non-Executives also. It was noted that Non-Executives could also sign up to "Connecting Over Coffee". Lynnette Grieve highlighted this as a good way of getting to know different staff across the organisation and to make the Board more visible.

9.6 Gillian Mawdsley asked if the Committee could be confident that incidents raised as part of employment tribunals were not a sign of wider issues. Tracey Ashworth-Davies confirmed that all learning from employment tribunals is reviewed and actioned as required . Gillian Mawdsley also noted that homeworking was not on the risk register and stated that there should be cross-referencing with actions in the context of the Health & Safety Annual report. Tracey Ashworth-Davies agreed that this would be beneficial, and this will be remitted to the Health and Safety Committee for further action. Tracey Ashworth-Davies also agreed that there was room for improvement in the Health & Safety report and this will be discussed in more detail under item 15.

Action: Tracey Ashworth-Davies

9.7 The Committee noted the updates and approved the new format of the report. Specific offline feedback on the report to Tracey Ashworth-Davies is welcome.

10.   People & OD Dashboard   (NES/SGC/20/48)

10.1 Ameet Bellad introduced the paper and made Committee members aware of two areas that are currently being focussed on in relation to the dashboard.

- Data Quality – The team are looking to actively identify areas of improvement and there is now a process to routinely look at this.
- Data Literacy/Digital Storytelling – The team are looking to improve the understanding of the report and to teach people how to use the report to make it more meaningful for end users.

10.2 Linda Dunion thanked Ameet stating that the Dashboard really benefits from ongoing feedback and it was reassuring to hear that it is still work in progress.

10.3 David Garbutt raised some concerns with understanding the report and provided several examples. Jean Ford replied to say that the first time they had viewed the report they asked a lot of similar questions. It required the explanation from an expert to fully understand the report and there are still areas for improvement. Jean Ford's comments were echoed by other members and attendees of the Committee. Ameet Bellad explained that the Dashboard is designed to be used as a live digital tool rather than a screenshot/print out.

10.4 David Garbutt informed the Committee that when active governance comes in, an exercise will be undertaken to determine if,

- The Dashboard can be easily changed to suit each Committee's purpose.
- NES have the data sets available to support the Dashboard.

Linda Dunion drew the discussion to a close by confirming that the Dashboard and the data to support it will form part of the Second Staff Governance Committee workshop which is being held to consider how best to meet the Committee's needs for information for governance. It was agreed that a key or

legend will be required for the Dashboard. David Garbutt will be invited to the workshop to provide input.

Action: Chris Duffy/Ameet Bellad

10.5 Morag McElhinney spoke to Appendix three of the paper which asked the Committee to approve actions identified to drive improvement in recruitment activity; to drive organisational performance in completion of PDPR and essential learning; promote accurate reporting of staff absences, and to refresh the KPIs.

10.6 The Committee noted the update and approved all actions identified in the paper.

10.7 Tracey Ashworth-Davies had to leave the meeting during this item.

11. Leadership and Management Review (NES/SGC/20/49)

11.1 Anne Campbell presented an update on the summary of findings from the Leadership and Management review and an update on the progress to date.

11.2 Linda Dunion thanked Anne for the good report and Committee members put forward the following points.

- Linda Dunion asked if more work can be undertaken on the communications with only 36% of people opening the management matters briefing. Anne Campbell responded recognising communications have been an issue and explaining that ongoing work on the marketing of management matters and the use of different communication vehicles is part of the project.
- Lynnette Grieve asked if the new line managers induction would be mandatory and Jean Ford agreed that it should be mandatory. Anne Campbell confirmed that it is not currently mandatory, and work is underway to improve the 60% completion rate.
- David Garbutt highlighted that the health inequalities and communication areas of the cover paper that were not completed. Anne Campbell noted this and explained that work is ongoing to decide how the project will be marketed and communicated, with an aim to use different vehicles.
- Kristi Long agreed to share the outputs from three staff focus groups with Anne Campbell and her team, which give insight into manager development.
- Anne Campbell also confirmed to the Committee that the Line Managers' Passport will be reinstated.

11.3 The Committee noted the findings and endorsed the recommendations stated in the paper.

11.4 Stewart Irvine left the meeting at the end of this item.

12. PDP/Essential Learning and Induction (NES/SGC/20/50)

12.1 Anne Campbell presented a paper which provided an update on Staff Induction and the compliance rates on Performance Review and Planning (PRP) and Essential Learning completion following the recommencement of these activities.

12.2 Key figures from the report included;

- PRP compliance reports showed, 72% of staff have had an appraisal discussion, 66% of staff have agreed objectives and 67%of staff have an agreed personal development plan.
- Essential Learning – completion of the Agile working module was agreed as a priority to ensure the health, safety and wellbeing of staff as they continue to work from home for the foreseeable future. At end June 2020, **43%** of staff had completed the Agile module. The latest performance data at 31 October 2020 shows that **86%** of staff have now completed this module

12.3 Linda Dunion thanked Anne Campbell and her team for all the efforts being made to improve these figures. The Committee then noted the report and approved the recommended actions.

13. Human Rights Update and Equality and Diversity Year-End Performance Report (19/20) (NES/SGC/20/51)

13.1 Kristi Long introduced two papers. The Equality and Diversity Annual Report was provided to inform on progress delivering NES's statutory equality duties and to provide assurance of effective governance of these duties. The report also highlights key strategic issues and areas identified for further development.

13.2 The Human Rights briefing was provided to give the Committee a brief overview of the expected programme of work resulting from the development of a Human Rights legislative Framework for Scotland.

13.3 Gillian Mawdsley thanked Kristi Long for the briefing on what will be a major piece of work. It will be important to map out the key issues for NES and workshop may be required in the future.

13.4 Linda Dunion also noted that it is good for the Committee to see this Horizon Scanning piece of work. The Committee then noted both the performance report and the human rights briefing.

14. Whistleblowing Update (NES/SGC/20/52)

14.1 Linda Dunion asked Nancy El-Farargy to introduce the paper and confirm the process it has been through. Nancy El-Farargy introduced a paper updating on the National Whistleblowing Arrangements to date. The paper outlined recent developments regarding the National Whistleblowing Standards, the new once for Scotland Whistleblowing Policy and the Independent National Whistleblowing Officer service. It provided an update on recent NES preparatory developments and highlighted intended NES actions via the implementation plan.

14.2   Gillian Mawdsley explained to the Committee that she did not have sight of this report before it was submitted to the Committee and would have commented on the report if given the chance, in her position as National Whistleblowing Champion for NES.

14.3   Gillian Mawdsley further explained that although the paper was very factual, the independent whistleblowing Officer service needs to be incorporated more fully and a more comprehensive review needs to be undertaken. The wider role for NES was not reflected in the report. Ameet Bellad explained that NES are the technology partners for the development of learning materials and have received a request to host the Whistleblowing policy. In addition to this NES will be providing space to host training materials for the SPSO.

14.4   David Garbutt explained that Gillian's role as National Whistleblowing Champion is quite unique. From a governance standpoint, Non-Executive Board members would not normally be involved in the production of papers but in this instance, the Committee does expect the National Whistleblowing Champion to be closely involved in helping to set up the necessary systems in NHS Boards.

14.5   The Committee noted the Whistleblowing update and recommended that Gillian Mawdsley plays an integral part in the development of the next paper for the February 2021 meeting of the Committee.

14.6   David Garbutt and Nancy El-Farargy left the meeting after this item.

Action: Gillian Mawdsley/Nancy El-Farargy

15.   Annual Review of Health & Safety Performance 2019/20   (NES/SGC/20/53)

15.1   Tracey Ashworth-Davies introduced this paper which reviews the health and safety performance across NES which is carried out on an annual basis, this is then presented to the Executive Team resulting in the development of an action plan to address and mitigate risks.

15.2   Committee members came to a consensus that the paper was not fit for the Committee in its current format. Anne Currie highlighted a concern relating to a lack of activity on Legionella/Fire Safety Checks, which have been put on the action log for next year. Stewart Irvine believes the checks have been completed and there may be a timing issue with the paper. Tracey Ashworth-Davies will confirm after the Committee.

Action: Tracey Ashworth-Davies

15.3   Jean Ford made a practical suggestion of writing a 2-year action plan that will run to 2022. This was welcomed by both members and attendees and Tracey Ashworth-Davies will take this forward.

15.4 Further comments were made regarding the quality of the paper and it was noted that the Committee have been seeking health and safety assurance for some time. The Committee agreed that the report in its current form is not suitable for next year's submission. An important discussion will need to take place to improve the report and it should include an action plan that goes forward for two years. Tracey Ashworth-Davies will take this forward.

Action: Tracey Ashworth-Davies

15.5 The Committee noted the report.

16. Policy/DL Tracker, NES Volunteering Policy and Information Governance Policies (NES/SGC/20/54-56)

16.1 One update was noted, to include reference to Whistleblowing in the NES Volunteering Policy. Following this recommendation, the Committee noted the DL Tracker and approved the Volunteering and Information Governance policies.

17. Risk Update (NES/SGC/20/57)

17.1 Lead Employer programme remains the only Primary 1 inherent risk for the Staff Governance Committee. Since the last meeting funding has been secured for the Lead Employer programme and so the risks have reduced. Initially during lockdown, meetings associated with Lead Employer came to a halt, but engagement is up and running again and gathering momentum.

17.2 David Garbutt suggested the Committee take a more holistic approach to risk and review on an ongoing basis. It was confirmed that the review of risk will form part of the second SGC workshop.

17.3 Jean Ford asked if the emerging theme of productivity/sustainability has been captured on the corporate risk register? Tracey Ashworth-Davies confirmed that the risk register is continually updated. DSI added that a close eye will be kept on this as a potential risk.

17.4 The Committee noted the risk update.

For Information

18. Audit Scotland Report – Equality Impact Assessment: COVID-19 and working from home (NES/SGC/20/58)

18.1 The Committee noted the Audit Scotland Report

19. Any other business

19.1   There was no other business to discuss.

20.   Date and time of next meeting

20.1   4th February 2021, 10:15 via Microsoft Teams

NES
November 2020
CD/LD

Approved
SGC 4th Feb 2021

NHS Education for Scotland   **NES/21/18**
Item 11d
11 February 2021

NHS Education for Scotland

Board Paper

1.   **Title of Paper**

        'Our Health, Our Rights, Our NHS' Agreement between NHS Scotland and
        Scotland's Gypsy / Traveller community

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

        Kristi Long, Equality & Diversity Adviser

3.   **Situation/Purpose of paper**

        The Board are asked to endorse and note the 'Our Health, Our Rights, Our NHS'
        Agreement between NHS Scotland and Scotland's Gypsy/Traveller community.

4.   **Background**

4.1   On behalf of the NHS Scotland Board Chief Executives, the Scottish Directors of
        Public Health Group convened a short-life working group, with the involvement of
        the Scottish Gypsy / Traveller community, to prepare a response to 'Tackling
        Negative Attitudes towards Gypsy Travellers', a joint statement by the Scottish
        Government, COSLA and Police Scotland. The result is the 'Our Rights, Our Health,
        Our NHS' Agreement that is included with this cover paper.

5.   **Assessment/Key Issues**

5.1   The 'Our Rights, Our Health, Our NHS' Agreement sets out what Gypsy / Travellers
        should expect when using NHS Services or receiving NHS care in Scotland and is
        designed to complement the Scottish Government and NHS Scotland Charter of
        Patient Rights and Responsibilities.

5.2   By endorsing the Agreement, NES will commit to supporting NHS Scotland to
        realise the Agreement' standards in practice. There are two additional asks that
        Boards must commit to:
        a. Provision of a senior named person to engage with Gypsy/Travellers on good
           and bad healthcare experiences – this is currently being agreed within NES
        b. A review of the Agreement annually, involving the Gypsy/Traveller community
           appropriately in the review process – given the specialist remit of NES, this
           review may be undertaken collaboratively with other national Boards.

5.3   To support delivery of Scottish Government's action plan, the NES Equality and
        Diversity Zone on Turas Learn hosts a range of Gypsy/Traveller educational
        resources that can be accessed by all staff, and which aim to raise awareness of
        Gypsy/Traveller culture and perspectives and the challenges the community can
        face.

6.   Recommendations

6.1   The Board are asked to endorse and note the 'Our Rights, Our Health, Our NHS' Agreement.

Author to complete

a) Have Educational implications been considered?
   ☒**Yes**
   ☐   No

b) Is there a budget allocated for this work?
   ☒   **Yes** -- although this budget is currently contingent and a business case has been submitted for extension in the 2021/22 operational plan
   ☐   No

c) Alignment with NES Strategy 2019-2024
   ☐   1. A high-quality learning and employment environment
   ☐   2. National infrastructure to improve attraction, recruitment, training and retention
   ☒   3. **Education and training for a skilled, adaptable and compassionate workforce**
   ☐   4. A national digital platform, analysis, intelligence and modelling
   ☐   5. A high performing organisation (NES)

d) Have key risks and mitigation measures been identified?
   ☒   **Yes**
   ☐   No

e) Have Equality and Diversity and health inequality issues been considered?
   ☒   **Yes**
   ☐   No

f) Have you considered a staff and external stakeholder engagement plan?
   ☒   **Yes**
   ☐   No

Kristi Long
January 2021
NES

Our health *our rights* OUR NHS

GYPSY/TRAVELLERS & NHS SCOTLAND

An agreement based on the NHS Scotland's Charter of Patient Rights and Responsibilities and feedback from Scotland's Gypsy/Travellers

NHS SCOTLAND

MECOPP

Our use of NHS services will never be affected or refused because we are Gypsy / Travellers

WELCOME ALL — Health Centre — Travellers Welcome

Our needs, values and history should be understood by NHS staff and our way of life respected

We have the right to be trusted and treated with dignity and respect when using NHS services. Our family, carers and NHS staff have this right too.

Trust

Patient Care

We have the right to safe care and treatment which is provided at the right time, in the right place and by the right person

We would like NHS staff to give us clear information about our health, care and treatment in a way we understand

---

We have the right to be involved in making decisions about our care and treatment

A&E — GP — Dentist — Pharmacy — Why do I need this?

We would like to have a say in how NHS services are designed so that they are provided in ways that are accessible and culturally appropriate

5/10 — It would help if...

What matters to you?

respect trust — commitment — protection — rights sensitivity

20 OCTOBER 2021 2022 2023

We would like a named senior person in each NHS Board who will listen to our good and bad healthcare experiences. They should be welcoming, respectful and committed to protecting and promoting our rights to health and healthcare

We would like each NHS Board to review this national agreement annually. We want to be involved in this review in a respectful, open and honest way

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To get a copy of this leaflet contact MECOPP,
Tel: 0131 467 2994
facebook/GypsyTravellers-Scotland-Health-and-wellbeing-information

To get help in raising concerns about NHS services in Scotland, contact the Patient Advice and Support Service,
Tel: 0800 917 2127

NHS SCOTLAND

MECOPP

NHS Education for Scotland　　　　　　　　　　　　　　　　**NES/21/19**
Item 12a
11 February 2021

NHS Education for Scotland

Board Paper

1.　Title of Paper

2019 – 20 NES Annual Review Response Letter / Actions

2.　Author(s) of Paper

Professor Stewart Irvine

3.　Situation/Purpose of paper

To inform the Board of Scottish Government's formal response to the 2019-20 NES Annual Review.

4.　Background

4.1　The 2019 – 20 NES Annual Review took place virtually on 18 November 2020 and was overseen by the Minister for Mental Health, Clare Haughey. NES's presentation focused on our 2019-20 achievements, our response to the ongoing COVID-19 pandemic and looked ahead briefly to 2020-21.

5.　Assessment/Key Issues

5.1　The letter acknowledges the significant amount of work that NES has delivered during 2019-20 and the pandemic, whilst also recognising the significant disruption the pandemic has caused to education and training. The Minister thanked NES for supporting learners to ensure they can continue to progress by utilising innovative and digital educational solutions.

5.2　In particular, the letter highlights the mental health programmes delivered by NES across a wide range of healthcare disciplines. Board members will note that this agenda includes a presentation from Judy Thomson and Sandra Ferguson from the NES Psychology directorate on NES's current and future contribution to mental health in Scotland.

5.3　The letter is a very positive reflection of the contribution of NES staff and how they continue to support the work of NHS Scotland and its people. We will continue to consider how the NHS can transform and improve and ensure that any ongoing disruption to learner education and progression is mitigated.

6.　Recommendations

The Board are asked to note the content of the letter from Clare Haughey and be assured that NES will continue to support the NHS Scotland COVID-19 pandemic response and Scottish Government priorities.

a) Have Educational implications been considered?

    ☒   Yes

    ☐   No

b) Is there a budget allocated for this work?

    ☒   Yes

    ☐   No

c) Alignment with NES Strategy 2019-2024

    ☒   1. A high-quality learning and employment environment

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

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

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

    ☒   5. A high performing organisation (NES)

d) Have key risks and mitigation measures been identified?

    ☒   Yes

    ☐   No

a) Have Equality and Diversity and health inequality issues been considered?

    ☒   Yes

    ☐   No

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

    ☒   Yes

    ☐   No

DSI
January 2021
NES

T: 0300 244 4000
E: scottish.ministers@gov.scot

David Garbutt
Chair, NHS Education for Scotland

Cc: Stewart Irvine

22nd December 2020

Dear David,

NHS EDUCATION FOR SCOTLAND (NES) – ANNUAL REVIEW 2019/20

1. I am writing to you following the Annual Review held on 18 November 2020. I would like to record my thanks to you, Stewart and to all of your colleagues and staff who were involved in the preparations for this meeting.

2. This letter summarises the main points discussed and the actions arising from the Review.

Pre-Covid performance to end of 2019/20

3. It was helpful to discuss performance in 2019-20. This enabled you to highlight many of the key and diverse achievements across a year which saw significant disruption due to the pandemic. I was pleased to hear about the development of the NES Strategy 2019-2024 and, in particular, the efforts made to ensure the Strategy aligns with Scottish Government (SG) priorities.

4. I acknowledge the vast amount of work that supports the education and training of those in both undergraduate and postgraduate placements which trainee surveys attest is of high standing. I was also pleased to hear about the mental health programmes delivered by NES across a wide range of healthcare disciplines, helping us to ensure that those people who require this care can receive it. These achievements amongst many reflect the on-going efforts of the organisation to provide highly effective education and training, inclusive of digital innovation, and speaks to the professionalism and commitment of staff.

5. I very much welcome NES' achievements in meeting all of their 2019-20 financial parameters/targets. I acknowledge this is down to the hard work of many in the organisation. In reflecting on the rigorous controls NES set themselves, there was discussion around the scope to increase recurring funding allocations at the expense of non-recurring funding, and a longer term risk NES foresees in managing the medical training grade funding. I would ask that NES along with SG policy and finance colleagues continue to discuss and seek means to develop options for sustainable

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recurrent solutions. These conversations should also consider the National Boards Savings Target.

Covid-19 initial response

6. It is without doubt that NES has performed extremely well in response to Covid-19 across a number of areas. I welcome the additional governance measures which have been adopted in order to support and monitor delivery of a changing set of priorities. I am also grateful for the efforts made by staff across the organisation to support services across Scotland, most notably:

   - At pace, the enormous task of redesigning existing education packages alongside fulfilling requests for new Covid-specific educational material covering issues including, for example: support for staff on protecting themselves and others; and assessment and care of those suffering with Covid-19 (inclusive of mental health care). I understand these materials were hosted on the TURAS eLearning platform.
   - Providing psychological interventions and, working with local partners, taking part in the Mental Health Network, with many resources made available to the National Wellbeing Hub.
   - Continuing to support learners who could be subject to significant disruption in achieving essential outcomes.
   - Building the Covid-19 Accelerated Recruitment Portal (ARP) to facilitate recruitment and employment activity for those individuals willing to return to the Health and Social Care workforce.
   - Employment of a large number of undergraduate nurses, midwives and allied health professionals.
   - Redeployment of some 800 trainee doctors to support frontline services, including early deployment of interim foundation doctors.
   - Working with other statutory and regulatory bodies to manage and mitigate the impacts to trainee progression.
   - Wide-ranging digital support, including data collection activity for the vaccination programme and the Care Home Safety Huddle
   - Redeployment of internal staff within NES to support existing and Covid-19 specific work

7. I appreciate the very fast pace at which this work was undertaken and am grateful that, in the context of these pressures, you have taken time to survey both learners and internal NES staff on the various impacts of Covid-19. This engagement will I hope be of benefit to NES, both in supporting your contribution to the pandemic response and in thinking about the future shape of the organisation and its ways of working. I was particularly interested to hear your reflections on how NES supported its own staff during these challenging times and I would encourage you to carry on the initiatives you have established in order to promote staff wellbeing, including the Healthy Working Lives Group and the People Recovery Group.

Forward look

8. I would like to thank you for all the work that you and your teams have undertaken against the objectives and principles for safe and effective remobilisation. This

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extends from the early stages of the pandemic through to the renewal and recovery phase detailed in the most recent Remobilisation Plan.

9. You highlighted that the primary emphasis for the organisation is to refocus efforts towards delivery of the aims and objectives of the Annual Operational Plan but noted this was not without challenge. In particular, you are mindful of the winter pressures we will face and that these will continue to be exacerbated by Covid-19. I am therefore supportive of the flexible and adaptable approach you intend to take, building on the experience of recent months.

10. I acknowledge that, due to the ongoing effects of Covid-19, there is concern around disruption to undergraduate and postgraduate learner placements and so their ability to complete their training paths. I expect NES to continue to liaise with SG Health Workforce officials and be a key stakeholder in the SG Strategic Oversight Group on Healthcare Students Placements, supporting development and implementation of the 3 Year Plan to get learner training pathways back on track. I would also wish NES to keep my officials abreast of the mitigation steps begin taken in conjunction with relevant UK partners to complete the annual trainee recruitment processes which ensures our NHS workforce supply.

11. Throughout the Annual Review you highlighted some of the digital innovation NES is taking forward in the form of support for the Covid-19 vaccination programme, cancer treatment summaries, wider ophthalmology Services and the development of improved learning resources. I am encouraged to hear of NES' ambition to not only own and lead digital innovation but to work with other groups and stakeholders as you do so. I would encourage continued collaboration with the SG Directorate for Digital Reform and Service Engagement, headed by Caroline Lamb.

Conclusion

12. The breadth of discussion at the Annual Review was a reminder of the vitally important role NES has to play in support of NHS Scotland. I would like to take this opportunity to extend my thanks to all NES staff for their achievements across 2019-20 and especially in carrying out the vast range of tasks and initiatives in response to the pandemic and beyond. This positive response coupled with staff capability, willingness and flexibility, has supported the right people, being in the right place, at the right time.

13. I would also encourage you to further consider what support the organisation can give in driving forward transformation and improvement, recognising that the Covid-19 pandemic, although unprecedented in impact, has given us all the opportunity to think differently about how we might deliver service and learning in the future. In this regard I believe NES has an important role.

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14. To finish, I wish again to offer you my thanks for the meeting and to thank to Stewart for his excellent work as interim CEO in extremely difficult times. I look forward to working with the Karen Reid when she takes up post in the New Year.

Clare Haughey

CLARE HAUGHEY

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NHS Education for Scotland

Board Paper

1. **Title of Paper**

Mental Health and Trauma Informed Care Report

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

Judy Thomson (Co-ordinating Author - Director of Training for Psychology Services)
Sandra Ferguson (Associate Director of Training for Psychology Services)
Susanne Forrest (Head of Programme (PCC) - NMAHP)
Jose Marshall (Associate Director of Priority Groups - Dental)
Claire McGuire (Head of Programme (PCC) - NMAHP)
Clare McKenzie (Postgraduate Dean - Medical)
Susan Roberts (Associate Postgraduate Pharmacy Dean – Medical)
Audrey Taylor (Principal Educator - NMAHP)

3. **Purpose of Paper**

The overall purpose is to brief Board colleagues of the work being undertaken by NES in relation to Mental Health. The detailed paper is provided as a reference paper about work being taken forward across Directorates in NES. This paper accompanies the presentation to be delivered at the Board Meeting on 11th February 2021. At the Board Meeting, as well as a brief summary overview presentation of our mental health contribution, one example will be explored in more depth – psychological trauma.

4. **Strategic background**

4.1 Scottish Government published a ten-year mental health strategy in 2017 that included 40 actions. A further three key documents include:

- Every Life Matters, Scotland's suicide prevention action plan
- Delivering Effective Services: Needs Assessment and Service Recommendations for Specialist and Universal Perinatal Mental Health Services
- Children and Young Peoples Mental Health Task Force recommendations.

4.2 NES is following programmes of work linked to all of these. The 2020 Programme for Government confirms and extends these priorities along with that of the ambition for Scotland's public services workforce to be informed and responsive to Psychological Trauma. Improving performance on the referral to treatment access standard for Psychological Therapies and CAMHS remains a priority with NES being funded to deliver workforce development to support improvements in capacity and capability.

4.3 In the context of the pandemic, in October 2020, the Scottish Government also published a wide-ranging mental health transition and recovery plan which outlines the Scottish Government's response to the mental health impacts of Covid-19 and lockdown. It addresses the challenges that the pandemic has had, and will continue to have, on the population's mental health.

4.4 The plan also lays out key areas of mental health need that have arisen as a result of Covid-19 and lockdown, and the actions that the Scottish Government will take to respond to that need. Scottish Government priorities include Mental Health Improvement, Self-Harm and Suicide Prevention, Perinatal and Infant Mental Health, Primary care and community mental health support, Comorbidities, Prison mental health, Drug and Alcohol misuse and Psychological Trauma.

5. The Role of NES

5.1 Mental Health is a major priority for Scottish Government and public services across Scotland and experience during the pandemic has reinforced this. The entire health and social care and wider public service workforce is involved in mental health and there are educational implications across all NES work, spanning pre-registration training and continuing professional development across sectors and disciplines.

5.2 Funding for mental health education and training is from a mixture of permanent and non-recurring sources. Scottish Government Mental Health Directorate is funding significant programmes of work on a non-recurrent basis. Discussions on continuing and expanding these programmes are underway.

5.3 NES contributes to the mental health and well-being of the population of Scotland through the education and training of the workforce in three main areas:

- Pre and post registration training of mental health disciplines (e.g. mental health nursing, psychiatry, clinical psychology)
- Mental health training for pre and post registration healthcare disciplines including those in primary care settings (general medical practitioners, general practice nurses, health visitors, school nurses)
- Mental health training for multidisciplinary health staff, social care and third sector staff (including care home/residential staff) This is a growing area for NES and demand is likely to increase as Health and Social Care integration continues to develop.

1. Education and Training of Mental Health Disciplines

1.1 Mental Health Nursing

Pre-Registration Nursing Programmes are commissioned by the Scottish Government. NES NMAHP Directorate undertakes a Performance Management function on behalf of the Scottish Government, including a range of functions with a focus on recruitment to target; retention and completion rates; and quality enhancement and improvement

There has been a steady increase in commissioned numbers to Mental Health pre-registration nursing programmes over several years, with good rates (and often over-recruitment to target) over several years.

Year	Target number
2014	420
2015	420
2016	443
2017	465
2018	516
2019	602
2020	655

1.2 <u>Psychiatry</u>

The Scotland Deanery provides a full range of regional and national psychiatry training programmes. There are 13 mental health training programmes:

- 4 x regional Core Psychiatry
- 4 x regional General Adult Psychiatry: sub specialties – Rehabilitation Psychiatry, Substance Misuse Psychiatry
- National Programme Child & Adolescent Psychiatry
- National Programme Forensic Psychiatry
- National Programme Old Age Psychiatry
- National Programme Medical Psychotherapy
- National Programme Intellectual Disability Psychiatry

The establishment and numbers in programme at Sept 2020 are as tabulated below

No. of trainees in post (establishment)	Trainee grade	Programme
164 (161)	Core	Core Psychiatry
55 (59)	Higher	General Adult Psychiatry
26 (28)	Higher	Child & Adolescent Psychiatry - National
17 (25)	Higher	Old Age Psychiatry - National
16 (15)	Higher	Forensic Psychiatry - National
10 (13)	Higher	Intellectual Disability Psychiatry - National
7 (8)	Higher	Medical Psychotherapy - National

CCT output of trained psychiatrists from Dec 18 to Sept 20	
General Adult Psychiatry	28
Child & Adolescent Psychiatry	5
Old Age Psychiatry	11
Forensic Psychiatry	7
Psychiatry of Intellectual Disability	3
Medical Psychotherapy	4
Total	**58**

Recruitment to all medical specialties has been affected by the COVID pandemic in 2020 and recruitment to higher training in psychiatry remains challenging. From a workforce

perspective, the concern remains that poor higher training programme fill rates will have a negative consequence on consultant recruitment.

There is a recognised need to increase the exposure to and improve the experience of mental health placements in both undergraduate and early-years training to try to improve recruitment. At a postgraduate level, we are developing priority foundation training programmes in the north of Scotland for recruitment in 2021 as part of an initiative to increase recruitment in hard to fill geographies and specialties. We will monitor the effect of this initiative. Additionally, we will be able to increase the number of foundation year 2 trainees undertaking a psychiatry placement in future due to the agreed Scottish Government expansion of foundation programmes which commences in 2021.

The General Medical Council (GMC) survey data confirms that psychiatry trainees are amongst the most satisfied trainees in Scotland with positive trainee feedback regarding the supportive nature of training and the value of 1hr a week protected supervision.

There was no new GMC data in 2020 due to cancellation of the trainee survey during the first wave of COVID-19 pandemic. This means that the only data available for UK comparison is from 2019.

Overall Satisfaction Rankings

	2018 NTS	2019 NTS
Child and Adolescent Psychiatry	5th of 14 Deaneries	5th of 15 Deaneries
Core Psychiatry Training	4th of 17 Deaneries	11th of 17 Deaneries
Forensic Psychiatry	9th of 13 Deaneries	8th of 14 Deaneries
General Psychiatry	4th of 16 Deaneries	6th of 17 Deaneries
Medical Psychotherapy	1st of 4 Deaneries	Equal 2nd of 5 Deaneries
Old Age Psychiatry	3rd of 15 Deaneries	6th of 14 Deaneries
Psychiatry of Learning Disability	2nd of 12 Deaneries	5th of 10 Deaneries

COVID-19 has impacted our quality management work this year. Five Quality Management visits to Mental Health were cancelled, however plans are now underway to undertake virtual visits. Our first virtual visit will be to NHS Tayside which remains under GMC's Enhanced Monitoring arrangements because of ongoing concerns relating to the training environment and trainee experience. We anticipate that COVID-19 effects may become more prevalent in mental health specialties with increased referrals for mental health illness.

1.3 Psychology

NES is responsible for the pre-registration training of psychologists for the NHS in Scotland and has a commissioning and direct delivery role. Trainees in Clinical Psychology are employed by NHS Boards and deliver services under supervision in 6 clinical placements over three years while enrolled on doctoral programmes at the Universities of Edinburgh and Glasgow.

Clinical Psychologists are trained to reduce psychological distress and to enhance the promotion of psychological well-being across the lifespan, in mental and physical health and disability domains and are a flexible workforce for the NHS. The training equips them

for their roles in working with people with the most complex psychological needs, clinical leadership, supervision and supporting the wider workforce to deliver psychological care.

As a result of demand from the service to increase access to psychological expertise, two one-year masters programmes were developed to enable a rapid supply of therapists for children's and adult services. These programmes are the MSc in Psychological Therapies in Primary Care (PTPC) and Applied Psychology in Children and Young People (APCYP).

	2016/17 Output	2017/18 Output	2018/19 Output	2019/20 Output	2020/21 Output	2021/22 Output	2022/23 Output	Total
Doctorate in Clinical Psychology (3 years)	45	52	57	57	61 (expected)	61 (expected)	64 (expected)	**396**
Child and Adolescent Psychotherapist in Training (4 years)	0	5	0	0	0	5 (expected)	0	**10**
MSc Applied Psychology for Children and Young People (1 year)	16	16	18	27	30 (expected)	30 (expected)	30 (expected)	**167**
MSc Psychological Therapies in Primary Care (1 year)	20	28	29	28	35 (expected)	40 (expected)	40 (expected)	**221**
Health Psychology (2 year)	3	4	5	4	0 (delayed start to cohort until May 2019 – end dates fall into May 2021 (financial year 2021-22)	5 (expected)	4 (expected)	**25**

Demand for training posts is high: for every place on the doctoral level clinical psychology training there are 17 applicants. For every master's place there are 8 applicants. The steady supply of psychology graduates in Scotland means that expansion of the workforce is possible when training and service posts are available. In recent years, Scottish Government has provided funding for service posts as well as increased training posts, including an additional ten DClinPsych places (17% increase) for the 2020 intake.

The data evidence that multidisciplinary Psychology services have grown by 632.5 WTE, 99.7%, since 2006 (from 634.4 WTE in 2006 to 1,266.9 WTE at 30 Sep 2020) for all clinical staff. This growth has been the result of the impact of expansion of NES commissioned postgraduate applied psychology training, including the development of

two MSc courses, graduates of which take up a variety of roles within NHS Scotland mental health services.

Retention within the NHS Scotland mental health workforce of graduates of all NES commissioned postgraduate applied psychology training courses is high (88% of Doctorate Clinical Psychology graduates remain in NHS Scotland after 5 years, and further longitudinal data evidence high retention over time; after 10 years 79% are within the NHS Scotland workforce. 76% of graduates of the MSc in Applied Psychology of Children and Young People remain in NHS Scotland in employment or in further training. This figure is 78% for the graduates of the MSc in Psychological Therapies in Primary Care (adult and older adult).

2. **Examples of Education and Training of wider healthcare disciplines in Mental Health**

2.1 Health Visitors and School Nurses

NES has a central role in the transforming roles programme, in designing, commissioning and delivering education to support the refreshed roles of health visitors and school nurses in Scotland. This has included commissioning an additional 500 health visitor training places, work to support new and existing education to support staff with the universal health visiting pathway and named person responsibilities. The school nursing priority areas and pathway, published in 2018, has required a strong educational focus on developmental needs, communication and emotional/mental health and wellbeing – the latter of which NES have contributed to. Support for practitioners adopting new roles is being enhanced through education for clinical supervisors and assessors.

The Programme for Scottish Government 2019 committed to recruit an additional 250 school nurses by 2022. This will help provide a response to mild and moderate emotional and mental health difficulties experienced by young people, in the form of responsive local approaches:

- Mental Health Awareness training has been delivered as part of the School Nurse CPD programme across Scotland.
- Training in Psychological Skills-Early Interventions for Children (TIPS-EIC) workstream continues to offer training and coaching to School Nurses across Scotland, to deliver early, evidence-based / informed psychological care and interventions. More detail about this training offer is available here: https://www.nes.scot.nhs.uk/our-work/training-in-psychological-skills-early-intervention-for-children-tips-eic/. We have trained a further 158 School Nurses in LIAM since March 2020.

2.2 Advanced Nursing Practice (ANPs)

NES NMAHP is supporting the Master's Level education, training and development of ANPs to the level of experienced and highly educated registered nurses, able to completely manage a person's care, not focused on any one condition.
As a clinical leader, they have the freedom and authority to act and accept the responsibility and accountability characterised by autonomous decision making that includes assessment, diagnosis, and treatment including prescribing, for people with complex multi-dimensional needs.
Decisions are made using high level expert, knowledge and skills with the authority to

refer, admit and discharge within appropriate clinical areas. Working as part of the multidisciplinary team ANPs can work in or across all clinical settings, dependent on their area of expertise. To date 42 Mental Health Nurses have/are being supported to complete the ANP Programme.

2.3 Allied Health Professions

NES supports mental health education and development for the Allied Health Professions including those who work solely in mental health services, for example many Arts Therapists, OT's, physiotherapists, dietitians and speech and language therapists and those AHPs working in other areas who also support people experiencing mental ill health. This is mainly via the range of MDT education which is currently delivered including psychological interventions, dementia, trauma informed and suicide prevention. AHPs are well represented in these programmes of work. In addition, the AHP Careers Fellowship Scheme supports AHP mental health practice development and service improvement projects. Occupational Therapists are dual mental health and physical health trained and are well positioned to support people with the complex mental, physical and social impact of Covid-19.

The AHP team also delivered a webinar session to over 700 people on the Scottish Government *Recovery and Rehabilitation Framework for people during and after the Covid 19 pandemi*c**. This had a strong mental health/physical health emphasis and focuses on the needs of people who have had Covid-19, those who have been impacted by lockdown and those who have been impacted by the pausing of services.

2.4 Pharmacy

NES pharmacy in conjunction with NES psychology have developed and are developing the following packages for pharmacy staff.

- Depression (now live)
- Anxiety (nearly complete)
- Bipolar Disorder (due to build in 2021)
- Schizophrenia (due to build in 2021)

The NMAHP and psychology & mental health team also delivered a session tailored to NES pharmacy staff around suicide awareness whose role includes close involvement with trainees. There is a demand for similar training to be continued in 2021 as increasing mental health issues amongst trainees are encountered.

2.5 General Practice

Managing people with mental health issues in the context of their families and their communities is a major component of the Royal College of General Practitioners' specialty training curriculum (http://www.rcgp.org.uk/training-exams/gp-curriculum-overview/online-curriculum.aspx).

Competencies are met both through placements in psychiatry specialties (there are 90 psychiatry posts in Scotland that contribute to GR Speciality Training programmes) and in the training experience in primary care itself, the context in which 90% of people with mental health problems across the lifespan are managed. For the training year 2019/20, 252 doctors completed their training in General Practice.

The Medical Directorate has two workstreams that focus on the business of training doctors (Training Programme Management and Quality Management), and one that has a wider remit with a range of uni-professional and multi-professional activities and programmes (Professional Development (PD). Within the PD workstream there are a range of activities that are relevant to the continuing training and education of the mental health workforce, including (but not limited to; Approved medical Practitioner training; CPD for GPs and other primary care professionals; the Specialist & Associate Specialist Development Programme.

2.6 General Practice Nursing

The NES General Practice Nursing (GPN) Programme consists of work-based learning for nurses newly employed in general practice to prepare them for delivering general practice nursing at level 5 and in accordance with the CNOD Transforming Roles paper 6 Developing the general practice nursing role in integrated community nursing teams. https://www.nes.scot.nhs.uk/media/4235323/cnod6.pdf

The programme aim is to deliver subject-related knowledge and clinical skills training to develop an autonomous nurse who can provide person-centred care with specific problem-solving skills in the context of General Practice Nursing.

Mental health and psychological wellbeing are themes which flow throughout the programme, overarching outcomes are around recognising individuals at risk of common mental health conditions in primary care.

2.7 Dental

Education and training undertaken by the Dental Directorate, relating to Mental Health is noted below.

Mental Health Wellbeing Training
A training day was delivered in February 2020, to Vocational Training Advisors and Dental Core Training Advisors with specific focus on addressing the mental health needs of young trainee dentists. The session was developed using specific case studies from Advisors' personal experiences. The aim will be to widen the delivery to trainers, probably in an online or blended format.

Dental Core Trainees
Receive training in:
Autism and how to support individuals and families with visits to the dentist and receiving treatment.
Dementia and other cognitive disabilities, capacity and consent relating to dental treatment.

CPD for dentists and members of the dental team
Courses available on Stress Management and Wellbeing in the workplace.

Adults with Incapacity Training for Dentists
This course deals with capacity and consent, as laid out in the 'Adults with Incapacity' (Scotland) Act, 2000', and is bespoke to dentists. Successful completion of this course is required to allow a dentist to be able to assess a patient's capacity to consent to treatment and sign a certificate of capacity relating to dental treatment.

A shorter 'awareness' course is available to members of the whole dental team.

'Caring for Smiles' training
An SCQF qualification in oral health for dependent older people is available, aimed at care home workers. This includes training in dementia and how to support the oral health needs of residents with dementia.

'Childsmile' training
Included in this course for dental nurses and dental health support workers.
Elements of the National Trauma Training Programme at Trauma Informed level.

2.8 Other Multidisciplinary Training and Education Relevant to Mental Health and Wellbeing

NES is leading significant programmes of work in the following areas relevant to mental health not in the scope of this paper, however, more details are available on request.

- Grief and Bereavement
- Safety, Skills and Improvement
- Dementia
- Autism
- Learning Disabilities
- Family Nurse Partnership

3. Examples of Multidisciplinary/Multi-Sectoral Programmes of Education and Training

3.1 Scottish Government Commissioned Workforce Development Programmes

Scottish Government has commissioned NES to deliver multidisciplinary/multi-sectoral workforce development programmes in the following areas: improving access to Child and Adolescent Mental Health Services (CAMHS) and Psychological Therapies, Perinatal and Infant Mental Health, Parenting Support, Early Intervention in Children Services, Mental Health Improvement and Suicide Prevention (jointly with Public Health Scotland) and Psychological Trauma. (Other programmes such as learning disability, autism and dementia are beyond the scope of this paper).

More recently in response to Covid-19 NES has been commissioned to lead workforce development to increase NHS Boards capacity and capability to deliver psychological interventions and therapies to support the mental health and wellbeing of the Health and Social Care workforce (see section 4 Covid Response).

3.2 Service posts to increase access in NHS Scotland

These posts support stepped care models of service delivery by providing training/coaching and supervision in evidence based psychological interventions as well as direct psychological therapy delivery in specific pressure/high demand areas. Individually negotiated packages were agreed with each Board with service level agreements in place.

- Older People's Services/Other priority areas - Clinical Psychology Posts equivalent to 21 wte posts
- Primary Care - MSc Applied Psychology (Clinical Associates in Applied

Psychology/other relevant roles) equivalent to 32 wte posts
- Early Psychological Intervention Practice Support Children's Services equivalent to 10.29wte

3.3 <u>Increase in Professional Training Posts</u>

In recognition of the increased pressure to increase the workforce supply the numbers in training annually have been raised. Service Level Agreements with NHS Boards and contracts with education providers are in place.

- MSc (child training posts). Further funding has been obtained as a result of taskforce recommendations to support a total 30 annually.
- MSc (Adult and Older Adult training posts) equivalent to an increase in training numbers by 10 to make a total of 40 annually.
- Clinical Psychology training programme equivalent to 32 of the 168 (CAMHS aligned pathway) Clinical Psychology training places annually

Child and Adolescent Psychotherapist in Training (CAPT) posts, 5 training posts over the 4 years. A further 4 CAPT posts will commence a 4-year training programme in September 2021.

3.4 <u>Perinatal Mental Health</u>

The Perinatal Mental Health Curricular Framework- A framework for maternal and infant mental health, was launched in February 2019, in partnership with the Perinatal Mental Health Network Scotland, National Managed Clinical Network. The Framework outlines the knowledge and skills required by the workforce across four levels: informed, skilled, enhanced and specialist, ranging from the baseline knowledge and skills required by all staff working within health, social care and the third sector, right through to those working within specialist perinatal and infant mental health services.

Three key areas of activity have been proposed to support the implementation of the Framework, in response to the recommendations of the Perinatal Mental Health Network Scotland report, Delivering Effective Services.

An 'Essential Perinatal and Infant Mental Health' resource, aimed at the Enhanced and Specialist levels of the workforce has been developed. The supply of the psychological therapies workforce for Perinatal Mental Health is being increased by expanding training places (an additional 10 Clinical Associate in Applied Psychology trainees, 5 multi-disciplinary CBT trainees, five Clinical Psychology trainees and 10 places MSc in Infant Observation – all included in training numbers reported in 3.3 above). A tender process for a train the trainer programme for Health Visitors is underway. The first cohort of 20 Health Visitor Trainers will commence early 2021.

3.5 <u>Infant Mental Health (IMH)</u>

The Solihull Approach helps early years practitioners think psychologically about development in the early years of life.

Some advanced infant mental health initiatives have been developed as part of a systematic training pathway for practitioners working with families of children up to 18 months. The new pathway includes further online training followed by additional in-depth training in specific

interventions suitable for work with parents and infants where the relationship is subject to high levels of stress. Education and training needs across universal services is addressed in partnership between NES Psychology and NMAHP. This collaboration has included Higher Education, for example, where the Solihull Approach is integrated within the health visiting and school nursing education curriculum in some programmes.

Solihull Approach Headline Data	
Number of Practitioners trained via Solihull Approach Cascade Scheme (SACS) since 2014	1434
Number of Solihull Approach Trainers trained since 2014	123

University of Warwick Infant Mental Health online course (IMHOL) Headline Data	
Practitioners who have undertaken IMHOL since 2018	147

Evidence-based Infant Mental Health Interventions: Video Interaction Guidance (VIG) & Mellow Babies Headline Data	
Practitioners trained in IMH interventions since 2018	18

3.6 Psychology of Parenting Project (PoPP)

The Psychology of Parenting Project (PoPP) has been working with Community Planning Partnerships (CPPs) across Scotland to equip staff to deliver evidence based parenting interventions to the families of 3-6year olds with elevated behaviour problems.

Psychology of Parenting: Summary Data

August 2013 to March 2020 [1]	Total
Number of Community Planning Partnerships that have adopted the PoPP model	22
Number of multi-sector Early Years practitioners who have been fully trained, equipped and supported to deliver one of the interventions with fidelity	800 [2]
Number of families enrolled in a group (attended one session)	6,610 [3]
Number of children for whom Initial and Final SDQs have been gathered	3,489 [3]
Percentage moved out of high risk range	60% [3]

312 [1]

1. Covid-19 has stopped face to face groups running since March 2020
2. There are a number of practitioners not included in these figures who undertook training recently and are not yet on the database
3. Includes all ages of children (Range 1 - 12 years)

3.7 Training in Psychological Skills – Early Interventions for Children (TIPS-EIC)

The NES Training in Psychological Skills-Early Intervention Children project employs Implementation Science principles to select, train and coach individuals across professional groups in the Scottish child workforce (e.g. school nurses, guidance teachers, educational psychologists, social workers and pupil support workers) to deliver evidence-based / informed psychological interventions to children and young people who may not otherwise be able to access such support. Training has been well-received and evaluated (over 1,000 school staff and school nurses). Colleagues have welcomed the coaching that is available to support the translation of skills into practice.

	Training since Oct/Nov 17
Let's Introduce Anxiety Management (LIAM)	696 plus 388 since March 2020 - 1084in total
Mental health Awareness for School Nurses	300
Connecting with Parents Motivation	61
Recognising and responding to common mental health difficulties	18
Psychological Skills Modules	209
Trauma	plus 20 since March 2020 - 198 in total
Behavioural Activation for low mood / depression	20 trainers trained since March 2020 to begin the implementation

3.8 Child and Adolescent Mental Health (CAMHS)

NES CAMHS has continued to deliver a programme aiming to build up supervision and psychological therapy/intervention capacity in evidence-based interventions. A contribution to backfill is provided for longer courses of a year or more to enable release of clinicians from the boards.

CAMHS clinicians have been offered training to different levels in Cognitive Behavioural Therapy (CBT) with children and young people with anxiety, depression and other mental health difficulties.

Training	Numbers Trained since 2015
CBT supervisor level	148
1 year-long CBT certificate training for anxiety and low mood	55 completed (14 ongoing)
CBT diploma year	21 completed (3 ongoing, 2 interrupted)

In addition, training in low intensity anxiety management interventions is being rolled out within the CAMHS community.

Analysis of clinical outcomes of children/young people seen by the CAMHS CBT trainees during training showed a highly significant improvement in pre and post measures of anxiety and depression (RCADS), with 76% of those cases presenting in the borderline or clinical range before treatment falling below the borderline range at completion of treatment.

Family therapy training has been completed by a range of CAMHS clinicians to a variety of levels since 2015 including:

Training Level	Numbers Trained
Foundation year level	48 completed (11 due to start)
Intermediate year level	31 completed
Masters training (over 2 years)	5 completed (4 ongoing)
Masters training - Supervisor level	10 completed

Family Based Treatment (FBT) for anorexia	7 completed year long practitioner level training and 5 went on to complete to supervisor level. 7 in training at practitioner level and further 2 in training to supervisor level. Short introductory FBT training delivered to a large group of clinicians.

Regional analysis shows that the implementation of FBT coincides with a reduction in admissions to the inpatient units for children/young people with eating disorders. In addition, training in specialist cognitive behavioural therapy for eating disorders was completed by 53 clinicians by end of 2019. Year-long training in Interpersonal therapy (IPT) for depression has been completed by 13 clinicians with 4 CAMHS clinicians currently in training, 6 clinicians have completed IPT supervisor training.

CAMHS clinicians have also been trained in trauma and resilience to different levels including:

Trauma Skilled Practice	174 (and numbers below in 1 year dev plan)
Trauma Focused CBT	135
LD Skills	54 (and numbers below in 1 year dev plan)
Applied Behaviour Analysis	57

As part of a 1 year development plan boards were supported to deliver the essential CAMHS learning programmes through essential CAMHS supervisor training. 73 clinicians attended Essential CAMHS supervisor training between June 2019 and Sept 20. Behavioural Activation training for trainers – 20 trainers trained to deliver BA in CAMHS and early intervention.

3.9 Additional Children & Young People Mental Health Services Resource

Additional funding was provided to NES to increase workforce capacity and capability in CAMHS in the areas listed below. Taking account of local needs, agreements were reached with all Boards covering education and training and direct service delivery. (44 nursing posts, 22 psychology posts, 9 AHPs. 5 doctors, 6 admins and 1 other):

- Crisis care/unscheduled care – dedicated staff to undertake this work so routine outpatient appointments are not cancelled with knock on impact to waiting times
- Additional clinicians for routine specialist CAMHS to help wait list flow
- Early intervention work with schools, in communities and in primary care settings to prevent specialist referrals
- Neurodevelopmental to increase access to specialist assessment and intervention

3.10 Mental Health Improvement, Self-Harm and Suicide Prevention

The Mental Health improvement and Self Harm and Suicide Prevention Knowledge and Skills Framework, alongside a workforce development plan, was published in 2019. Aimed at those working across health and social care settings, and beyond, the framework identifies knowledge and skills required across 4 levels of practice: informed, skilled, enhanced and specialist
Informed Level Learning Aminations aimed at those supporting adults in mental

improvement and the prevention of suicide were initially launched in 2019 and have subsequently been further developed as an eLearning module with additional facilitators' training guides.

- At mid-September 2020, these animations have been accessed by over 20,000 people on Vimeo and over 2,700 people have engaged in the Turas Learn eLearning site.
- A new series of animations addressing mental health improvement and the prevention self-harm and suicide prevention specifically for the Children and Young People's workforce were launched in September 2020.

Work is also continuing in the development of Skilled Level Learning Resources, with a range of resources being developed for publication in Winter 2020/21.

3.11 Psychological Interventions and Therapies for Adult Mental Health

NES has increased the number of therapists able to provide:

- Cognitive Behavioural Therapy, Multidisciplinary staff working within mental health services have been educated to widen access to evidence based psychological therapies and deliver high intensity Cognitive Behavioural Therapy. They will also provide the supervisory infrastructure for the delivery of brief psychological interventions. 45 training places in Cognitive Behavioural Therapy PG Certificate/Diploma are provided each year.
- NES also provides a national programme of work-based training in brief Psychological Interventions for multidisciplinary staff to incorporate within their routine roles to meet the needs of adults and older adults with mental health problems including; anxiety & depression, substance misuse, psychosis and bespoke training for staff in secure settings. Some courses within this programme are delivered in partnership with the NHS boards through a network of local trainers supported by NES.
- To date, 237 training places have been provided. 36 training events in brief psychological interventions will be delivered by the end of March 2021

3.12 Psychological Trauma

The ambition of Scotland to become a 'trauma informed and responsive' nation has been set out in the last 3 Scottish Government Programmes for Government with the most recent document committing to a further 2 years resource to support active implementation of the National Trauma Training Programme which has been led by NES Psychology. There are now training resources at all practice levels (informed, skilled, enhanced and specialist) as well as the Scottish Trauma Informed Leaders Training (STILT) which is offered to senior strategic and operational leaders to. Staff wellbeing is a significant component of the project, which is particularly relevant in the current COVID context.

A specific project within Maternity care, aims to ensure women accessing services in Scotland receive a trauma informed approach throughout their maternity journey, that identifies their needs and mitigates potential adverse impact of trauma on pregnancy and birth.

3.13 Workforce data and analysis

To support the above work funding has been provided to ensure that relevant data and analysis are available.

NES is responsible for the multidisciplinary CAMHS, and Psychology Workforce National Statistics. Data are reported quarterly as National Statistics and include data tracking the impact of Scottish Government and NES mental health services capacity building funding. Data are extracted from NES developed bespoke databases.

- CAMHS – workforce monitoring and modelling, trainee and qualified
- Psychology – workforce monitoring and modelling, trainee and qualified
- Psychological Therapies – training, supervision, therapy delivery and workforce data monitoring
- Psychology of Parenting (PoPP) – practitioner, delivery and outcome data to monitor progress
- Implementation Science – implementation improvement monitoring and analysis

The data evidence that since 2006, when data collection began, there has been a 412.7 WTE, 63.1%, increase overall in the WTE of all staff in post within CAMHS in Scotland (from 653.7 WTE in 2006 to 1066.4 WTE at 30 Sep 2020), and the Psychology workforce within CAMHS has grown by 148.0 WTE, 98%, from 149.5 WTE to 297.5 WTE.

Data source: https://turasdata.nes.nhs.scot/workforce-official-statistics/

4. COVID-19 Response

https://learn.nes.nhs.scot/29698/psychosocial-mental- health-and-wellbeing-support

As part of the early response to the pandemic NES has collaborated with colleagues to create a suite of resources which are designed to support -

4.1 Staff providing effective support for people experiencing distress.

This has been underpinned by the evidence based Psychological First Aid approach. To support this there are e-modules, animations, resources and podcasts designed to meet the needs of different staff groups across the workforce. There are additional sections for staff who are supporting children and young people and families and people with additional needs. The includes access to a wide range of evidence based resources including online free access to a parenting resource and the latter provides resources to everyone who support those with additional needs including learning disabilities, dementia, autism and neurodiversity and people with sensory impairments.

4.2 Staff planning for their own wellbeing.

This is a range of tools including wellbeing planning tools, evidence based apps to support difficulties such as sleep and anxiety (ongoing evidence collection is supporting the efficacy of this in the Scottish Health and Social Care Workforce).

In May 2020 NHS Education for Scotland launched a digital coaching service "Coaching for Wellbeing" to support all health and social care colleagues during COVID-19. The emphasis for this form of support was in recognising the importance and value of wellbeing at a time of crisis

and uncertainty. This service was commissioned by Scottish Government as a contribution to the National Wellbeing Hub and in service of the shared mission of "You look after us, so we'll look after you".

Since the launch over 800 people from across the health and social care workforce have received coaching support. The post-coaching evaluation shows that coaching has made a strong, positive difference to the overall resilience, wellbeing and morale of those who took up the opportunity. Improvements in all three areas of wellbeing, confidence, leadership and were shown across all professional areas and role levels in the participant group.

A comment from one participant illustrates the value of their coaching experience:
"It has been a transformational experience, which saved me professionally during the most difficult time of my career."

4.3 Managers supporting the wellbeing of their staff

This includes an e-module specifically designed to support managers who are planning to support the wellbeing of their staff across the spectrum of needs, podcasts and additional high quality advice sources.

These are consistent and developed in partnership with www.promis.scot which is the Scottish Government wellbeing hub for health and social care staff.

4.4 Health and Social Care Workforce Mental Health and wellbeing support

The continuation and further development of Health & Social Care workforce mental health network proposals includes a request from Scottish Government for NES to develop and implement plans to increase capacity and capability for psychological therapy to health and social care colleagues experiencing significant distress. This includes embedded training, education and supervisory elements. Proposals have been submitted across Scotland and plans agreed.

5. **Once for NES – Mental Health, Learning Disability and Dementia Group.**

With support from Organisational Performance & Improvement Programme colleagues, the above group brings together colleagues from across NES directorates to improve our contribution in these areas. It is an active and engaged group that facilitates:

- collaborative operational planning
- sharing and widening access to existing resources
- collaborative approach for developing new resources
- creation of TURAS Learn learning sites for multi-professional topics (the intention is for this model to be replicated across other multi-professional areas)
- ability to respond swiftly and confidently to requests from Scottish Government and other stakeholders
- sharing of intelligence o efficiency and effectiveness through closer collaborative working
- allows a collective/coordinated NES 'voice' to influence developing policy/direction.

6. Future Directions

Discussions are underway with Scottish Government colleagues surrounding the continuation and expansion of work in many of the above areas.

- There are considerable challenges in workforce recruitment and retention in psychiatry with efforts continuing to address this. In contrast, expansion in training posts in psychology, pharmacy, mental health nursing and allied health professionals is possible due to high demand for training places.

- Widening the skill mix to enable greater access to effective interventions continues to be a priority. Focusing at the enhanced practice level of the skills framework offers a way forward. This needs to run alongside a continuing focus on recruitment and retention of the specialist workforce.

- A major focus will be to strengthen primary care and community delivery of mental health support.

- The mental health and wellbeing of the health and social care workforce will also continue to be a priority.