NHS Education for Scotland

NES/25/74

AGENDA FOR THE ONE HUNDRED AND EIGHTY-NINTH BOARD MEETING

Date: Thursday 20 November 2025

Time: **10:15 – 12:30**

Venue: Hybrid meeting: Microsoft Teams / Room 2 Bothwell Street, Glasgow

1.	**10:00**	**Chair's introductory remarks**	
2.	**10:03**	**Apologies for absence**	
3.	**10:05**	**Declarations of interest**	
4.	**10:06**	**Draft Minutes of the One Hundred and Eighty-Eighth Board Meeting 25 September 2025** For Approval	NES/25/75
5.	**10:08**	**Matters arising from the Minutes and notification of Any Other Business**	
6.	**10:10**	**Actions from previous Board Meetings** For Review and Approval	NES/25/76
7.		**Chair and Chief Executive reports**	
7a.	**10:15**	**Chair's Report** For Information and Assurance	NES/25/77
7b.	**10:20**	**Chief Executive's Report** For Review and Assurance	NES/25/78
8.	**11:00**	**Performance Items**	
8a.		**Quarter 2 Finance Update Report 2025/26** For Review and Approval (J Boyle/ L Howard / A Young)	NES/25/79
8b.		**Quarter 2 Strategic Risk Update Report 2025/26** For Review and Approval (J Boyle/ D Lewsley)	NES/25/80
8c.		**Quarter 2 Strategic Key Performance Indicators 2025/26** For Review and Approval (C Bichan/ D Lewsley)	NES/25/81

8d.		**Quarter 2 Performance Delivery 2025/26** For Review and Approval (C Bichan/ A Shiell)	NES/25/82
9.	**11:45**	**Annual Items**	
9a.		**NES Equality, Diversity & Inclusion Mid-Year Report 2025** For Review and Approval (K Hetherington)	NES/25/83
9b.		**NES iMatter Survey Report – Results for 2025** For Assurance (S Canavan/J Gibson)	NES/25/84
9c.		**Annual Climate Emergency and Sustainability Report 2024/25 and Public Bodies Climate Change Duties Report 2024/25** For Approval (J Boyle)	NES/25/85
10.	**12:05**	**Governance Items**	
10a		**Final Review of the Board Assurance Framework 2025-26** For Approval (J Boyle/ C Bichan / D McGowan)	NES/25/86
10b		**Blueprint Improvement Plan: Final Progress Report** For Review and Approval (D McGowan)	NES/25/86
		Significant issues to report from Standing Committees:	
10c		**Audit & Risk Committee 2 October 2025** (Jean Ford, verbal update)	
11.	**12:20**	**Items for Homologation**	
		NES Standing Committee Minutes:	
11a.		**Planning & Performance Committee 11 August 2025**	NES/25/87
11b.		**Staff Governance Committee 14 August 2025**	NES/25/88
12.	**12:25**	**Date and Time of Next Meetings:**	

Joint SSSC Board Development Session (Dundee) – 8 December 2025

Public Board – 5 February 2026

Private Board – 5 February 2026

L. Scott, Associate Manager, Chair and CEO Office
NHS Education for Scotland (NES) e-mail: ceo.nes@nes.scot.nhs.uk

NES/25/75

NHS Education for Scotland

Draft for approval Minutes of the One Hundred and Eighty Eighth Board Meeting held on 25 September 2025 at 10:15 – 11:35

This public Board meeting was held in a hybrid format via Microsoft Teams and in person at the NES office, Room 2, Bothwell Street, Glasgow.

Present:
David Garbutt (DG), (Chair)
Jim Boyle (JB), Executive Director of Finance
Olga Clayton (OC), Non-Executive Director
Shona Cowan (SC), Non-Executive Director
Jean Ford (JF), Non-Executive Director
Annie Gunner Logan (AGL), Vice Chair & Non-Executive Director
Louise Harker (LH), Board Room Apprentice
Nigel Henderson (NH), Non-Executive Director
Gillian Mawdsley (GM), Non-Executive Director
Karen Reid (KR), Chief Executive and Accountable Officer
Karen Wilson (KW), Executive Director of Nursing, Midwifery and Allied, Health Professionals (NMAHP) & Deputy Chief Executive

In attendance:
Christina Bichan (CBi), Director of Planning, Performance & Transformation
Colin Brown (CB), Head of Strategic Development
Sybil Canavan (SC), Director of People & Culture
Rob Coward (RC), Principal Lead, Planning, Performance & Transformation (item 8b)
Diane Dickson (DD), Associate Director of Nursing, Midwifery and Allied Health Professionals (observing)
Lindsay Donaldson, (LD) Deputy Medical Director
Kyle Clark-Hay (KCH), Associate Director Corporate Governance (Board Secretary), NHS National Services Scotland (observing)
Nick Hay (NH), Principal Manager Communications & Engagement
Drew McGowan (DM), Board Secretary and Principal Lead – Corporate Governance
Matthew Neilson (MN), Customer Engagement & Development Director at NHS National Services Scotland (observing)
Gordon Paterson (GP), Director of Social Care & Communities
Lee Savario (LS), Postgraduate Dental Dean & Director of Dentistry
Lorraine Scott (LSc), Associate Manager, CEO & Chair Office (minutes)
Andrew Sturrock (AS), Postgraduate Pharmacy Dean & Director of Pharmacy
Judy Thomson (JT), Director of Training for Psychology Services
Christopher Wroath (CW), Director of NES Technology Service

1. Chair's Welcome

1.1. The Chair welcomed everyone to the meeting. He particularly welcomed Drew McGowan who joins his first NES Board meeting as Board Secretary & Principal Lead for Corporate Governance, and Sybil Canavan, Director of People and Culture, attending her first NES Board meeting. He also welcomed observers Diane Dickson, who has recently joined NES as Associate Director of Nursing, Midwifery and Allied Health Professions plus colleagues from NHS National Services Scotland (NSS) Matthew Neilson, Customer Engagement & Development Director, and Kyle Clark-Hay, Associate Director Corporate Governance (Board Secretary).

2. Apologies for absence

2.1. Apologies were received from Board members, Ally Boyle and George Valiotis, Non-Executive Directors, Lynnette Grieve, Employee Director & Non-Executive Director, and Emma Watson, Executive Medical Director.

2.2. Apologies were also received from regular Board attendees, Kevin Kelman, Director of NHS Scotland Academy, Learning & Innovation, John MacEachen, Head of Communications & Engagement and Claire Neary, Policy & Briefings Manager.

3. Declarations of Interest

3.1. No declarations of interest were made regarding the business of the meeting. However, Gillian Mawdsley noted her connection as an education associate to the General Dental Council (GDC), and reference was made to the GDC Consultation in the Chief Executive Reports.

4. Draft Minutes of the One Hundred and Eighty Seventh Board Meeting – 21 August 2025 (NES/25/62)

4.1. The Board approved the draft minutes of the 21 August 2025 meeting.

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.

5.2. No items of any other business were raised.

6. Actions from previous Board Meetings (NES/25/63)

6.1. The Board received the rolling Board action list for review and approval.

6.2. The Chair noted that of the 9 actions raised during the 21 August 2025 Board meeting, 3 were complete. 4 actions will be carried forward to the November Board meeting and 2 actions remaining in-progress; however, the Chair advised that these are advancing towards completion.

6.3. The Board agreed and approved the action list and noted the actions in progress.

7. Chair and Chief Executive reports

7a) Chair's Report (NES/25/64)

7.1. The Chair submitted his report to the Board for information and assurance, detailing recent engagements and activities since the Board meeting on 21 August 2025, both in his capacity as Chair of the NES Board and as a member of the NHS Scotland (NHSS) Board Chairs Group (BCG).

7.2. The Chair asked the members of the Board if they had any questions, as there were none, the Board confirmed the report provided assurance.

7b) Chief Executive's Report (NES/25/65)

7.3. The Chair invited Karen Reid to introduce the report submitted to the Board for review and assurance.

7.4. Karen highlighted the comprehensive nature of the report and thanked colleagues for their assistance in its preparation; she noted the inclusion of population health throughout which fulfils the requirements as a public health organisation and specifically drew attention to section 5.1c and section 5.7 as examples of this.

7.5. Karen highlighted the strong recruitment fill rates in Dental, Medical, Pharmacy, and Healthcare Science areas, also noting significant progress in Digital Learning Infrastructure, HR Transformation, and Business Transformation noting that this positions the organisation well for transition.

7.6. Karen noted a recent gateway review of the Digital Learning Infrastructure, which highlighted the governance measures implemented by NES. Karen, as Accountable Officer, acknowledged the positive feedback received.

7.7. Karen noted that NHS Academy continues to have a positive impact through accelerated training, noting that this is contributing to reduced waiting times and improvements in patient safety.

7.8. Karen highlighted that the Digital Front Door project received commendations at the Strategic Leadership Board from the Scottish Government, including praise from the Chief Operating Officer, for the work on the full business case, which she considered very encouraging.

7.9. Karen reported ongoing operational planning, including developing the 26/27 Annual Delivery Plan (ADP) to support the new organisation's infrastructure. She also noted continued efforts in the Centre for Workforce Supply, with a focus on international medical recruitment and assistance for displaced social care workers.

7.10. Karen reported that she was recently informed of the Public Audit Committee's consideration of leadership training. Karen noted the success of the Aspiring Chairs and Chief Executives program, which was formally recognised in Parliament, and extended congratulations to Sybil Canavan, Janice Gibson and the team for this accomplishment.

7.11. Karen highlighted recent success in strategic partnerships, noting the signing of a collaboration agreement with Glasgow Caledonian University. She also referenced strong partnerships in research and innovation with other organisations such as the Scottish Funding Council, Health Data Research UK (HDRUK), the Chief Scientist, the Academy of Medical Sciences and the Health and Care Institute.

7.12. Karen concluded by mentioning her continued involvement in additional leadership tasks and roles, particularly as Vice Chair of the Board of Chief Executives and other areas undertaken on behalf of the Board of Chief Executives with the Scottish Government.

7.13. The Chair thanked Karen and asked Directors to raise any additional points about their directorate in the report.

7.14. Lee Savarrio noted that representatives from the British Congress of Optometry and Vision Science produced three educational posters highlighting work related to risk and educational requirements in Optometry.

7.15. The Chair and Karen Reid conveyed their appreciation for the team’s efforts and accomplishments, requesting that the Board formally acknowledge and extend congratulations to the team.

7.16. Andrew Sturrock highlighted the continued support for large numbers of pharmacists through independent prescribing training, noting that over 50% of pharmacist practitioners in Scotland are now registered as independent prescribers, with only 35% in the community pharmacy sector. He advised that this remains an area of focus.

7.17. Andrew also reported excellent performance of the pharmacy training year cohort in the General Pharmaceutical Council registration assessment, with an 84.9% pass rate compared to a 77% national average. He credited the NES team and supervisors for their support.

7.18. Andrew noted the importance of updated adverse drug reaction modules, especially considering recent public misinformation, and noted that these modules have over 6,000 completions annually, making them among the most popular hosted on Turas, these modules enable professionals to advise patients effectively and report any adverse drug reactions.

7.19. Karen Wilson highlighted the progress in national quality improvement programmes, specifically mentioning the continued success of the Kickstart Quality Improvement Essentials learner pathway and the recent launch of Practical Quality Improvement and Managing Quality Improvement modules for managers.

7.20. Karen also noted the growth of the Realistic Medicine and Values-Based Health and Care program, with all undergraduate nursing and midwifery programs now delivering this content. She also noted the recent distribution of a new module on Managing Risk to all universities. Karen also emphasised the importance of embedding these principles early in careers to influence future nursing and midwifery practice.

7.21. Gordon Paterson highlighted the work on the Unpaid Carers Programme, emphasising its significance due to the estimated 800,000 unpaid carers in Scotland whose contributions are valued at over £15 million annually, he advised that the programme aims to help the Health and Social Care workforce better identify and support adult and young unpaid carers, especially to ensure access to breaks and opportunities. The programme also supports young carers in having childhood opportunities. Gordon also reported a positive external evaluation of the Equal Partners in Care learning resources, encouraging Board members to access these modules via Turas.

7.22. Sybil Canavan provided an update on activities within the People and Culture Directorate, with particular emphasis currently on improving temporary staffing arrangements. She noted the extensive collaboration with the Line Managers Network, advising that it continues to be well-attended and serves as a valuable forum for meaningful discussions.

7.23. Sybil also commended colleagues on the development of the Workforce Dashboard for organisational and directorate-level insights and referenced positive ongoing results from the iMatter staff engagement tool and she also recognised the impact of the National Leadership Programme.

7.24. The Chair formally acknowledged the outstanding iMatters results, highlighting that, despite current uncertainties, the high scores reflect NES's positive organisational culture and effective staff management. He expressed his appreciation and extended his gratitude to all staff members.

7.25. Lindsay Donaldson reported a 4% increase in General Practice (GP) Whole Time Equivalent (WTE) over the past two years, indicating positive outcomes from improved fill rates.

7.26. Lindsay also highlighted collaboration with Lee Savarrio and the Royal College of Physicians and Surgeons of Glasgow on the sexual misconduct workshops, which are now being rolled out in response to recommendations from the surgical college.

7.27. Lee acknowledged this collaborative work and highlighted its importance in addressing sexual misconduct in clinical leadership.

7.28. Judy Thomson highlighted the Perinatal and Infant Mental Health Programme's multidisciplinary approach, noting over 20,000 completed modules, whilst the programme is still developing. She also highlighted the new Group Supervision training for psychological therapies, which improves supervisor experience and efficiency.

7.29. The Chair expressed praise for the Quality Improvement figures, noting the high number of participants and the significant impact on their organisations after completing the program and described these results as phenomenal.

7.30. The Chair thanked everyone for their updates and opened up for questions.

7.31. The Board asked about the constraints on increasing the percentage of independent prescribers in community pharmacy, specifically whether the limitations were due to funding or other factors and inquired about the rollout plan and target timeline for progress.

7.32. Andrew Sturrock noted that funding remains static despite increased tuition fees, advising that both pharmacy schools in Scotland are at capacity, therefore any expansion would require involvement from institutions outside Scotland. He advised that supervisory capacity is limited due to the need for qualified prescribing practitioners; however, from next summer, all new pharmacists will be qualified prescribers, and this should increase the proportion of prescribers in the workforce. He noted that it may take up to four years for the majority to achieve this status.

7.33. The Chair asked whether, with all future pharmacy registrants being trained as prescribers, there is a risk of having more trained prescribers than needed and if steps are being taken to plan for how such a surplus could be utilised, especially in rural communities or by restructuring roles.

7.34. Andrew Sturrock advised that prescribing will become a core responsibility for pharmacists. He highlighted that the main workforce challenge is the limited number of foundation training places and jobs, rather than student numbers, and noted the potential need for more pharmacy technicians or support staff. He reported ongoing work on a Transforming Roles paper for pharmacy, commissioned by the Chief Pharmaceutical Officer, which will address these issues and is due for publication within 6 to 9 months.

7.35. The Board acknowledged the value of the complaints workshop and its positive feedback, asking if staff were involved in the workshop and if there

was a report or actions resulting from it. They also inquired about the possibility of observers attending future workshops

7.36. Christina Bichan reported that the complaints workshops are focused on the updated complaints handling policy and standardising practice across directorates. She advised these are operational in nature and not intended for non-executive participation. Christina noted positive staff feedback and confirmed ongoing delivery of the workshops, advising that updates will be included in future Complaints Report to the Planning & Performance Committee and subsequently to the Board.

7.37. The Board formally noted the strong and positive reception to the Independent Prescribers Initiative, recognising the significant enthusiasm it has generated within the pharmacy sector and the favourable coverage received by NES for its leadership in this area.

7.38. The Board enquired if the upcoming national report on the Mental Health Workforce will include social care sector workers who contribute to mental health services

7.39. Judy Thomson responded to advise that the current Mental Health Workforce review is focused on the NHS due to Scottish Government funding, with plans to eventually cover all mental health workforce sectors, volunteers, and unpaid carers. She noted that full quantification of the NHS workforce is not yet possible but is being addressed and confirmed ongoing collaboration with NTS colleagues to gather this information.

7.40. The Board inquired whether there is a target percentage for the GP vacancy rate, referencing the positive trend of the rate coming down.

7.41. Lindsay Donaldson confirmed that the strategic objective remains to eliminate GP vacancies, in line with the Scottish Government's commitment to increase the GP workforce by 800. She emphasised that measuring progress should focus on WTE roles rather than just headcount, with effective workforce planning essential to ensure training places correspond to projected vacancies. She noted that comparative data for other UK regions was unavailable at this time.

7.42. The Chair asked what impact the Health and Social Care Public Benefit and Privacy Panel (HSC-PBPP), now administered by Public Health Scotland, will have on NES’s ability to deliver new digital solutions rapidly, and if there is ongoing collaboration to ensure effective engagement with Boards.

7.43. Karen Reid explained that the HSC-PBPP is linked to the Caldicott Guardian role and that NTS are working to improve information sharing and strengthen information governance as part of developing the Digital Front Door.

7.44. Gordon Paterson explained that the HSC-PBPP continues to meet regularly, reviewing research requests for access to patient-identifiable information through a robust process. He noted the Panel is attentive to emerging issues

like digital apps and Artificial Intelligence (AI), and that Caldicott Guardians actively consider how evolving technologies may require updates to privacy criteria to ensure sensitive handling of patient data.

7.45. Christopher Wroath added that the data aspects of the Digital Front Door programme, including health and social care records, are governed by existing information governance processes appropriate to their care settings.

7.46. Karen Reid advised that the Medicines and Healthcare products Regulatory Agency (MHRA) is reviewing AI regulation in healthcare, which will help shape the framework and assurances for Privacy Panels, Caldicott Guardians, and Digital Front Door work regarding AI use in healthcare

7.47. The Chair thanked Karen and colleagues for the report, and the Board confirmed that it provided assurance.

8. Annual Items

8a) Information Governance 2024-2025 Annual Report (NES/25/67)

8.1. The Chair welcomed Christopher Wroath to introduce the report, which comes to the Board for assurance.

8.2. Christopher Wroath advised the Board that he is presenting the report in Tracy Gill's absence. He confirmed that the report had previously been considered by the Planning & Performance Committee and noted that the audit had recorded an overall compliance rate of 92%, which exceeded expectations. Christopher further reported that only one security incident had been notified to the Information Commissioner's Office (ICO) which related to training materials originating from England, with no further action required by the ICO.

8.3. Gordon Paterson advised that his directorate has now achieved 100% completion of the safe information handling essential learning, acknowledging previous underperformance, he advised that he had shared with Tracy Gill an update showing improved performance across all directorates.

8.4. The Chair thanked Christopher for the report and opened up for questions. As there were none, the Board confirmed that the report provided assurance.

8b) Feedback, Comments, Concerns and Complaints Annual Report 2024-25 (NES/25/68)

8.5. The Chair invited Christina Bichan to introduce the report, which comes to the Board for approval.

8.6. Christina Bichan introduced the report, noting it was reviewed by both the Education & Quality Committee and Planning & Performance Committee. She stated that the report be taken as read and highlighted that it covers statutory complaints provisions and broader feedback noting that there were many positives in the report.

8.7. Rob Coward joined the meeting.

8.8. Rob Coward advised that the report reflects very few formal complaints, with the focus on various ways NES engages with learners and stakeholders for educational development and quality assurance. He emphasised that learning from experience is a strong feature of NES's core business and that future plans include strengthening feedback collection and used through the Learning and Education Quality System (LEQs), as well as implementing the Involving People in Communities Framework.

8.9. The Chair opened up for questions.

8.10. Karen Reid noted that the report's prior review by the Planning & Performance Committee accounted for no questions at the Board meeting and stressed that each complaint is seen as a chance to learn and improve.

8.11. The Chair thanked Rob and Christina for the report which the Board approved.

8.12. Rob Coward left the meeting.

8c) Caldicott Guardian Annual Report 2024-25 (NES/25/69)

8.13. The Chair invited Gordon Paterson to introduce the report, which comes to the Board for approval.

8.14. Gordon Paterson introduced the Caldicott report by acknowledging it was his first year as Caldicott Guardian. He expressed appreciation for the support from Tracy Gill and Information Governance colleagues, also Christopher Wroath and his team. Gordon apologised for a mistake in the covering report regarding new patient data processing activities, clarifying that there was one such case involving digital dermatology use. He also highlighted that pages 7-9 of the report provide further information for the Board.

8.15. The Chair thanked Gordon and opened to the Board for questions.

8.16. No questions were raised by the Board, and they approved the report.

9. Governance Items

9a) Committee Membership Changes (NES/25/70)

9.1. The Chair welcomed Drew McGowan to introduce the report, which comes to the Board for approval.

9.2. Drew McGowan advised that, since the last meeting, the Chair has made changes to the membership of the Board's committees. He advised that these changes were made in accordance with the NES Standing Orders and asked the Board to approve them.

9.3. The Chair thanked Drew for the report and opened it to the Board for questions.

9.4. The Board noted that Shona Cowan attends the Clinical Care Assurance Group which reports to the Education & Quality Committee (EQC). They suggested considering the non-executive membership of this group, especially as Shona will no longer be attending EQC. This was referred to Annie Gunner Logan, Chair of EQC, for consideration, who agreed to review the membership. **ACTION: AGL**

9.5. The Chair thanked Drew and the Board homologated the new Committee membership decisions.

Significant issues to report from Standing Committees:

9b) Education & Quality Committee 11 September 2024

9.6. The Chair invited Annie Gunner Logan to provide a summary of the recent meeting.

9.7. Annie Gunner Logan noted that the Committee reviewed the Leadership Development Annual Report, Strategic Key Performance Indicators (SKPI), and noted assurance that a pathway for incomplete SKPI data will be established prior to the organisational transition.

9.8. The Committee also considered the annual Research Governance Report, Research and Innovation Governance Policy, Career Pathway Planning update, and Learning & Education Quality System update. Annie also advised that the discussion included the role of the Clinical Care Assurance Group (CCAG), and that EQC members requested sight of the Leading to Change report and an update on the Quality Policy ahead of the transition, highlighting their significance for the Committee's work.

9.9. The Committee also raised concerns regarding discriminatory behaviour and reporting highlighted in the GMC survey, seeking further action from NES, including implementation of bystander training and anti-racism initiatives.

9.10 The Chair invited questions from the Board, as there were none he thanked Annie for the update.

10. Items for Homologation

NES Standing Committee Minutes

10a) Education & Quality Committee 8 May 2025 (NES/25/71)

The minutes of this meeting were homologated by the Board.

11. Date and Time of Next Meetings

10.1. The Chair noted the forthcoming meetings of the Board: Private Board will follow today's Public meeting, the next Board Development Session is on 23 October 2025, and the next Public Board meeting is scheduled for 20 November 2025.

10.2. The Chair thanked everyone for their attendance and all papers presented.

10.3. The meeting closed at 11:15 am.

NES September 2025
LS/DM/KR/DG

Agenda Item 6

20 November 2025

Rolling Action List arising from Board meetings

Minute	Report Title	Action	Responsibility	Date required	Status and date of completion
Action raised at Board meeting on 25 September 2025					
9.4	Committee Membership Changes	AGL to review membership of Clinical Assurance Group	AGL	20 Nov 2025	**Complete**: AGL has confirmed that SC can remain part of this Group
Action raised at Board meeting on 21 August 2025					
7.8	CEO Report	GP to explore how to communicate information on 'The Promise' to Board members	GP	October	**Complete:** email circulated to members with briefing note 20/10/2025
7.16	CEO Report	GM to be invited to represent NES at SG's Climate Week (29/09/25 – 5/10/25)	JB/GM	20 Nov 2025	**Complete:** Gillian Mawdsley was invited to participate in the active travel webinar (the only in-person session) but diary commitments did not permit that to take place.
7.42	CEO Report	Incorporate vaccination messages to the workforce into broader population health literacy	KW	20 Nov 2025	**In Progress:** A verbal update to be provided to the November Board. Vaccination conversations | Turas | Learn
9.18	Q1 Delivery Report	Review presentation of red/amber deliverables from cover paper to appendix	AS/CBi	20 Nov 2025	**Complete:** Following feedback from the Board at the August 2025 meeting, the 2025/26 Quarter 2 Delivery Report (Item 08d) sets out mitigating actions for red and amber deliverables more clearly, including whether progress is within the scope of NES to take forward or whether external support is required.

Minute	Report Title	Action	Responsibility	Date required	Status and date of completion
9.36	Q1 SKPI Report	Improve readability of Dashboard; too many items on one page	DL/CBi	20 Nov 2025	**In Progress:** The Dashboard is under review; an update will be provided at the November meeting
9.42	Q1 SKPI Report	Include text for red/amber/green status as colour coding is difficult to read	DL/CBi	20 Nov 2025	**Complete:** This update is included within the report presented on November Board Agenda

NES / LS / CD
Oct 2025

NES/25/77
Agenda Item: 7a
20 November 2025

CHAIR'S REPORT

David Garbutt, Chair of NES Board

20 November 2025

1. Introduction

1.1. Since the last Board meeting on 25 September 2025, I have attended the following meetings and events, as well as internal NES meetings, Board and Standing Committees.

1.2. During this time, I have held mentoring meetings with Louise Harker, Boardroom Apprentice and with George Valiotis at his six-month stage.

1.3. I am delighted to confirm that the role of Boardroom Apprentice has now been extended to 31 March 2026, allowing Lousie Harker to continue her apprenticeship over the coming months.

1.4. I attended several NHS Delivery meetings and NHS Delivery Executive Meetings in collaboration with Scottish Government (SG), National Services Scotland (NSS) and NES colleagues.

1.5. I attended the annual BCG away days on 25th and 26th September at the NHS Golden Jubilee. Discussions were held around the strategic role of Board Chairs and reviewed the BCG Work Groups to align them to the SG strategy for all NHS Boards.

1.6. On 29th September I attended the monthly NHS National Board Chairs meeting which considered the national implications for the new strategic approaches set out by SG.

1.7. On 30th September I attended a meeting of the NHS Delivery Programme Board. This meeting was attended by Chief Executives and Chairs of National Services Scotland (NSS) and NES, and Scottish Government (SG) colleagues.

2. Summary of Engagement October 2025

2.1. On Thursday, 2 October 2025 NES held the quarterly Audit and Risk Committee meeting.

2.2. On Thursday 7th October I attended the First Minister's Brave@Heart Awards Ceremony at Bute House, as Chair of the Brave@Heart Validation Panel

2.3. On 8th October I met with Neena Mahal the Chair of Forth Valley Health board and discussed Board Development, workforce planning and succession planning.

2.4. On 13th October I attended an NHS Delivery Gateway Zero panel to respond to questions from the Review Team.

2.5. On the 14 October 2025, I attended the first meeting of the National Performance Management Committee (NPMC) to discuss the approach to the 2024/25 appraisal ratings for the Executive cohort

2.6. On the morning of the 20 October 2025 the quarterly Board Chairs Group (BCG) Private meeting took place, with Board Chairs from across the NHS.

2.7. On the 20 October 2025, I also attended the NHS Promise Network to discuss the valuable work and insights emerging from the network and to explore how the group could establish a more established gateway to the NHS Chairs and Chief Executives Group

2.8. On the 23 October 2025, I attended the NES Board Development Session at 177 Bothwell Steet, Glasgow with NES colleagues and Board members. At this meeting we had several presentations from various areas across the organisation to include:

- Review of Strategic Key Performance Indicatiors
- Health and Social Care Foundation Apprenticeships
- Strategic partnerships

2.9. I met with KPMG to discuss the NES Board Audit on Thursday, 30 October 2025. I then attended the Aspiring Chairs Advisory Panel to discuss the significant changes to the NES Board in the coming months. Early indications are that

3. Summary of Engagement November 2025

3.1. On 3 November 2025 I met with the Chair of NHS Forth Valley, Neena Mahal at Westport Edinburgh to discuss the production of videos to attract applicants for the round of Chairs posts which are about to be advertised.

3.2. I attended the regular NES Standing Committee Chairs meeting with Ally Boyle, Jean Ford and Nigel Henderson to discuss upcoming committee business and meeting chair queries on the 5 November 2025,

3.3. On 5th November I attended the SCLF System Leadership Session to provide a lecture on my journey through leadership. This was a follow up session after meeting the cohort at their induction in May 2025.

3.4. On Monday, 10 November 2025 I chaired the Planning and Performance Committee with NES alongside colleagues from across the organsiation. Items for discussion included Q2 Planning and Performance Strategic Risk Report, Digital Learning Infrastructure Business Case update and Gateway Review and discussion regarding THE Governance of Externally Commissioned Activity.

3.5. I then attended the second meeting of the National Performance Management Committee (NPMC) with NHS Scotland Chairs and colleagues from Scottish Government.

3.6. On Tuesday, 11 November 2025 I attended the NHS Delivery Programme Board and the NHS Delivery Executive Delivery Group Meeting, with NES, NSS and SG colleagues.

3.7 On the same date, I attend a Board Development meeting with Organisational Development and Leadership Learning (ODLL) colleagues to discuss planning for future board development sessions across the organisation and NHS Scotland.

3.8 On Wednesday, 12 November 2025 I attended the Four Nations Responsible AI In Healthcare Education Conference. Four Nations Responsible AI in Healthcare Education Conference - elearning for healthcare . This conference was organised by NHS England and hosted online with input from across the NHS and Health Sector.

3.9 On the 13 November 2025, I attend the NES Annual Review meeting with NES Board members and leadership colleagues as well as Caroline Lamb, (Chief Executive of NHS Scotland and Director-General Health and Social Care) and Scottish Government colleagues.

David Garbutt
Chair

NES/25/78
Agenda Item: 07b
20 November 2025

Chief Executive's Report

Professor Karen Reid, Chief Executive

Date: 20 November 2025

1. Introduction

Our 20 November 2025 Public Board meeting demonstrates our ongoing commitment to strong governance and strategic oversight. In addition to the annual items for approval, including the 2024-25 Annual Report on NHS Scotland Global Climate Emergency & Sustainability, the NHS Education for Scotland Equality, Diversity & Inclusion Mid-Year Report 2024-2 and 2025 NHS Education for Scotland iMatter report for assurance, the Board will review and approve the comprehensive Quarter 2 performance reports covering Strategic Risk, Finance, and Key Performance Indicators. This approach ensures that we stay aligned with our organisational goals and continue to monitor improvements across all areas of delivery.

The Board Assurance Framework 2025-26 will also be presented for review and approval , reinforcing our dedication to transparency, accountability, and continuous enhancement of our governance framework.

2. Updates and Announcements

2.1. National Care Service

a) The Public Sector Leadership Group (comprising Scottish Government, CoSLA, NHS Scotland, Health and Social Care Scotland and SOLACE) continues to meet fortnightly to discuss, comment on and clear papers for consideration by the Interim National Care Service Advisory Board. Recently, the Public Sector Leadership Group has considered the proposal to extend voting rights to other members of IJBs; the membership of the full National Care Service Advisory Board, Justice Social Work, and Evaluation of the Interim Board.

At its most recent meeting the Interim National Care Service Advisory Board determined its five priority areas, as follows:

- Fair Work
- Getting It Right for Everyone
- Breaks from Caring
- Self-Directed Support
- Coming Home

Papers are being produced to inform the Board's consideration of progress in respect of each of these priorities, which might then inform the Board's advice to Ministers and CoSLA Leaders.

2.2. NHS Delivery

a) Following legal advice, the Scottish Government (SG) confirmed on 30 September 2025 that the legal framework for establishing NHS Delivery will be through the transfer of the statutory functions currently held by NHS Education for Scotland (NES) to the Common Services Agency (CSA), which currently operates as NHS National Services Scotland (NSS). This is considered the most pragmatic approach to deliver the

required changes and provide the new organisation with the necessary legal mandate. However, it has been highlighted that all messaging must be clear that whilst the CSA is being engaged as the framework, NHS Delivery will be a completely new organisation.

b) A formal public consultation opened on 1 October 2025 and will run until 30 November 2025. The consultation aims to gather feedback from stakeholders and the wider public on the proposed creation of NHS Delivery, ensuring transparency and allowing people to express views, concerns and ideas to shape the next stages of development. It includes questions related to principles, potential scope, and alignment with other key NHS priorities.

c) A Staff Consultation regarding the proposed TUPE transfer of NHS NES staff to the new organisation was issued on 10th November 2025 and will run for 90 days until 8 February 2026 in line with NHS Scotland Organisational Change Policy. This consultation into the TUPE Transfer provides an opportunity for Trade Unions and staff to review and comment on the proposed arrangements which will be enacted in accordance with the Transfer of Undertakings (Protection of Employment) Regulations 2006 (TUPE).

d) Supported by the Directorate of People and Culture, NES provided further opportunity for staff to share their views via a Microsoft Form and a signpost to NES's dedicated NHSD mailbox. In addition, signposting to available supports in NES – National Wellbeing Hub; NES's Wellbeing Hub and The Employee Assistance Programme – were also re-shared in recognition of our commitment to staff wellbeing and support.

e) Within the Project Team, under the governance of the NHSD Programme Board on which both NES Chief Executive and NES Chair sit, a series of workstreams have been set up, which are: Legislative / Parliamentary, Leadership, Governance, Purpose and Vision, Finance, Operations, People, and Communications. NES has provided appropriate representation across all workstreams (except Leadership, and Purpose and Vision, where it has not been requested) and is monitoring the internal resources required to support the work, ensuring no detriment to the ongoing delivery of NES's 2025/2026 Annual Delivery Plan, while appropriately supporting the NHSD programme.

f) Week beginning 10 October 2025 the programme was subject to a Gateway Zero review for which key NES staff were interviewed. The Gateway Zero final report is currently being reviewed by the SG legal team but is expected to be shared by w/b 27 October 2025. It is understood that the assessment has been rated as amber, which indicates that the review team believe that it is possible for the programme to meet its objectives.

g) NES continue to monitor our internal support to the Programme using our established practices in programme management (per our Corporate Improvement Programme approach), which includes a monthly internal programme board, robust risk and issue management and the ongoing management of resource and internal communications.

h) The NES programme risks relate to staff morale stemming from a lack of clarity therefore impacting communications and fostering misconceptions e.g. in the role of the CSA. Clarity is also sought in relation to day one governance arrangements which will impact the critical path and key dependencies. SG colleagues are endeavoring to address the issue of clarity through a 'Proposition Paper' being drafted by the Programme Director and being taken to the NHSD Programme Board in November. The paper is expected to focus on day one expectations and introduce the concept of further phasing in the establishment and development of the new organisation. It is hoped that this provides information which will enable NES ET to provide more clarity and assurance to our staff.

2.3. Announcements

a) Annual Review 2025 – Final NES Milestone

On 13 November, NHS Education for Scotland held its final Annual Review as a standalone organisation ahead of the transition to NHS Delivery in April 2026. The event was highly successful, with 426 staff joining online. Together with David Garbutt, (Board Chair), and the executive team, I presented to Caroline Lamb (Director General for Health and Social Care/Chief Executive NHS Scotland) and Amy Wilson (Deputy Director for Health Workforce Planning and Development). The session celebrated NHS Education for Scotland's achievements in 2024–2025 and reflected on five years (2021–2025) of impactful transformation across the health and social care workforce. We now await our letter from the Scottish Government outlining any recommendations.

b) Real Living Wage Accreditation (RWL)

NHS Education for Scotland is delighted to have officially received accreditation in October 2025, from Living Wage Scotland. This is recognising NHS Education for Scotland's commitment to fair pay and responsible employment practices. This milestone reflects our dedication to valuing our workforce and supporting financial well-being across the organisation. Accreditation places NHS Education for Scotland among a growing movement of employers championing the real Living Wage in Scotland.

We are now working with the NHS Education for Scotland Corporate Communications team to prepare communications regarding our accreditation and highlight the links to our role as an Anchor institution.

c) Glasgow Dental Education Centre Celebrates 40 years

In October 2025, the Glasgow Dental Education Centre celebrated its 40th anniversary. As one of NHS Education for Scotland's flagship training hubs, Glasgow Dental Education Centre has played a vital role in delivering high-quality dental education and professional development across Scotland. This milestone reflects NHS Education for Scotland's long-standing commitment to workforce excellence and innovation in clinical education.

d) Learning at Work Week

I am thrilled to announce that NES for Scotland has been Highly Commended in the Inspiring a Lifelong Learning Culture category of the Learning at Work Week (LAWW) Impact Awards. The award, presented by **Campaign for Learning,** is a fantastic

recognition of NHS Education for Scotland's commitment to learning, development, and innovation.
My thanks go to the Organisational Development, Leadership and Learning (ODLL) team for their outstanding work and well-deserved recognition.

e) Remote and Rural - National Centre Phase 2 Options Appraisal Commission

On 27 October 2025 NHS Education for Scotland received a letter from Tim McDonnel, Director of Primary Care, Scottish Government. The letter commissions NHS Education for Scotland to produce an initial options appraisal for delivering targeted education, training, research, evaluation, and leadership tools for rural and island health and care. The appraisal will draw on evidence of need, stakeholder engagement, and lessons from phase one of the National Centre, while reflecting priorities across recruitment and retention, research, training, and leadership. It will also incorporate insights from existing workstreams and achievements, including those related to Rural Advanced Practitioners and paramedicine developments.

NES is asked to submit the appraisal by 5 December 2025 to support planning for a final business case in January 2026, ahead of NHS Delivery's establishment in April 2026. The appraisal will outline delivery options, resource implications, and NHS Education for Scotland's recommended approach, informed by key Scottish Government strategies, including the Operational Improvement Plan, Population Health Framework, and Service Renewal Framework. Once a preferred option is agreed upon, the business case will underpin funding decisions and inform ministerial advice.

f) Scottish Learning and Improvement Framework (SLIF) Publication

The Scottish Government has published the Scottish Learning and Improvement Framework for Adult Social Care Support and Community Health developed collaboratively with COSLA, SOLACE, NHS, and a cross-sector Steering Group.

GP's actively contributed to Steering Group discussions, ensuring the framework reflects practical considerations from frontline health and social care delivery. This engagement reinforces our commitment to collaborative improvement and integrated care.

The framework sets out a shared vision and priorities for improvement in adult social care and community health, supporting integrated planning and delivery. It aligns with the wider reform agenda, including the Operational Improvement Plan, Population Health Framework, and Service Renewal Framework, as well as initiatives such as the Primary Care and Community Health Route Map and the development of a National Social Work Agency.

2 Our Strategic Themes

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

3 Performance - how we are performing as an organisation

a) Strategic Key Performance Indicators

Implementation of reporting on NHS Education for Scotland's Strategic Key Performance Indicators is ongoing. The Planning and Performance Committee reviews all Strategic Key Performance Indicators before being presented to the Board, addressing an improvement action identified during an audit of our performance management approach undertaken in 2024. Individual governance committees continue to receive quarterly reports on all Strategic Key Performance Indicators assigned to their specific responsibilities.

At the end of Q2 2025/26, data is reported for 80% of our Strategic Key Performance Indicators (82% of metrics). Work continues to develop the measures which have not yet been reported. Progress is noted on interim solutions to report against several of the education measures. These include the piloting of data gathering processes and questionnaires in Q3 with the expectation of reporting data in Q4 2025/26. This is highlighted as a key area where delivery of our corporate improvement programme is crucial to the achievement of our strategic ambitions.

The Annual Strategic Key Performance Indicators Review was concluded within the Q2 reporting period, and the findings of the review were presented to the NHS Education for Scotland Board at their October 2025 Board Development Session.

During this period, further development of the new dashboard for presenting the quarterly Strategic Key Performance Indicator data was undertaken, and the new format has been implemented for the reporting of the Q2 2025/26 data.

Data updates were reported for 21 measures during this quarter. Detailed information about these updates is available in the Q2 Strategic Key Performance Indicator Report as a substantive agenda item. The Planning and Performance Committee met on 10 November 2025 and, as part of its remit, it scrutinised the full quarterly Strategic Key Performance Indicator report prior to it being presented to the Board.

b) Population Health Planning

Following a discussion on the Public Health Framework at the August Chair's meeting NHS Boards were requested to transition to Population Health Organisations (PHOs) with a focus on prevention, equity, collaboration, and leadership. In support of this, NHS Education for Scotland is forming a Population Health Group (PHG) to unify efforts in improving population health and reducing inequalities across Scotland. The PHG will use data-driven, multidisciplinary approaches to:

- Advance NES's strategic population health commitments
- Identify and coordinate opportunities for greater impact
- Foster collaboration internally and with external partners
- Oversee and align projects with PHF priorities
- Inform strategic direction and reduce duplication

This initiative aims to strengthen NES's role in delivering improved health outcomes and equity at both national and local levels.

c) Public Bodies Climate Change Duties

Recent work has focused on preparing the Annual Report on Climate Emergency, which is due for submission by the end of November. Similarly, the Public Bodies Climate Change Duties Report must be submitted to the Sustainable Scotland Network by the same deadline. Both reports are included on the agenda for this public board meeting.

4.1 Dental including Optometry

a) Dental Vocational Training

NES continues to deliver a high-quality of trained dental professionals, supporting workforce sustainability and patient safety. Completion rates remain high, with 143 Dental Vocational Trainees achieving a 98% satisfactory completion rate, demonstrating the effectiveness of our training model and the strength of our quality assurance processes. The successful introduction of the 2025/26 cohort, welcoming 159 new Vocational Dental Practitioners and Therapy Vocational Trainees, confirms our commitment to maintaining capacity and supporting service resilience across Scotland. These outcomes reinforce NES's role in developing a skilled, adaptable dental workforce aligned with national priorities for oral health and equitable access to care.

b) Dental Therapist Vocational Training

NES has successfully launched the Dental Therapist Vocational Training programme for 2025/26, reinforcing our commitment to developing a skilled and versatile dental workforce. On 1 September 2025, seven Vocational Dental Therapists began training following induction sessions. The structured study programme, comprising, is designed to improve clinical skills and support service resilience across Scotland.

c) Dental Nurse Post - Registration Training

In September 2025, three advanced programmes began, supporting skills in Dental Practice Management, Delivering Oral Health Interventions, and Managing Quality Improvement in Dental Practice. Out of 34 places offered, 30 were filled, marking an 88% uptake, which shows strong engagement and demand for professional development.

To improve the learner experience and modernise delivery, NES introduced the City & Guilds Learning Assistant Portfolio across these programmes, supported by additional licence investment. This approach demonstrates our commitment to digital innovation and quality enhancement in training, ensuring dental teams are prepared to meet changing service needs and national priorities.

d) Optometry Postgraduate Support Workstream

The Optometry postgraduate support workstream is currently delivering a catalogue of Continuous Professional Development for the eyecare workforce in Scotland, including online Peer Review events, webinars, and face-to-face training. We have received excellent feedback from the events so far, with learners noting a positive impact on their practice from the learning.

e) Optometry: NHS Education for Scotland Postgraduate Glaucoma Award Training Programme

The NES Postgraduate Glaucoma Award Training Programme has achieved an excellent outcome following its recent Scottish Qualifications Authority (SQA) verification visit in early September. The report highlighted five areas of good practice and made no recommendations, reflecting the programme's high standards and robust governance.

In line with the Scottish Government's continued expansion of the Community Glaucoma Service, NES has been asked to prepare for a fifth cohort of learners in the next financial year. This development underscores NES's pivotal role in supporting advanced clinical skills and service transformation, ensuring patients benefit from timely, community-based glaucoma care.

4.2 Medical, including Healthcare Science

a) Advancing Equity in Medical Education Group Update

Four trainee representatives, selected through a fair and transparent process, have joined the Advancing Equity in Medical Education Group, contributing to a diverse mix of training levels and specialties. Their involvement has already proved valuable, and ongoing engagement is expected to yield even greater benefits. Meanwhile, collaboration between the data and quality teams continues to enhance annual

Equality Diversity & Inclusivity data reports, with the introduction of Heat Maps from the Scottish Training Survey offering new insights into trainee experiences across specialties and health boards.

The Advancing Equity in Medical Education Group's regular activities remain robust, with increased meeting frequency and strong support from NHS Education for Scotland leadership, including senior management and the Equality Diversity & Inclusivity team. Efforts to advance allyship and cultural awareness among all trainees have intensified, notably through reciprocal mentoring pilots and initiatives that provide fairer feedback, with a focus on supervisors and trainers. These initiatives aim to broaden cultural intelligence and allyship beyond international medical graduates, embedding these principles across the wider training community.

4.3 Nursing, Midwifery and Allied Health Professionals (NMAHP)

a) Electronic Practice Assessment Documentation

The Electronic Practice Assessment Documentation developed by NHS Education for Scotland for student nurses is now being used at seven Higher Education Institutions across Scotland, including the University of Glasgow and the University of the West of Scotland. We are pleased to report that we have nearly 5,000 users, and we have secured commitments from the University of Edinburgh and Queen Margaret University in the East region.

This month marks a significant milestone: the first 330 University of Dundee students who began using Electronic Practice Assessment Documentation three years ago have successfully transitioned to the Nursing and Midwifery Council Register. They will now use the Turas portfolio for their revalidation and continuing professional development.

Furthermore, we are assessing the viability of NextGen Higher National Certificate Healthcare Practice students using Electronic Practice Assessment Documentation at three pilot sites in Further Education colleges. This will support their transition into university courses while maintaining their Electronic Practice Assessment Documentation records.

We are also pleased to announce that we are in the early stages of developing a Paramedic Electronic Practice Assessment Documentation, and plan to evaluate it from a user experience perspective.

4.4 Psychology

a) Doctorate in Clinical Psychology Programmes

Over the coming year, the University of Edinburgh and University of Glasgow Doctorate in Clinical Psychology programmes will work towards meeting the new British Psychological Society Standards for Accreditation, which introduce a significant shift in focus towards Equity, Diversity and Inclusion (EDI).

A key change is the introduction of a Foundational Standard requiring programmes to address inequity, discrimination, and marginalisation consistently across recruitment,

trainee experience, supervisor training, curriculum, and research. Trainees will be expected to develop a deep understanding of how social structures and systemic factors perpetuate inequity, poverty, prejudice, and psychological distress.

Other critical aspects include:

- Removing structural barriers to entry for under-represented groups in clinical psychology training and the workforce.
- Embedding historical context within training content, acknowledging the profession's roots and its historical complicity in inequity. This development represents a strategic opportunity to strengthen inclusivity and social accountability within clinical psychology education, aligning with national priorities for equitable health services.

4.5 Social Care & Communities

a) Capacity and Capability of the Social Care Workforce

Our work to increase the capacity and capability of the social care workforce has seen growth in the number of learners accessing the National Induction Framework, with an additional 445 new learners in September, taking the total number to 1437 users. We have also seen over 1000 people access the Social Care Career Options Tool since its launch in May. To promote both resources and achieve greater awareness and adoption, we have delivered presentations to the Scottish Government's Social Care Directorate, the Care Inspectorate, and 30 Health and Social Care providers, as well as to private, public, and third-sector social care providers. In addition to evaluating the impact of our work to date, we are exploring how we can add value by expanding NHS Education for Scotland's current learning offers, including through the repurposing of existing learning content and the identification of gaps that we may be able to address.

b) Unpaid Carers

The Unpaid Carers programme continues to promote the Equal Partners in Care resources that enable the health and social care workforce to understand and meet their responsibilities under Carers legislation. In the last quarter, 649 new learners used these resources. Colleagues are progressing with the development of learning materials to support those caring for people with mental health issues, as well as resources to involve carers in hospital discharge processes.

c) The Centre for Workforce Supply (Health)

The Centre for Workforce Supply (Health) has launched the General Practice Turas Hub, progressed workforce insights for Nursing, Midwifery and Allied Health Professionals, and supported the Nursing and Midwifery Taskforce through market research engagement. Work is underway to develop an Anchors hiring managers' hub and toolkit, and a proposal has been advanced to establish a cross-directorate Workforce Planning Group within NES, supporting the Scottish Government's Workforce Planning Delivery Plan.

d) The Centre for Workforce Supply (Social Care)

In partnership with Scottish Government, NHS Education for Scotland has delivered targeted webinars for displaced workers to attract talent into Scotland's social care sector. Additionally, the launch of the 'New Scots in Adult Social Care' Facebook Group demonstrates innovative approaches to engagement and inclusion.

4.6 NHS Scotland Academy, Learning and Innovation

a) Research and Innovation Plan

The structure and governance to support the mobilisation of the NES Research and Innovation Plan are being advanced by small working groups that are progressing the underpinning priority actions with associated smart targets, which are on track to be completed by the end of Q3. The Research & Innovation Workforce Diversification workstream has developed a core resource bundle to enhance cohesion for implementation across NHS Education for Scotland. Progress and updates will continue to be shared through the NHS Education for Scotland Research and Innovation Reference Group and its associated monthly flash report. Co-leads of the five thematic pillars have met, with initial focus and priorities agreed.

b) Knowledge Management and Discovery

Significant progress is being made on the standardisation of nine once for Scotland statutory and mandatory modules, with modifications and testing underway by the NHS Education for Scotland eLearning team. These modules will soon be hosted on a new Turas Learn site. Robust governance processes are in place for the ongoing review and maintenance of eLearning modules. Additionally, the Knowledge Services team is advancing the national eBooks tender, with contract awards expected by the end of October.

c) Learning and Education Quality System

October marked a significant phase in the implementation of the Learning and Education Quality System, with a new product commissioning form and guidance undergoing live testing and refinement, ready for wider adoption. Directorate Education Quality and Safety Groups are being established, with standardised Terms of Reference agreed and meetings underway between all NHS Education for Scotland directorates to support implementation. An organisational learning and education product estate review is due to be undertaken in the coming months with a clear process for review and retiral of products. A structure and design for a Learning and Education Hub - a once for NHS Education for Scotland resource hub for all NHS Education for Scotland staff involved in learning and education - is progressing. These developments reflect a maturing infrastructure that will support quality across the lifecycle of all NHS Education for Scotland learning and education products. These developments will be discussed at the next NHS Education for Scotland Education and Quality Executive Group to ensure that reporting structures support effective organisational governance through to NHS Education for Scotland Board standing committees.

d) NHS Scotland Academy

NHS Scotland Academy continues to deliver impactful national resources that strengthen Scotland’s health and social care workforce. The Cultural Humility digital resource, developed with NHS Education for Scotland’s Equality, Diversity and Human Rights Team, has engaged over 3,700 learners across NHS Scotland and partner organisations, fostering values and behaviours rooted in cultural humility. Similarly, the Preparing for Work in Health and Social Care eLearning programme, introduced to ease post-COVID winter pressures, has supported workforce readiness with over 16,800 learners completing pre-induction modules. Both successful programmes will now transition fully to NHS Education for Scotland, ensuring continued access and

alignment with our strategic commitment to inclusive practice, workforce resilience, and high-quality learning resources.

4.7 NHS Education for Scotland Technology Service

a) Digital Front Door Programme (Mycare)

The Digital Front Door Programme is progressing towards its revised goal of Whole Population Availability by April 2026, following Ministerial engagement and the announcement of the MyCare.scot brand and rollout approach in September 2025. Planning and discovery work is underway to support readiness, while the initial release achieved its Digital Delivery feature targets on 10 October. Key priorities include strengthening information governance through Data Protection Impact Assessments and defining Minimum Viable Product support arrangements. New leadership roles in Digital Inclusion and Additional Channels have been appointed, reinforcing NES's commitment to equitable access and user-centred design as part of Scotland's digital health strategy.

4.8 Planning, Performance and Transformation

a) 2025/26 Annual Delivery Plan

An updated version of 2025/26 NHS Education for Scotland Annual Delivery Plan was uploaded to the Corporate Publications page of the NHS Education for Scotland website after the 21 August 2025 Board meeting. This updated version highlights changes to the Annual Delivery Plan that were approved at the end of Quarter 1. Updated versions of the Annual Delivery Plan will continue to be published on a quarterly basis following approval of any further changes.

During Quarter 2 there has been a further reduction in the number of Annual Delivery Plan deliverables still dependent on Scottish Government funding (from 13 to two).

b) 2026/27 Operational & Financial Planning

NHS Education for Scotland's approach to 2026/27 Operational & Financial Planning has been developed within the context of the NHS Delivery announcement (17 June 2025). This has included collaboration with our partners at NHS National Services Scotland to ensure we are well placed to prepare a combined 2026/27 delivery plan for the new organisation, which is due to be operational by April 2026, once this is required.

Our 2026/27 Operational & Financial Planning approach includes how we plan to demonstrate our commitment to supporting the Scottish Government's strategic priorities and in particular the ambitions of service renewal, population health and improved health and care outcomes for Scottish citizens[1]. As per 2025/26, integrated planning and financial principles, guidance (including resource considerations and risk

[1] Scottish Government publications: Health and Social Care Service Renewal Framework (2025-2035) (June 2025), Scotland's Population Health Framework 2025-2035 (June 2025) and NHS Scotland Operational Improvement Plan (March 2025).

management information) and templates have been issued to enable directorates to set out their proposed deliverables and milestones for the upcoming year. New Finance and Operational Planning PowerBI dashboards have also been developed to support the 2026/27 Operational & Financial Planning process through to completion.

The Scottish Government have recently advised NHS Scotland Directors of Planning to roll forward Board's 2025/26 Annual Delivery Plan priorities into 2026/27 as they do not intend to issue a formal ask to prepare a new Annual Delivery Plan imminently. Given the importance of ensuring there are appropriately aligned Delivery and Financial in plans in place to support the successful operation of the organisation and provide clarity on priorities through the transition to NHS Delivery, a new NHS Education for Scotland Annual Delivery Plan for 2026/27 will continue to be developed and presented to the Planning & Performance Committee and Board for consideration in the final quarter of the year.

c) NHS Education for Scotland as an Anchors Institution

Significant progress has been made during 2025/26 Quarter 2 (Q2) in relation NHS Education for Scotland's role as an Anchors institution. In support of our aim to secure both Real Living Wage (RLW) and Equally Safe at Work (ESAW) accreditation both our Real Living Wage and Equally Safe at Work accreditation applications have been submitted along with relevant supporting evidence and documentation. We received confirmation from the Living Wage Foundation on 21 October 2025 that our Real Living Wage application has been successful, and NHS Education for Scotland is now an accredited Living Wage Employer. We are now working with the NHS Education for Scotland Corporate Communications team to prepare communications regarding our accreditation and highlight the links to our role as an Anchor institution.

As part of our national role in support of Anchors work we also continue to provide strategic support to and engagement in the Scottish Government Anchors Workforce Strategic Group and Place and Wellbeing Programme Board. During Q2, the Centre for Workforce Supply has progressed the development of a hiring managers toolkit and online hub to support one of the Anchors Workforce Strategic Group recommendations. The Centre for Workforce Supply continues to support attraction to a wide variety of NHS Scotland roles through the NHS Scotland Careers website and social media channels.

The NHS Scotland Academy has continued to support Anchors work during 2025/26 Q2 with a careers event held for school pupils who were welcomed into the skills and simulation centre at NHS Golden Jubilee for interactive sessions promoting potential careers. The NHS Scotland Youth Academy is also continuing to work with partners across various Youth Academy huddle groups to develop resources to support simulation in schools.

In relation to the 2025/26 Quarter 3 Anchors milestone and the formalisation of arrangements for the provision of redundant IT equipment to community groups, NHS Education for Scotland's is now signed up to the 'Warp-IT' resource redistribution network which allows NES to offer unwanted items to their other sites via a managed process and also to other local schools, charities, NHS Scotland Boards or further afield. The Warp-IT network also provides NHS Education for Scotland's with the opportunity to 'claim' other items being offered across the network. NHS Education for

Scotland's's involvement in 'Warp-IT' is currently at a trial stage with a view to using it for future office moves and general reuse of any excess furniture.

d) Quarter 2 2025-2026 Whistleblowing Performance

Launched in April 2021, the National Whistleblowing Standards set out a national procedure for handling any whistleblowing concerns in NHS Scotland. NHS Education for Scotland is now in its fifth year of applying the Standards.

NHS Education for Scotland received one notification of a concern in August 2025, relating to supervision arrangements and the balance between service provision and learning.

Within NHS Education for Scotland, line managers are required to complete the line manager-level training on TURAS Learn (this forms part of our suite of 'essential learning'). As of 02 October 2025, our compliance rate was 90.51% (334 out of 369), with 35-line managers yet to complete the training.

NHS Education for Scotland continues to uphold the National Whistleblowing Standards, which have been in place across NHS Scotland since April 2021. Now in its fifth year of implementation, NHS Education for Scotland's remains committed to fostering a culture of openness, transparency, and psychological safety.
During the second quarter of 2025–2026, NHS Education for Scotland's received one whistleblowing concern. This related to supervision arrangements and the balance between service provision and learning. The concern was managed in line with the national procedure, ensuring appropriate review and follow-up.

Training and Compliance

All NHS Education for Scotland's line managers are required to complete whistleblowing training via TURAS Learn, as part of the organisation's essential learning programme.

As of 2 October 2025:

- **90.51%** of line managers (334 out of 369) had completed the training.
- NES is taking steps to support the remaining managers in completing their training.

An internal analysis highlighted areas for improvement, including:

- A higher proportion of senior and part-time staff among those yet to complete training.
- A link between manager training completion and team-level compliance with other essential learning modules.

Next Steps

Targeted communications and support will be issued to improve training uptake and reinforce NHS Education for Scotland's's commitment to safe and effective whistleblowing practices. NHS Education for Scotland's remains dedicated to continuous improvement and ensuring that all staff feel confident and supported in raising concerns in the public interest.

e) Confidential Contacts

In August 2025, Kerrie Walters was appointed as an additional Confidential Contact, bringing the total number of Confidential Contacts in NHS Education for Scotland to five:

- Karen Wilson, Director of NMAHP and Deputy Chief Executive.
- Graham Paxton, Principal Lead, People and Culture Directorate.
- Lindsay Donaldson, Deputy Medical Director, Medical Directorate.
- Pamela Renwick, General Manager, People and Culture Directorate.
- Kerrie Walters, Principal Lead, Social Care and Communities Directorate.

This recent appointment strengthens NHS Education for Scotland's commitment to fostering a culture where staff feel confident and supported to speak up. In addition, expressions of interest in becoming a Confidential Contact have been sought from NHS Education for Scotland Under-represented Ethnic Minorities Forum.

A session on ‘Speaking up!’ – by Nancy El-Farargy, Christina Bichan, Gillian Mawdsley, Lindsay Donaldson, Graham Paxton, Pamela Renwick and Kerrie Walters – was delivered to the Line Managers’ Network in August 2025.

Session outline: As a line manager, you may receive concerns from colleagues in their day-to-day work. In this participative session, you will find out more about the National Whistleblowing Standards and what is required of you (and others in similar roles) in responding to any stage one or business as usual concerns. You will also learn more about the overall process involved, including the stage two process, and the support available to help you. There will also be an opportunity to learn more about NHS Education for Scotland’s 's 'speaking up' journey to date. We look forward to discussing with you then and to hearing your stories and insights.

f) Whistleblowing Steering Group

The NHS Education for Scotland Whistleblowing Steering Group met in September 2025.

Discussions included:

- Introduction to newly appointed Confidential Contact.
- The potential to expand the role of the Confidential Contacts to support the ‘Equally Safe at Work’ agenda, including support and signposting for any colleagues experiencing sexual harassment and racism.
- Discussion in preparation for the NHS Education for Scotland speak up week webinar (as part of the ‘Speak up Week’ initiative, hosted by the Independent National Whistleblowing Officer).
- A debriefing on the Line Managers’ Network session held in August 2025.

In support of the Equally Safe at Work agenda, the Confidential Contacts have agreed to expand their role to further offer colleagues the opportunity to discuss any issues of concern.

This year’s Speak up week took place between 29 September 2025 and 03 October 2025. Christina Bichan, Director of Planning, Performance and Transformation launched the week via an intranet news article. She reflected on the importance of building trust and in shaping a workplace where everyone feels safe to share their

ideas, concerns or suggestions. She underscored how NHS Education for Scotland continues to support a culture where speaking up is encouraged and our role in continuing the live the NHS Education for Scotland values, which positively guide cultures and behaviours. Other work that took place, as part of the speak up week campaign, will be reported in the next quarter three 2025-2026 update.

NHS Education for Scotland continues to maintain a speak up culture where all employees, volunteers, agency staff and contractors, are encouraged to speak up.

NHS Education for Scotland continues to strengthen its commitment to a culture where colleagues feel safe and supported to raise concerns. The Whistleblowing Steering Group met in September 2025, focusing on enhancing the role of Confidential Contacts to provide broader support, including alignment with the Equally Safe at Work agenda. This expansion will offer signposting and assistance for colleagues experiencing issues such as sexual harassment or racism.

As part of Speak Up Week (29 September – 3 October 2025), NHS Education for Scotland reinforced its values-driven approach to openness and trust. The campaign, launched by the Director of Planning, Performance and Transformation and the Chief Executive, highlighted the importance of creating a workplace where all voices are heard and respected. Further activities from the campaign will be reported in the next quarterly update.

These actions demonstrate NHS Education for Scotland's ongoing commitment to transparency, psychological safety, and inclusive workplace culture, ensuring alignment with national standards and organisational values.

4.9 People and Culture

a) HR Transformation Workstreams

Significant progress has been achieved across all five HR Transformation workstreams. At the Joint HR and Business Transformation Board held on 21 August 2025, it was agreed that the programme would be formally closed, with transformation activities now embedded into business-as-usual operations.

Ongoing staff engagement has focused on continuous improvement, shared purpose, and enhanced visibility through HR dashboards and metrics. Feedback indicates a marked increase in staff confidence in HR, reflecting improved collaboration and service delivery.

Key priorities moving forward include:

- Finalising the remaining Standard Operating Procedure (October 2025)
- Delivering Job Evaluation and policy awareness sessions
- Gathering customer experience feedback to inform future improvements

The HR function is now operating from a stable, strategically aligned position, supported by a strengthened management team committed to learning, adapting, and driving sustained improvement.

4.10 NHS Education for Scotland - Corporate Improvement Programmes

a) NHS Education for Scotland Corporate Improvement Programme

The Corporate Improvement Programme continues to progress well, with activity across all programmes focused on delivery of the agreed three- and six-month priorities ahead of the transition to NHS Delivery.

Programme risks remain consistent and well controlled, with mitigations in place through the three- and six-month planning process, active resource management, and strengthened cross-programme coordination. Collectively, these activities continue to deliver measurable improvements in efficiency, standardisation, and digital readiness, positioning NHS Delivery to inherit a strong and mature operating foundation.

b) Learning & Education Quality System

The Learning and Education Quality System programme has agreed to a revised set of deliverables and is progressing process mapping for commissioning and learning design. The Business Analyst appointed to develop the system specification has commenced work, supporting delivery of an interim technical solution.

c) Digital Learning Infrastructure Programme

The Digital Learning Infrastructure programme achieved a strong outcome from its Critical Friend Gateway Review, receiving an Amber/Green rating, confirming that delivery is well managed and strategically aligned. The Review Team's main recommendation—to explore a hybrid build–buy technical model—will extend the Full Business Case submission to February 2026. The programme remains robustly governed, with additional technical expertise being procured to ensure comprehensive options appraisal.

d) The Business Transformation Programme

The Business Transformation programme has made further progress, finalising new organization wide risk management processes and tools, and progressing discovery work on finance reporting improvements. Meetings management tools and principles continue to be embedded across the organisation, with wide engagement through Senior Operational Leadership Group SOLG and NHS Education for Scotland Directorate Townhall communications.

e) Digital Capability and Confidence

NHS Education for Scotland has advanced its digital transformation agenda, with the Digital Capability and Confidence programme now in full delivery. A key milestone will be the launch of the Digital Resource Hub, which will provide staff with tools and guidance to strengthen their digital skills and confidence. In parallel, the introduction of a Digital Modern Apprenticeship scheme demonstrates NHS Education for Scotland's commitment to building a digitally skilled workforce and securing future talent pipelines.

5 People – How are we supporting our staff, learners and trainees

5.1 Chief Executive Update

a) Staff Engagement

Since our last Board meeting held in September 2025, I have continued to prioritise meaningful engagement with NHS Education for Scotland staff across the organisation. Providing open channels for dialogue and sharing key strategic updates remains central to our approach. Regular Chief Executive Officer, All Staff Briefings have ensured we maintain clear and transparent communication, and I am pleased to note the positive feedback these sessions continue to receive. These briefings support our ongoing commitment to fostering an inclusive culture where staff feel heard and valued.

b) ET on the Road

On 27 October 2025, I was delighted to participate in our "ET on the Road" event in Inverness, where colleagues actively engaged with the Executive Team. These events provide a valuable forum for addressing staff questions directly and strengthening our connection across all regions and staff. We look forward to continuing this dialogue at our next event on 24 November 2025 at the Westport offices, with a further session planned for 2 February 2026 at the Aberdeen office (Forest Grove House) reinforcing the Executive Team's commitment to staff engagement and open dialogue across locations.

c) Population Framework

Following due consideration and in response to the publication of the Population Health Framework, we intend to bring together the work of NHS Education for Scotland's Public Health and Health Inequalities Groups into an internal Population Health Group.

The NHS Education for Scotland Public Health Group will look to advance the strategic commitment NHS Education for Scotland has made in its Strategic Plan and elsewhere in relation to improving population health, reducing health inequalities and working nationally and locally with partners to make a positive and lasting impact on the wellbeing of the people of Scotland. The NHS Education for Scotland Public Health Group will use population health data to prioritise activities and will benefit from a multi-disciplinary approach.

On the establishment of the NHS Education for Scotland, Public Health Group members will review and agree on the Terms of Reference. We anticipate that the group will take forward the following functions:

- Recognise the NHS Education for Scotland contribution to the Population Health Framework for health and social care workforce education, including potential wider workforce contribution and volunteers / community involvement
- Identify opportunities for NHS Education for Scotland to increase its offer and influence to support the delivery of NHS Education for Scotland and PHF strategic ambitions in the area of population health

- Be multidisciplinary in nature, reflecting the broad coalition required to meet the intersectionality of the challenges and opportunities within the PHF
- Draw on the five prevention drivers within the PHF to curate, develop and maintain an accurate record of work in relation to: Prevention focused system; Social and Economic Factors; Equitable Health and Care; Places and Communities; Enabling Healthy Living
- Identify, oversee and co-ordinate opportunities for future commissioned work which would enhance the NHS Education for Scotland contribution to the delivery of the PHF
- Receive and respond to project and programme updates, providing approval where appropriate for work to stop / start / continue
- Identify opportunities for collaboration across Directorates
- Identify opportunities for collaboration with other organisations including PHS
- Inform strategic direction and Operational Planning
- Recognise potential overlap with other agenda and act to reduce duplication / enhance synergies
- Make recommendations to the Strategic Implementation Group (SIG)

d) UK Antimicrobial Resistance National Action Plan (2024-29)
A cross-directorate approach within NHS Education for Scotland has been agreed to enhance the support of the UK Antimicrobial Resistance National Action Plan (2024-29) and centralise Antimicrobial stewardship resources. While the Nursing Midwifery and Allied Health Profession directorate currently leads the Antimicrobial Resistance work, with input from other directorates, recent discussions have identified the need for enhanced input and senior leadership. Consequently, Dr Andrew Sturrock, Director of Pharmacy, will assume senior leadership for the Antimicrobial Resistance team. Additional resources are being discussed to support the activities of the NHS Education for Scotland Cross-Directorate Group.

5.2 Dental including Optometry

a) NHS Education for Scotland continues to play a pivotal role in sustaining and modernising Scotland's dental workforce through targeted initiatives that align with national priorities for oral health and equitable access:

Strengthening Workforce Supply: The revised Modern Apprenticeship in Dental Nursing has successfully launched with strong uptake, supported by increased funding from Skills Development Scotland. This ensures a robust pipeline of qualified dental nurses entering the profession.

Driving Innovation and Equity: NHS Education for Scotland has pioneered remote supervision models for Orthodontic Therapy trainees in remote areas, such as NHS Shetland, demonstrating our commitment to innovative solutions that overcome geographical barriers and support service resilience.

Future Workforce Readiness: The next cohort of Orthodontic Therapy trainees begins in November 2025, following rigorous workplace readiness assessments. These programmes reflect NHS Education for Scotland's strategic focus on quality assurance and adaptability in training delivery.

b) UK and Eire Glaucoma Society

The Post-Graduate Qualifications and Post-Graduate Support workstreams will collaborate to promote the NHS Education for Scotland Glaucoma Award Training Programme and raise the profile of the Community Glaucoma Service at the UK and Eire Glaucoma Society Conference 2025. Through the acceptance of two posters at this high-profile international event, we aim to use this valuable platform to showcase our collaborative work, increase awareness of NHS Education for Scotland Glaucoma Award Training and the Community Glaucoma Service in Scotland, and foster meaningful engagement with clinicians, policymakers, and service providers across Scotland and beyond. Supporting the continued evolution of glaucoma care delivery in the community

c) Optometry: National Standards

Recent changes to the General Ophthalmic Services contract in Scotland introduce a greater reliance on the Independent Prescribing workforce to enhance patient access and clinical decision-making within community optometry. In response, NHS Education for Scotland's postgraduate support team is reviewing how its Continuous Professional Development (CPD) programmes can best align with these service requirements. This work will ensure practitioners are equipped with the necessary skills and knowledge to deliver safe, effective care under the revised contract, supporting national priorities for high-quality, accessible eye health services.

d) Optometry: Developing Competency

Part of the postgraduate support workstream focuses on working with the optometry workforce through meaningful engagement, including the recent NHS Education for Scotland Competency Focus Group. This session brought together experienced practitioners from across Scotland to review the NHS Education for Scotland Competency Certification process, ensuring it remains supportive and continues to align with the General Ophthalmic Services regulations. The group also helped identify additional support needs for those who are new to, or returning to, community optometry practice in Scotland, informing future enhancements to NHS Education for Scotland resources and guidance.

e) Optometry: Rural and Islands Training

The postgraduate support team, in conjunction with the postgraduate placements and skills team, delivered two days of training in Inverness, delivering simulated placement sessions for the Independent Prescribing postgraduate qualification, and impactful Continuous Professional Development which was very well received.

5.3 Medical including Healthcare Science

a) General Credential in Rural and Remote Unscheduled and Urgent Care

In October 2025, Dr Pauline Wilson, Consultant Physician, NHS Shetland and the Associate Postgraduate Dean for Rural and Remote Credential, presented at the General Medical Council meeting in Glasgow. This was a vital opportunity to advocate for the unique challenges and strengths of healthcare delivery in non-urban settings, where geography, resource constraints, and workforce pressures have led to innovative and adaptable care models. A key focus of discussion was the NHS Education for Scotland lead, General Medical Council approved, Credential in Rural

and Remote Unscheduled and Urgent Care. This formally recognises the distinct expertise required by doctors in remote and rural communities. By valuing prior experience and supporting targeted development, this initiative helps build a resilient workforce and improve patient outcomes in areas often underserved by traditional systems.

It was encouraging to see the General Medical Council's commitment to understanding the realities of rural practice and exploring how regulation can better reflect the diversity of healthcare across rural Scotland. Ensuring the rural voice is included at the highest levels of policy and regulation is essential to achieving a truly equitable and sustainable healthcare system.

b) New Senior Remote and Rural Leadership Programme

This bespoke development offer is a collaboration between the National Centre for Remote and Rural Health and Care and Leading to Change at NHS Education for Scotland. It combines extensive expertise and experience in designing and delivering both tailored remote and rural workforce education and leadership development interventions for senior leaders across health, social care and social work. The outputs of this work will also provide the Scottish contribution to an international study to identify the needs of leaders in remote, rural, coastal and island settings, alongside colleagues from the US, Australia and University of the Highlands and Islands.

c) Health Care Science: Genomics

The Scottish Strategic Network for Genomic Medicine Education and Workforce Group are currently undertaking a data gathering exercise with the aim to understand the genomics workforce and services across Scotland. Education and Training resources are currently being organised for hosting on Turas, with ongoing alignment to the framework.

In Pharmacogenomic education, a collaborative group has been set up to identify opportunities and progress a Scotland-wide approach, involving Scottish Government, NHS Education for Scotland and in-service teams.

d) Quality Improvement National Programmes

Following the launch of the Kickstart Quality Improvement and Quality Improvement Essentials learner pathways in April 2025, over 1,450 people completed the Kickstart Quality Improvement, and more than 800 individuals have finished the Quality Improvement Essentials. This resulted in over 6,000 module completions across these two pathways. Evaluation data have demonstrated a high level of engagement from both Robert Gordon University and the University of Dundee for these pathways.

Two additional learner pathways, Practical Quality Improvement and Managing Quality Improvement, were introduced in late August 2025. Practical Quality Improvement offers learners the opportunity to apply Quality Improvement tools in the workplace. At the same time, Managing Quality Improvement focuses on managers and team leaders to support teams in implementing changes and improvements.

External stakeholders have commented on the responsiveness of the NHS Education for Scotland Quality Improvement team in meeting the changing needs of the workforce through these new learner pathways, as well as their commitment to

providing equity and flexibility in learning.

The 17th cohort of the Scottish Quality and Safety Fellowship is beginning this month, and the next cohort of the Scottish Improvement Leader programme will start in November 2025.

e) Realistic Medicine and Value Based Health & Care

NHS Education for Scotland continues to work closely with the Scottish Government Realistic Medicine Policy Team to support the delivery of the Value Based Health and Care Action Plan. The Managing Risk learning resource has been launched with positive initial feedback. Work is ongoing to develop a Senior Leaders Turas page and an Inequalities Learning resource. This includes creating video interviews with Senior Leaders demonstrating how they are supporting Value Based Health & Care within their organisations. Several case studies from Higher Education Institutions illustrate how NHS Education for Scotland is collaborating with these institutions to incorporate Realistic Medicine and Value Based Health and Care into their curricula and best practices.

The Realistic Medicine Champions network continues to meet quarterly to collaborate with NHS Education for Scotland in embedding Realistic Medicine content into learning resources and programmes where appropriate. Quarterly TURAS data is shared with Boards upon completion of RM learning resources, and NHS Education for Scotland supports increasing the uptake of resources through a targeted communications plan.

f) Person Centred Care

NHS Education for Scotland has created a train-the-trainer resource to enable four pilot boards to deliver Compassionate Communication Skills training. Evaluation data from NHS Education for Scotland's Cohort 10, focused on involving patients and families in adverse event reviews, is overwhelmingly positive. 100% of participants would recommend the training to colleagues.

NHS Education for Scotland person-centred care programme delivered a seminar on person-centred practice to over 500 undergraduate nursing students at Caledonian University forming part of their introduction to professional practice module. Recruitment and shortlisting is underway for Cohort 7 of the Care Experience Improvement Model Leaders Programme.

5.4 Pharmacy

a) Workforce Training Update

NHS Education for Scotland continues to strengthen Scotland’s pharmacy workforce through advanced education and credentialing programmes aligned with the Royal Pharmaceutical Society standards. The Post-Registration Foundation Programme now supports 572 early career pharmacists across nine cohorts, with 122 new participants joining in October 2025 and 107 pharmacists progressing to assessment. In addition, 31 pharmacists are enrolled in the Pharmacy Pathway to Advanced Practice Programme in Primary Care for 2025/26, equipping practitioners to achieve advanced credentials and deliver enhanced clinical care

5.5 Psychology

a) Let's Introduce Looking At Differences, Strengths & Sensory Experiences

NES is delivering significant improvements in mental health support for children and young people across Scotland directly supporting the **Scottish Government's Neurodevelopmental Service Specification**, and delivering on principles of equity and early intervention. Building on the success of the **Let's Introduce Anxiety Management (LIAM)** intervention, we have introduced new resources to better meet the needs of Autistic and Neurodivergent learners.

Children and young people who are Autistic or Neurodivergent often experience higher levels of anxiety, which can affect school attendance, family life, and emotional wellbeing. Early, inclusive interventions are essential to reduce these barriers and improve long-term outcomes. As a result, LIAM has been expanded to include three new sessions - Understanding Differences; Understanding My Strengths; Understanding My Senses. These sessions were co-produced with practitioners and young people, ensuring they reflect lived experience and practical needs.

Between July and September, 149 multi-agency staff were trained; 35 CAMHS trainers are now in place following a successful pilot in Orkney; and coaching sessions are underway to embed practice. Through this work NES is playing a key role in improving mental health outcomes, reducing barriers to education, and fostering inclusive practice across schools and services.

5.6 Social Care & Communities

a) Health Inequalities

Underpinned by findings from across the NHS Education for Scotland survey, two key objectives are being progressed in the Health Inequalities project. These are developing workshops and infographics to raise awareness across NHS Education for Scotland of the impact of health inequalities, and the establishment of a Short Life Working Group to develop educator guidance ensuring education materials adopt a health equity approach.

b) Digital Assets

The Social Care and Communities Directorate have produced a new interactive digital asset to give information on the range of resources that we have developed to support the learning journey for those working in social care, Pathway Infographic .

c) Launch of the Quality Framework for Practice Learning

NHS Education for Scotland launched the new Quality Framework for Practice Learning, providing a structured approach to support high-quality learning experiences across health and social care settings. The framework sets out clear expectations and guidance for educators, placement providers, and learners, reinforcing NHS Education for Scotland's commitment to excellence in workforce development.

5.7 NHS Scotland Academy, Learning and Innovation

a) NHS Fellowships in Clinical AI [Fellowships | Turas | Learn]
NHS Education for Scotland funded opportunities for the first Scottish cohort of two fellows who recently graduated and have shared reflections on their experience. This programme is best viewed as work-based learning and sees the fellows situated in live clinical AI projects, and aligns with Theme 5 of the Research & Innovation Plan's 'research and innovation capacity'. Both fellows on this occasion were connected to the Accelerated National Innovation Adoption Pathway and the innovation pipeline. Two new fellows, both medical, commenced their programme in August 2025. Activity continues to clarify the funding position and opportunities to recruit a third cohort, with applications going live in November 2025. So far, funding for two medical and one Allied Health Professional recruitment is in scope.

b) NHS Clinical Entrepreneurs Programme
The learning programme for entrepreneur candidates continues, with ten new participants based in Scotland joining the programme in early summer. The Research & Innovation Workforce Diversification workstream led the delivery of a module webinar 'Understanding the NHS, comparing the context for NHS Scotland and NHS England'. We are grateful to our colleagues in NHS Education for Scotland, Organisational Development, and Leadership Learning for providing excellent content to frame this webinar.

c) Knowledge Management and Discovery
Knowledge Management and Discovery teams are actively involved in corporate improvement initiatives, supporting programmes such as the Learning and Education Quality System and Developing Digital Workforce Confidence and Capability. There is a strong focus on user support, training requirements, and educational technology assessment within NHS Education for Scotland. The Technology Enhanced Learning (TEL) Team continues to expand learning through podcasting, recently celebrating two years since the first podcasting channel was launched. The knowledge services outreach team hosted well-attended learning events in September and October, focused on knowledge management and health literacy. As part of the discovery phase of exploring the possible development of a research repository, Kristi Long is arranging a session between staff involved in the NHS Education for Scotland Research and Innovation Plan and NHS Wales.

d) Learning and Education Quality System
Progress has centred on embedding quality and consistency in learning experiences. Core evaluation questions have been approved and mechanisms for capturing feedback data are being explored in further detail, with the support of a business analyst. The Involving People Framework has been positively received during live testing. Directorate Education Leads are now in place, chairing newly formed quality and safety groups to oversee product development and review. These structures enable clearer decision-making and accountability, while supporting staff and learners through improved governance and feedback mechanisms. The Learning and Education Quality System continues to progress, with communications planned to support implementation and adoption across directorates.

5.8 Planning, Performance and Transformation

a) Building on the last update provided to the Chief Executive report in September 2025, we have continued to communicate and engage with staff and stakeholders around the development of NHS Delivery, including regular CEO and Exec Team All Staff Drop-in Sessions, which continue to be well attended and positively received.

b) Our communications, including updates on NHS Delivery and Frequently Asked Questions, have been coordinated with NSS to ensure that all messaging surrounding NHS Delivery remains consistent, timely, and 11 aligned. For example, we recently communicated an update from Scottish Government outlining the legislative process for establishing the new organisation.

c) Our Corporate Improvement Programme Webinars are ongoing and have been positively received by staff. Additionally, we share several important updates through the monthly Townhall Slides for each Directorate, including recent changes to the Transformation programme, NHS Delivery updates, as well as the current initiatives from teams in NES.

5.9 NHS Education for Scotland Technology Service

a) Platform & Workforce Data
Changes to the Turas registration form were made to support the National Induction Framework, allowing social work staff to select registration data items more relevant to their roles.

b) Training Programme & Quality Management
The upgraded Dental Trainer Information System is now live, enabling applications for Dental VT trainers or Therapy trainers through a revised form and process.

5.10 People and Culture

a) Board Development
The third in-person *Aspiring Chairs* communications session took place in September 2025. The session was further enriched by contributions from the Interim Chief Executive and an Aspiring Chief Executive, providing valuable leadership perspectives and fostering continued development of our future Board leaders.

b) NHS Education for Scotland iMatter 2025
NHS Education for Scotland achieved a 90% response rate in the 2025 iMatter cycle, an increase from 87% in 2024, with the Employee Engagement Index maintained at 84. Action planning engagement also strengthened, with 90% of teams submitting plans on time and 94% recorded on the portal, reinforcing transparency and accountability. The Executive Team has again published its action plan openly, demonstrating leadership commitment to staff involvement. A full report will be reviewed by the Staff Governance Committee ensuring governance oversight and alignment with organisational priorities.

6 Partnerships - how we are supporting our partners

6.1 Strategic Partnerships

a) Relationships continue to evolve and consolidate with a range of national partner organisations, educational institutions, research and innovation partners and within collaborative workstreams involving multiple partner organisations (focused on key areas of cross-public service interest). Partnership work is aligning with the priority themes within the NHS Education for Scotland Learning and Education Strategy and the Learning and Education Research and Innovation Plan as relationships mature and as we share our strategic intent for working in partnership. This is in addition to the continued efforts of colleagues across NHS Education for Scotland, who work in partnership across, health, social care and wider public service in the day-to-day delivery of their specific areas of work.

The number of partnerships and collaboration between NHS Education for Scotland and partners has continued to grow, and we are working hard to develop and consolidate these relationships.

b) Delivery of Learning and Education for Health and Social Care
Partnership working arrangements are in place with nine National Partners supporting coherent learning provision in health and social care: Scottish Funding Council, Social Services Standards Council, Skills Development Scotland, Scottish Qualification Authority, College Development Network, Colleges Scotland, Universities Scotland, Education Scotland and Council of Deans of Health Scotland.

We are also working closely with the Scottish Qualifications Framework Partnership and the Scottish Apprenticeship Advisory Board Standards and Frameworks Group. We now have NHS Education for Scotland colleagues on the formal Scottish Qualification Authority, Scottish Qualifications Framework Partnership, Scottish Apprenticeship Advisory Board and Scottish Funding Council Committees and Groups.

There are currently 15 strategic collaborative workstreams, which bring together multiple partner organisations around a common area of interest/delivery, to support the delivery of cohesive learning provision for health and social care.

Learning collaborations are formalised with three other NHS Scotland Boards: NHS Golden Jubilee, Scottish Ambulance Service, NHS 24, and continued strategic discussions are ongoing with Public Health Scotland.

Formal strategic partnerships with eight Higher Education Institutions: University of St Andrews, Open University in Scotland, University of Dundee, University of Strathclyde, University of the West of Scotland, Glasgow Caledonian University, Glasgow School of Art and University of Glasgow. We are now working towards strategic partnerships with both the University of Aberdeen and Fife College.

Nations collaborations between NHS Education for Scotland, NHS England, Health Education and Improvement Wales & Northern Ireland Medical and Dental Training Agency Collaboration are continuing with a current focus on:

- new roles/Medical Associate Professions.
- medical training reform and AI/digital.

We are working together to curate a four nations **Four Nations Responsible AI in Healthcare Education Conference** on 12 November 2025.The conference brought together stakeholders from across the UK to explore how Artificial Intelligence can be integrated responsibly into healthcare education. The event focused on embedding ethical and inclusive AI practices in teaching and learning, enhancing educator capability through innovative tools, transforming curriculum and assessment with adaptive technologies, and supporting continuous professional development to prepare the workforce for future service needs. It also addressed governance, bias, and safeguarding considerations, while fostering collaboration across the four nations to share best practice and drive innovation in healthcare education.

c) Strategic Research and Innovation Initiatives and Partnerships

There are 5 formal Research and Innovation Partnerships with national partners: Scottish Funding Council, UK Health Data Research Alliance, Chief Scientist Office (Health), The Academy of Medical Sciences and the Digital Health and Care Innovation Centre.

There are currently 13 collaborative workstreams (involving multiple partners) with a focus on different areas of the research and innovation agenda: Examples include NHS Education for Scotland involvement and support for the Accelerated National Innovation Adoption Pathway; working with Scotland's three health and social care innovation hubs to support learning and education.

6.2 Chief Executive Update

a) NHS Education for Scotland works with partners, stakeholders, and our own staff to build careers, lives and the future sustainability of the health and social care workforce. Partnership working is integral to ensuring that NHS Education for Scotland education, training and workforce development is co-designed and shaped by the voice and needs of people with lived experience as well as the needs of health and social care staff.

b) The NHS Education for Scotland Executive Team and Strategic Implementation Group continue to meet formally. Collectively, they focus on strategic matters, strategic scrutiny, cross-organisational leadership, and ensuring the direction of strategy with a focus on our people, partnerships, and performance.

c) The Internal NHS Education for Scotland NHS Delivery Programme Board continues to meet monthly. The meeting will focus on establishing a clear mechanism to enable NHS Education for Scotland representatives across the NHS Delivery project workstreams to seek guidance and escalate key risks, issues, and challenges for timely resolution. This approach ensures that all significant risks and dependencies

related to NHS Education for Scotland are closely managed by the Executive Team, while also keeping the NHS Education for Scotland Board informed of progress and ensuring that relevant matters are escalated as appropriate. Additionally, there is oversight of NHS Education for Scotland's delivery timeline and commitments, supporting effective governance and accountability throughout the project and ensuring that NHS Education for Scotland can play its required role in the overall Scottish Government led project.

d) My engagement with a wide range of key stakeholders across health and social care continues. This includes a wide range of colleagues across NHS Scotland, including Board Chief Executives and other senior colleagues, and as part of the Scottish Government, NHS Board Chief Executives' Private, Strategy and Business meetings.

e) I regularly meet with Christine McLaughlin, Chief Operating Officer & Deputy Chief Executive, NHS Scotland, Director-General for Health and Social Care, to drive forward our shared ambitions in the digital space. These discussions focus on the Digital Front Door Programme, ensuring alignment on governance, delivery priorities, and the integration of national digital services. This included a presentation on the beta version of MyCare.scot to the First Minister and Director General which I presented with David McColl (Deputy Director, NTS) and which was positively received. This ongoing engagement strengthens collaboration between NHS Education for Scotland and NHS Scotland, supporting the successful implementation of digital solutions that enhance patient access and service efficiency.

f) I continue to play a leading role in national workforce and strategic reform. I co-chair the Joint Negotiating Committee and act as Co-Chair on contract reform for resident doctors and dentists in training. I also serve as the NHS Board Chief Executives lead on pay negotiations for consultants, specialty doctors, and resident doctors and dentists in training. On behalf of NHS Board Chief Executives, I continue to lead work on the future of the National Care Service, ensuring alignment with wider health and social care reform. Since 1 April 2025, I have held the role of Vice Chair of the NHS Board Chief Executives Group and continue to contribute to national leadership and strategic direction in this capacity.

g) Engagement with the Scottish Government continues through my regular one-to-one meetings with a number of SG colleagues, as well as my attendance at wider Scottish Government meetings which now includes the NHS Delivery Programme Board. We continue to maintain strong links with Scottish Government through the Strategic Sponsorship arrangement, involving myself, the NHS Education for Scotland Board Chair, and Scottish Government's Director of Health Workforce. Recent discussions have focused on funding arrangements and NHS Education for Scotland priorities, ensuring alignment with national workforce strategy and delivery planning.

I actively participate in the 4 Nations NHS CEO Peer Group, which brings together Chief Executives from NHS England, Health Education and Improvement Wales, Northern Ireland Medical and Dental Training Agency, and NHS Education for Scotland. These quarterly meetings provide a valuable forum for collaboration across the UK, enabling us to share strategic priorities, explore common challenges, and align on key workforce and education developments.

h) I continue to engage with the Employers Reference Group to support NHS Boards in preparing for the transition to a 36-hour working week from April 2026. Recent discussions have focused on safe and sustainable implementation, including service impact modelling, national guidance, and alignment of rostering and payroll systems. The group has agreed to adjust the effective date to 30 March 2026 to avoid midweek rostering challenges, and all services have completed job family planning templates and risk assessments, with initial heat mapping shared with Corporate Management Teams. NES remains an active contributor to this work, ensuring readiness across education and workforce planning as part of this significant national change.

6.3 Dental including Optometry

a) Modern Apprenticeship in Dental Nursing Launch Event
Skills Development Scotland hosted a launch event in October to recognise the outstanding collaborative partnership between employers, training providers, and stakeholders in the recent review of the apprenticeship framework. Speakers at the event include senior colleagues from Skills Development Scotland, Associate Postgraduate Dental Dean and The Scottish Government Chief Dental Officer.

b) National Occupational Standards: Dental Nursing Post Registration Review
A new Dental Nursing National Occupational Standards UK Steering Group, led by Skills for Health, was established in September 2025 to explore the need for creating National Occupational Standards for Dental Nurse Post Registration additional skills. Colleagues from the Dental Care Professional workstream are contributing to this six-month project, which will include a consultation process.

c) Dental Technician Training
A short questionnaire was distributed to dental laboratory owners and managers across Scotland to gather data to understand current and future workforce demand for training in Scotland. A total of 26 responses were received from Independent Dental Laboratories, the Public Dental Service, and the Hospital Dental Service across 11 NHS Board areas in Scotland. The data will be analysed and a report formulated to inform the development of a sustainable education and training pathway that meets the evolving needs of the dental workforce within NHS Scotland.

Collaborating with Edinburgh College and stakeholders, we aim to develop an adaptation of the existing National Certificate in Oral Health Care: Preparing for Practice (SCQF 6), which is currently a full-time programme for individuals interested in a career in Dental Nursing. This will open a new pathway for those interested in dental technology and support widening access and attracting more people to the profession. Edinburgh College plans to deliver this new programme in the 2026-2027 academic year.

d) Optometry Foundation Training Year Workstream
The Optometry Foundation Training Year workstream held a successful stakeholder event on 24 October 2025 at Stobhill Hospital, enabling meaningful discussion and the demonstration of our proposed simulated placement elements for the Optometry 5th year Master of Optometry with Independent Prescribing. Pharmacy Simulation Lead Scott McColgan-Smith, Forth Valley Consultant Ophthalmologist Dr Iain Livingstone,

and Optometry Educational Lead Clare Sommerville gave presentations. Stakeholders included representatives from the two Scottish Optometry schools, major employers, Scottish Government, Optometry Scotland, and indemnity providers.

e) Optometry Community Practice

The postgraduate support workstream is planning collaborative educational delivery with neuro-ophthalmology colleagues in NHS Greater Glasgow & Clyde, to address unwarranted referrals into the Paediatric Ophthalmology service. This aims to improve the confidence of community optometrists in managing more challenging cases and to drive improvements around the impact of over-referring on our secondary care partners.

6.4 Medical Including Healthcare Science

a) NHS Lothian Obstetrics and Gynaecology

Quality management processes have been implemented within this unit over the last two years. Recent media has highlighted ongoing concerns resulting in a review of what NHS Education for Scotland can provide to support ongoing improvement**.**

b) General Surgery at Borders General Hospital

Serious concerns related to culture, undermining and educational governance were highlighted by Foundation Year Resident Doctors in Training. A Quality Engagement meeting took place in June, followed by a triggered visit on 15July 2025. The Quality Engagement meeting and visit confirmed the concerns raised by Resident Doctors in Training. Enhanced monitoring was discussed between Lead Dean Director and Executive Medicine Director Approval given by the Executive Medicine Director to escalate to the General Medical Council Enhanced Monitoring. The General Medical Council confirmed escalation to Enhanced Monitoring process in August 2025. A SMART objective setting meeting was held on 2 October and will be followed up with an Action Plan Review Meeting on 28th October 2025.

c) General Internal Medicine at Queen Elizabeth University Hospital

An Enhanced Monitoring re-visit took place with the General Medical Council on 28th and 30th May 2025. Overall, the panel found improvement from the previous visit and noted the efforts of the leadership and management team in continuing to engage with Resident Doctors in Training to improve the training experience. Whilst some concerns remained in terms of access to educational opportunities and handover of GlasFLOW patients, the cultural issues reported at the previous visit were not heard and there was a high level of confidence about accessing clinical supervision across all grades. Two requirements were carried over from the previous visit in relation to handover and staffing for workload. An Action Plan Review Meeting is scheduled for 20th November 2025.

6.5 Psychology

a) Doctorate in Clinical Psychology Programmes

The two Scottish Doctorate in Clinical Psychology programmes, commissioned by NHS Education for Scotland and delivered in partnership with NHS Scotland territorial Boards and the Universities of Edinburgh and Glasgow, send their congratulations to a cohort of Trainee Clinical Psychologists that have successfully completed their training.

The programmes have also just welcomed a new intake of 83 trainees across both programmes. Trainees will spend the next 3 years (or 2 years 7 months if Recognition of Prior Learning applies) placement in NHS Boards, in teaching at the Universities, carrying out service-based research and academic assignments, thereby making a significant contribution to NHS psychological services.

6.6 Social Care and Communities

a) Community Link Workers/Improving the Cancer Journey Link Workers – Joint Networking Event

The Director of Social Care and Communities presented at the recent 'Community Link Workers/Improving the Cancer Journey Link Workers – Joint Networking Event' hosted by the Voluntary Health Scotland and MacMillan Cancer Support. NHS Education for Scotland has previously supported Social Prescribers in Scotland by curating learning resources on Turas Learn and more recently has been commissioned by the Scottish Government, Primary Care Directorate to develop a Knowledge and Skills Framework for Community Link Workers. This will support the commitment in the Population Health Framework; for learning and development; to support competence and confidence; to offer greater consistency to role; to enhance professional identity; to demonstrate CPL and support reflective practice, supervision and career conversations.

b) The Director of Social Care and Communities continues to represent NHS Education for Scotland on several external groups, including the Public Sector Leadership Group; the Scottish Social Work Partnership; NHS Delivery Project Team; the SNAP2 Leadership Panel; the Adult Support and Protection National Strategic Forum; and the Collaborative Response and Assurance Group.

c) The Director of Social care and Communities recently chaired a panel at a conference in Fort William exploring what actions might be taken to address the sustainability challenges faced by social care commissioners, providers and the workforce in the Highlands.

6.7 NHS Scotland Academy, Learning and Innovation

a) NHS Education for Scotland and Digital Health & Care Innovation Mindset UK Challenge

Progressing our successful collaborative bid to the Innovate UK Mindset challenge, which tests the application of Extended Reality as an educational medium. As part of

NHS Education for Scotland capacity building approach, the Research & Innovation Workforce Diversification workstream is supporting NHS Education for Scotland colleagues to join the project at a range of key stages across the 15-month project. A small team is now in place and work is ongoing around storyboarding, co-design planning, education design and user accessibility.

b) NHS Education for Scotland & Chief Scientist Office

NHS Education for Scotland was a sponsor at Scotland's Health Research and Innovation Conference hosted by the Chief Scientist Office and NHS Research Scotland on 23rd October in Edinburgh. This well attended event provided an exciting opportunity to showcase NHS Education for Scotland and aligns with Pillar 5 of the Research & Innovation Plan 'research and innovation capacity'.

c) NHS Scotland Youth Academy

The new *Your Med Future* section of NHS Scotland Careers, launched in June to support applicants to undergraduate Medicine, continues to receive positive feedback and is evolving in response to user experience and updated information, e.g. around university entry requirements. In planning for the rest of 2025-26, the team is aiming to extend outreach and mentoring activities to potential applicants. This work will focus on opportunities to pilot widening access to remote, rural and island settings, and economically disadvantaged areas.

The proposed early secondary engagement pilot in Dundee is now being presented to local school leaders, aiming to confirm support so that initial work can begin before the end of the 2025-26 school year. We have agreed a schedule for developing simulation resources and will begin co-design via a series of meetings with interested schools in Q3.

Phase 2 of the Earn as You Learn work involved a series of Board engagement sessions and deep dives on apprenticeships during August – September. These were positively received and have confirmed the strong support for the work across territorial and national Boards.

d) Accelerated National Innovation Adoption

Implementation of pharmacogenetics and Digital Programmes for Type 2 Diabetes Remission continues apace, with extensive stakeholder engagement. The procurement process for the Type 2 Diabetes Remission programme is nearing completion, with the announcement of a successful supplier eagerly awaited to enable the synchronisation of training and education resources.

Scottish Government funding of £1.9m has been announced to support additional programme implementation; deployment of Ambulatory Electrocardiogram patch monitors for around 8000 recent stroke patients annually. Innovation to transform lives of stroke patients - gov.scot

Two new innovative Accelerated National Innovation Adoption programmes are being assessed through the strategic case review process; obstructive sleep apnoea/hypopnoea syndrome and Intelligent Liver Testing.

e) Knowledge Management and Discovery

Knowledge Management and Discovery teams provide comprehensive support services for staff across health and care, particularly regarding digital learning and Turas Learn resources. This includes dedicated Teams channels, an online community of practice, and helpdesk support. Opportunities for sharing best practice in technology enhanced learning are also being explored through strategic collaborations, such as with NHS Education for Scotland, Scottish Ambulance Service, and NHS 24.

f) Pathways and Partnerships Team

The Pathways and Partnerships team has achieved significant progress in developing scalable methods for future-oriented learning pathways. After extensive discovery work, including literature reviews, semi-structured interviews, and internal surveys, the team has established guiding principles and a draft methodology now ready for piloting. Strategic alignment has been enhanced through connections with Earn as You Learn initiatives (Scottish Government commission) and external standards such as National Occupational Standards. Engagement with NHS Wales is guiding repository development, and cross-directorate collaboration is supporting the co-design of pathways. These efforts are laying the foundation for a coherent, adaptable approach to workforce development across health and social care.

6.8 NHS Education for Scotland Technology Services

a) National Digital Platform

Significant progress has been made towards delivering the functionality required for the Digital Front Door, including integration with the Scottish Government's digital mailbox solution and ensuring the readiness of the CHI matching service.

The roll-out of the Medical Device Data Hub has continued, with NHS Lothian and NHS Borders going live during September 2025.The Data Store has been developed for the Digital Front Door and is ready for end-to-end testing of the entire service.

Access to ECS data (medications and allergies) has been established and developed for the Digital Front Door and is ready for end-to-end testing of the entire service.

Work has concentrated on integrating with the Scottish Government's ScotAccount to facilitate login and Identification & Verification for the Digital Front Door service. Additionally, a solution has been developed to identify eligible users during the initial launch.

A multi-disciplinary team has been set up to enable the National Digital Platform agile delivery teams and coordinate work and other activities.

b) Digital Prescribing and Dispensing Pathways

Tender documentation is currently being prepared for the procurement of the technical build partner for Digital Prescribing and Dispensing Pathways' specific functionality, with an invitation to tender to be posted by the end of October 2025. Work with procurement continues regarding the potential use of Cloud Services call-off frameworks. Recruitment of an NHS Education for Scotland Technology Service

Programme Director is progressing, which will help to establish the procurement route for the Advanced Electronic Signature (AES) (digital signature).

The Scottish Government's spending review process has allocated specific additional funding to primary care, particularly for Digital Prescribing and Dispensing Pathways. This includes a commitment to maintain Business as Usual after implementation. This announcement will reinstate the governance processes concerning the Digital Prescribing and Dispensing Pathways Implementation Full Business Case.

c) Accelerated National Innovation Adoption

NTS, as the Accelerated National Innovation Adoption digital partner, obtained approval from the National Services Scotland Technical Design Authority to utilise National Services Scotland products and services in support of the Digital Diabetes Remission programme. This approval will enable the programme to leverage existing secure infrastructure and technical standards, ensuring interoperability, compliance, and scalability across NHS Scotland. It also provides assurance that the solution aligns with national governance requirements, supporting accelerated delivery and reducing duplication of effort.

d) Family Nurse partnerships (England)

A new contract for the continued support & maintenance of the Family Nurse Partnership England application was signed with the Department of Health & Social Care on 25 September 2025. This contract will continue to maintain and support cross-border relationships.

6.9 People and Culture

a) Trainee Services

Since August 2025, 147 Certificates of Sponsorship have been issued, with a further 30 extensions expected by December 2025. The Human Resources Trainee Services team also successfully processed Protecting Vulnerable Groups Scheme clearances for 1,766 Resident Doctors and Dentists as part of the summer 2025 intake, with vetting information identified for two trainees.

In response to new Disclosure Scotland legislation introduced in April 2025, the team collaborated with NHS Education for Scotland Technology Services to develop and implement a system enhancement that significantly improved the recording of Protecting Vulnerable Groups Scheme outcomes and the accuracy of status reporting to territorial boards. This development has strengthened data quality and ensured that Health Boards receive timely updates, enabling more effective local workforce planning and contingency management.

NHS Education for Scotland **NES/25/79**

Agenda Item: 8a

Date of meeting: 20 November 2025

NES Public Board

1. Title of Paper

1.1 Quarter 2 Finance Update Report 2025/26

2. Author(s) of Paper

2.1 Jim Boyle, Director of Finance
Laura Howard, Deputy Director of Finance
Alan Young, Head of Finance Business Partnering

3. Lead Director

3.1 Jim Boyle, Director of Finance

4. Situation/Purpose of paper

The purpose of this paper is:

4.1 To inform the Board of the forecast financial outturn position at the end of Quarter 2 (Q2) of financial year 2025/26, based on year-to-date activity and known spending commitments and anticipated funding for the remainder of the year. The forecast year-end position, as set out in this report is an underspend of £3m. The report will describe any significant movements in financial performance and projections sine the Q2 report to the Board on 21 August 2025.

4.2 To report the Scottish Government in-year funding position and highlight the ongoing work with SG Health Finance and policy teams on outstanding funding.

5. Background and Governance

5.1 The Financial Plan which supports the Annual Delivery Plan was approved by the NES Board on 27 March 2025. This consisted of a baseline budget of

£648.9m for NES to conduct its core activities with recurring and non-recurring funding of around £211m indicated at that time for additional commissioned work by the SG policy teams. Due to timing of the initial announcement to end the lease at Westport the approved Financial Plan indicated a deficit position of £1.0m in all three years of the planning period. All Boards opening baseline budgets for financial year 2025/26 were uplifted by 3% and following extensive discussions with SG sponsor and finance teams a further £12m was returned to NES to restore the previous baseline reduction as part of the 2024/25 Financial Plan.

5.2 The Digital Learning and Infrastructure programme (previously known as TURAS Refresh) will be funded from the restored NES baseline.

5.3 The Financial Plan for 2025/26 included the following assumptions set out by SG:

- 60% of the Employers National Insurance increase would be funded by an additional recurring allocation.
- NES would receive recurring Sustainability Funding of £4.7m to offset in-year cost pressures
- Pay awards above 3% will be fully funded by SG (first 3% would be met by the baseline uplift in 25/26).

5.4 A savings plan of £9.2m, split £6.6m recurrent and £2.6m non-recurrent, was approved as part of the financial plan at the Board meeting in March. This reflects the ask from SG to not impact on any areas of our budget which we provide funding to other NHS Scotland Boards for deliverables such as training grade salaries or undergraduate teaching.

5.5 Throughout the year Scottish Government policy teams ask NES to undertake additional commissions that reflect policy and service need, aligned to the NES strategy, and are supported by further funding. Work with Scottish Government policy teams is ongoing to ensure funding requirements are based on the most up to date information available and can be fully utilised in the financial year.

5.6 A more detailed analysis of the financial position was presented and well received at the Planning and Performance Committee meeting on 10 November 2025.

6. Assessment/Key Issues

Table 1 – Summary projections 2025/26

Performance Indicator	Year-End Outturn	Q2 Position (Year to Date)	Q1 Position (Year to Date)
Revenue Outturn	**£3.0m (underspend)**	£4.1m (underspend)	£3.1m (underspend)
Cash Releasing Efficiency Savings	**£10.4m**	£5.8m	£2.4m

6.1 NES is reporting a full year underspend position of £3m, 57% relating to the lower recruitment and uptake of training places across Dental and Psychology, with remaining 43% internal to NES, mainly Digital Learning Infrastructure Programme.

6.2 The main driver is lower number of trainees recruited in Dental (£0.7m) and Psychology (£0.8m) than had been forecast within operational plans. There is also an increasing number of Resident Doctors who are opting to work less than full time, but the funding that is not then deployed to Boards is recycled by NES to cover the funding gap for the medical expansion programmes.

6.3 The Executive Team have commissioned a closer examination of the reasons for lower fill rates for some clinical programmes, as well as any actions that can be taken to address this. Once the Executive Team has considered this, it will be brought to the Board for consideration.

6.4 A further £0.9m underspend sits within NHS Academy, Learning & Innovation, in relation to Digital Learning Infrastructure (DLI) programme, where work has not started as quickly as anticipated due to delays in getting Full Business Case to approval stage.

6.5 SG have allocated funding for the increase to employer's national insurance contributions. This funding is less than the 60% expected as part of the agreed planning assumptions in the approved financial plan. This has resulted in a recurring cost pressure for NES of £1.5m.

6.6 NES has met this pressure in 25/26 through additional £1.2m non-recurring vacancy lag savings and dental training gaps already given up as non-recurring savings in 25/26.

6.7 The Agenda for Change and Medical and Dental Consultant pay awards for 2025/26 have been agreed by Scottish Government, with full funding being allocated in Quarter 2.

6.8 The Resident Doctors pay award for 2025/26 has yet to be agreed. NES continues to plan for this being fully funded in line with Scottish Government Finance guidance.

6.9 At Quarter 2 we are on track to exceed the savings target of £9.2m set out in the Financial Plan. We anticipate delivering £10.4m, with excess driven by increased vacancy lag, due to increased pay awards and new baseline funding for posts which would previously not been part of the vacancy lag process.

6.10 All adjustments to 2024/25 recurring allocations have now been received in full. In quarter 2 we received a further £8.7m of in year funding from SG, with £6m on a recurring basis for the Agenda for Change and Medical and Dental Consultant pay awards. The forecast position includes a further c.£23.5m of allocations expected during the year. Appendix 2 to the attached detailed financial report provides a detailed breakdown of allocations in excess of £0.5m.

Key Risks to Financial Performance

6.11 Table 2 sets out the main risks to the financial performance detailed in this report, as well as mitigations that will assist in managing those risks. Table 2 includes a risk around the establishment of NHS Delivery. While the Scottish Government has stated that funding in the current financial year will be unaffected by the setting up of NHS Delivery, there is a risk that significant new spending commitments will be necessary during 2025/26 which may not be funded. This includes any additional staff and non-staff contractual commitments that may arise that Scottish Government may wish both existing Boards to absorb. There is also a risk that some budgets will not be spent because staff activity is diverted to work associated with NHS Delivery.

Table 2 - Key Risks to Financial Performance

Risk	Status	Mitigations
NHS Delivery – financial risk associated with the establishment of new entity from 1 April 2026	**AMBER**	• NES Senior Leadership representation on Programme Board and Project Delivery Team. • NES representation on all workstreams of project team • Regular and consistent communications for all staff • Weekly drop-in sessions for staff with Chief Executive, Chair and Employee Director. • Regular reporting to ET, Board and Committees on performance against in year ADP. • Establishment of financial reporting of project costs. • Additional Financial Resource requirements will be shared with Scottish Government as the need arises. • Scottish Government consideration of the creation of a programme budget.
Remaining allocations not being confirmed in future allocation letters	**AMBER**	• We have already received 79% (£90.9m) of allocations. Of the remaining 21% (£23.5m) outstanding, 63% have written confirmation with the other 37% agreed in principle (see Table 4 of Financial Summary Report).
Digital Front Door – financial risk as a result of tight delivery deadlines and accelerated rollout request.	**AMBER**	• Delivery partner in place. • Funding envelope agreed with SG to progress with spend plans for initial rollout and. • Project brief on accelerated rollout being developed for review by DFD Delivery Board. • Discussions with SG around additional funding to support requirements of accelerated rollout.
Requirement by SG for Boards to further reduce spending in-year (baseline or non-recurrent)	**GREEN**	• Completion of monthly FPR returns to keep SG Health Finance appraised of outturn projections • Utilising flexibility within the overall NES baseline budget to cover shortfalls across NES directorates • Potential to implement further discretionary spending controls
2025/26 pay awards not fully covered by additional funding	**AMBER**	• SG have confirmed that Boards should continue to work on assumption awards

Risk	Status	Mitigations
		will be fully funded until notified otherwise. • Funding for AfC and Consultant pay awards received in full in Q2. Resident Doctors and Exec/Senior Management awards not yet confirmed.
Medical Training Grades potential funding deficit not underwritten by SG	**GREEN**	• Expenditure and allocation of trainees is well-controlled within NES • Regular engagement with SG Health Finance and Workforce Policy Teams to make sure the likely funding position is well understood • SG have previously honoured this underwriting

7. Recommendations

7.1 To note and review the financial results set out in this report.

Author to complete **checklist.**

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

a) Have implications for NHS Delivery been considered?
☒Yes
☐No

b) Have Educational implications been considered?
☐ Yes
☒ No

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

d) Alignment with Our Strategy 2023 – 26 People, Partnerships and Performance
☐ 1. People Objectives and Outcomes
☐ 2. Partnership Objectives and Outcomes
☒ 3. Performance Objectives and Outcomes

e) Have key strategic risks and mitigation measures been identified?
☒ Yes
☐ No

f) Have Equality, Diversity, Human Rights and health inequality issues been considered as per Fairer Scotland Duty: Guidance for Public Bodies and Corporate Parenting as per the Children and Young People (Scotland) Act 2014?
☐ Yes
☒ No

g) Has an Equality Impact Assessment (EQIA) been completed or in progress for this piece of work?
☐ Yes
☒ No

h) Have you considered Emergency Climate Change and Sustainability implications as per **DL (2021) 38**?
☐ Yes
☒ No

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

Author name(s):
Alan Young, Head of Finance Business Partnering, Laura Howard, Deputy Director of Finance, Jim Boyle, Director of Finance
Date: 10/11/2025

FINANCIAL SUMMARY REPORT

AS AT Q2 (September) 2025/26

Contents

1. Executive Summary

At the end of 2025/26 financial year, NES is on track to meet all its statutory financial targets, provided that remaining outstanding Scottish Government funding is received in line with expectations. The year end ouuturn forecast is £3m underspend as detailed in section A.

Table 1 – Summary Position	Year-End Outturn	Q2 (YTD)	Q1 (YTD)
Revenue Budget	**£3.0m**	**£4.1m**	**£3.1m**
Cash Releasing Savings	**£10.4m**	**£5.8m**	**£2.4m**

A. Revenue Budget

- At Q2 the NES forecast year-end position for financial year 2025/26 is an underspend of £3m against a budget of £873.4m. The year-to-date position shows an underspend of £4.1m which is from a number of budgets needing to be re-phased across year now that funding has been received from SG and spend plans are finalised.

- The underspend is driven by lower number of trainees recruited in Dental and Psychology and delay to Digital Learning and Innovation Full Business Case being submitted to the Scottish Government for approval to commence next phase of programme.

- The shortfall in funding from SG for changes to employer national insurance contributions, shown within Corporate Provisions, can be covered via additional non-recurring vacancy lag savings in 2025/26 and lower cost on dental training from trainee gaps relating to 2024/25 recruitment intake (budget transferred to Corporate Provisions at start of financial year). As the NI costs are a recurring pressure, we will need to review how they can be covered for future years as part of Operational planning for 2026/27 and beyond.

- There are various overspends and underspends reported across directorates, and these are discussed further in the Operational Performance section on Page 5.

- The revenue forecast position is based on all outstanding anticipated funding being received by SG in a timeframe which allows all deliverables to be achieved.

B. Capital

- Each financial year a revenue to capital allocation is agreed with Scottish Government (SG) as part of the Financial Plan. A full review of planned capital spend will take place in Q3 and be communicated to SG and an asset then created on the asset register once purchase is complete. For 2025/26 we currently anticipate £1.1m will be required to support capital programmes, with the main spend being on the fit-out works at our new Bothwell Street property in Glasgow.
- As part of Medical ACT bids process, we also facilitate the in-year transfer of revenue to capital funding for territorial boards. Once a bid has been approved which requires capital funding, NES engage with SG Finance to remove revenue funding from our budget on a one-off non-recurring basis and allocate it as capital funding to the Boards to carry out the approved work. The Boards own the asset which will sit on their asset register and they are responsible for all future deprecation and maintenance.

C. Savings

- At the end of the Q2 NES has delivered 63% of its Cash-Releasing Efficiency Savings (CRES) savings plans, and the Board is on track to exceed the £9.2m target, by £1.2m, at the end of the financial year. The increased savings are on workforce from higher vacancy lag. This continues to be monitored as longer lead times to recruit to vacant posts may deliver further non-recurring in year savings. The establishment of NHS Delivery may well drive this vacancy lag up further than it may otherwise have been, due to uncertainties created for potential new recruits.

D. Key Risks and Issues

- **Funding –** At the end of Q2 NES has c£23.5m of funding outstanding. Some of these allocations are not expected until quarter 4, however others should have been received by this stage, and we are working with policy teams to progress allocation. An allocation for Resident Doctors pay uplift will be added once an award is confirmed. The working assumption for all NHS Boards is that all pay awards will be fully funded by SG, but with the increasing pressures on the wider system, this remains a risk until

funding is confirmed. The deadline for Medical ACT funding support requests from Boards is 31/10/25. At end of September £5.2m remained available. Any underutilisation would be an underspend against NES final position.

- **Major Programmes** – The fit out of our new Bothwell Street property in Glasgow has now completed with staff locating in mid-July. The full in years costs of the relocation are c£1.4m and will be covered by the property investment fund as per our approved 2025/26 Operational and Financial Plans. The Digital Learning Infrastructure (DLI) Full Business Case is now due to be submitted to the DLI Programme Board for sign off in February. If the Programme Board and SG approve its expected work on the next phase will begin in April 2026. A budget of £2.2m was included within the Financial Plan for 2025/26. This was based on FBC being approved and delivery phase work starting in October, with new plan resulting in an underspend of £0.9m. Once FBC is submitted the profile of costs for the project will be adjusted and considered as part of the 26/27 operational and financial planning process. Any change to the preferred option, especially any move to a Buy option or a hybrid Build/Buy would have the potential for significant deviation from the original financial profile and overall project costs, but this cannot be established at this stage.

- **Digital Front Door (DFD)** - following confirmation of funding to support the rollout of DFD we have moved to recruit the required posts and completed the tendering process to secure a delivery partner. At Q2 we remain on track to meet the first implementation date in December 2025. £12m of funding has been committed by SG for 2025/26, with £4m drawdown at Q2 and we will continue to drawdown further funding as required throughout the year. An accelerated delivery to the whole population has been requested by SG and is in the process of being planned and costed. Further detail will be provided in future reports as information becomes available.

- **Digital Prescribing and Dispensing Programme (DPDP) -** for DPDP we are anticipating funding of £2.5m for 2025/26. The ability to source staff from our existing delivery partner will help push this programme forward and work is currently in progress to initiate the tender process for sourcing a new delivery partner to facilitate the digital transfer of patient data across the different healthcare sectors. One risk that is not directly related to NES but will form part of overall programme is the need for further work on the future implementation and business as usual costs for territorial boards to ensure sign up for the new platform being built. At this point, the Scottish Government's position is that Boards will meet these costs from existing funding, but there has been significant push back from Boards on their ability to meet these costs in the current constrained financial environment.

2. Operational Performance

Revenue Position

- Monthly financial monitoring continues to be undertaken with directorates and a summary of the Q2 position is included by Directorate in Table 2 below. A more detailed breakdown by Directorate can be found at Appendix 1. Work with directorates will continue across future months to ensure all approved budgets have robust spend plans in place.

- **Medical including Medical Training Grade Salaries, Pharmacy & Healthcare Science:** Overall £0.2m overspend mainly from new consultant sessional appointments below budget rates.

- **Dental:** £0.7m underspend within Dental, which is predominantly driven by lower recruitment fill rates, for September 25 intake, in dental training grades on both core and vocational training (11 wte core, 3 wte VT).. £0.2m of the underspend relates to the reduction of funding for the BSc Oral Health training with NHS Lothian which is in a 4-year wind down process.

- **Psychology:** Underspend of £0.9m is driven by lower number of trainees on Enhanced Psychological Practice programme. This equates to an average of 17 fewer trainees across the year, from lower recruitment and less than full time trainee gaps.

- **NHS Scotland Academy, Learning & innovation:** Longer time to get DLI full business case approved has meant later start date to next phase of programme, resulting in an underspend of £0.9m against the £2.2m budget allocated at operational plan.

- **Provisions:** A £0.3m underspend is shown within provisions which is driven by a number of factors. Additional £1.2m vacancy lag savings, £0.2m lower fit out costs at new Bothwell Street property in Glasgow, £0.7m underspend on Dental trainee recruitment relating to 24/25 intake which was identified after operational plan. Offset by pressures from £1.5m funding shortfall received from SG for the changes to Employer National Insurance contributions and £0.3m procurement savings target set at operational plan.

- No financial commitment has been anticipated at this stage for the dilapidations at the point of vacating Westport, as that will be a cost in 2026/27, but consideration will be given to whether that can be paid early in 2025/26.

3. Scottish Government Additional In-Year Allocations

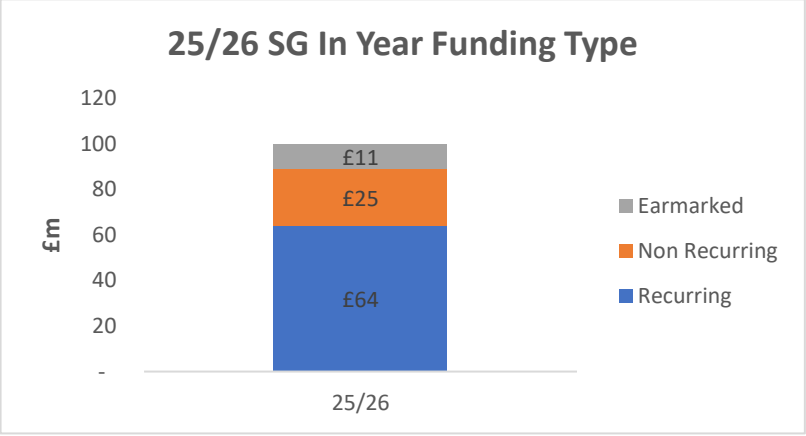
- NES has received a total of £90.8m in additional in-year allocations as at end of Q2. This equates to 79% of the total non-baseline funding that NES is anticipating receiving to support work on commissions.

- £64m has been received recurrently which will be transferred to the NES baseline from 2026/27, including £24m for Mental Health, £15.3m for Medical Training Grade expansion trainee salaries, £7.4m for Medical ACT, £10m for changes to Employer National Insurance contributions and £5.8m for 25/26 pay awards. This large element of funding confirmation provides NES with greater clarity and increased certainty as it sets its operational planning deliverables for future financial years and will enable more work to be spread across the financial year rather than final quarters were we to be awaiting late confirmation and receipt of funding, as has been the case in recent years.

- Directorates and Finance have worked closely with SG Sponsorship team, Finance and policy leads to ensure the prompt receipt of allocations and will continue to engage with those areas who are not providing funding within a timely manner.

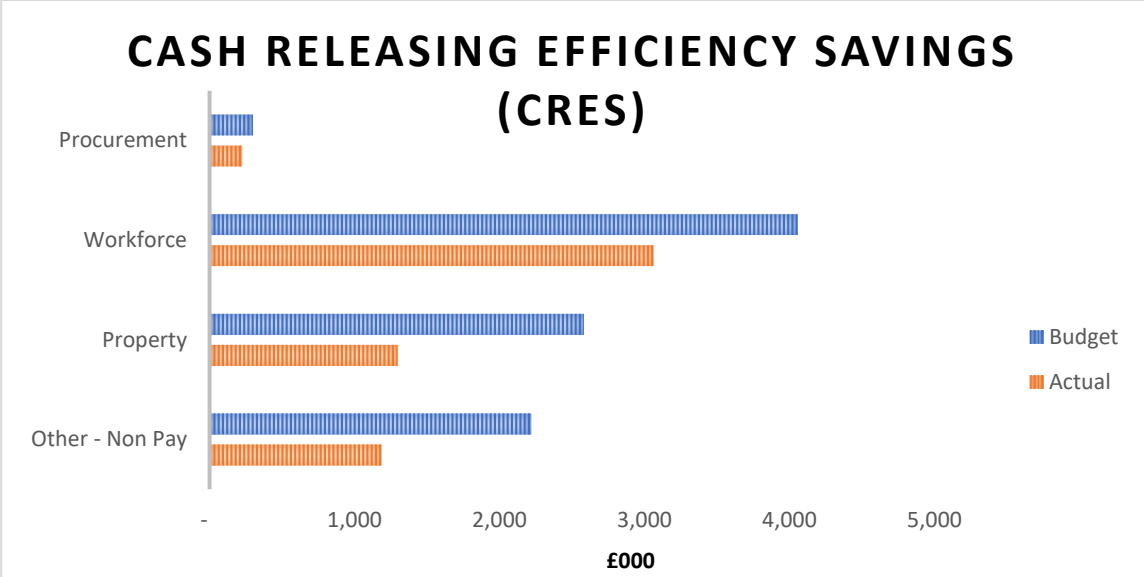
- At Q2 no outstanding allocations are red risk rated. £14.8m has been confirmed in writing while the remaining £8.6m is agreed in principle and awaits final confirmation of funding requirement before allocation is made. *£9m has since been received in October allocation letter at beginning of Q3.*

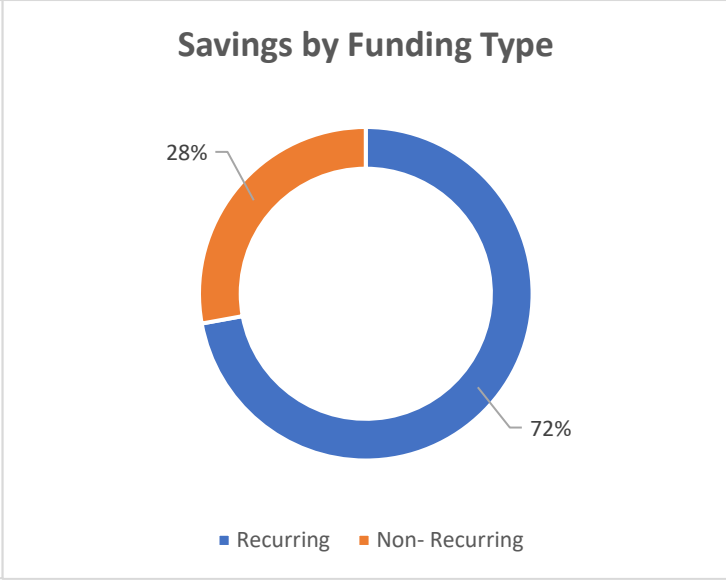
Allocations Status by Risk	Outstanding £'000
1 - Allocation date confirmed	40
2 - Formal confirmation in writing received	14,857
3 - Funding approved in principle	8,617
4 - Funding under discussion with SG	-
5 - No communication with SG	-
Total Anticipated Funding into NES	23,514
6 - Funding Return to SG	-
Total Anticipated Funding incl Return	23,514



4. Cash Releasing Efficiency Savings (CRES)

- The 2025/26 approved Financial Plan identified a savings plan of £9.2m, 1.4% of the total NES baseline.
- We have achieved 63% of the CRES savings target at the end of Q2 and are on track to exceed the full year target by £1.2m due to increased vacancy lag savings on our workforce pay. The additional £1.2m savings are all on non-recurring basis.
- The majority of the Workforce savings are the result of the time required to recruit to vacant posts. The property savings have been delivered by entering into shared space arrangements at our Glasgow, Edinburgh, and Aberdeen offices, and only retaining one of the sites in Dundee.
- The 25/26 Savings Plan consisted of £6.6m on a recurrent basis and £2.6m on a non-recurrent basis.





Appendix 1 – Year End Position by Directorate

	Full Year				
Directorate	**Budget**	**Outturn**	**Variance Under/(Over)**	**Q1 Variance**	**Monthly Movement**
	£000s	**£000s**	**£000s**	**£000s**	**£000s**
Quality Management	2,055	2,032	**23**	10	13
Medical ACT and Academic	151,969	151,968	**1**	4	(3)
Medical Directorate Support	9,553	9,529	**24**	(61)	85
Training Programme Management excl. MTG	27,211	27,093	**118**	(48)	166
Professional Development	8,072	7,996	**76**	(4)	80
Pharmacy	17,691	17,805	**(114)**	(28)	(86)
Healthcare Sciences	4,160	4,078	**82**	25	57
Medical Total	**220,711**	**220,501**	**210**	**(102)**	**312**
Dental	58,567	57,828	**739**	602	137
NMAHP	19,056	19,039	**17**	56	(39)
Psychology	50,053	49,281	**772**	0	772
Optometry	2,244	2,167	**77**	24	53
NHS Scotland Academy, Learning & Innovation	11,790	10,907	**883**	60	823
Social Care	2,106	2,107	**(1)**	17	(18)
NTS	32,178	32,182	**(4)**	64	(68)
Workforce	8,976	8,936	**40**	0	40
Finance	3,990	4,074	**(84)**	(82)	(2)
Properties & Facilities Mgmt	5,800	5,717	**83**	(3)	86
Planning	3,725	3,736	**(11)**	17	(29)
Net Provisions	13,033	12,779	**254**	(1,796)	2,050
NES Total (excl. MTG)	**432,229**	**429,254**	**2,975**	**(1,143)**	**4,117**
MTG Salaries	441,196	441,196	**0**	0	0
NES Total (incl. MTG)	**873,425**	**870,450**	**2,975**	**(1,143)**	**4,117**

Appendix 2 – SG In Year Funding Received and Outstanding 2025/26

Funding	Recurrent	Earmarked	Non Recurrent	Total	Total split by:		Risk Rating
					Received	Outstanding	
	£000s	£000s	£000s	£000s	£000s	£000s	
Baseline budget	648,875			648,875	648,875	0	
24/25 Recurring Allocations Adj to Baseline	111,305			111,305	111,305	0	
Original budget	**760,180**	**0**	**0**	**760,180**	**760,180**	**0**	
Anticipated pay award AfC	3,789	0	0	3,789	3,789	0	**0**
Anticipated pay award M&D Consultants	2,149	0	0	2,149	2,149	0	**0**
Anticipated pay award Resident Doctors	0	0	0	0	0	0	**0**
Anticipated pay award Exec	0	0	0	0	0	0	**0**
NI increase 60%	5,163	0	0	5,163	5,163	0	**0**
Sustainability Fund	4,818	0	0	4,818	4,818	0	**0**
Nursing & Midwifery Education	0	0	558	558	558	0	**0**
Dental ACT Levy	0	0	(889)	(889)	0	(889)	**3**
Vocational Training Grant Rate	603	0	0	603	603	0	**0**
Digital Enabled Workforce	0	0	831	831	831	0	**0**
Digital PDP	0	0	2,500	2,500	0	2,500	**2**
Patient Record Opthtamology	0	0	600	600	0	600	**3**
Pharmacy Trainees	0	7,533	120	7,653	0	7,653	**3**
Pharmacy Non Global Sum	0	571	0	571	571	0	**0**
Pharmacy clinical supervision and IP/CS places	0	932	0	932	932	0	**0**
Medical ACT	7,393	0	978	8,371	7,393	978	**2**
MEP Gap including Widening Access & ScotGEM	0	2,113	0	2,113	0	2,113	**2**
Medical Training Grades & Expansions	15,598	0	1,662	17,261	17,261	0	**0**
IFRS16 Non Core	0	0	483	483	0	483	**3**
Primary Care	0	0	1,726	1,726	1,707	19	**0**
Remote & Rural Centre for Helath & Social Care	0	0	1,169	1,169	1,169	0	**0**
Mental Health	23,896	0	7,765	31,661	31,661	0	**0**
Vocational Training Additionality	0	0	710	710	710	0	**0**
Digital Front Door	0	0	12,000	12,000	4,000	8,000	**2**
Vaccinations	0	0	1,937	1,937	1,937	0	**0**
Other allocations (under £500k)	916	1,128	5,610	7,655	5,596	2,058	
Total in-Year allocations	**64,326**	**12,277**	**37,759**	**114,363**	**90,849**	**23,514**	
Total Revenue Allocation	**824,507**	**12,277**	**37,759**	**874,543**	**851,029**	**23,514**	

Risk Status

1 - Allocation date confirmed

2 - Formal confirmation in writing received

3 - Funding approved in principle

4 - Funding under discussion with SG

5 - No communication with SG

NHS Education for Scotland **NES/25/80**

Agenda Item: 8b

Date of Meeting: 20 November 2025

NES Public Board

1. Title of Paper

1.1 Quarter 2 Strategic Risk Update Report 2025/26

2. Author(s) of Paper

2.1 Rob Coward, Principal Educator, Planning & Corporate Resources
Debbie Lewsley, Risk Manager, Planning & Corporate Resources

3. Lead Director(s)

3.1 Jim Boyle, Director of Finance

4. Situation/Purpose of paper

4.1 The purpose of this report is to present to the Board the Quarter 2 Strategic Risk Update for 2025/26 for review and approval.

4.2 In addition, the Board is asked to approve the de-escalation of Strategic Risk 16 to Directorate level, where it will continue to be managed.

5. Background and Governance Route to Meeting

5.1 NES has well established risk management processes which are subject to frequent review by the Executive Team, the Audit and Risk Committee, NES Board and the Risk Management Group. Our risk management infrastructure is predominantly in place, with established directorate risk leads, common risk log format and Risk Management Strategy.

5.2 Strategic Risks that relate to individual Board Governance Committees' remitted responsibilities are presented quarterly. This allows for consideration of the degree of assurance that the individual risks are being effectively managed by the mitigating controls and planned actions identified.

6. Assessment/Key Issues

6.1 NES Strategic Risk Register

6.1.1 The Strategic Risk Register (summary Appendix 1, detail Appendix 2) has been subject to a recent review by the Executive Team and individual risk owners. Within the last reporting period three new risks have been added to the Strategic Risk Log and changes have been made to the risk titles of Strategic Risks 2, 5,12 and 13 to reflect the current risk profile. There has also been movement to the scoring of four of the risk ratings.

6.1.2 Strategic Risk 2 “Disproportionate amount of non-recurrent funding, without conversion to recurrent funding” the risk title has been changed to “Continued reliance on high levels of non-recurrent funding to support the work of NES”. The risk has been recently reviewed with no change to the risk rating and updates on actions recorded.

6.1.3 Strategic Risk 5 - “NES does not put in place an adequate corporate infrastructure to support the Transformation Route Map” the risk title has been changed to “NES does not establish and maintain adequate corporate infrastructure to support the Transformation Route Map”. The risk has been recently reviewed with no change to the risk rating and updates on actions recorded.

6.1.4 Strategic Risk 9 – (relating to NES not putting sufficient measures in place to address ongoing cost and funding pressures leading to misalignment with Scottish Government priorities and expectations). The net likelihood rating has been decreased due to the funding for the Employers National Increase being reconciled. This assessment has resulted in the overall net risk rating being decreased from 12 to 8. The risk still sits outwith the Boards appetite for risks in the “Finance” category but has resulted in a reduction in the gap from 7 to 3.

6.1.5 Strategic Risk 11 – (relating to poor learning outcomes and learning experience for our stakeholders). The gross and net impact and likelihood ratings have been increased due to the uncertainty of provision of external venues for training in regard to the Westport relocation. Additional actions have been identified to support mitigation of the risk including the establishment of a NES Project Management Team to coordinate the programming of venue activity. This assessment has resulted in the overall net risk rating being increased from 12 to 20. The risk now sits outwith the Boards appetite for risks in the “Operational” category and the overall control rating is now assessed as acceptable.

6.1.6 Strategic Risk 12 – “Insufficient investment in TURAS Learn and other NES learning platforms”, the risk title has been changed to “Insufficient investment in Digital Learning and Infrastructure Programme and other NES learning platforms.” The risk has been recently reviewed with no change to the risk rating and updates on actions recorded.

6.1.7 Strategic Risk 13 - “Failure to recruit sufficient number of appropriately skilled and experienced staff within NES”, the risk title has been changed to “Failure to recruit and retain sufficient number of appropriately skilled and experienced staff within NES.” The risk has been recently reviewed with no change to the risk rating and updates on actions recorded.

6.1.8 Strategic Risk 14 – (relating to the failure to adequately anticipate and mitigate the impacts of policy, legislative, economic, technological and societal change). The net likelihood rating has been decreased due to NES continuing to operate a robust programme of internal controls which have been complemented by the establishment of internal governance mechanisms surrounding the NHS Delivery project. This assessment has resulted in the overall net risk rating being decreased from 6 to 4, the risk now sits within the agreed Board appetite and the overall control rating now assessed as effective.

6.1.9 Strategic Risk 16 (relating to the inability to meet core responsibilities and objectives due to HR Performance). The net likelihood rating has been decreased due to the HR Transformation Programme being stood down and the progress that has been made, with all activity being transferred to business as usual. This assessment has resulted in the overall net risk rating being decreased from 12 to 9, the risk continues to sit within the agreed Board appetite, and the overall control rating has been reassessed and changed from acceptable to effective. As a result of the decrease in rating and the transfer of activity to business as usual the Board is asked to approve the proposal of deescalating the risk back to Directorate level where it will continue to be managed. This recommendation was endorsed at the October 2025 Audit and Risk Committee and by the Staff Governance Committee at its November 2025 meeting.

6.1.10 New Strategic Risk 17 - (relating to the inability for NES to deliver its Annual Delivery Plan for 2025/26 and sufficiently plan for the future delivery of its statutory functions due to the uncertainty and resource demands caused by the formation of NHS Delivery). This risk was approved by the Executive Team and the Audit & Risk Committee for inclusion to the Strategic Risk Log in response to the announcement by Scottish Government on 17th June 2025 for NES to come together with NHS National Services Scotland to create a new organisation, from 1st April 2026.The risk has been recently reviewed and continues to be scored at a high rating of 16, with additional controls and actions identified to support further mitigation of the risk.

6.1.11 New Strategic Risk 18 – (relating to NES being unable to resource the work needed to adopt the national Business Systems Replacement Programme). This emerging risk was approved by the Executive Team and the Audit & Risk Committee for inclusion to the Strategic Risk Log. The risk has been recently reviewed and continues to be scored at a high rating of 12, additional actions have been identified to support further mitigation of the risk.

6.1.12 New Strategic Risk 19 – (relating to NES being unable to govern and discharge its responsibilities as Lead Employer). This risk was approved by the Executive Team and the Audit & Risk Committee for escalation to the Strategic Risk Log due to it being identified on three Directorate risk logs and the potential impact of the combined risks. The risk is currently scored at a high rating of 16, with additional controls and actions identified to support further mitigation of the risk.

6.1.13 All other Strategic Risks have been reviewed, and additional controls and actions have been added where appropriate to support with the mitigation of individual risks, with updates on actions recorded.

6.1.14 Table 1 in Appendix 3 provides a summary of the current Net risk exposure across each of the categories within the Strategic Risk Register, with Table 2 providing the last reported position for reference. As can be seen there has been an increase to Net risk exposure of Strategic Risks sitting within the Very High rating with a slight decrease within the High rating and an increase within the Low rating during this reporting period. This reflects the increase of the net risk rating to Strategic Risk 11 and decrease of the net risk ratings to Strategic Risks 9, 14 and 15. The NES risk profile's highest percentage of risk continues to sit within the Governance and People/Workforce categories

6.2 NES Board Risk Appetite

6.2.1 Presently 36.8% of Strategic Risks are sitting outwith the Board's risk appetite, this is mainly attributed to the risks within the Financial and Governance categories and reflects the Board's highly risk averse appetite in these areas.

6.2.2 Within this reporting period there has been a slight decrease in the percentage of risks sitting outwith appetite, this is a result of the additional risks that have added to the Strategic Risk Log this reporting period. There a currently seven strategic risks sitting outwith appetite, Strategic Risks 2 and 9 that are aligned to the Financial category, will continue to sit outwith Board Appetite for the foreseeable future due to the financial impact they would have if they materialised, the mitigating controls in place have reduced the gap in appetite within this reporting period.

6.2.3 The Net Risk rating for Strategic Risk 6 (relating to the failure to develop and maintain adequate Business Continuity arrangements to deal with the risk of adverse events and threats) will be reviewed following the completion of the outstanding action, to ascertain if the mitigating controls in place support the reduction of the net risk rating and bring the risk within Board Appetite.

6.3 Strategic Risks Overall Control Rating

6.3.1 The current overall risk control ratings for each Strategic Risk is shown in Appendix 1. The risks scored as ‘Effective’ are all within Board Appetite and the risks scored as ‘Acceptable’ are either outwith the Board Appetite or scored at a high risk rating of 15 and above and have key mitigating actions to improve the control environment either underway or planned.

7. Recommendations

The NES Board is invited to:

7.1 To review and approve NES Strategic Risk Q1 update and provide any feedback as appropriate.

7.2 To approve the de-escalation of Strategic Risk 16 to Directorate level.

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

a) Have implications for NHS Delivery been considered?
☒Yes
☐No

b) **Have Educational implications been considered?**
☒ Yes
☐ No

c) **Is there a budget allocated for this work?**
☒ Yes
☐ No

d) **Alignment with Our Strategy 2023 – 26 People, Partnerships and Performance**
☐ 1. People Objectives and Outcomes
☐ 2. Partnership Objectives and Outcomes
☒ 3. Performance Objectives and Outcomes

e) **Have key strategic risks and mitigation measures been identified?**
☒ Yes
☐ No

f) **Have Equality, Diversity, Human Rights and health inequality issues been considered** as per Fairer Scotland Duty: Guidance for Public Bodies and **Corporate Parenting** as per the Children and Young People (Scotland) Act 2014**?**
☐ Yes
☒ No

g) **Has an Equality Impact Assessment (EQIA) been completed or in progress for this piece of work?**
☐ Yes
☒ No

h) **Have you considered Emergency Climate Change and Sustainability implications as per DL (2021) 38?**
☐ Yes
☒ No

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

Author name: Rob Coward, Debbie Lewsley, Jim Boyle
Date: November 2025
NES

APPENDIX 1

Summary of Risk Log

Risk No.	Risk Title	Risk Date	Date due for next review	Gross Total	Net Total	Risk Category	Risk Appetite	Risk appetite vs net score	Overall Control Assurance
SR1	NES Strategic Plan does not align with the evolving needs and expectations of stakeholders	19/04/2023	28/12/2025	15	12	Strategic	12-16		Effective
SR2	Continued reliance on high levels of non-recurrent funding to support the work of NES.	19/04/2023	11/12/2025	20	8	Finance	1-5	Gap 3	Acceptable
SR3	Failure to recruit and retain sufficiently experienced and knowledgeable people to the Board, Executive Team and senior management establishment	19/04/2023	28/12/2025	16	16	People/Workforce	12-16		Acceptable
SR4	NES staff become disengaged	19/04/2023	28/12/2025	16	12	People/Workforce	12-16		Effective
SR5	NES does not establish and maintain adequate corporate infrastructure to support the Transformation Route Map.	19/04/2023	28/12/2025	16	12	People/Workforce	12-16		Effective
SR6	Failure to develop and maintain adequate Business Continuity arrangements to deal with the risk of adverse events and threats	19/04/2023	30/12/2025	16	9	Governance	1-5	Gap 4	Acceptable
SR7	Failure to put in place measures to adequately protect against breaches of cyber security	19/04/2023	30/12/2025	20	15	Governance	1-5	Gap 10	Acceptable
SR8	Failure to put sufficient employee training and other operational controls in place to minimise the risk of breaches of Information Governance	19/04/2023	30/12/2025	20	8	Operational	12-16		Effective
SR9	NES does not put sufficient measures in place to address ongoing cost and funding pressures leading to misalignment with Scottish Government priorities and expectations.	19/04/2023	11/12/2025	25	8	Finance	1-5	Gap 3	Acceptable
SR10	Failure to adequately anticipate and mitigate the impacts of policy, legislative, economic, technological and societal change	19/04/2023	28/12/2025	16	16	Strategic	12-16		Acceptable
SR11	Poor learning outcomes and learning experience for our stakeholders	19/04/2023	09/02/2026	20	20	Operational	12-16	Gap 4	Acceptable
SR12	Insufficient investment in Digital Learning and Infrastructure Programme and other NES learning platforms.	19/04/2023	30/12/2025	20	15	Operational	12-16		Acceptable
SR13	Failure to recruit and retain sufficient number of appropriately skilled and experienced staff within NES.	19/04/2023	28/12/2025	16	16	People/Workforce	12-16		Acceptable
SR14	Inadequate Board governance, systems, processes and scrutiny of them.	19/04/2023	28/12/2025	15	4	Governance	1-5		Effective
SR15	NES is not an evidence based data driven organisation, lacking intelligence and insights from its Information Assets.	14/12/2023	30/12/2025	12	6	Governance	1-5	Gap 1	Acceptable
SR16	Inability to meet core responsibilities and objectives due to HR Performance.	03/12/2024	28/12/2025	20	9	People/Workforce	12-16		Effective
SR17	Inability of NES to deliver its Annual Delivery Plan for 2025/26 and to sufficiently plan for the future delivery of its statutory functions due to the uncertainty and resource demands caused by the formation of NHS Delivery.	17/07/2025	28/12/2025	20	16	Strategic	20-25		Acceptable
SR18	NES will be unable to resource the work needed to adopt the national Business Systems Replacement Programme	17/07/2025	11/12/2025	15	12	Operational	20-25		Effective
SR19	NES unable to govern and discharge its responsibilities as Lead Employer.	17/07/2025	28/12/2025	20	16	Governance	1-5	Gap 11	Acceptable

STRATEGIC RISK 1

Risk no:	**SR1**		
Risk Short Title:	NES Strategic Plan does not align with the evolving needs and expectations of stakeholders		
Risk Owner:	Karen Reid	**Date Added to Register:**	**19/04/2023**
		Review Date:	**28/12/2025**
		Frequency of Review:	**Quarterly**
		Committee/Group overseeing	**Planning & Performance Committee**
Risk Category(s)	Strategic	Reputational	
Risk impacts on NES Strategy Key Area of Focus :			

Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
03/03/2025	9	Medium		Open	12-16	
03/07/2025	12	High	⇧			
29/09/2025	12	High	⇔			
	-					
	-					

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

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

Board Risk Appetite v Net Total	
Open	**12-16**
High	**12**

Existing control rating: **Effective**

Cause:	**Effect:**
NES Strategic Plan does not align with the needs and expectations of stakeholders	This could lead to a failure of the NHS and social care workforce's ability to respond to the existing and changing health and social care needs of Scotland's population In light of the Scottish Government announcement to bring together NES and NSS and potentially other national functions into a new organisation NES will develop its 2026/27 Annual Delivery Plan aligning with the current NES Strategy (development to be stopped) to ensure that the new organisation can take forward development of its own strategy while ensuring NES statutory functions are delivered to meet stakeholder needs and requirements.
	Result: This could result in high levels of dissatisfaction with the role of NES and loss of credibility as the statutory education, training, workforce development, data and technology provider in health and social care in Scotland. It could also mean that the health and social care workforce do not have the necessary skills and knowledge to meet the needs of the population.

Control:	Effectiveness:	Actions:	Due Date:
1. Revised NES Strategic Plan clearly articulates the importance of education and training to a sustainable workforce and has been widely consulted upon	Effective - Consultation report and approval recorded in minutes. Associated Strategic KPIs	1. Executive engagement sessions with Territorial Health Boards, Health & Social Care Partnerships, Scottish Government, Social Care Sector and Academia to develop relationships and understanding of needs. 2. ADP 2025/26 In draft and 1st submission sent to Scottish Government - awaiting feedback Update July - ADP 2025/26 approved by Scottish Government and NES Board, delivery underway	Ongoing Ongoing Yearly Submission
2. Annual Operating Plan, incorporating desired outcomes, forms the baseline for organisational activities	Effective - Approved by Exec Team and shared with NES Board and recorded in minutes.KPIs	3. Ongoing SG engagement and commissions to NES for social care workforce education and training	Ongoing
3. Development of focused communications to support management of stakeholder expectation in relation to NES capacity to deliver and support new systems development.	Effective - Communication Strategies and associated Action Plans.	4. Stakeholder Survey - stakeholders needs and expectations will be considered and analysed and will be reported to the November Board and will inform a refreshed Communications Plan. Update Dec 2024 - Analysis of the Stakeholder Survey 2024 has identified a number of areas for NES to focus on in order to align with the evolving needs and expectations of stakeholders. Feedback has suggested that whilst awareness of NES is relatively high, actions should go towards improving customer satisfaction. A report was presented to the November NES Board which highlighted the analysis and consequent action plan, including the need to: improve communications, create a consistency and cohesion of branding, develop a once for NES approach to communications and marketing and monitor and evaluate progress. Update March 2025 - NPS survey to go to stakeholders in Quarter 1. Update July 2025 - NES Comms activities will be coordinated with the establishment of the new organisation that integrates NES and NSS into a new National Board, NHS Delivery. It has been agreed that the planned NPS Survey in Q2 will not go ahead due to the aforementioned announcement. Update Sept 2025 - Position continues with respect to joint work between NES, NSS and Scottish Government in relation to NHS Delivery. Agreed with NES Board to undertake no further survey activity.	31/12/2025
4. Work has been undertaken with NHS Boards, statutory education bodies in the four nations, and professional regulators, to mitigate disruption and allow trainees/learners to progress where possible.	Effective - Actively monitor trainees progression through their ARCP process.	5. Regular Temperature Checks undertaken to ensure we are meeting the needs of all of our stakeholders. Update July 2025 - NES Comms activities will be coordinated with the establishment of the new organisation that integrates NES and NSS into a new National Board, NHS Delivery. It has been agreed that the planned NPS Survey in Q2 will not go ahead due to the aforementioned announcement. Update Sept 2025 - Action closed to be reviewed next financial year.	Closed
5. The implications for NES from the establishment of the National Care Service are discussed with our Sponsor Directorate and Health & Social Care Directorate to allow for forward Planning 6. Involving People and Communities Policy Implemented.	Effective - Ongoing discussions with sponsorship team and tripartite group meetings minuted. Not Tested	6. Agreed approach to meeting the Consumer Duty is being implemented. Update July 2025 - HIS recommended approach for Boards presented to NES Board during development session in April 2025. Agreed to progress in line with NHS service change guidance. Update Sept 2025 - Action closed approach agreed by NES Board. 7. Communication and Engagement Plan being developed for new NES Strategy 2026 - 31, which will include internal and external stakeholders. Update July 2025 - Following announcement of the establishment of NHS Delivery the NES Strategy Comms and Engagement suspended, however Communication and Engagement Plan developed to support the transition to the new organisation. Update Sept 2025 - Communication and Engagement Strategy developed with NSS colleagues for NHS Delivery project. Internal and external NES related comms continue to be planned and delivered in line with business needs.	Closed 31/12/2025

STRATEGIC RISK 2

Risk no:	**SR2**		
Risk Short Title:	Continued reliance on high levels of non-recurrent funding to support the work of NES.		
Risk Owner:	Jim Boyle	**Date Added to Register:**	**19/04/2023**
		Review Date:	**11/12/2025**
		Frequency of Review:	**Quarterly**
		Committee/Group overseeing	**NES Board**
Risk Category(s)	Finance		
Risk impacts on NES Strategy Key Area of Focus :			

Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
04/03/2025	8	Medium		Averse	1-5	
06/06/2025	8	Medium	⇔			
12/09/2025	8	Medium	⇔			
	-					
	-					

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

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

Board Risk Appetite v Net Total	
Averse	1-5
Medium	8

Existing control rating:	Acceptable

Cause:	Effect:
NES continues to experience a disproportionate amount of non-recurrent funding, without conversion to recurrent funding	We will have to rely on a high number of short-term and fixed-term contracts of employment in NES
	Result:
	This will result in continued workforce instability and could also result in failure to adequately deliver the NES Strategic Plan and respond to the commission requirements of Scottish Government. This situation seriously compromises our ability to maintain a workforce that has the right capacity and capability

Control:	Effectiveness:	Actions:	Due Date:
1. NES Exec Team maintain strong engagement with relevant leads at Scottish Government, as well as with the Sponsorship Team	Effective - Meetings take place fortnightly and quarterly and minuted.	1. Baselining and bundling impact will be assessed when proposals are made available by the Scottish Government, and will be reported to the Board at the earliest opportunity Update Nov 2023 - This is more likely to impact on 2024/25. Update June 2024 - This will be determined following SG deliverable workshops. Update Sept 2024 - Allocation letter received in July 2024 confirmed that £103m of funding will be moved from non-recurrent to baseline during 2024/25. That letter also confirmed 81% of expected allocations for 2024/25. Update Dec 2024 - Allocation letter received in Oct 2024 confirmed £108m will be moved from non-recurrent to baseline in this financial year. Update March 2025 - Scottish Government Deliverable Agreement Workshops scheduled for March/April 2025, these will help to advance discussions on funding. Update June 2025 - Awaiting confirmation from Scottish Government on dates for rescheduling workshops. Update Sept 2025 - Scottish Government confirmed workshops will no longer be going ahead, due to the ongoing work in establishing NHS Delivery - Action Closed.	Closed
2. Quarterly meetings with Scottish Government Health Finance Team and informal ad hoc meetings weekly.	Effective - Quarterly letter received following meetings.	2. Any requests by Scottish Government to decommission any work streams will be fully considered by the Executive Team, considering education and training impacts, as well as staffing and financial implications	Ongoing
3. Maintain clarity in relation to NES's role and influence - through regular engagement with SG sponsor team, and relevant executive director groups, including SAMD, SEND, DoFs and HRDs.	Effective - Minutes of meetings.	3. NES will be involved in discussions with SG policy teams, the Sponsorship Team and NHS Health. Finance to determine what existing non-recurrent funding can be moved to the NES baseline and how outcomes can be shaped to fit with any revised baseline. Update June 2024 - SG have set up deliverable workshops in May and June with policy and finance teams with NES to discuss the move of non-recurring funding to baseline. Transfers to baseline will be confirmed in our allocation letter during the year. Update August 2024 - Allocation letter received in July 2024 confirmed that £103m of funding will be moved from non-recurrent to baseline during 2024/25. That letter also confirmed 81% of expected allocations for 2024/25. Update Sept 2024 - Letter from Cabinet Secretary to Parliament Finance Committee reviewed to determine any potential implications for NES and these have been assessed as minimal at present. Update Dec 2024 - Further mitigation provided following Deliverable Workshops with SG policy teams, which indicated further conversions to recurrent funding in future years. Update June 2025 - Significant amount £113M already moved to baseline with discussions ongoing for further transfers. Update Sept 2025 - Further discussions to take place later in the year.	Ongoing
4. Chief Executive and NES Directors maintain links with other UK organisations	Effective - Outcomes of meetings recorded.		
5. Executive Team actively and regularly consider risk in extending posts and in converting posts to permanent. Funding is carefully considered as part of these decisions	Effective - recorded in minutes.		

STRATEGIC RISK 3

Risk no:	**SR3**		
Risk Short Title:	Failure to recruit and retain sufficiently experienced and knowledgeable people to the Board, Executive Team and senior management establishment		
Risk Owner:	Karen Reid	**Date Added to Register:**	**19/04/2023**
		Review Date:	**28/12/2025**
		Frequency of Review:	**Quarterly**
		Committee/Group overseeing	**Staff Governance Committee**
Risk Category(s)	People/Workforce		
Risk impacts on NES Strategy Key Area of Focus :			

Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
03/03/2025	8	Medium		Open	12-16	
03/07/2025	16	High	⇧			
29/09/2025	16	High	⇔			
	-					
	-					

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

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

Board Risk Appetite v Net Total	
Open	12-16
High	16

Existing control rating: **Acceptable**

Cause:	Effect:
NES fails to recruit and retain sufficiently experienced and knowledgeable people to the Board, Executive Team and senior management establishment due to insufficient recruitment and succession planning	This would impact the continuity of effective leadership, management and governance of NES
	Result:
	This would result in a deterioration of NES performance and credibility at all levels and would increase the risk of serious failures in governance

Control:	Effectiveness:	Actions:	Due Date:
1. NES has access to a wide pool of nationwide talent in terms of non-executive recruitment and has a robust process and a good track record for attracting high quality candidates when Board vacancies occur. 2. NES recruits executives and senior managers from across the public and private sectors to ensure a wide spread of skills and experience in its senior leadership.	Effective - Process in place including Aspiring Chair Programme. Effective - Data available from recruitment system dependent on recruitment route.	1. Succession planning exercise covering cohort of executive and senior management roles has resulted in risk rating each role based on identifying potential internal candidates within a 2 year period of being ready for the role. Internal candidates are producing development plans which they and their line manager will regularly review supported by ODLL. A second cohort of senior management roles has been identified and a further succession planning exercise will take place. Update March 2025 - Paper been developed that will go to the Executive Team in April that outlines streamlining the process with the requirements of our PRP processes and takes account of the National Succession Planning approach. The Succession Planning cycle will mean that by July 2025 we will understand the picture in relation to risk rating. Update July 2025 - The NES Succession Planning Approach for financial year 2025/2026 was approved by Executive Team on 8 April 2025. The approach will align fully with the NES Personal Review and Planning (PRP) period and appraisal systems and utilise the National Succession Planning tools within the Senior Leadership Gateway. The staged processes will result in readiness ratings for each of the roles, enabling areas of risk to be identified and mitigations to be developed by the following report in August. All information to support succession planning will be shared appropriately to support the new organisation. Update Sept 2025 - Outcome of the 2025/26 succession planning process was presented and approved by ET on 1 Sep 25.	31/12/2025
3. A programme of executive and senior manager development and succession planning is in place to make sure that those in post are given the opportunity to develop in the role, and to acquire new professional skills and experience. This includes mapping of key roles; a process to identify potential successors; work with potential successors on individual development plans.	Effective - PDP and Annual Reviews.	2. The Non-Executive Board Skills and Experience Matrix is updated on an annual basis. Update Sept 2024 - This is currently being updated. Update Dec 2024 - Annual Update completed October 2024. Update July 2025 - Following the announcement of NHS Delivery being established from 1st April 2026, changes are expected in respect of Board membership. Dissolution of the NES Board and the establishment of the new Board structure will be coordinated through the Scottish Government led project team. Update Sept 2025 - Skills matrix continues to be in place however no changes expected in the run up to NHS Delivery.	Ongoing
4. Senior leaders are encouraged to participate in a wide range of national professional networking groups to make sure they have access to best practice across the sector.	Effective - Minutes of meetings/events attended.	3. Successful appointment of Dental Director and Postgraduate Dean, effective from 1st January 2025. Recruitment process for Director of People and Culture Vacancy in progress. Update Dec 2024 - Recruitment process for Director of People and Culture vacancy to commence 13/01/2025. Update March 2025 - Targeted head hunting for Director of People and Culture ongoing. Update May 2025 - Round 2 of recruitment process for Director of People and Culture progressing. Update June 2025 - Successful appointment of Director of People and Culture with confirmed start date 1st Sept 2025 Update Sept 2025 - Action Closed - Director of People and Culture now in post.	Closed
5. The non-executive director membership of the Board and the Co-opted membership of the Board Committees, reflects the correct skills and experience required to govern the organisation.	Effective - The Non-Executive Board Skills and Experience Matrix		
6. Members are Co-Opted annually to cover and any skills and experience gaps on the EQC and the TIC	Effective - ToR's, membership, committee annual reports and minutes of meetings.		

STRATEGIC RISK 4

Risk no:	**SR4**		
Risk Short Title:	NES staff become disengaged		
Risk Owner:	Karen Reid	**Date Added to Register:**	**19/04/2023**
		Review Date:	**28/12/2025**
		Frequency of Review:	**Quarterly**
		Committee/Group overseeing	**Staff Governance Committee**
Risk Category(s)	People/Workforce		
Risk impacts on NES Strategy Key Area of Focus :			

Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
03/03/2025	6	Medium		Open	12-16	
03/07/2025	12	High	⇧			
29/09/2025	12	High	⇔			
	-					
	-					

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

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

Board Risk Appetite v Net Total	
Open	12-16
High	12

Existing control rating:	**Effective**

Cause:	**Effect:**
NES does not adequately engage with its employees, or does not adequately provide for its wellbeing and pastoral care of staff and trainees for whom we have responsibility for.	There could be a breakdown in understanding of the roles that employees play and the contributions that are expected of them in the delivery of the Strategic Plan and the individual Directorate Operational Plans
	Result:
	That could result in a significant deterioration in NES' ability to deliver on those plans

Control:	Effectiveness:	Actions:	Date Due:
1 - Strong partnership working arrangements in place and maintained through regular contact with the Employee Director and via the Change Management Programme Board.	Effective - Minutes of Partnership Forum and Change Management Programme Board.	1. iMatter action plans by iMatter Teams are completed and submitted annually. Update Sept 2024 - This year our response rate was 87% (88% in 2023) and our Employee Engagement Index (EEI) score was 84 (85 in 2023). There were 213 iMatter teams included this year and 185 also submitted an action plan which is an improvement on last year (172 of 207 teams). Update Dec 2024 - The overall response rate and EEI remained consistently high for NES compared to the 2023 survey results. Our EEI continues to also be the highest across NHS Scotland. Update July 2025 - This year our rate was 90% that is up from 87% last year and our EEI score has stayed the same, Action Plans to be completed by end of August 2025. Update Sept 2025 - Action plan completion rate is 90%	Ongoing Yearly Submission
2 - Communication plan to be a key focus on all organisational change projects.	Effective - Plan approval route recorded in minutes.	2. Continue to monitor attendance at monthly directorate townhalls/webinars. Update Sept 2024 - Attendance figures for last 3 webinars - 468,433,434. Q&A's from all sessions are shared with all NES staff by NES Comms Team. Update Nov 2024 - 83 attended Sept Sustainability Webinar and 126 attended Speak Up Week Oct Webinar. Update March 2025 - 358 attended Christmas Webinar (Dec 2024) and 306 attended AI Webinar (March 2025). Update July 2025 - 531 & 414 attended the Westport Relocation Webinars (April 2025), 461 attended Finance/Future Priorities Webinar (April 2025), 367 attended the Transformation update (May 2025) and 182 attended the Health Inequalities Webinar (June 2025). 872 staff attended the June 2025 CEO Briefing re NHS Delivery and 336 attended the CEO Drop in Session in June 2025. Update Sept 2025 - 296 attended the August Strategic Collaboration Webinar and between 379 and 474 attended the CEO Drop in Sessions that were held in July, August and September 2025.	Ongoing
3 - Strong focus on communication and visibility, both at a corporate and directorate level through, for example, monthly directorate townhalls and executive led webinars enabling 2 way participation.	Effective - Townhalls, webinars and talking heads.	3. Increase all staff communications via intranet. Update July 2025 - Staff communications have increased following the NHS Delivery announcement. Weekly CEO drop-ins update staff and gather feedback, while ET Roadshows across NES sites will provide insights to inform decisions. Update Sept 2025 - Frequent staff communications continue through webinars, emails, drop in sessions and ET on the road sessions, with good uptake from staff.	Ongoing Ongoing
4 - Strong focus on support to line managers through the line managers network. 5 - Organisational priority to complete team action plans resulting from annual iMatter NHS Scotland employee survey exercise.	Effective - Line Managers Handbook - and Line Managers Network Effective - Action Plans recorded and progress reported to Board and Governance Committees and recorded in minutes.	5. Maintain focus through Operational Planning on reasonable expectations of staff in a constrained fiscal environment. Update March 2025 - Ongoing Action Update July 2025 - Focus on expectations now maintained on both fiscal and the uncertain environment. Update Sept 2025 - Operational Planning Guidance for 2026/27 provides clear and consistent messages for staff to support their planning process.	Ongoing
6 - Wellbeing Matters Hub launched on 22 March 2024. This is a one-stop shop for health and wellbeing. The Hub is hosted on TURAS and provides resources offering information, practical tools, and top tips around the four pillars of wellbeing: healthy work, healthy mind, healthy life, and healthy body. 7 - NES biannual inclusion survey to include communication measure.	Effective - Monthly all staff communications informing staff of any changes and future events/resources. Effective - Results of survey shared with ET and Staff Governance Committee and action plans implement including the Anti Racism Plan.	6. ET, SIG and SOLG Development Days scheduled for November 2024 and February 2025. Update Dec 2024 - November session taken place, feedback and outcomes of session to be discussed at ET in January 2025. Update March 2025 - Planning session been undertaken and next development session scheduled April 2025. Update July 2025 - Further session taken place on 27th June 2025, with positive feedback received from attendees. Next session scheduled 29th August 2025. Update Sept 2025 - ET, SIG and SOLG development sessions continue to be delivered regularly with continuing positive feedback from attendees. 7. CEO staff drop in session webinars been established for all staff and regular Employee Director surgeries. Update Sept - Regular CEO staff drop in sessions and Employee Director surgeries continue to be facilitated with positive attendance and feedback.	31/12/2025 31/12/205

STRATEGIC RISK 5

Risk no:	**SR5**		
Risk Short Title:	NES does not establish and maintain adequate corporate infrastructure to support the Transformation Route Map.		
Risk Owner:	Karen Reid	**Date Added to Register:**	**19/04/2023**
		Review Date:	**28/12/2025**
		Frequency of Review:	**Quarterly**
		Committee/Group overseeing	**Planning & Performance Committee**
Risk Category(s)	People/Workforce	Reputational	
Risk impacts on NES Strategy Key Area of Focus :			

Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
03/03/2025	9	Medium		Open	12-16	
03/07/2025	12	High	⇧			
29/09/2025	12	High	⇔			
	-					
	-					

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

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

Board Risk Appetite v Net Total	
Open	**12-16**
High	**12**

Existing control rating: **Effective**

Cause:	**Effect:**
NES does not have in place a corporate infrastructure to support business processes in relation to the improvement programme including HR, Finance and the PMO. This includes not having the right number of people, suitably skilled, as well as having the right systems and other resources to drive improvements in transformation and best value.	NES might not adequately deliver the aims of its own Strategic Plan or the external commissions agreed with the Scottish Government
	Result:
	This could result in NES having insufficient corporate infrastructure staff to support delivery of the AOP, Transformation Activity and potential efficiency savings. Resulting in reputational damage and impact on stakeholder engagement.

Control:	Effectiveness:	Actions:	Due Date:
1. Workforce Planning takes place alongside AOP processes so that resourcing can be aligned on an annual basis. 2. In year changes to resourcing are made in alignment with in year consideration of new projects through the Corporate Radar process.	Effective - Recorded in AOP documentation. Effective - Corporate Radar projects considered at ET and recorded in minutes.	1. Ongoing Process with Corporate Radar	Ongoing
3. Post prioritisation process considers requirements of Transformation Projects.	Effective - Issues associated with funding posts required to deliver the AOP/Corporate Radar projects discussed at ET and outcomes recorded in minutes.	2. Digital Prioritisation Process - ensuring capacity is aligned to requirements. Update July 2025 - Capacity review of NTS requested by CEO being undertaken with a view to completion mid July 2025. Update Sept 2025 - Digital Prioritisation Process complete, some areas of delivery risk identified and being actively managed. Regular reporting of delivery progress to Executive Team established.	Ongoing
4. Recruitment authorisation and other recruitment processes strengthened with the aim of achieving a more efficient, risk-based approach reducing time across NES and, all things being equal, reducing the time to recruit new staff.	Effective - ET sub group in place with timely homogeneous and communication of decisions.	3. Implement accelerated recruitment process as approved by ET 13/08/2024 (exception ET roles) In October 2024 and in Jan 2025 carry out a 3 months post implementation evaluation for update to the ET. Update March 2025 - An initial evaluation of the Accelerated Recruitment process has been conducted to provide insights into the experiences of Hiring Managers. The average timescale of business case to job advertisement has reduced from 45 to 15 days with positive feedback being received from Directorates. A further in depth analysis is planned for April 2025. Update July 2025 - An in-depth analysis will now take place in October 2025 to allow a full calendar year of data to be analysed. East Region and NES meet frequently to discuss the recruitment data such as Time to Hire.	31/12/2025
5. Ongoing discussions with Scottish Government regarding commissioned activity and the baselining of non-recurrent allocations where appropriate. Corporate process to ensure centralised view of new commissions and impact on infrastructure in place .	Effective - Corporate Radar in place and deliverable agreements with SG.	4. NES responds to establishment of NHS Delivery stood up with identification of Project Lead and key support roles. Engagement in delivery established through Scottish Government led Project Team. Internal governance approach for NES critical areas being developed with view to establishment from August 2025. Update Sept 2025 - Internal Governance arrangements established with Programme Board meeting monthly in addition weekly updates provided to the Executive Team.	31/12/2025
6. Temporary expanded resources to support PMO and corporate improvement through Project Based Development Opportunities.	Effective - Register of all applicants held.	5. CIP Governance arrangements reviewed in light of programme maturity and Transformation Group disestablished. Reporting through ET, SIG and SOLG as appropriate will ensure robust scrutiny and successful implementation.	31/12/2025

STRATEGIC RISK 6

Risk no:	**SR6**		
Risk Short Title:	Failure to develop and maintain adequate Business Continuity arrangements to deal with the risk of adverse events and threats		
Risk Owner:	Christopher Wroath	**Date Added to Register:**	**19/04/2023**
		Review Date:	**30/12/2025**
		Frequency of Review:	**Quarterly**
		Committee/Group overseeing	**Planning & Performance Committee**
Risk Category(s)	Governance	Operational	
Risk impacts on NES Strategy Key Area of Focus :			

Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
03/03/2025	**9**	**Medium**		**Averse**	**1-5**	
13/06/2025	**9**	**Medium**	⇔			
01/10/2025	**9**	**Medium**	⇔			
	-					
	-					

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

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

Board Risk Appetite v Net Total	
Averse	**1-5**
Medium	**9**

Existing control rating: **Acceptable**

Cause:	**Effect:**
NES does not put in place and maintain adequate Business Continuity arrangements to deal with the risk of adverse events and threats, both internal and external threats, e.g. national or global pandemics, power supply outages, and other events	There may be an inability to deliver normal levels of service, or even an inability to deliver services at all in extreme circumstances.
	Result:
	This could result in failure to achieve strategic outcomes.

Control:	Effectiveness:	Actions:	Due Date:
1. Disaster Recovery Plan and Business Continuity Plans have been approved by the Executive Team.	Effective - approval recorded in minutes.	1. Evidence of a cloud data recovery to be presented to the NES Assurance Forum Update Oct 2025 - External consultancy has been engaged to catalogue the NES network architecture and associated hypercloud. Report is expected at end of Oct 2025, work on the associated workplan will be completed by the end of November 2025.	31/12/2025
2. The plans were robustly tested in a desktop exercise and recommendations were considered by the ET and incorporated into the current version of the plans.	Effective - Exercise formally documented and recorded in minutes.		
3. NTS have agreed to an internal audit on BCP on an emphasis on disaster recovery on cloud data, audit to commence September 2024.	Effective - Audit presented to ARC and documented in minutes		

STRATEGIC RISK 7

Risk no:	**SR7**		
Risk Short Title:	Failure to put in place measures to adequately protect against breaches of cyber security		
Risk Owner:	Christopher Wroath	**Date Added to Register:**	**19/04/2023**
		Review Date:	**30/12/2025**
		Frequency of Review:	**Quarterly**
		Committee/Group overseeing	**Planning & Performance Committee**
Risk Category(s)	Governance	Operational	
Risk impacts on NES Strategy Key Area of Focus :			

Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
03/03/2025	**15**	**High**		**Averse**	**1-5**	
13/06/2025	**15**	**High**	⇔			
01/10/2025	**15**	**High**	⇔			
	-					
	-					

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

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

Board Risk Appetite v Net Total	
Averse	**1-5**
High	**15**

Existing control rating: **Acceptable**

Cause:	**Effect:**
NES does not put in place measures to adequately protect itself against breaches of cyber security	This could lead to unauthorised access to NES digital systems and data
	Result:
	This could significantly affect our ability to continue normal business operations and would risk reputational damage and the imposition of punitive financial fines by regulatory authorities

Control:	Effctiveness:	Actions:	Due Date:
1. Digital team ensures firewall logs, including changes to the firewall rule base, are added to the (Security Information and Event Management) SIEM tool in use and continue to be monitored frequently	Effective - The standard build for end user Windows devices and servers has been documented in the Windows 10 Endpoint Security Standards and in the VMWare tool for servers.	1. Continue to use the NIS Audit framework to manage and build on NES' cyber security posture. - Ongoing Update June 2025 - Action Complete and added as a control.	Closed
2. Senior Management and Executive level involvement and oversight of Cyber security related risk through updates in the Technology and Information Committee and Audit & Risk Committee meetings and through the NES Assurance Group.	Effective - Minutes of NES Assurance Group shared with TIC and ARC.	2. Review our early adopter status for the NHSS Security Operations Centre (Dundee). Update Sept 2024 - In progress Update Dec 2024 - In progress Update June 2025 - In progress Update Oct 2025 - In progress - Engagement with Cyber Centre of Excellence (CCoE) and adoption of services is ongoing in line with CCoE service capacity and strategic roadmap. NES cyber security attend monthly CCoE operational steering group meetings	31/12/2025
3. Staff awareness of Cyber security matters is raised through information security webinars provided by the Information Security Manager, which includes phishing emails and security regarding the use of public Wi-fi, reporting security breaches and determining key NES contacts, password guidance, information / data management under GDPR as well as analysing key current trends in Cybercrime.	Effective - Attendance numbers available/ number of security breaches recorded and reported to NES Assurance Group and TIC and minuted.	3. Comprehensive NES Cyber position completed and NTS Director accepted recommendations and associated action plan being developed with delivery by end of July. Update Oct 2025 - Delivery of plan extended to end of October 2025.	31/12/2025
4. NIS Audit framework used to manage and build on NES' cyber security posture.	Effective - Compliance minuted.		

STRATEGIC RISK 8

Risk no:	**SR8**		
Risk Short Title:	Failure to put sufficient employee training and other operational controls in place to minimise the risk of breaches of Information Governance		
Risk Owner:	Christopher Wroath	**Date Added to Register:**	**19/04/2023**
		Review Date:	**30/12/2025**
		Frequency of Review:	**Quarterly**
		Committee/Group overseeing	**Planning & Performance Committee**
Risk Category(s)	Operational	Reputational	Governance
Risk impacts on NES Strategy Key Area of Focus :			

Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
03/03/2025	8	Medium		Open	12-16	
13/06/2025	8	Medium	⇔			
01/10/2025	8	Medium	⇔			
	-					
	-					

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

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

Board Risk Appetite v Net Total	
Open	**12-16**
Medium	**8**

Existing control rating: **Effective**

Cause:	Effect:
NES does not put sufficient employee training and other operational controls in place to minimise the risk of breaches of Information Governance	There could be instances of significant loss of data
	Result: This could result in serious reputational damage and the imposition of punitive financial fines by regulatory authorities.

Control:	Effectiveness:	Actions:	Due Date:
1. Statutory and relevant data security processes in place, with specific reference to the new General Data Protection Regulations.	Effective - Processes approved and recorded in minutes		
2. Specific additional policies, procedures and practices (based on ISO27001) have been put in place to ensure robust security applies to the TURAS platform and the being developed National Digital Platform.	Effective - Policies and procedures approved and recorded in minutes.		
3. Whistleblowing arrangements are in place with information and resources available to staff via the Intranet including Whistleblowing standards, policy and process. These resources include reference to whistleblowing in relation to loss or misuse of data and are part of the essential learning programme for all NES employees.	Effective - Whistleblowing Annual Report presented to governance committees and board and recorded in minutes.		
4. Safe Information Handling features as an element of the NES essential learning programme.	Effective - Executive Team regularly review compliance which is minuted.		

STRATEGIC RISK 9

Risk no:	**SR9**		
Risk Short Title:	NES does not put sufficient measures in place to address ongoing cost and funding pressures leading to misalignment with Scottish Government priorities and expectations.		
Risk Owner:	Jim Boyle	**Date Added to Register:**	**19/04/2023**
		Review Date:	**11/12/2025**
		Frequency of Review:	**Quarterly**
		Committee/Group overseeing	**NES Board**
Risk Category(s)	Finance		
Risk impacts on NES Strategy Key Area of Focus :			

Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
04/03/2025	8	Medium		Averse	1-5	
06/06/2025	12	High	⇧			
12/09/2025	8	Medium	⇩			
	-					
	-					

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

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

Board Risk Appetite v Net Total	
Averse	**1-5**
Medium	**8**

Existing control rating: **Acceptable**

Cause:	Effect:
NES does not put sufficient measures in place to address ongoing cost and funding pressures as well as a high level of non-recurrent funding from SG	NES will experience financial constraints and will risk the inability to set sustainable financial plans and to take remedial actions necessary to remain in financial balance
	Result:
	This could then result in failure to meet the aspirations set out in the Strategic Plan as well as having an increased risk of not being able to control the finances of NES

Control:	Effectiveness:	Actions:	Due Date:
1. The Annual Operational Planning process within NES gives Directorates indicative budgets to plan their own activities and expenditure and identifies cost pressures and potential savings across NES.	Effective - AOP process in place. Lesson learned logged and actioned. AOP reported to NES Board	1. The financial implications of any requests to decommission specific activities, or to reduce funding generally will be fully explored, with the financial, staffing and service impacts fully set out	Ongoing
2. The Senior Operational Leadership Group, chaired by the Director of Planning reviews budget submissions from across NES to ensure congruence, no duplication and identify opportunities for collaboration and efficiency savings. 3. Prioritisation process in place to deliver a balanced budget to the Board which is based on the impact of the planned activities.	Effective - recorded in minutes. Effective - decisions recorded in ET minutes.	2. The Operational Planning process for 2025/26 will have a significantly sharpened focus on the achievement of savings, as required by the SG's Sustainability & Value programme, and with the increasing likelihood of reductions to baseline funding. Update Dec 2024 - Directorate reviews completed in process of consolidating report to present to December 2024 ET and subsequently to January 2025 ARC. Update March 2025 - Report also presented to Private Board 6th February 2025. Annual Delivery Plan and Financial Plan to be presented to 27th March 2025 NES Board for approval. Update June 2025 - Financial Plan including savings plan has been approved by the NES Board. Update Sept 2025 - Action Closed	Closed
4. NES Board considers measures and makes approvals to balance the annual budget, including the measures suggested by the ET to reach a balanced position.	Effective - recorded in Board minutes.	3. NES are working with SG to identify how baseline and additional commission activity can be modelled to match reduced funding availability.	Ongoing
5. Close working with SG to address the underlying deficit resulting from the expansion of TGs and uplifts that have been less than cost pressures in this area. SG have agreed to underwrite the in-year deficit position on MTG's.	Effective - recorded in minutes	4. Implications and risks of reducing activity will be set out for SG to allow decisions to be taken in the full knowledge of their impact to the wider NHS in Scotland. Update June 2024 - Discussions taken place about sharing NES spending reduction plans at an earlier stage with Scottish Government colleagues. Update Dec 2024 - Discussion will take place with SG in January 2025. Update March 2025 - Discussion ongoing with Scottish Government. Update June 2025 - Action closed with restoration of baseline funding.	Closed
6. Letter been sent to all staff from CEO directing suspension of discretionary spending where possible. 7. Twelve million of baseline reduction from 2024/25 will now be reinstated.	Effective - recorded Effective - recorded	5. Close contact with Scottish Government concerning the costs in regard to the short term relocation from Westport. Discussions include the Scottish Government Digital Health and Social Care finance team. Update Sept 2025 - Ongoing discussions with Scottish Government and exploring options with third parties for the delivery of education and training post July 2026. 6. Finance Workstream for NHS Delivery will bring together the financial plans for both organisations and part of the planning process for this financial year to ensure a balanced plan over the 3year planning period.	31/12/2025 31/12/2025

STRATEGIC RISK 10

Risk no:	**SR10**		
Risk Short Title:	Failure to adequately anticipate and mitigate the impacts of policy, legislative, economic, technological and societal change		
Risk Owner:	Karen Reid	**Date Added to Register:**	**19/04/2023**
		Review Date:	**28/12/2025**
		Frequency of Review:	**Quarterly**
		Committee/Group overseeing	**Planning & Performance Committee**
Risk Category(s)	Strategic		
Risk impacts on NES Strategy Key Area of Focus :			

Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
03/03/2025	12	High		Open	12-16	
07/07/2025	16	High	⇧			
29/09/2025	16	High	⇔			
	-					
	-					

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

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

Board Risk Appetite v Net Total	
Open	**12-16**
High	**16**

Existing control rating: **Acceptable**

Cause:	Effect:
NES is not able to adequately anticipate and mitigate the impacts of policy, legislative, economic, technological and societal change	We may be unable to attract, educate and train sufficient workforce supply, across the health and social care workforce, and in particular trainees and employees in specialist professional disciplines
	Result:
	This could result in a compromise in our ability to deliver on our Strategic Plan or significant parts of it, or to deliver Directorate Operational Plans

Control:	Effectiveness:	Actions:	Due Date:
1. There are many regular engagements with a wide range of stakeholders - governmental, professional, peer Boards - to ensure that NES is aware of changes to policy, demographic trends, technological change, which will feed into the NES Strategic Plan	Effective - NES Strategic Plan approval route minuted, minutes of meetings.	1. Significant Engagement with Health Boards, Health & Social Care Partnerships, Scottish Government, Social Care Sector and Academia.	Ongoing
2. Scottish Government Priorities are fully discussed with the NES/SG Sponsorship Team and are then incorporated into the Annual Delivery Plans that drive the core activity of the Board	Effective - Annual Delivery Plans approval route minuted and minutes of meeting	2. Ongoing SG discussions on fiscal impact on NES ADP.	Ongoing
3. Monitoring of Strategic Risk 2 in relation to funding in current fiscal and political environment.	Effective - Review of Strategic Risk Log minuted.	3. Policy Parliamentary Team within NES meets regularly with Scottish Government. 4. Strengthening financial reporting to be implemented.	Ongoing
4. Parliamentary Horizon Report - issued to all Executive Team and NES Board.	Effective - Issued weekly and outputs provided to Executive Team and recorded	5. Quarterly UK Four Nations Meetings - actions from meetings progressed by NES Chief Executive, Director of NMAHP and Executive Medical Director.	Ongoing
5. Engagement with four nations to pick up national issues that may impact NES or the Scottish context.	Effective - Attendance at four nations working groups minuted.	6. Record of funding proposals that are not taken forward by Scottish Government to be developed. 7. NES response to establishment of NHS Delivery stood up with identification of Project Lead and key support roles. Engagement in delivery established through Scottish Government led Project Team. Internal governance approach for NES critical areas being developed with view to establishment from August 2025. Update Sept 2025 - Internal Governance arrangements established with Programme Board meeting monthly in addition weekly updates provided to the Executive Team.	31/12/2025 31/12/2025

STRATEGIC RISK 11

Risk no:	**SR11**		
Risk Short Title:	Poor learning outcomes and learning experience for our stakeholders		
Risk Owner:	Karen Wilson	**Date Added to Register:**	**19/04/2023**
		Review Date:	**09/02/2026**
		Frequency of Review:	**Quarterly**
		Committee/Group overseeing	**Education & Quality Committee**
Risk Category(s)	Operational	Reputational	
Risk impacts on NES Strategy Key Area of Focus :			

Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
03/03/2025	9	Medium		Open	12-16	
03/06/2025	12	High	⇧			
11/09/2025	12	High	⇔			
11/11/2025	20	Very High	⇧			
	-					

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

Net Impact (1-5)	Net Likelihood (1-5)
4	5
Net Total:	**20**

Board Risk Appetite v Net Total	
Open	**12-16**
Very High	**20**

Existing control rating: **Acceptable**

Cause:	**Effect:**
NES delivers poor learning outcomes or a poor quality learning experience to our stakeholders, or if we are inflexible in evolving the methods of delivery of training and education. Uncertainty of timing of move out of Westport and the impact this would have on access and quality of training facilities.	This could lead to the Health and Social Care workforce not having the necessary knowledge and skills to deliver good quality care
	Result:
	This could result in NES becoming disconnected from the needs of the wider workforce and failing to meet the needs of staff, trainees, learners and stakeholders, leading to serious reputational damage and reassessment of the Board's role in delivering education and training

Control:	Effectiveness:	Actions:	Due Date:
1. Chief Executive and/or NES Directors maintain open and collaborative relationships/arrangements with counterparts in partner organisations	Effective - Minutes and reports available for meetings and presentations minuted and available.	1. Learning and Education Framework being developed. Update June 2024 - Pilot Framework launched May 2024 - action to remain open until feedback received and final version published. Update Sept 2024 - Feedback received and being considered, expected final version to be published Nov 2024. Update Dec 2024 - Framework finalised awaiting implementation. Update Feb 2025 - Framework to be implemented in April/May 2025. Update June 2025 - Framework now implemented - Action Closed and added as a control.	Closed
2. Ensure Chair is well briefed to manage relationships with other Board/organisational Chairs	Effective - Report presented to every NES Board public meeting.	2. Implement a corporate improvement programme to support high quality learning and education provision through the Learning & Education Quality System (LEQS). Update March 2024 - All groups progressing within project timelines. Update June 2024 - Continuing to progress within project timelines. Update Sept 2024 - Continuing to progress within project timelines and significant improvement in KPI data for reporting. Update Dec 2024 - Moving into implementation stage using a Blueprint approach. Developing set of core questions to ask learners feedback questions that will be applied to all NES products. Update March 2025 - Testing methodology being developed. Update June 2025 - Elements of LEQS being tested prior to implementation. Update Sept 2025 - Three and 6 six month forward plans have been approved and work is progressing at pace.	31/12/2025
3. Parliamentary monitoring service provides daily briefing to NES Executives and senior managers. Board papers and minutes made available on NES corporate website. Discussions about pressures and national developments at ET are communicated to staff through regular staff video and Intranet updates	Effective - Briefings available, ET minutes and Q&As from webinars and other staff events.	3. Implementation of the Learning & Education Quality Policy. Update June 2025 - Summary version of policy in development for awareness raising. Update Sept 2025 - Summary version in development and will form part of Communications Plan for LEQS implementation.	31/12/2025
4. Education Governance arrangements in place to ensure quality and performance is monitored and improved where necessary. 5. Widespread evaluation of education programmes, including the use of feedback from learners to effect improvement.	Effective - Considered at EQC regularly and minuted. Effective - Reported through Strategic KPIs when fully developed. Feedback received as part of Stakeholder Survey.	4. Operational Group and Gold Command established to oversee any required moves. Active scoping of alternative training venues being undertaken. Update Sept 2025 - Active scoping continuing and established group overseeing required moves.	31/12/2025
6. Clinical Care Sub Group established. 7. Learning and Education Framework implemented.	Effective - Meetings minuted and reports into EQC Not Tested	5. Establishment of NES Project Management Team to coordinate the programming on venuing activity in regard to Westport move.	31/12/2025

STRATEGIC RISK 12

Risk no:	**SR12**		
Risk Short Title:	Insufficient investment in Digital Learning and Infrastructure Programme and other NES learning platforms.		
Risk Owner:	Christopher Wroath	**Date Added to Register:**	**19/04/2023**
		Review Date:	**30/12/2025**
		Frequency of Review:	**Quarterly**
		Committee/Group overseeing	**Planning & Performance Committee**
Risk Category(s)	Operational	Reputational	
Risk impacts on NES Strategy Key Area of Focus :			

Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
08/04/2025	15	High		Open	12-16	
13/06/2025	15	High	⇔			
01/10/2025	15	High	⇔			
	-					
	-					

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

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

Board Risk Appetite v Net Total	
Open	**12-16**
High	**15**

Existing control rating: **Acceptable**

Cause:	Effect:
NES do not sufficiently invest in technology that supports learning outcomes including the Digital Learning and Infrastructure learning platform as well as other learning platforms provided by NES.	This would lead to the NES being unable to meet the learning needs and expectations of all stakeholders
	Result: This could result in NES becoming disconnected from the needs of the wider workforce and failing to meet the needs of staff, trainees, learners and stakeholders, leading to serious reputational damage and reassessment of the Board's role in delivering education and training

Control:	Effectiveness:	Actions:	Due Date:
1. A significant amount of time and resource is invested to establish the learning needs of a very wide stakeholder group	Controlled - Fully documented.	1. Transformational Group need to agree Phase 2 outcomes of the Digital Learning and Infrastructure Programme. The Digital Learning and Infrastructure Programme Full Business Case in development. Update Sept 2024 - In development Update March 2025 - Continuing to be developed. Update Sept 2025 - The governance sign off for the Full Business Case will be by end of Feb 2026, to take account of the external review recommendation number 2, to reevaluate the technical approach of only build. External consultants are being procured to report by end of December 2025 and their recommendations will be used to rewrite the economic case before submission to the governance process in February 2026.	31/12/2025
2. Strategic case for investment has been prepared for discussion with the Scottish Government	Effective - OBC approval route recorded in minutes.	2. Discussions on going with regards to investment with NES Director of Finance and SG Health Finance Director of Finance who is supportive of the programme. Update March 2025 - Ongoing discussions between NES Director of Finance and SG Health Finance Director of Finance . Update April 2025 - NES Director of Finance has secured agreement with Scottish Government Digital Health and Social Care finance team that 2025/26 NES baseline funding will be restored to the original level and that this return of finance to the NES baseline to be used specifically to fund the Digital Learning Infrastructure Programme. Update Sept 2025 - Ongoing discussions.	Ongoing
3. In light of the standing down of the Transformation Group Programme the Executive Team have requested that the Digital Learning and Infrastructure Programme is reported to them directly as part of the Internal Governance of External Programmes.	Effective - Programme reports progress to Executive Team andminuted.	3. Programme Level Risk Deep Dive being undertaken and findings to be presented to Digital Learning Infrastructure Board. Update Sept 2025 - Action completed and no further action required from the Board.	Closed

STRATEGIC RISK 13

Risk no:	**SR13**		
Risk Short Title:	Failure to recruit and retain sufficient number of appropriately skilled and experienced staff within NES.		
Risk Owner:	Karen Reid	**Date Added to Register:**	**19/04/2023**
		Review Date:	**28/12/2025**
		Frequency of Review:	**Quarterly**
		Committee/Group overseeing	**Staff Governance Committee**
Risk Category(s)	People/Workforce		
Risk impacts on NES Strategy Key Area of Focus :			

Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
03/03/2025	8	Medium		Open	12-16	
03/07/2025	16	High	⇧			
01/10/2025	16	High	⇔			
	-					
	-					

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

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

Board Risk Appetite v Net Total	
Open	**12-16**
High	**16**

Existing control rating:	**Acceptable**

Cause:	**Effect:**
Failure to recruit sufficient number of appropriately skilled and experienced staff within NES.	NES having insufficient staff to support delivery of the AOP, Transformation Route Map and Strategic Plan
	Result:
	This could result in reputational damage and impact on stakeholder engagement.

Control:	Effectiveness:	Actions:	Due Date:
1. Monitoring and continuously improving job packs to ensure they attract an appropriate number of high quality candidates.	Effective - Job packs available on intranet, evaluation scheduled April 2025. Data available from ERRS.	1. Work with Higher/Further Education establishments in Scotland, in addition to targeted Third Sector and related bodies to support greater apprenticeship opportunities and related early career routes. Update July 2025 - Initial efforts are concentrated on current staff, particularly exploring digital modern apprenticeships. We have been working closely with NHS Scotland Academy team, who have shared their expertise and supported various aspects of this initiative. The first apprenticeship opportunity is scheduled to launch in Q2 2025, via an internal selection process. The recruitment phase of the project, which will require close collaboration with HR, is planned to commence in Q3. Update Oct 2025 - Following an application process early October 2025, 20 digital apprentices have now successfully been identified and informed that they will be starting their supported learning in November 2025. We aim to expand this to 30 apprentices, adding a further 10 before December 2025, subject to interest.	Ongoing
2. Monitoring and continuously improving recruitment routes eg career sites, social media to ensure they attract an appropriate number of high quality candidates.	Effective - Accelerated Recruitment Programme. Wider use of corporate social media, targeted professional networks, alternative job posting platforms.	2. The Armed Forces Talent Programme (AFTP) team will continue to engage, influence and deliver in support of the territorial and national board efforts to attract more talent from the Armed Forces Community (AFC).	Ongoing
3. Monitoring our workforce data to identify actions to improve the diversity of the workforce.	Effective - Annual workforce E&D report published and presented to Board and Governance Committees and recorded in minutes.	3. The NES Equality & Human Rights Team continue to promote and offer learning opportunities to staff on ED&I, including 'conscious inclusion' sessions, anti-racism, cultural humility, promoting of learning and guidance from the business disability forum and also guidance for mitigating bias during recruitment. New EDI Strategy and action plan being produced for 2025-2029. Team completing work in relation to gender equality as part of the Equally Safe at Work accreditation programme. Update March 2025 - Progressing work on the equally safe at work accreditation programme which includes an all staff survey and focus groups with more lower paid female staff. This will inform our priorities for NES on gender equalities. NES EDI Strategy and Anit-Racism Action Plan will be presented to March Board for approval. Update July 2025 - Strategy and Plan both approved by NES Board and action plan is being implemented. Update Oct 2025 - Submitted evidence for Equally at Work accreditation, work underway to ensuring hiring managers are appropriately aware of biases in recruitment. Line manager network sessions planned on Anti-racism and Equally Safe at Work.	31/12/2025
4. Monitor and report on the composition of the NES workforce and sex/gender/ethnicity/disability pay gaps to the Board.	Effective - Annual Workforce Report presented to Board and Governance Committees and recorded in minutes.	4. Development of Talent Attraction Strategy. - Update March 2025 - Talent management approach embedded in our Succession Planning framework where we align development support through a tailored PDP for the pool of ready soon and ready now candidates. Update July 2025 - We are currently finalising the NES succession plan for ET and direct reporting roles. A plan showing a RAG status showing ready soon and ready now candidates will be concluded early August 2025. All candidates will have had an opportunity to put in place a PDP to support development if required. Update Oct 2025 - The ET approved the Succession Plan for the board on 1st September 2025. This provides an overview of potential ready soon and ready now candidates interested in applying for future key leadership and business critical post vacancies should they arise. All have individual Personal Development Plans in place that are agreed and will be monitored by their line manager. The OD&L team will review and monitor progress for the duration of this succession plan.	31/12/2025
5. Risk based decisions regarding termination of temporary staff in the event of uncertainty of funding. 6. Workforce planning is integrated in Operational Planning	Effective - Decisions recorded in ET minutes. Effective - Included in AOP documentation.	5. Workforce planning to be carried out across NES as part of the 25/26 Operational Planning process. Update March 2025 - To be discussed by Executive Team with onward submission to Scottish Government. Update July 2025 - All Directors undertaking a review of temporary staffing arrangement within their areas with a view to providing clarity for affective staff in a timely manner given the recent announcement about the future of NES. Update Oct 2025 - Business cases to stabilise the workforce position re. temporary staffing arrangements are being progressed via the normal governance route.	31/12/2025

STRATEGIC RISK 14

Risk no:	**SR14**		
Risk Short Title:	Inadequate Board governance, systems, processes and scrutiny of them.		
Risk Owner:	Karen Reid	**Date Added to Register:**	**19/04/2023**
		Review Date:	**28/12/2025**
		Frequency of Review:	**Quarterly**
		Committee/Group overseeing	**NES Board**
Risk Category(s)	Governance		
Risk impacts on NES Strategy Key Area of Focus :			

Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
03/03/2025	4	Low		Averse	1-5	
03/07/2025	6	Medium	⇧			
29/09/2025	4	Low	⇩			
	-					
	-					

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

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

Board Risk Appetite v Net Total	
Averse	**1-5**
Low	**4**

Existing control rating: **Effective**

Cause:	Effect:
NES does not put sufficient arrangements in place in relation to Board governance, systems, processes and scrutiny of them	This could lead to corporate non-compliance and failure to comply with statutory, legislative and climate emergency/sustainability requirements
	Result:
	This could result in a loss of credibility towards the Board, from the Scottish Government as well as a range of audit and scrutiny bodies, which could pose a threat to the general credibility and future of NES

Control:	Effectiveness:	Actions:	Due Date:
1. Standing committees responsible for each governance domain supported by Executive Groups.	Effective - Terms of Reference, Schedule of Business. Governance Route Flowchart, Assurance Framework.	1. Development of Blueprint Action Plan to strengthen governance. Update June 2024 - Action Plan submitted to Scottish Government and ongoing actions reported through ARC Update July 2025 - Improvement Plan delivered with 1 action carried forward into 2025/26.	Ongoing
2. Individual committees review effectiveness at every committee meeting and provides an annual report to Audit Committee detailing how it has discharged its remit.	Effective - Annual reports and minutes of meetings.	2. ET review outstanding Audit actions - quarterly	Ongoing
3. Comprehensive programme of internal audit. 4. Board Governance included as part of Corporate Induction.	Effective - Approved and recorded in minutes. Effective - Induction Attendance Records/ Participant Feedback	3. Scottish Government sign off of ADP - completed 2023/24 Update June 2024 - Verbal feedback received from Scottish Government awaiting final sign off. Update Sept 2024 - Written acceptance of ADP received from Scottish Government and presented to August 2024 Board. Update Dec 2024 - Development of 2025/26 ADP underway. Update March 2025 - Submission of final draft ADP 17/03/2025. Update July 2025 - ADP approved by SG and NES Board.	Ongoing Yearly Submission
5. An Assurance framework has been developed in line with the 'Blue Print for Governance' and the Assurance and Audit Committee Handbook . 6. Blueprint Action Plan been submitted to Scottish Government.	Effective - Approval route recorded and minuted. Effective - Approval route recorded and minuted.	4. Board Governance Training at Board Development Events Update June 2024 - Board Governance Development Event completed 19th January 2024. Update July 2025 - Ongoing programme of Board Development in place. Update Sept 2025 - Next Board Development scheduled for 23rd October 2025.	Ongoing
7. Ensure corporate awareness of relevant statutory regulatory oversight, and maintain close working with relevant professional and other regulatory bodies 8. New Planning & Performance Committee established from April 2025 that will provide further scrutiny of Board governance, systems and processes.	Effective - Annual report to EQC on compliance with statutory regulations and professional bodies requirements, recorded and minuted. Effective - Terms of Reference, Schedule of Business. Governance Route Flowchart, Assurance Framework.	5. In light of the announcement regarding the formation of NHS Delivery an interim Scheme of Delegation and then new Scheme of Delegation will be required. Development of this will be led through the Scottish Government led project team. Update Sept 2025 - Leadership & Governance Workstream led by Scottish Government will ensure the formation of appropriate Corporate Governance arrangements for the new organisation. NES continues to operate a robust programme of internal controls which have been complemented by the establishment of internal governance mechanisms surrounding the NHS Delivery project.	31/12/2025

STRATEGIC RISK 15

Risk no:	**SR15**		
Risk Short Title:	NES is not an evidence based data driven organisation, lacking intelligence and insights from its Information Assets.		
Risk Owner:	Christopher Wroath	**Date Added to Register:**	**14/12/2023**
		Review Date:	**30/12/2025**
		Frequency of Review:	**Quarterly**
		Committee/Group overseeing	**Planning & Performance Committee**
Risk Category(s)	Governance	Reputational	Strategic
Risk impacts on NES Strategy Key Area of Focus :			

Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
03/03/2025	6	Medium		Averse	1-5	
13/06/2025	6	Medium	↔			
01/10/2025	6	Medium	↔			
	-					
	-					

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

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

Board Risk Appetite v Net Total	
Averse	**1-5**
Medium	**6**

Existing control rating: **Acceptable**

Cause:	Effect:
Lack of strategic application of data quality standards. Lack of outcome focussed in our information gathering and structures.	Inefficiency and waste of resources in all aspects of NESs work in support of our strategic outcomes.
	Result:
	This could result in a loss of credibility towards NES, from the Scottish Government and scrutiny bodies, which could pose a threat to the general credibility and future of NES

Control:	Effectiveness:	Actions:	Due Date:
1. Transformation Programme is now operational. There is a specific focus from the Corporate Improvement Programme on efficiency and effectiveness of data collection, storage and management.	Effective - Meetings minuted and regular reports on progress presented and recorded at Transformation Group.	1. Development of an overt data plan as part of the Corporate Improvement Plan. Update Sept 2024 - In progress Update March 2025 - Continuing to be progressed. Update June - Action closed and superseded by Action 4	Closed
2. Plans for automation and preparation for artificial intelligence will drive new and improved data collection, storage and management.	Not Tested	2. Planned rollout of CoPilot to all NES staff on completion of the pilot. Update Dec 2024 - Pilot completed and report developed, planned rollout unable to commence until M365 contract renegotiation is completed - expected completion May 2025 Update June 2025 - As a result of the contract NES have 350 licences and Director of NTS in discussions with ET on how to deploy them. Update Sept 2025 - The process control and rollout of CoPilot now sits with the OL&ED Head of Programme - Created new DPIA for rollout for CoPilot, created allocation criteria and documentation to support managers in identifying staff who will benefit with CoPilot licence. 6th October 240 licenses to be issued and training provided by WMReply. Ongoing evaluations will be undertaken during implementation.	31/12/2025
3. Outcome of the pilot of the M365 Copilot Application will drive intelligence and knowledge on required improvements and restructuring of all NES data and information.	Effective - recordings of outcomes minuted.	3. NTS have agreed to an internal audit on their ability to support a data driven organisation - scheduled for April 2025 Update June 2025 - Audit been agreed and will be undertaken in the next quarter. Update Sept 2025 - Information Assets and Data Management Audit scheduled for October 2025.	31/12/2025
		4. Director of NTS to develop a formal data and analytics function for NES with specific responsibility for the development of an NHS Scotland Workforce Data Observatory Update Sept 2025 - The Executive Team as of 22nd Sept 2025 agreed for planning and development of a formal NES data and analytics function to commence.	31/12/2025

STRATEGIC RISK 16

Risk no:	**SR16**		
Risk Short Title:	Inability to meet core responsibilities and objectives due to HR Performance.		
Risk Owner:	Karen Reid	**Date Added to Register:**	**03/12/2024**
		Review Date:	**28/12/2025**
		Frequency of Review:	**Quarterly**
		Committee/Group overseeing	**Staff Governance Committee**
Risk Category(s)	People/Workforce	Reputational	Finance
Risk impacts on NES Strategy Key Area of Focus :			

Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
03/03/2025	15	High		Open	12-16	
08/07/2025	12	High	⇩			
29/09/2025	9	Medium	⇩			
	-					
	-					

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

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

Board Risk Appetite v Net Total	
Open	12-16
Medium	9

Existing control rating: **Effective**

Cause:	Effect:
HR service not performing effectively.	An ineffective HR function may fail to foster a positive workplace culture or support professional development, leading to a poor experience workplace experience, lack of employee motivation and misalignment with organisational goals. Overall, this underperformance creates a gap in meeting both operational and strategic objectives. Underperformance of the HR function can lead to increased turnover, longer recruitment lead times, lower productivity, decreased employee morale, and legal risks associated with non-compliance with laws and regulations.
	Result:
	NES could fail to meet its legal and statutory requirements, as well core responsibilities such as employee engagement, retention, performance management, and wellbeing. This could result in an increased risk of employee relations issues and ultimately increased employment tribunal activity.

Control:	Effectiveness:	Actions:	Due Date:
1. Internal and external audits completed between Workforce and Finance Directorates that looked at financial and workforce data quality processes across NES. Recommendations and management actions are being reported through the audit and risk committee.	Effective - Reported at Audit & Risk Committee and minuted.	1. Recommendations and management actions from internal and external audit being progressed and reported through the Audit & Risk Committee. Update March 2025 - Ongoing progress being reported through Audit & Risk Committee Update July 2025 - Phase 1 of programme completed and Phase 2 progressing with defining roles and responsibilities and communication and engagement with placement Boards. We continue to provide regular updates to Executive Team and Audit & Risk Committee. Update Sept 2025 - Report to be presented to October Audit & Risk Committee, which sets out next steps for Phase 2 of programme and highlights activities from Phase 1 that are having a positive impact on service delivery and the value of salary of overpayments has reduced in comparison to August 2024.	31/12/2025
2. Corporate Improvement Programme on the Lead Employer Model for DDiT in place which ensures operational processes, financial and management information controls and risk management practices across NES, NHS Placement Boards and GP Practices to provide assurance that the programme is operating within the NES risk appetite.	Effective - Process in place and reported to governance groups and committees and minuted.	2. HR Transformation Programme actions progressed through project team and reported in line with governance arrangements set out in PID-. Update March 2025 - Ongoing progress being reported through Staff Governance Committee. Update July 2025 - Programme delivery is progressing well in line with intended 3/6/9 months deliverables. Update Sept 2025 - Due to progress being made programme has now been stood down and activity transferred to BAU.	Closed
3. Extensive HR Transformation Programme is underway to address the key aims of recovery, stabilisation and transformation.	Effective - Programme Board reporting to Transformation Group and to NES Board via CEO Report. Reporting to PPC will commence once established.	3. Refresh of the internal job evaluation process to ensure alignment with national job evaluation scheme. Update March 2025 - Work is ongoing, all AFC job evaluation staff have received job evaluation refresher training from the National Job Evaluation leads and new panellists have been trained by the National Job Evaluation leads to widen the pool of panellist for upcoming job evaluations. Update July 2025 - The reset Job Evaluation Policy was submitted for approval to Partnership Forum and will next be considered by Staff Governance Committee. Update Oct 2025 – The refreshed Job Evaluation Policy has been approved, policy awareness sessions have taken place and the information on the new policy and process has been shared with the line manager network.	31/12/2025
		4. Organisational change process being developed to redesign the structure of the Workforce Directorate and recruitment to vacant leadership roles (Director and Associate Director) is being progressed. Update March 2025 - Significant progress been made to realign the Workforce Directorate as part of the Exec Team Organisation Change Update July 2025 - New Director of People and Culture confirmed to start on 1st Sept 2025. Update Sept 2025 - Action Closed - Director of People and Culture now in post.	Closed
		5. Current focus is on the measurements and improvements and the impact to date. A customer pulse survey will be progressed in September. Also looking at the internal team KPIs on customer service and performance. Update Oct 2025 – Customer experience survey took place end of August, significant improvement in feedback. Further improvements identified, and ongoing feedback via local dashboards to be monitored as business as usual. 6. ET have requested a monthly Workforce report which will give measures of turnover, absence, headcount etc. Update Oct 2025 – This should be available for sharing with ET by end of October/start November	31/12/2025 31/12/2025

STRATEGIC RISK 17

Risk no:	**SR17**		
Risk Short Title:	Inability of NES to deliver its Annual Delivery Plan for 2025/26 and to sufficiently plan for the future delivery of its statutory functions due to the uncertainty and resource demands caused by the formation of NHS Delivery.		
Risk Owner:	Karen Reid	**Date Added to Register:**	**17/07/2025**
		Review Date:	**28/12/2025**
		Frequency of Review:	**Quarterly**
		Committee/Group overseeing	**NES Board**
Risk Category(s)	Strategic	Operational	Reputational
Risk impacts on NES Strategy Key Area of Focus :			

Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
21/07/2025	**16**	**High**		**Hungry**	**20-25**	
29/09/2025	**16**	**High**	⇔			
	-					
	-					
	-					

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

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

Board Risk Appetite v Net Total	
Hungry	**20-25**
High	**16**

Existing control rating:	**Acceptable**

Cause:		**Effect:**	
SG announcement of the creation of a new organisation by bringing together the functions of NES and NSS, and possibly other parts of NHSS.		Existing staff and other resources of NES are diverted to the establishment of the new organisation, with less resource available for intended delivery and future planning impeded by lack of clarity on future operational model and budget.	
		Result:	
		Potential failure to deliver on strategic and operational priorities, leading to dissatisfaction by Scottish Government and other key stakeholders as well as failure to meet the needs of the Health & Social Care Workforce.	
Control:	**Effectiveness:**	**Actions:**	**Due Date:**
Establishment of NHSD Project Delivery Team and Programme Board to co-ordinate the work needed to get the new organisation up and running by 1 April 2026. This will make the management of existing workloads more controlled.	Partially Effective - Due to control impacting positively on NHS Delivery however outwith NES control as led by Scottish Government.	NES internal Governance mechanisms to be established. Update Sept 2025 - Action complete - Internal Governance arrangements established with Programme Board meeting monthly in addition weekly updates provided to the Executive Team.	Closed
Executive Team and Board overview of existing delivery plans, and prioritisation of workplans, e.g. review of Transformation Programme	Effective - Regular reporting and recorded in minutes.	Proactive engagement in NHS Delivery Project and all associated workstreams ensuring robust representation from across NES. Update Sept 2025 - Seven workstreams now established and actively progressing with NES representation across all as well as Project Team and Programme Board.	Ongoing
Discussion of funding implications of the creation of NHSD, flagging additional resources that will be needed.	Effective - Regular reporting and consideration of resources within project planning.		
Establishment of internal NES Governance Structure to oversee transition and ensure alignment with SG led project requirements as well as enabling escalation to Planning & Performance Committee and the Board as required.	Effective - established and approved.		
Collaboration with NSS colleagues to support and inform future planning mechanisms as part of overall project.	Effective - positive relationships and working arrangements established.		

STRATEGIC RISK 18

Risk no:	**SR18**		
Risk Short Title:	NES will be unable to resource the work needed to adopt the national Business Systems Replacement Programme		
Risk Owner:	Jim Boyle	**Date Added to Register:**	**17/07/2025**
		Review Date:	**11/12/2025**
		Frequency of Review:	**Quarterly**
		Committee/Group overseeing	**Planning & Performance Committee**
Risk Category(s)	Operational	People/Workforce	Reputational
Risk impacts on NES Strategy Key Area of Focus :			

Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
23/07/2025	**12**	**High**		**Hungry**	**20-25**	
12/09/2025	**12**	**High**	⇔			
	-					
	-					
	-					

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

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

Board Risk Appetite v Net Total	
Hungry	**20-25**
High	**12**

Existing control rating: **Effective**

Cause:	Effect:
NES resources are not sufficient to prepare for the substantial re-engineering of business processes that the new systems will bring	Any realignment of existing processes and data will not be carried out to a sufficient level to be ready for the implementation of the new systems
	Result:
	Critical business systems will not be capable of being smoothly implemented on go live dates, with the risk of service failure

Control:	Effectiveness:	Actions:	Due Date:
Attendance at regular briefings by the national project team	Effective - Verbal updates provided to Executive Team and recorded in minutes.	1. Engage with NSS Programme Team and identify any backfill requirements. Funding available for backfill in the national programme plan.	31/12/2025
DoF, Technology and HRD representation on national implementation groups	Effective - Verbal updates provided to Executive Team and recorded in minutes.	2. Deputy Director of Finance co chairing the Chart of Accounts Workstream which will help to identify resource requirements as part of the programme for delivery.	31/12/2025
		3. Ongoing engagement with the programme at Director of Finance level.	31/12/2025

STRATEGIC RISK 19

Risk no:	**SR19**		
Risk Short Title:	NES unable to govern and discharge its responsibilities as Lead Employer.		
Risk Owner:	Sybil Canavan	**Date Added to Register:**	**17/07/2025**
		Review Date:	**28/12/2025**
		Frequency of Review:	**Quarterly**
		Committee/Group overseeing	**Staff Governance & Planning & Performance Committee**
Risk Category(s)	Governance	People/Workforce	Reputational
Risk impacts on NES Strategy Key Area of Focus :			

Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
17/07/2025	16	High		Averse	1-5	
29/09/2025	16	High	⇔			
	-					
	-					
	-					

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

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

Board Risk Appetite v Net Total	
Averse	**1-5**
High	**16**

Existing control rating: **Acceptable**

Cause:	**Effect:**
The lead employer model for employment of resident doctors and dentists has a governance structure where a steering group ensures that reviews and updates to process are carried out, and that disputes are brought to the steering group for resolution. The steering group is in abeyance and as a result there are a number of issues arising for NES as a lead employer and as the education body.	Fragmented governance structures, inconsistent HR and payroll practices across Boards, unclear role delineation, and lack of consistent national approaches (e.g. to overseas experience recognition). Increased uncertainty as to the roles of lead employing board and placement boards in relation to 'on behalf of' principle and how to resolve disputes.
	Result:
	Diminished ability to deliver a high-quality training experience for Scotland's future healthcare workforce. This could result in inequitable treatment of trainees, employment and training disruption, financial hardship for trainees and reputational damage for NES.

Control:	Effectiveness:	Actions:	Due Date:
Contribute to national discussions and progress NES actions from the Lead Employer Sub Group	Not Tested	1. Senior Specialist Leads to provide HR policy process updates to Training Programme Directors.	Ongoing as Required
National Lead Employer Standard Operating Procedures established and published on shared platform.	Effective - available on shared platform.	2. Monthly reconciliation of all Lead Employment data. Update Sept 2025 - Action complete process in place.	Ongoing
NES Lead Employer Group established with representation from all Directorates involved.	Effective - reports to ET and Audit & Risk Committee.	3. Mapping of Lead Employer Process. Update Sept 2025 - Action complete process in place.	Completed
Monthly reconciliation taking place between all Lead Employment systems	Effective - Reported as part of ET report and to individual placement Boards.	4. Stakeholder Analysis being undertaken. Update September 2025 - Analysis underway and expected completion date November 2025.	31/12/2025
Associate Director for HR is Chair of DDiT Systems Group and CoChair of NHMDWG	Effective -	5. National payroll system update from 01/04/2026, that will assist with issues of overpayments. 6.Paper being developed on the current issues and governance gaps on the Lead Employment Model that will include recommendation for the reestablishment of the steering group.	31/04/2026 31/12/2025

APPENDIX 3

Summary of Strategic Risks Exposure

Table 1 - Current Position - November 2025

Current Risk Exposure (Total Score)	Very High	High	Medium	Low	Total	% of Total
Strategic		3			3	15.8%
Operational	1	2	1		4	21.1%
Finance			2		2	10.5%
Reputational					0	0.0%
Governance		2	2	1	5	26.3%
Technology					0	0.0%
People/Workforce		4	1		5	26.3%
Health & Safety					0	0.0%
Enviromental Sustainability					0	0.0%
Transformation/ Innovation					0	0.0%
TOTAL EXPOSURE	1	11	6	1	19	100.0%
% of Total	5.3%	57.9%	31.6%	5.3%		

Table 2 - Last Reported Position - August 2025

Current Risk Exposure (Total Score)	Very High	High	Medium	Low	Total	% of Total
Strategic		2			2	12.5%
Operational		2	1		3	18.8%
Finance		1	1		2	12.5%
Reputational					0	0.0%
Governance		1	3		4	25.0%
Technology					0	0.0%
People/Workforce		5			5	31.3%
Health & Safety					0	0.0%
Enviromental Sustainability					0	0.0%
Transformation/ Innovation					0	0.0%
TOTAL EXPOSURE		11	5	0	16	100.0%
% of Total	0.0%	68.8%	31.3%	0.0%		

NES Risk Matrix, Scoring and Risk Categories **APPENDIX 4**

Risk Matrix and Score –

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

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

NES Scoring Definitions – Likelihood -

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

NES Scoring Definitions – Impact/Consequence –

Types of Risk	Negligible (1)	Minor (2)	Moderate (3)	Major (4)	Extreme (5)
Strategic *(Risk could impact on achievement of strategic objectives)*	• Negligible impact on achievement of strategic objectives. • No loss of confidence from key stakeholders. • Negligible impact on services.	• Minor impact on achievement of limited number of strategic objectives. • Minor loss of confidence from some key stakeholders. • Reduced ability to support some services.	• Some strategic objectives will not be achieved. • Loss of confidence from key stakeholders in specific areas. • Inability to support specific services.	• Significant proportion of strategic objectives will not be achieved. • Loss of confidence from key stakeholders in several areas. • Inability to support several services.	• Inability to deliver on strategic objectives. • Loss of confidence from key stakeholders including Scottish Government. • Inability to support service.
Financial *(Risk could impact on financial position)*	• Some adverse financial impact but not sufficient to affect the ability of the service/department to operate within its annual budget (up to £100k).	• Adverse financial impact affecting the ability of **one or more** services/ departments to operate within their annual budget (£100k – 250k).	• Significant adverse financial impact affecting the ability of **one or more** directorates to operate within their annual budget (£250k - £500k).	• Significant adverse financial impact affecting the ability of the organisation to achieve its annual financial control total (£100k-1m).	• Significant aggregated financial impact affecting the long-term financial sustainability of the organisation (£>1m).
Governance (*Risk could impact on the governance of the organisation and services)*	• Small number of potential issues affecting minor quality improvement issues. • Minor non-compliance with governance requirements	• Potential issues which can be addressed by low level of management action. • Isolated failures to meet internal standards or follow protocols.	• Challenging issues that can be addressed with appropriate action plan. • Repeated failures to meet internal standards or follow protocols.	• Mandatory improvement required to address major issues. • High level action plan is necessary. • Major failure to meet legal requirements or governance standards.	• Major governance issues leading to the threat of prosecution. • Board level action plan required. • Systematic failure to meet legal or governance standards.
Reputational (*Risk could impact on public/stakeholder trust and confidence, and affect organisation's reputation)*	• Adverse comments/feedback, no media coverage. • Little effect on staff morale.	• Adverse local media coverage – short term. • Some public embarrassment. • Minor impact on staff morale and public/political perception and confidence in the organisation	• Adverse local or social media coverage – long-term adverse publicity. • Significant effect on staff morale and public/political perception of the organisation	• Adverse national media coverage, less than 3 days. • Public/political confidence in the organisation undermined. • Use of services affected	• Adverse coverage in national/International media - more than 3 days. • MSP/MP concern (Questions in Parliament). • Court Enforcement. • Public Enquiry
Operational (*Risk could impact on the NES operations and delivery of products and services)*	• Interruption in a service which does not impact on the ability to continue to provide service.	• Short term disruption to service with minor impact on quality-of-service provision.	• Some disruption in service with unacceptable impact on service provision. • Temporary loss of ability to provide service.	• Sustained loss of service which has serious impact on delivery of services. • Major Contingency Plans invoked.	• Permanent loss of core service or facility. • Disruption to facility leading to significant "knock on" effect.
Technology *(Risk could impact on delivery of services due to technological systems/processes/development and resilience)*	• Negligible impact on delivery of services due to inadequate or deficient system/process development and performance or inadequate resilience.	• Minor impact on delivery of services due to inadequate or deficient system/process development and performance or inadequate resilience.	• Late delivery of services due to inadequate or deficient system/process development and performance or inadequate resilience.	• Failure to deliver services due to inadequate or deficient system/process development and performance or inadequate resilience.	• Non delivery of services due to inadequate or deficient system/process development and performance or inadequate resilience.
Workforce (*Risk could impact on staff wellbeing, staffing levels and competency)*	• Short term staffing issues temporarily reduces service provision and quality. • Short term staffing issues, where there is no disruption to service quality.	• Ongoing staffing issues reduce service quality. • Minor errors due to ineffective training / implementation of training.	• Late delivery of a key objective / service due to staffing issues • Moderate error due to ineffective training / implementation of training.	• Failure to meet key objective / service due to staffing issues. • Major error due to ineffective training/implementation of training.	• Non delivery of key objectives/service due to staffing issues • Loss of key/high volumes of staff. • Critical error due to ineffective training / implementation of training.
Health and Safety (*Risk could impact on staff/public/volunteer, or a patient out with delivery of care)*	• Adverse event leading to minor injury not requiring first aid. • Temporary, local disruption to operations due to health and safety issues • No staff absence	• Minor injury or illness, first aid treatment required. • Up to 3 days staff absence • Local disruption of operations for up to one week due to health and safety concerns	• Agency reportable, e.g., Police (violent and aggressive acts) • Significant injury requiring medical treatment and/or counselling. • RIDDOR over 7- day absence due to injury/dangerous occurrences • Local disruption to operations for a period of more than one week due to health and safety concerns.	• Major injuries/long term incapacity /disability (e.g., loss of limb), requiring, medical treatment and/or counselling. • RIDDOR over 7- day absence due to major injury/dangerous occurrences. • Widespread disruption to operations for a period of up to one week due to health and safety concerns.	• Incident leading to death(s) or major permanent incapacity. • RIDDOR Reportable/FAI • Widespread disruption to operations for an extended period due to health and safety concerns
Environmental Sustainability / Climate Change (*Risk could impact on environment, ability to comply with legislation/targets or environmentally sustainable care)*	• Limited damage to environment, to a minimal area of low significance. • Negligible impact on ability to comply with climate legislation/targets or ability to reach net zero.	• Minor effects on biological or physical environment. • Minor impact on ability to comply with climate legislation/targets or ability to reach net zero.	• Moderate short-term effects but not affecting eco-system. • Moderate impact on ability to comply with climate legislation/targets or ability to reach net zero.	• Serious medium term environmental effects. • Serious impact on ability to comply with climate legislation/targets or ability to reach net zero.	• Very serious long term environmental impairment of eco-system. • Critical non-compliance with climate legislation/targets or ability to reach net zero.
Transformation/Innovation (*Risk could impact on an operational/technology risk)*	• Barely noticeable reduction in scope/quality/ schedule. • Negligible impact on achievement of intended benefits.	• Minor reduction in scope/quality/ schedule. • Minor impact on achievement of intended benefits.	• Reduction in scope/quality/project/programme objectives or schedule. • Some intended benefits will not be achieved.	• Significant project/programme over-run. • Significant proportion of intended benefits will not be achieved.	• Inability to deliver project/programme objectives. • Inability to achieve sustainable transformation.

NES Risk Categories –

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

NHS Education for Scotland **NES/25/81**

Agenda Item: 8c

20 November 2025

NES Public Board

1. Title of Paper

1.1. Quarter 2 Strategic Key Performance Indicators 2025/26

2. Author(s) of Paper

2.1. Rob Coward, Principal Educator, Planning & Corporate Resources
Debbie Lewsley, Performance & Corporate Governance Manager, Planning & Corporate Resources

3. Lead Director(s)

3.1. Christina Bichan, Director of Planning, Performance and Transformation

4. Situation/Purpose of paper

4.1. The purpose of this report is to present to the Board the quarter one Strategic Key Performance Indicators (SKPIs) update for 2025/26 for review and approval.

4.2. The Board is also asked to consider and approve the proposed amendments for SKPI reporting as outlined in Section 6.7.

5. Background and Governance Route to Meeting

5.1. Delivery of the NES Strategy 2023-26 requires NES to work differently as an organisation, ensuring we focus our attention and resources on the areas where impact can be maximised and the greatest benefit for the health and social care system is generated.

5.2. Implementing the refreshed mechanism for performance management assists the Board in executing good governance, seek assurance on the measuring and monitoring of impact and the reach of NES strategic activities.

5.3. In May 2023, the NES Board approved 41 Strategic Key Performance Indicators in parallel with the NES Strategy, these were structured around the three key themes of the strategy - People, Partnership and Performance.

5.4. Board standing committees receive quarterly reports on Strategic Key Performance Indicators that relate to their remitted responsibilities. This enables an assessment of the assurance provided by the SKPI data.

5.5. The Annual Strategic Key Performance Indicators Review was completed in Quarter 2 2025/26. The findings of the review were presented to the NES Board at their October 2025 development session.

5.6. The Q2 Strategic Key Performance Indicators Report was presented to the Planning and Performance Committee for consideration and approval in advance of 10 November 2025 Board meeting.

6. Assessment/Key Issues

6.1. Overview

6.1.1. There are 41 strategic key performance indicators, spanning 52 individual metrics that form NES's reporting suite as presented in Appendix 2.

6.1.2. A summary of the RAG status for the 52 SKPI's metrics is presented in Table 1.

Table 1: SKPI RAG Status Summary – October 2025

Green	Amber	Red	Blue (Complete) (Paused)	RAG parameters to be set
30	8	2	2	10

6.1.3. Within his reporting period 60% of SKPIs have been reported with a green RAG status, this is a decrease of 3% in comparison to the last reporting period, which reflects the slight increase in the number of SKPIs reported with an amber RAG status this reporting period.

6.1.4. The number of RAG parameters still to be set can be attributed to the outstanding measurements in development. The RAG status of every reportable measurement apart from SKPI34 which had previously been paused, have now been determined.

6.1.5. At its August 2025 meeting, the NES Board approved the pausing of capturing data for SKPI22 '*Net Promoter Score for stakeholders who rate themselves likely to recommend NES to colleagues and associates*'. This

ensures that NES are not overlapping with the consultation processes relating to the formation of the new organisation. This measurement has been greyed out on the dashboard.

6.2. Q2 Reporting Overview

6.2.1. In Quarter 1 data has been recorded for 21 SKPI metrics as shown in Appendix 1. Other measures have not been updated due to their frequency of reporting meaning that they were not due in this reporting period.

6.2.2. A summary of the RAG status for the 21 SKPI's with updated performance information is presented in Table 2.

Table 2: RAG Status Summary – SKPIs reported in Q2 2025/26

Green	Amber	Red	RAG parameters to be set
13	5	2	1

6.2.3. Reporting of data of data for SKPI34 '*CO2 emissions (estates)*' had been paused due to the multiple reconfigurations to NES's office space. This measurement has now been reinstated with data reported in Q2 for the Westport office; work is ongoing to measure emissions from the other properties, and a review of agreed targets and RAG status is being conducted for Q3 reporting.

6.3. Q2 Performance Highlights for SKPI's with Green RAG Status

6.3.1. SKPI25 – '*% of Service Providers who report utilising NES provided workforce data'*.
This measurement continues to perform at 100%, with work continuing to develop the workforce planning tool, to monitor statistics and develop an evidence base for health and social care workforce planning in Scotland.

6.3.2. SKPI31 – '*Achievement of agreed savings % against annual budget'*
This measurement continues to show a green RAG status with NES enroute to meet all agreed savings plans.

6.3.3. SKPI33 – '*Benefits realisation/ROI from corporate change activities'.*
Although this measurement is showing a reduction in score, all programmes are reporting as a green RAG status for budget, schedule and benefits management adherence. The reduction can be attributed to one high performing programme closing due to completion.

6.4. Q2 Performance on SKPI's with Amber RAG Status

6.4.1. SKPI04 – '*Vacancy Rate'*
The number of advertised vacancies has continued to decrease this quarter and can be mainly attributed to the temporary arrangements review conducted in June 2025. A slight increase is projected for Q3 as business cases for recruitment progress, the ET Sub Group continues to monitor trends and assess future needs. A review of the RAG status has been completed, and the NES Board will be asked to consider a change to the RAG parameters for this measurement.

6.4.2. SKPI05 – *'Sickness Absence Rate'*
There has been a continuous increase in the sickness absence rate over the last 3 reporting periods and Q2 reporting (3.4%) marks the highest quarterly rate since December 2023. However, NES continues to perform favourably in comparison to other NHS Boards, with National and Special Boards reporting up to 9.7% and Territorial Boards between 4.4% and 7.7%. The measurement will continue to be monitored to assess whether this increase reflects a seasonal variation or signals any emerging concerns.

6.4.3. SKPI15b – *Employee Engagement Index – Dentists in Training'.*
The Vocational Training Satisfaction survey is mandatory with a 100% completion rate, the Core/Speciality survey is not mandatory, and responses have declined in recent years. Quality management visits are conducted across all training sites, and these would identify any concerns and allow for remedial action if appropriate.

6.4.4. SKPI32 – *'"% of audit actions which are completed within agreed timescale'.*
This measurement continues to report an amber RAG status due to the overdue audit actions requiring national agreement and implementation, NES are continuing to drive these actions forward with timelines updated to reflect the wide level of engagement required.

6.4.5. SKPI38 – 'Number of unplanned outages to NES systems (internal and external).
The 2 outages reported in Q2 were outwith NES's control and were in relation to the NSS National CHIXML interface due to configuration issues for SWAN. The outage times were minimal with no impact on delivery of service.

6.5. Q2 Performance on SKPI's with Red RAG Status

6.5.1. SKPI13b – *Dental Funded trainee placements – Vacancy Rate (WAS Fill rate)'.* 80% of funded posts in DCT are currently filled, historically and in 2025 this figure has fluctuated prior to the start date in September, and local recruitment has been put in place where necessary. All other programmes are 99% or 100% filled.

6.5.2. SKPI35 - '*CO2 emissions (staff and business travel)*'
Although reporting as a red RAG status CO2 emissions from travel are down compared to the previous quarter and the same quarter last year, the YTD figures are also down compared to last year. Targets for 2025/26 have now been set for this measurement and at Q2 have been exceeded. This will be monitored closely to ensure the overall annual trend continues to be downwards.

6.6. SKPI Reporting Development for Outstanding Measures

6.6.1. There are currently 9 measurements which have not yet been reported on. Work continues to develop SKPI data collection and reporting capabilities in the short-term while addressing structural challenges affecting the scope and consistency of data collection, data quality and comprehensive reporting. Progress has been made on the interim solutions for several of the measurements, the piloting of a number of data gathering processes and questionnaires that will be progressed in Q3 with the expectation of reporting data in Q4 2025/26.

6.6.2. A consistent approach to evaluation is being planned in regard to reporting for SKPI11 '% of learners that tell us their education & training will improve their practice' and SKPI12 '% of learners who score their learning experience as 80% or above' an interim technical solution is being developed with anticipated launch of approved core feedback questions in December 2025 and expectation for data to be available for Q4 2025/26 reporting.

6.6.3. SKPI16 '*Clinical Training Environment'.*
Development continues to understand current approaches to monitoring and evaluating practice-learning environment. The Practice Learning Framework has been launched, and exploration of implementation measures will be initiated in Q3 2025/26.

6.6.4. SKPI18 '*Uptake of learning products by sector as % of total reach'*.
The creation of a centralised learner record as part of the Digital Learning Infrastructure Programme will support reporting for this measurement.

6.6.5. SKPI19 '% of learners and trainees from the 20% most deprived data zones in Scotland (SIMD)' and SKPI20 '% of learners and trainees by protected characteristics as compared to population of Scotland'.
These metrics require changes to the way we collect data on learners, questions on postcodes and selected characteristics. Piloting of monitoring questions is in progress with initial reporting available in Q4 2025/26, though this is dependent on the quality of the data obtained.

6.6.6. SKPI21a *'% of learning products which include sustainability'*.
Piloting of a new commission process for new education products to enable identification of programmes and resources that address sustainability will be undertaken in Q3, with initial data on new programmes available for Q4 2025/26 reporting.

6.6.7. SKPI26 '% of health and social care workforce who report being confident in using digital ways of working'.
Work undertaken in Q1 focused on gathering data points in order to establish a baseline for future reporting on confidence and capability levels across job families. Data will be reported in Quarter 3 on the shifts in confidence levels from the baseline across the job families.

6.6.8. SKPI27 'Number of NES programmes that can demonstrate active engagement of people with lived or living experience in the development of educational resources designed to support interaction with those who use health and social care services'.
The LEQS Board has agreed that engagement with people and communities will be monitored through the application of Quality Management, Assurance and Enhancement processes with data being available in Q4 2025/26 or Q1 2026/27.

6.7. Proposed Amendments for SKPI Reporting

6.7.1. SKPI04 – *'Vacancy Rate'*. Following recommendations from the SKPI Annual Review it is proposed that the title of this measurement is changed to 'Operation to capacity threshold – posts advertised' this enhanced wording will support in clarifying what is being reported. In addition a review of the current thresholds has been undertaken and currently vacancy rate thresholds are set as percentages, while reporting uses whole numbers. It is proposed that the thresholds are changed to whole numbers to ensure consistency and clarity in reporting and ensure the RAG status remains meaningful, these revised thresholds would reflect current performance and align with national benchmarks. This proposal was discussed and approved by the November Staff Governance Committee and recommended to Board for final approval.

6.7.2. In addition the Board is asked to approve the enhancement to the wording of the below SKPIs to help clarify what they are reporting:

- SKPI07a – *'% of disabled staff'* change to *'% of staff formally reporting a disability'*.

- SKPI07b – *'% of minority ethnic staff'* change to *'% of staff formally reporting minority ethnicity'*.

- SKPI07c – '*% of LGB'* change to *'% of staff formally reporting as identifying as LGB'*.

6.7.3. These proposed amendments were approved by the Staff Governance Committee in November 2025 and the Planning and Performance Committee at its November 2025 meeting.

6.8. SKPI Reporting Dashboard

6.8.1. Following approval by the NES Board the SKPI Reporting Dashboard (Appendix 3) has been implemented for Q2 reporting. The dashboard has been developed to provide an enhanced view for presenting the SKPI reporting data to the Board and Governance Committees. The dashboard allows users to view the reportable SKPIs by strategic theme: People, Learners, Partnerships and Performance or by Governance Committee, with access to all data available on individual tabs. It is recommended that the dashboard is viewed in Excel desktop and full user guidance for the dashboard is provided in Appendix 2.

6.9. Key Matters Arising from the Planning & Performance Committee

6.9.1. The Q2 Strategic Key Performance Indicators Report was presented and approved by the Planning and Performance Committee at its November 2025 meeting.

6.9.2. The Committee highlighted the continuing challenges on the measurements that have not yet been reported on while noting that the recruitment of the Business Analyst will support with this but recognising data may not be reportable within this financial year. The Committee expressed concern of the possibility that the unreportable measurements may be lost with the transition to the new organisation. Assurance was provided that deliverables which support the continued activity to report on all SKPIs have been included in the 2026/27 operational planning process and will ultimately be included in the 2026/27 Annual Delivery Plan.

6.9.3. The Committee noted that a number of measurements are continuing to perform at their desired level and asked if targets will be reconsidered to ensure we are not plateauing. This will be undertaken as part of the quarterly reviews with individual measurement leads.

6.9.4. The Committee welcomed the new dashboard format for presenting the SKPI quarterly data and expressed the benefits this has brought to improving the accessibility and readability of the information presented.

7. Recommendations

The Board is invited to:

7.1. To review and approve NES Strategic Key Performance Indicators Q1 update and provide any feedback as appropriate.

7.2. To consider and approve the proposed amendments for SKPI reporting as outlined in Section 6.7.

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

a) **Have implications for NHS Delivery been considered?**
☒Yes
☐No

b) **Have Educational implications been considered?**
☒ Yes
☐ No

c) **Is there a budget allocated for this work?**
☒ Yes
☐ No

d) **Alignment with Our Strategy 2023 – 26 People, Partnerships and Performance**
☒ 1. People Objectives and Outcomes
☒ 2. Partnership Objectives and Outcomes
☒ 3. Performance Objectives and Outcomes

e) **Have key strategic risks and mitigation measures been identified?**
☐ Yes
☒ No

f) **Have Equality, Diversity, Human Rights and health inequality issues been considered** as per **Fairer Scotland Duty: Guidance for Public Bodies** and **Corporate Parenting** as per the **Children and Young People (Scotland) Act 2014?**
☐ Yes
☒ No

g) **Has an Equality Impact Assessment (EQIA) been completed or in progress for this piece of work?**
☐ Yes
☒ No

h) **Have you considered Emergency Climate Change and Sustainability implications as per DL (2021) 38?**
☒ Yes
☐ No

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

Author name: Rob Coward, Debbie Lewsley, Christina Bichan
Date: November 2025
NES

Overview of SKPI Reported in Quarter 2

Measure ID	Measure Name	RAG Status - Oct 2025
SKPI03	Staff retention rate (voluntary leavers)	Reported Q2
SKPI04	Vacancy Rate	Reported Q2
SKPI05	Sickness Absence Rate	Reported Q2
SKPI13b	Dental Funded trainee placements - Vacancy Rate (WAS Fill rate)	Reported Q2
SKPI15b	Employee Engagement Index - Dentists in Training	Reported Q2
SKPI17	Total accesses of the NHS Scotland Careers Website	Reported Q2
SKPI25	% of Service Providers who report utilising NES provided workforce data	Reported Q2
SKPI28	% of technology, data and digital developments which are shaped by staff, learner and partners feedback	Reported Q2
SKPI29b	Number of collaborations to support employability and engagement of young people	Reported Q2
SKPI30	Number of NES programmes of education and training which are SCQF credit rated	Reported Q2
SKPI31	Achievement of agreed savings % against annual budget	Reported Q2
SKPI32	% of audit actions which are completed within agreed timescale	Reported Q2
SKPI33	Benefits realisation/ ROI from corporate change activities	Reported Q2
SKPI34	CO2 emissions (estates)	Reported Q2
SKPI35	CO2 emissions (staff and business travel)	Reported Q2
SKPI36	Projected variance of budgeting within 0.5% at year end	Reported Q2
SKPI37	Number of complaints or concerns upheld and partially upheld	Reported Q2
SKPI38	Number of unplanned outages to NES systems (internal and external)	Reported Q2
SKPI39	% NIS Audit Compliance Score for Cybersecurity	Reported Q2
SKPI40	% RAG status for delivery against Annual Delivery Plan	Reported Q2
SKPI41	Adverse events: Number of Category 1 Information Governance events and events requiring reporting under RIDDOR	Reported Q2
SKPIs - Not Reported this Quarter		
SKPI01	Employee Engagement Index	Data Due Q1 26/27
SKPI02	Proportion of staff who report having the time and resources to support their learning and growth	Data Due Q1 26/27
SKPI06a	Gender pay equality	Data Due Q1 26/27
SKPI06b	Disability pay equality	Data Due Q1 26/27
SKPI06c	Ethnicity pay equality	Data Due Q1 26/27
SKPI07a	% of disabled staff	Data Due Q1 26/27
SKPI07b	% of Minority Ethnic staff	Data Due Q1 26/27
SKPI07c	% of LGB staff	Data Due Q1 26/27
SKPI08	Staff Inclusion Score (WAS: % of staff who experience NES as an inclusive organisation)	Data Due Q3 25/26
SKPI09	Total number of accesses to NES learning products	Data Due Q1 26/27
SKPI10	Number of health and social care staff accessing NES learning products as a % of the health and social care workforce	Data Due Q1 26/27
SKPI13a	Medical Funded trainee placements - Vacancy Rate (WAS Fill rate)	Data Due Q3 25/26
SKPI14a	Medical Funded trainee placements - Non-completion rate	Data Due Q1 26/27
SKPI14b	Dental Funded trainee placements - Non-completion rate (Vocational Training)	Data Due Q1 26/27
SKPI14c	Dental Funded trainee placements - Completion rate (Core Training)	Data Due Q1 26/27
SKPI14d	Dental Funded trainee placemnts - Non-completion rate (Dental Speciality Training)	Data Due Q1 26/27
SKPI15a	Employee Engagement Index – Doctors in Training	Data Due Q1 26/27
SKPI21b	% of learning products which include value based health and social care	Data Due Q4 25/26
SKPI23	Number of education, research and strategic collaborations	Data Due Q3 25/26
SKPI24	Number of innovation initiatives invested in, including in collaboration with other stakeholder organisations	Data Due Q3 25/26
SKPI22	Net Promoter Score for stakeholders who rate themselves likely to recommend NES to colleagues and associates	Reporting Paused
SKPI29a	Number of young people participating on a school-based pilot pathway	SKPI Closed
SKPIs - Not Measured		
SKPI11	% of learners that tell us their education & training will improve their practice	
SKPI12	% of learners who score their learning experience as 80% or above	
SKPI16	Clinical Training Environment	
SKPI18	Uptake of learning products by sector as % of total reach (10)?	
SKPI19	% of learners and trainees from the 20% most deprived data zones in Scotland (SIMD)	
SKPI20	% of learners and trainees by protected characteristics as compared to population of Scotland	
SKPI21a	% of learning products which include sustainability	
SKPI26	% of health and social care workforce who report being confident in using digital ways of working	
SKPI27	Number of NES programmes that can demonstrate active engagement of people with lived or living experience in the development of educational resources designed to support interaction with those who use health and social care services	

NHS Education for Scotland

NES Strategic Key Performance Indicators

Dashboard Guidance

Introduction

The Strategic Key Performance Indicators Dashboard has been developed to provide an enhanced view for presenting the SKPI reporting data to the Board and Governance Committees.

The dashboard allows SKPIs to be viewed by individual strategic theme –

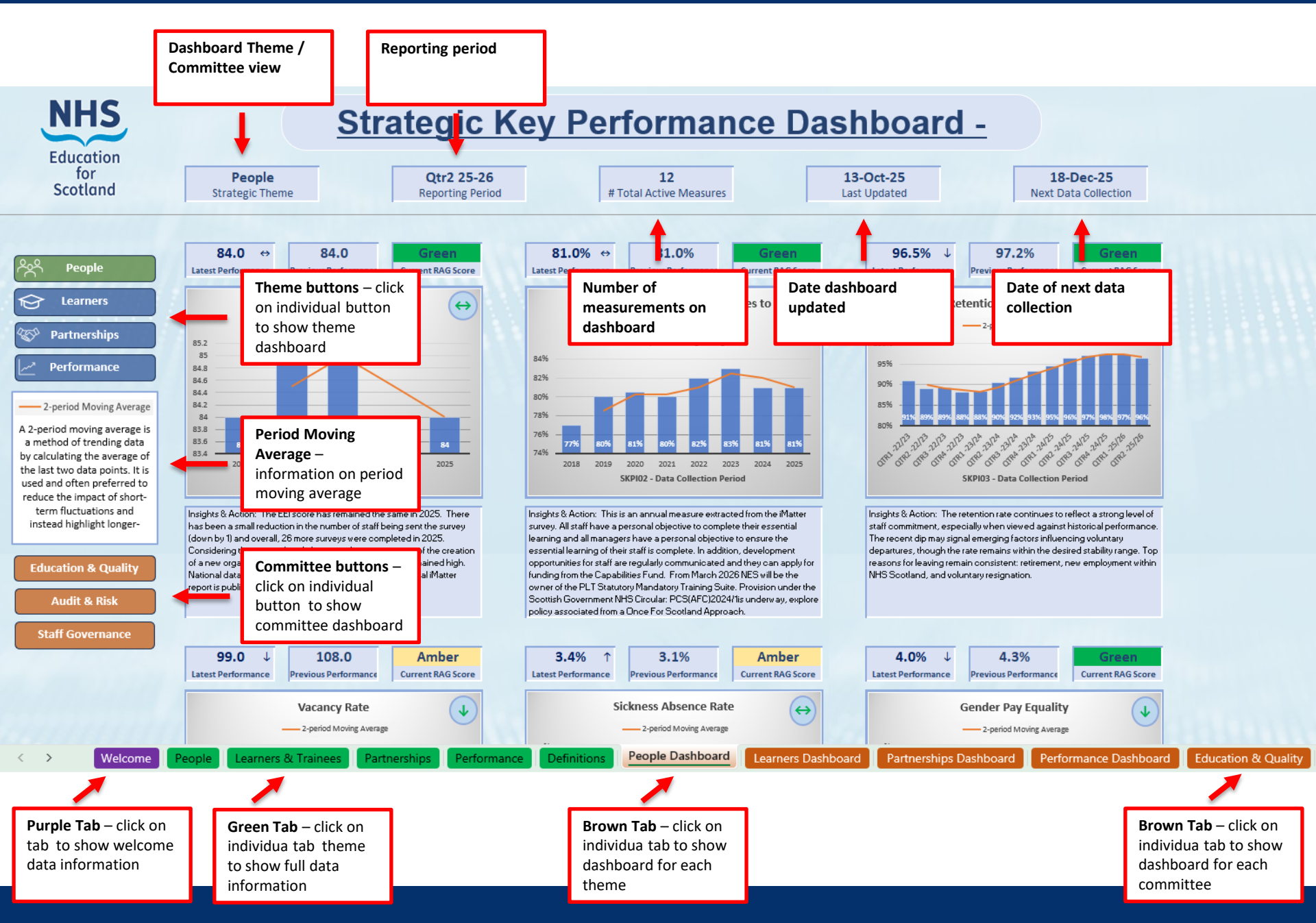
- People
- Learners
- Partnerships
- Performance

or by Governance Committee –

- Audit & Risk
- Education & Quality
- Staff Governance

* It is recommended to view the Dashboard in Excel Desktop and enable macros when asked.

Users can quickly access all information using the interactive dashboard as shown below.


Dashboard Theme / Committee view
Reporting period
NHS Education for Scotland
Strategic Key Performance Dashboard -
People
Strategic Theme
Qtr2 25-26
Reporting Period
12
Total Active Measures
13-Oct-25
Last Updated
18-Dec-25
Next Data Collection
People
Learners
Partnerships
Performance
Education & Quality
Audit & Risk
Staff Governance
2-period Moving Average
A 2-period moving average is a method of trending data by calculating the average of the last two data points. It is used and often preferred to reduce the impact of short-term fluctuations and instead highlight longer-
84.0
84.0
Green
81.0%
Green
96.5%
97.2%
Green
SKPI02 - Data Collection Period
SKPI03 - Data Collection Period
Insights & Action: This is an annual measure extracted from the iMatter survey. All staff have a personal objective to complete their essential learning and all managers have a personal objective to ensure the essential learning of their staff is complete. In addition, development opportunities for staff are regularly communicated and they can apply for funding from the Capabilities Fund. From March 2026 NES will be the owner of the PLT Statutory Mandatory Training Suite. Provision under the Scottish Government NHS Circular: PCS(AFC)2024/1is underway, explore policy associated from a Once For Scotland Approach.
Insights & Action: The retention rate continues to reflect a strong level of staff commitment, especially when viewed against historical performance. The recent dip may signal emerging factors influencing voluntary departures, though the rate remains within the desired stability range. Top reasons for leaving remain consistent: retirement, new employment within NHS Scotland, and voluntary resignation.
99.0
Latest Performance
108.0
Previous Performance
Amber
Current RAG Score
3.4%
Latest Performance
3.1%
Previous Performance
Amber
Current RAG Score
4.0%
Latest Performance
4.3%
Previous Performance
Green
Current RAG Score
Vacancy Rate
Sickness Absence Rate
Gender Pay Equality
2-period Moving Average
Welcome
People
Learners & Trainees
Partnerships
Performance
Definitions
People Dashboard
Learners Dashboard
Partnerships Dashboard
Performance Dashboard
Education & Quality
Theme buttons – click on individual button to show theme dashboard
Number of measurements on dashboard
Date dashboard updated
Date of next data collection
Period Moving Average – information on period moving average
Committee buttons – click on individual button to show committee dashboard
Purple Tab – click on tab to show welcome data information
Green Tab – click on individua tab theme to show full data information
Brown Tab – click on individua tab to show dashboard for each theme
Brown Tab – click on individua tab to show dashboard for each committee

Movement in direction from previous performance reported

Previous reported performance

Latest performance reported.

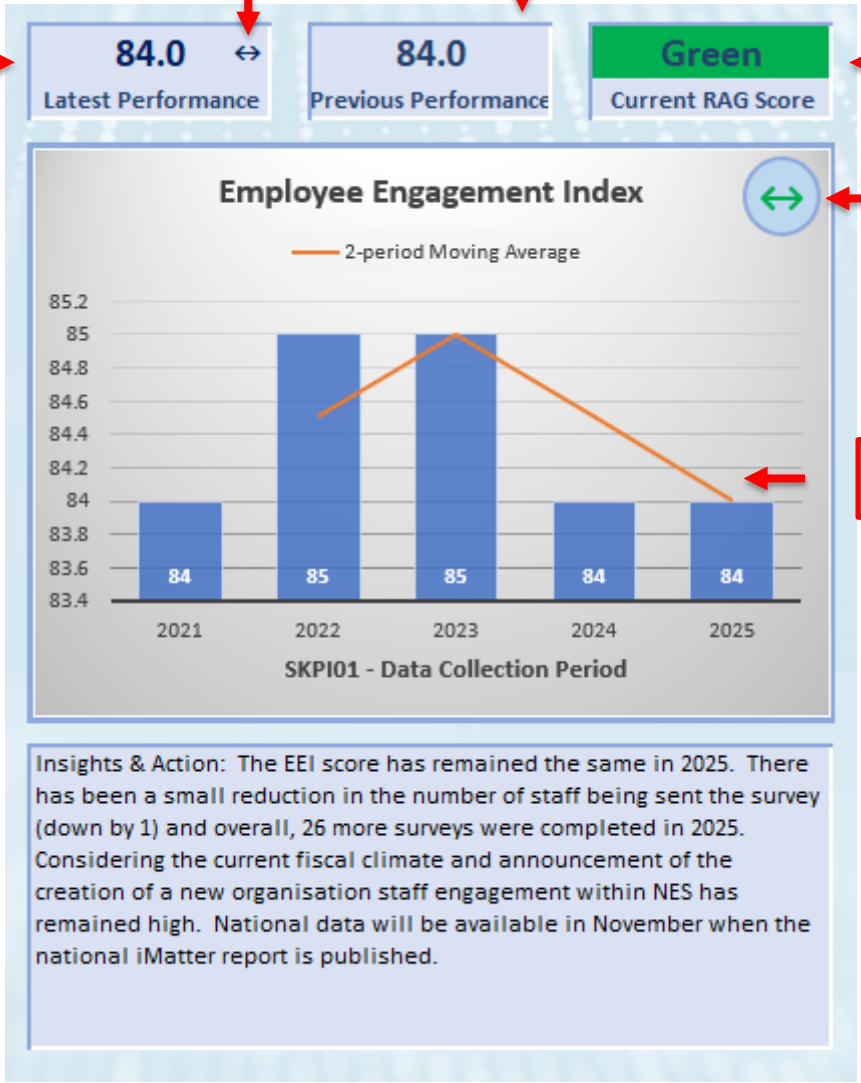
Current RAG Score

Desired Direction for SKPI

Reported data over collection period.

2 – period moving average

Insights and Actions for SKPI measurement.



NHS Education for Scotland **NES/25/82**

Agenda Item: 08d

Date of Meeting: 20 November 2025

Public Board Paper

1 Title of Paper

1.1 Quarter 2 Performance Delivery 2025/26

2 Author(s) of Paper

2.1 Alison Shiell, Planning & Corporate Governance Manager

3 Lead Director(s)

3.1 Christina Bichan, Director of Planning, Performance & Transformation

4 Situation / Purpose of paper

4.1 This report provides the Board with a Quarter 2 (Q2) update on NES's delivery performance against the deliverables and milestones set out in the 2025/26 NES Annual Delivery Plan (ADP). The report uses BRAG exception reporting to evidence progress and completion status.

4.2 In addition to the cover paper, the report comprises a 2025/26 Q2 summary progress report (Appendix 1) and a full 2025/26 Q2 update (Appendix 2).

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

5 Background and Governance Route to Meeting

5.1 This report has been prepared for the Board's review and approval and has been considered by the NES Planning & Performance Committee (PPC) and Executive Team in advance of the 20 November 2025 Board meeting.

5.2 As per the PPC Terms of Reference, the Board has delegated oversight and scrutiny of organisational performance to the PPC. The PPC receive quarterly ADP delivery reports in advance of the NES Board and provide feedback, guidance and advice as required.

5.3 The 2025/26 NES ADP was approved for publication by the NES Board on 22 May 2025, whilst recognising that the ADP is a dynamic document that will continue to evolve during the course of the year. Scottish Government (SG) approval for the 2025/26 ADP was received via a formal feedback letter on 6 June 2025 with the letter presented to the NES Board for noting on 21 August 2025.

5.4 An updated version of 2025/26 NES ADP was uploaded to the Corporate Publications page of the NES website after the 21 August 2025 Board meeting. This updated version highlights changes to the ADP that were approved at the end of Quarter 1 (Q1). Updated versions of the ADP will continue to be published on a quarterly basis following approval of any future changes.

5.5 Following the announcement by the Cabinet Secretary for Health and Social Care on 17 June 2025 setting out the requirement to form the new NHS Delivery organisation (which NES will become part of along with our partners, NHS National Shared Services / NSS), NES continues to deliver on its priorities set out within the 2025/26 ADP whilst also preparing for the establishment of the new organisation. NES is working closely with SG and NSS colleagues to ensure the new organisation is ready to deliver services from 1 April 2026.

6 Assessment / Key Issues

2025/26 Quarter 2 – Summary of Delivery Position

6.1 Following changes and updates approved at Q1, the NES 2025/26 ADP now comprises 193 deliverables. There has been further positive movement in relation to the number of deliverables still dependent on SG funding – this has reduced from 13 to two during Q2. Further detail regarding ADP changes is provided within Table 5 (2025/26 ADP Amendments / page 12).

6.2 At the end of 2025/26 Q2, 169 (**87.5%**) 2025/26 deliverables have been categorised as either complete or on track to be completed in line with ADP milestones. 20 (**10%**) deliverables are progressing with minor delays, and one (**0.5%**) deliverable is experiencing significant delay. Two deliverables have been closed during Q2 and one does not commence delivery until Quarter 3 (Q3) therefore these do not have BRAG status attached to them. The summary progress report (Appendix 2) highlights that delivery status at 2025/26 Q2 is an improved position in comparison to the same point in previous years. This is particularly notable given the additional work that is being undertaken across the organisation to support the establishment of NHS Delivery.

6.3 The PPC considered the Q2 Delivery Report at their meeting on 10 November 2025. Two deliverables were highlighted as Red within the report however following feedback from the Board Chair at the PPC meeting, one of the red deliverables (MED 2025/26 36) has since been de-escalated to

Green. NES's BRAG criteria had been applied in relation to the delay to this deliverable which relates to the delivery of Continuing Professional Development (CPD) for GP Practice Managers. However, at the PPC meeting it was agreed that the delay – due to a late receipt of funding and changes in the delivery methodology of the CPD programme following a joint NES/SG review – was outwith NES's control; therefore the original deliverable and timeline would not be able to be met and thus a red assessment was not appropriate. The Q2 Delivery Report to the Board has been revised accordingly and as set out within Table 5, the NES Executive Team have approved amendments to the Q3 and Quarter 4 (Q4) deliverable milestones which reflect the updated position.

6.4 The number of deliverables reporting delays has reduced from 30 at Q1 to 21 at Q2. Of the 21 deliverables reporting delays, four deliverables (19%) are due to funding issues outwith NES's control. This equates to 2% of the overall 2025/26 ADP deliverable total (193). An overview of 2025/26 Q2 BRAG status is provided in Table 1a (Section A). Tables 2 and 3 (Section B) summarise the Red and Amber deliverables including any actions being taken to mitigate delays with the aim of bringing these deliverables back on track where possible.

6.5 Following feedback from the Board at the 21 August 2025 meeting, mitigating actions have been highlighted more clearly within the report. Where appropriate, detail has also been provided in relation to NES's ability to take action i.e. whether mitigations are within NES's scope to be able to take action or whether they are reliant upon external support.

6.6 As per previous quarterly delivery reports, this report aims to provide the Board with as much assurance as possible regarding NES's overall delivery position. The report provides additional context regarding any deliverables that are still subject to funding and / or affected by funding-related issues and also highlights whether the impact of these issues are within or outwith NES's control. This information is set out within Section C (Table 4 / page 11).

2024/25 ADP - Remaining Deliverables

6.7 Following on from the 2025/26 Q1 Delivery Report, four deliverables from the 2024/25 ADP have continued to report progress during 2025/26 Q2 and are enclosed within Appendix 2 as an individual tab within the excel document. An overview of the outstanding 2024/25 deliverable position is provided within Table 6 (page 13).

Section A - 2025/26 Quarter 2 – Delivery Performance Overview

6.8 Delivery performance at 2025/26 Q2 is summarised in Table 1a.

Table 1a: Summary of deliverable status – 2025/26 Quarter 2

Deliverable Status	Number	Percentage
Blue – complete	3	2%
Red – significant delay	1	0.5%
Amber – minor delay	20	10%
Green – on track	166	85.5%
N/A (closed / no status)	3	2%
Total	**193**	

6.9 Appendix 1 provides a summary of 2025/26 ADP delivery and an overview of the Q2 delivery position. This is supported by additional context and detail provided in the later sections of the cover paper. An overview of NES directorate BRAG status at Q2 is shown on Table 1b (page 4).

Table 1b: Summary of NES directorate RAG status – 2025/26 Quarter 2

NES Directorate / Business Area	Total 2025-26 ADP Deliverables	Blue	Red	Amber	Green	N/A
Corporate & Quality Improvement	3	-	-	-	3	-
Dental	21	-	-	1	20	-
Finance	4	2	-	-	2	-
Healthcare Science	8	-	-	1	7	-
Medical	29	-	-	-	29	-
NHSS Academy, Learning & Innovation	24	-	-	4	19	1
NMAHP	41	-	-	6	34	1
NES Technology Service	10	1	1	5	3	-
Optometry	8	-	-	1	7	-
People & Culture	10	-	-	-	10	-
Planning, Performance & Transformation	9	-	-	-	9	-
Pharmacy	10	-	-	-	10	-
Psychology	5	-	-	1	4	-
Social Care & Communities	9	-	-	1	7	1
Corporate	2	-	-	-	2	-
Totals	193	3	1	20	166	3

Section B - 2025/26 Quarter 2 – Red & Amber Deliverables

Table 2: 2025/26 Quarter 2 position – Red deliverable(s)

2025/26 Quarter 2 – Red Deliverable(s)	
ADP ref	**Summary of 2025/26 Q2 position and next steps**
NES Technology Service (NTS)	
NTS 2025/26 6	NES's provision of technology support for the national Digital Prescribing and Dispensing Pathways (DPDP) programme continues to be affected by funding delays and has again reported Red at Q2. The lack of multi-year funding has delayed the onboarding of build teams to produce the bespoke DPDP build and the PPC were advised at Q1 that ongoing discussions have been taking place between NTS and the DPDP programme team to revise previous DPDP delivery plans to reflect the current position. **Mitigating Actions** – Following discussions between NTS and the DPDP programme team during Q2, the DPDP SG sponsor has given further funding assurances, and the programme has therefore been re-baselined accordingly. Revised milestone wording for the Q2, Q3 and Q4 DPDP milestones have been approved by the Executive Team. During Q2, two Senior Platform Engineers have been onboarded to bolster teams responsible for DPDP-related National Digital Platform development, with further resourcing avenues being explored to continue to supplement existing resources. As a result of the new funding assurances and onboarding of additional staff this deliverable is now projected to report Amber at Q3. The NES 2025/26 ADP will be updated following submission of the Q2 Delivery Report to the 20 November 2025 Board meeting.

Table 3: 2025/26 Quarter 2 position – Amber deliverables

2025/26 Quarter 2 – Amber Deliverables	
Dental	
DEN 2025/26 23	The deliverable focused on the recruitment of Dental Core and Specialty posts continues to report Amber at Q2 due to the current Dental Core Trainee (DCT) fill-rate position. Following national DCT recruitment in Q1 and a fill rate of 76 posts (87%), late resignations have resulted in 69 (79%) of the 87 funded DCT posts being filled at the end of 2025/26 Q2. **Mitigating Actions** – Local recruitment by associated Health Boards continues to try and fill outstanding vacant DCT posts. A further update will be provided at Q3.
Healthcare Science	
HCS 2025/26 12	The delay in receiving SG funding to support to support the development of a Levels 5-9 education, skills and competencies framework for all Healthcare Science (HCS) specialties continues to

2025/26 Quarter 2 – Amber Deliverables	
	impact planned recruitment timelines for additional resource to support this work. **Mitigating Actions** – One member of the NES HCS team continues to be redirected to undertake the commissioned work with SG kept updated on progress. Further information to be provided at Q3.
NHSS Academy, Learning & Innovation (NHSSA, L & I)	
NHSSALI 2025/26 1	The delivery of NES's Digital Learning Infrastructure (DLI) programme (previously known as TURAS Refresh) has reported Amber at Q2. Whilst good progress has been made with the development of a national approach to statutory and mandatory training (nine modules to launch in February 2026) and the confirmed selection of a data warehouse solution as part of work supporting the foundation architecture of the TURAS platform, the deliverable is now reporting Amber to reflect the high profile nature of this project and the impact of the Critical Friend Gateway Review. The Full Business Case needs to be developed further before submission to SG and confirmed funding for this programme is still awaited. **Mitigating Actions** – Risks to the DLI programme are monitored at programme level and reported through governance groups as appropriate. An action plan addressing the Critical Friend Gateway Review recommendations has been submitted to SG. As a result of the current position this deliverable is projected to report Amber at Q3.
NHSSALI 2025/26 5	The deliverable focused on Knowledge Management and Digital Library services has reported Amber at Q2 due to planned milestones not being met. This includes a slight delay to the procurement of an eBooks supplier however the tender evaluation and notification of awards will now take place in early Q3. The planned automation of the deletion of OpenAthens accounts is now not being taken forward as this work has now been included in NES Technology Service delivery plan for 2025/26. **Mitigating Actions** – Focused work during Q3 to bring deliverable back on track where possible. The NES Knowledge Services team will continue to manage the deletion of OpenAthens accounts manually however this work request will be proposed for inclusion with the the NTS delivery plan for 2026/27. This deliverable is projected to report Green at Q3.
NHSSALI 2025/26 27	As part of the NHS Scotland Academy (NHSSA), the delivery of an accelerated training pathway for Biomedical Scientist graduates has reported Amber at Q2. Whilst current cohorts are achieving registration in an accelerated timeframe, a planned cohort from Q3 is not able to go ahead due to low participant numbers. Information gathered by the NHSSA indicates that Health Boards are not investing in this particular role with lower-band staff being used instead.

2025/26 Quarter 2 – Amber Deliverables	
	Mitigating Actions – The NHSSA are currently ascertaining the demand of this service and are exploring the possibility of closing this project. A further update will be provided at Q3. As a result of the current position this deliverable is projected to report Amber at Q3.
NHSSALI 2025/26 32	As part of the NHSSA, a new deliverable was added at the end of Quarter with the aim of increasing the amount of immersive training opportunities for doctors working towards achieving an Entrustable Professional Activity (EPA) in managing a cataract operating list which in turn allows them to perform independent surgical lists as per the RCOphth (Royal College of Ophthalmologists) curriculum. This deliverable has reported Amber at Q2 due to delays in the initial recruitment process at Q1 (specifically related to job matching) however the job matching process has now successfully completed and roles are progressing through recruitment systems. **Mitigating Actions** – Focused work during Q3 to bring deliverable back on track where possible. With recruitment processes now progressing this deliverable is projected to report Green at Q3.
NMAHP	
NMAHP 2025/26 3	Delivery of the Family Nurse Partnership (FNP) programme in Scotland has reported Amber as projected at Q2. This follows an anticipated decrease in family nurse recruitment in Q2 which led to the FNP team requesting amends to the deliverable wording and Q2 / Q4 milestones at the end of Q1 to reflect this. Less than anticipated new family nurses and supervisors commenced cohorts during Q2 and no CPD was in this quarter due to capacity. **Mitigating Actions** – The FNP team continue to monitor family nurse recruitment and data gathered during Q2 indicates an increase. To support future forward planning the FNP team have reviewed and updated how workforce data is gathered from FNP teams with the aim of facilitating appropriate and responsive planning for future education provision in light of a potential anticipated reduction in family nurse recruitment. Whilst no CPD was offered during Q2 cumulative CPD totals indicate that deliverable targets should be achieved. As a result of the current position, this deliverable is projected to report Green at Q3.
NMAHP 2025/26 14	The Allied Health Professions (AHP) aspect of work to support the NMAHP workforce to comply with regulatory bodies' requirements for quality practice education continues to report Amber at Q2 as a result of delays to planned delivery. Following on from the update provided at Q1, AHP Board visits remain behind schedule as a result of staff sickness however the final visits have now been completed and the final report will be available by the end of Q3. The AHP Practice Based Learning (PBL) agreements, which were delayed following an addendum from the Scottish Directors of AHPs Group (SDHAP), are now progressing to final signoff however they remain behind schedule. **Mitigating Actions** – Focused work during Q3 to bring deliverable back on track where possible. Original timelines revised to ensure

2025/26 Quarter 2 – Amber Deliverables	
	delivery during 2025/26. As a result of the current position this deliverable is projected to report Amber at Q3.
NMAHP 2025526 15	The deliverable focused on the development of improvements / enhancements to NMAHP commissioned education programmes continues to report Amber at Q2 due to planned milestones being slightly behind schedule, particularly in relation to the development of a digital indexing system for paramedics and progress with mapping the current Quality Management System (QMS) as part of work to enhance the practice learning experience for NMAHP learners. **Mitigating Actions** – To support the ongoing development of a 'Once for NES' Learning & Education Quality System (LEQS) the mapping of the NMAHP QMS is now being overseen by the NES Programme Management Office (PMO) as part of the overall LEQS Corporate Improvement Programme. The NMAHP Practice Education team continue to input into this activity as guided by the PMO. As a result of the current position this deliverable is projected to report Amber at Q3.
NMAHP 2025/26 21	The deliverable focused on supporting the SG Dementia Strategy Delivery Plan via the provision of learning and development opportunities for the health, care and wider workforce who support people with dementia and their families / carers continues to report Amber at Q2. Confirmation of SG funding to support 2025/26 delivery was received during Q2 however this delay has impacted planned delivery. Capacity within the NES Design team has also impacted the development of facilitator resources for the 'Fundamentals of Skills Dementia Practice' programme. **Mitigating Actions** – Focused work during Q3 to bring deliverable back on track where possible. As a result of the current position this deliverable is projected to report Amber at Q3.
NMAHP 2025/26 31	The deliverable supporting the building of capacity and capability to enable AHPs to undertake robust workforce planning continues to report Amber at Q2 due some aspects of planned milestones not being met. In relation to progressing AHP occupational classification indexing across all NHS Scotland Boards, the Q2 objective has been partly achieved. The development of associated educational resources has commenced however further work is required in relation to the development of the Skills Maximisation toolkit. In relation to progressing the establishment of a network of AHP workforce leads across Scotland, this work has not been taken forward as there is no funding available. **Mitigating Actions** – Focused work during Q3 to bring deliverable back on track where possible. Discussion to take place with NMAHP colleagues regarding the establishment of the AHP leads network to understand funding source for this work and the implications of not delivering this part of the deliverable. As a result of the current position this deliverable is projected to report Amber at Q3.

2025/26 Quarter 2 – Amber Deliverables	
NMAHP 2025/26 37	The deliverable focused on the review of all NMAHP frameworks and subsequent development of standardised principles for future frameworks has continues to report Amber at Q2 due to planned milestones being slightly behind schedule, however a wide range of governance, mapping and data analysis activity has taken place during Q2 in support of the FRAME (Framework Review, Alignment, Monitoring & Evaluation) project. **Mitigating Actions** – Engagement with colleagues across NES has helped identify potential areas of duplication which will inform refinement of project deliverables. Funding has been secured to commission external consultancy support for this project and the draft tender specification is nearing completion. The overall timeline for this work has been extended until 31 March 2026 which in turn has led to, additional objectives relating to the NMAHP development framework being added to the project remit. With these mitigating actions in place, this deliverable is projected to report Green at Q3.
NES Technology Service (NTS)	
NTS 2025/26 2	The deliverable supporting SG Future Care Planning (FCP) via the development of a viable Hospital Care Plan product continues to report Amber at Q2 due to ongoing discussions with the associated SG policy team regarding the direction of FCP. During Q2, the NTS Deputy Director has engaged with SG regarding the alignment of this work to the Digital Front Door (DFD) programme and Integrated Record portfolio as part of the strategic direction of travel in relation to data sharing. **Mitigating Actions** – This deliverable is unable to progress until discussions with SG have concluded and a formal position / roadmap regarding the FCP is agreed. As a result of the current position this deliverable is projected to report Amber at Q3.
NTS 2025/26 3	The deliverable supporting the Scottish Vaccination Improvement Programme (SVIP) has reported Amber at Q2. This is as a result of planned SVIP work not progressing due to the need for NTS teams to prioritise work related to Digital Front Door (DFD) programme (NTS 2025/26 4). Delivery of SVIP-specific work has not progressed in the quarter as focus has been on DFD. The programme is aware of the focus in this area however, and support from SVIP for the DFD programme was secured in this quarter. **Mitigating Actions** – NTS advised the SVIP that delivery of DFD was the priority during Q2 and the SVIP were supportive of this. As a result of the current position this deliverable is projected to report Amber at Q3 and is predicted to remain Amber until 2025/26 year-end because of the priorities associated with the delivery of DFD.
NTS 2025/26 4	Delivery of the Digital Front Door (DFD) programme has continued during Q2 and a Full Business Case has now been drafted. Work is

2025/26 Quarter 2 – Amber Deliverables	
	continuing at pace across a number of areas including delivery of the initial DFD release in NHS Lanarkshire in December 2025, preparations for the scaling up of digital communications and appointments and initial work to enable the production of a first version DFD roadmap. **Mitigating Actions** – Risks associated with DFD delivery are managed via a specific risk log with regular progress updates provided to SG and associated DFD governance groups. As a result of the current position and the significant extent of activity required within this financial year, this deliverable is projected to report Amber at Q3.
NTS 2025/26 8	Delivery of the OpenEyes electronic patient record solution (on a regional basis in 2025/26) has reported Amber at Q2 as the digital work required for the rollout of both the Community Glaucoma Scheme and Hospital Eye Service is beyond the current capacity within the Eyecare Development team. Positive engagement and planning has continued with Health Boards during Q2, however capacity within territorial eHealth teams has also limited some aspects of planned delivery. **Mitigating Actions** – The Eyecare Development team have spent time re-planning during Q2 in order to prioritise 2025/26 delivery and have highlighted the need for additional resource as there are now demonstrable savings (financial and a reduction in waiting times) as a result of the ongoing OpenEyes system implementation. As a result of the current position this deliverable is projected to report Amber at Q3.
NTS 2025/26 11	The deliverable focused on improvements to the timeliness and quality of workforce data continues to report Amber at Q2 due to planned milestones being behind schedule. Limited progress has been made during Q2 as a result of other NTS priorities. There is a need for dedicated resource to support this work, particularly in relation to the development of the Workforce Data Observatory. **Mitigating Actions** – Discussions regarding this work are continuing both within NES and with SG with further information to be provided at Q3. As a result of the current position this deliverable is projected to report Amber at Q3.
Optometry	
OPT 2025/26 7	The deliverable supporting CPD for care delivered under General Ophthalmic Services continues to report Amber at Q2. This work has been paused due to staff sickness absence and the need to prioritise work in other areas (Optometry simulation and teach and treat). It is hoped that work will resume Q3 once staffing has stabilised. Further information to be provided at Q3. **Mitigating Actions** – Focused work during Q3 to bring deliverable back on track where possible. As a result of the current position this deliverable is projected to report Amber at Q3.

2025/26 Quarter 2 – Amber Deliverables	
Psychology	
PSY 2025/26 4	In response to the Mental Health Strategy 2017-27, NES Psychology colleagues continue to develop a national programme of education and training across a range of multidisciplinary, multi-sectoral areas. This deliverable continues to report Amber at Q2 due to planned milestones relating to resource development being slightly behind schedule. **Mitigating Actions** – Focused work during Q3 to bring deliverable back on track where possible. As a result of the current position this deliverable is projected to report Amber at Q3.
Social Care & Communities	
SC 2025/26 2	Ongoing interdependencies between the Involving People and Communities workstream and other Learning & Education Quality System (LEQS) workstreams mean that the IPC deliverable continues to report Amber at Q2 as the planned deliverable to launch the IPC framework has not been met. However, as part of the wider LEQS approach the framework has been tested and refined and the framework is now being tested by NES Directorates. Standard Operating Procedures (SOPs) in support of the Renumeration Policy - which has now been approved by the NES Executive Team - are also now being developed. **Mitigating Actions** – Focused work during Q3 to bring deliverable back on track where possible. As a result of the current position this deliverable is projected to report Amber at Q3.

Section C – Deliverables affected by funding delays at 2025/26 Q2

6.10 Table 4 provides an overview of deliverables affected by funding delays at 2025/26 Q2. As stated in paragraph 6.1, the number of deliverables still dependent on SG funding has reduced from 13 to two during Q2, however this table also includes detail relating to deliverables where funding has now been received but the delay in receipt is impacting planned delivery.

6.11 For the Board's information, notes have been added to individual deliverable lines within Appendix 3 to indicate where they were previously categorised as 'Subject to Funding' and funding has now been received.

Table 4: Deliverables affected by funding delays at Quarter 2

2025/26 Quarter 2	
ADP ref	**Summary of funding situation and next steps (if known)**
NHSSA, L & I	
NHSSALI 2025/26 1	Formal confirmation of SG funding to support NES's Digital Learning Infrastructure programme is still awaited however the development of the Full Business Case (FBC) is ongoing and a team of technical

2025/26 Quarter 2	
ADP ref	**Summary of funding situation and next steps (if known)**
	experts is now in place to support this work. It is expected that the FBC will come forward for approval at the February 2026 PPC meeting.
NTS	
NTS 2025/26 6	Technology support to the DPDP programme continues to be affected by ongoing funding delays however discussions have taken place between NTS and the DPDP programme during Q2 which have resulted in funding assurances being given by the SG sponsor. The DPDP delivery plan has been reworked to reflect the current position and revised quarterly milestones have been presented to the Executive Team for approval.
NTS 2025/26 11	Progress in support of improvements to the timeliness and quality of workforce data has been impacted by other NTS priorities and the need for dedicated resource (particularly in relation to the development of the Workforce Data Observatory). Discussions both within NES and with SG are continuing; a further update will be provided at Q3.
Pharmacy	
PHARM 2025/26 2	Formal confirmation of SG funding to support the delivery of the 1-year Pharmacy Foundation Training Year is still awaited however activity continues to be delivered as planned during Q2 with the deliverable reporting Green. Pharmacy colleagues continue to liaise with SG to confirm when funding is due to be received.

Section D – <u>2025/26 ADP Amendments during Quarter 2</u>

6.12 Table 5 sets out changes and refinements to the 2025/26 ADP identified during Q2 as a result of ongoing changes within our operating environment and the fluid nature of certain aspects of our work. The following amendments have been made to the 2025/26 ADP during Q2 and have been reviewed and approved by the NES Executive Team.

Table 5: Amendments to the 2025/26 NES ADP – Quarter 2

2025/26 ADP Deliverable	Amendment Detail
Dental	
DEN 2025/26 30	Revised milestone wording approved for the implementation of the Longitudinal Dental Foundation Training (LDFT) programme which is now commencing in September 2026.
Medical	
MED 2025/26 2	The Executive Team approved a request to prepare revised deliverable milestone wording for Q3 and Q4 as a result of discussions with SG and the need to appoint two programme leads to progress education and training frameworks and materials for Medical Associate Professionals (MAPs), as part of their revalidation using SOAR (Scottish Online Appraisal Resource). Revised milestone wording to be confirmed during Q3.

MED 2025/26 36	In relation to the deliverable focused on CPD for GP Practice Managers, the Executive Team approved a request to prepare revised milestone wording for Q3 and Q4 as a result of delays caused by late confirmation of SG funding and 2025/26 deliverables. Revised milestone wording to be confirmed during Q3.
NHSS Academy, Learning and Innovation	
NHSSALI 2025/26 19	Deliverable closed as this and deliverable NHSSALI 2025/26 18 are reporting duplicate information. Remaining milestones to be incorporated into NHSSALI 18 and reported accordingly.
NMAHP	
NMAHP 2025/26 4	Deliverable closed as it aligns and is incorporated into the wider work around the NMAHP Development Framework which is covered via deliverable NMAHP 2025/26 47.
NMAHP 2025/26 48	Deliverable and milestones refocused and revised in relation to supporting the endoscopy / cystoscopy workforce following 2024/25 decision to discontinue endoscopy programme funding.
NES Technology Service	
NTS 2025/26 6	Further to the update provided in Table 2, revised milestone wording for the DPDP programme has been approved by the Executive Team.
Planning, Performance and Transformation	
PPT 2025/26 16	The Executive Team approved milestone wording for the new deliverable supporting transition into the NHS Delivery organisation.
Social Care & Communities	
SC 2025/26 15	The Executive Team approved deliverable and milestone wording for a new deliverable supporting Community Link Workers and Social Prescribing Knowledge and Skills Framework (delivery to formally commence in Q3).

Section E – Outstanding 2024/25 ADP deliverables

Table 6: Overall position for remaining 2024/25 ADP deliverables

6.13 Table 6 sets provides an overview of 2024/25 ADP deliverables that continue to report progress during 2025/26. Two out of the four remaining deliverables have completed during Q2. Further detail is provided within the '2024/25' tab of Appendix 2.

NES Directorate / Business Area	Total 2024/25 ADP Deliverables	Blue	Red	Amber	Green
Dental	1	-	-	1	-
Medical	1	1	-	-	-
NMAHP	1	-	-	-	1
Pharmacy	1	1	-	1	-
Totals	4	2	-	1	1

Section F – Key Achievements during 2025/26 Quarter 2

6.14 There have been a number of achievements during Q2 that support the delivery of the NES 2023-26 Strategy and align directly with our strategic themes (People, Partnerships and Performance). Further detail is provided within the paragraphs below.

6.15 To support the delivery of our **People** strategic theme objectives, the following has been achieved during Q2:

a. Ongoing creation of new Healthcare Science career profiles for the NHS Scotland Careers website and associated promotional materials developed with the Centre for Workforce Supply.
b. NES Psychology multidisciplinary eLearning programmes and resources have been accessed over 57,000 times by end of 2025/26 Q2 across the four NES practice types (Informed – 45,339 / Skilled – 15,064 / Enhanced – 2,311 / Specialist – 822).
c. In support of the delivery of clinical skills and simulation training across Scotland, two simulation workshops were presented at the SESAM 2025 conference (Society for Simulation in Europe) in June 2025.
d. 100% of Compassionate Communications Skills programme participants (Cohort 10) indicated they would recommend the training to colleagues.

6.16 To support the delivery of our **Partnerships** strategic theme objectives, the following has been achieved during Q2:

a. The NES Research and Innovation plan was published in August 2025. The plan outlines how we will work with our staff, learners, partners and stakeholders to deliver our ambitions for research and innovation, using technology and innovation to improve education and learning and create a better and more sustainable future for health and social care.
b. 'Your Med Future' web resource developed and launched to provide a single point of reference for information about undergraduate applications to Medicine. The resource was developed by NES in in collaboration with the five Scottish medical schools and the Medical Schools Council.
c. Delivery in support of the Digital Front Door (DFD) programme has progressed well during Q2. A Full Business Case is now drafted and work is continuing at pace to deliver the initial release of DFD in NHS Lanarkshire in December 2025. Work to support national DFD communications is also underway along with the development of a DFD roadmap.

6.17 To support the delivery of our **Performance** strategic theme objectives, the following has been achieved during Q2:

a. As part of NES's work to advance our approach to Children's Rights, The Promise and the United Nations Convention on the Rights of the Child, a project with Youth Scotland has been established to enable participation and engagement with children and young people about their

rights in health care and their participation in the reporting duties of health boards.

b. NES supported and participated in Scotland's Climate Week (29 September - 5 October 2025). Via the Scottish Government's 'Net Zero Nation' banner, NES published daily articles highlighting work underway as part of NES' Climate Change Emergency & Sustainability strategy (2024-27) and personal experiences from staff setting out the steps they are taking to help tackle the climate emergency. The work of NES's Viva Engage Climate and Sustainability action community was also showcased and an Active Travel webinar hosted highlighting sustainable transport options available to NES staff.

Section G – Risk Management

6.18 The one red deliverable reported at 2025/26 Q2 has been reviewed against the NES Corporate Risk Register. The delays reported at Q2 can be broadly aligned with the impact of ongoing financial pressures (SR9) and staff resourcing (SR13). Mitigating actions are in place and further information in relation to these risk areas is provided within the quarterly risk report.

6.19 As part of reporting requirements for 2025/26 Q2, directorates were asked to provide additional detail in relation to any risks to delivery and confirm whether these risks have been escalated to the appropriate level (Directorate / Corporate level risk registers). Risks identified at Q2 include uncertainty of future funding and the potential impact on service delivery, future progress of work that is reliant on external factors outwith NES's control and limited capacity / resource requirements that could affect planned deliverables (e.g. the need to prioritise individual programmes of work which in turn impacts other deliverables, internal NES resource requirements such as digital / design support). NES's refreshed risk management framework and 'Once for NES' approach enables directorates to escalate risks via the NES Risk Management Group and ensure they are considered via appropriate governance groups, including the Executive Team.

Section G – Equality Impact Assessments (EQIA)

6.20 An EQIA was undertaken collectively for the 2025/26 ADP and Financial Plan.

7 Recommendations

7.1 The Board is asked to approve the Quarter 2 Delivery Report.

a) Have implications for NHS Delivery been considered?

☒ Yes
☐ No

b) Have Educational implications been considered?

☒ Yes
☐ No

c) Is there a budget allocated for this work?

☒ Yes
☐ No

d) Alignment with Our Strategy 2023 – 26 People, Partnerships and Performance

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

e) Have key strategic risks and mitigation measures been identified?

☒ Yes
☐ No

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

☒ Yes
☐ No

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

☒ Yes
☐ No

h) Have you considered Emergency Climate Change and Sustainability implications as per DL (2021) 38?

☒ Yes
☐ No

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

☒ Yes
☐ No

Annual Delivery Plan (ADP) Summary Progress Report (2025/26 – Quarter 2)

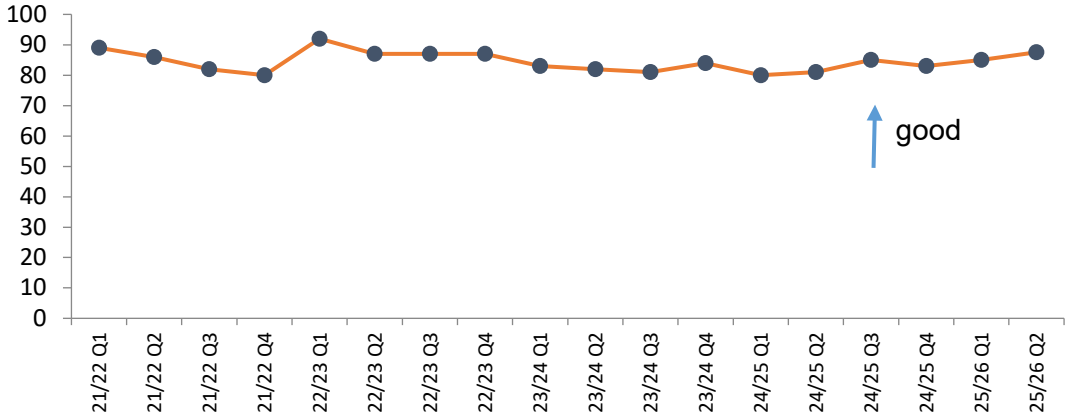
Aim: To provide an overview of progress and highlight key achievements, delays and risks in relation to delivery of the 2025/26 NES ADP.

Delivery Status at 30 September 2025 (Quarter 2)

- **87.5% of deliverables** are completed or on target to be completed in line with ADP milestones at the end of Quarter 2 (Q2) and a further **10%** progressing with minor delays.
- **0.5% of deliverables** are experiencing significant delay. Mitigating actions are in place to bring deliverables back on track where possible.
- The position at 2025/26 Q2 indicates a lower proportion of delayed deliverables in comparison to previous years which may be due to funding being confirmed at earlier points in the performance year.

	Q1 25/26	Q2 25/26	Q3 25/26	Q4 25/26
Status				
Complete	5	3		
On Track	159	166		
Minor Delay	28	20		
Significant Delay	2	1		
Closed / No Status	-	3		
Total Deliverables	**194**	**193**		

% of on target / completed deliverables, by Quarter, 2020/21 – 2025/26



Key Achievements (Individual ADP milestone references shown in brackets)

- 100% of Compassionate Communications Skills programme participants (Cohort 10) indicated they would recommend the training to colleagues. (**WF 25/26 15**)
- 110 health and social care (h&sc) staff completed foundation level Caring for Smiles qualification and 229 learners completed eLearning resources towards the Open Badges qualification for h&sc staff. **(DEN 25/26 12)**
- Support to and participation in Scotland's Climate Week (**FIN 25/26 4)**
- Ongoing creation of new Healthcare Science career profiles for the NHSS Careers website and associated promotional materials developed with Centre for Workforce Supply. (**HCS 25/26 8**)
- Digital Front Door (DFD) programme continues to progress well with a Full Business Case now drafted and delivery of initial DFD release in NHS Lanarkshire due in Dec 2025. (**NTS 25/26 4**)
- Simulation workshops presented at SESAM 2025 conference (Society for Simulation in Europe). (**MED 25/26 27**)
- Gender-Based Violence eLearning module (informed level) published on TURAS Learn (developed in partnership with Public Health Scotland). (**NMAHP 25/26 4)**
- NES Psychology eLearning resources have been accessed over 57,000 times by end of 2025/26 Q2. (**PSY 25/26 5**)
- NES Strategic Workforce Planning advanced by delivery of an annual capabilities plan and range of learning initiatives focused on digital skills, leadership, wellbeing and culture. (**WF 25/26 2**)
- NES Research and Innovation Plan published in August 2025. (**NHSSALI 25/26 15**)

Delays and associated impact

Of the one red and 20 amber deliverables identified at 2025/26 Q2, the majority have mitigating actions in place. Further detail is provided within the report regarding any mitigation that is beyond the scope of NES. Progress in Quarter 3 aims to bring deliverables back on track. The impact of the transition to the new NHS Delivery organisation will continue to be monitored alongside 2025/26 delivery.

Corporate Risks Affecting Delivery

The **one** red deliverable reported has been reviewed against the NES Corporate Risk Register. Delays can be broadly aligned with the impact of ongoing financial pressures (SR9) and staff resourcing (SR13).

2025/26 Quarter 2 – Red & Amber Deliverables Overview

1 Red Deliverable

Summary of Q2 position and next steps

The national **Digital Prescribing and Dispensing Pathways (DPDP)** programme continues to be affected by funding delays, particularly in relation to long-term funding which in turn affects recruitment and delivery timelines.

Mitigating Actions – Ongoing discussions have taken place between the NES Technology Service (NTS) and the DPDP programme team at SG during Q2. The SG DPDP sponsor has given further funding reassurances and the programme and associated delivery plan has been re-baselined accordingly. Two Senior Platform Engineers have been onboarded to bolster DPDP-related National Digital Platform development and further resourcing avenues are being explored. Revised milestone wording approved for Quarters 2, 3 and 4.

2025/26 Quarter 2 – Red & Amber Deliverables Overview

20 Amber Deliverables - overview

Issues / Decisions outwith NES's control	
Funding	Delays in confirmation of SG funding which impacts NES's ability to deliver planned milestones e.g. commencement of programmes / planned next steps
External factors	Other external circumstances / factors e.g. • discussions with Scottish Government resulting in changes to delivery plans • high profile nature of certain projects (Digital Front Door) • lower than expected recruitment position (Dental) • lower than expected cohorts / participants during Q2 e.g. Family Nurse Partnership

Issues / Decisions within NES	
Capacity	Capacity constraints (including resource availability and staff absence) / the need to support priority projects e.g. Digital Front Door impacting the delivery of Scottish Vaccination Improvement Programme / work contingent on other NES processes
Technical issues	Technical complexities associated with individual deliverables
Planning and delivery	Individual aspects of milestones taking longer than originally expected / planned Changes to deliverable scope

2025/26 Quarter 2 – Red & Amber Deliverables Overview

20 Amber Deliverables - overview

Mitigating Actions
Ongoing communication / discussions with SG colleagues to gain clarity re funding delays or changes to commissions / delivery plans - NES Planning working with directorates as required to track delays with any issues to be reported to the Planning & Performance Committee and Board as needed
Amendments to deliverable / milestone wording as a result of funding decisions or changes within our operating environment
Focused work / planning in Q3 to bring deliverables back on track (within NES and / or with partners and stakeholders as appropriate)
Within NES, alignment to other workstreams / teams to ensure coherence with wider strategic priorities (across both NES and NHS Scotland)

NHS Education for Scotland **NES/25/83**

Agenda Item: 9a

Date of meeting: 20 November 2025

Public Board Meeting

1. Title of Paper

1.1. NES Equality, Diversity & Inclusion Mid-Year Report 2025

2. Author(s) of Paper

2.1. Katy Hetherington, Principal Lead – Equality, Diversity and Human Rights

3. Lead Director(s)

3.1. Christina Bichan, Director of Planning, Performance and Transformation

4. Situation/Purpose of paper

4.1. The Board is asked to note and approve this mid-year report for the period April 2025-October 2025.

5. Background and Governance Route to Meeting

5.1. This is the first report on NES's Equality, Diversity and Inclusion Strategy 2025-2029, approved by the Board in March 2024. It includes progress on activities from April-October 2025.

5.2. Appropriate scrutiny by the Staff Governance, Education and Quality and Planning and Performance Committees has taken place.

6. Assessment/Key Issues

6.1. The Strategy and associated action plan set out how we will meet our legislative requirements, including updated equality outcomes, an anti-racism action plan and our commitment to an inclusive workplace for our people and our learners. There has been progress across all elements of the action plan and this is set out in Annex A.

6.2. There has been progress in the activities to support our Equality Outcomes. This is set out in Annex B.

6.3. All NHS Boards are required to have anti-racism action plans in place and the Scottish Government has held meetings with each Health Board to provide feedback on plans. NES had a positive meeting with the Scottish Government in October. There was recognition of the work NES is doing both as an employer and for the wider health and social care system. The NES Equality Team is building capability across the system by rolling out train the trainer sessions on anti-racism and the NHS Lothian Beyond Bystander model.

6.4. The Equality, Diversity and Human Rights Team have been commissioned by Scottish Government this financial year to build capability on international human rights treaties in the health and social care workforce. A specialist lead started in NES in July and is working closely with a similar postholder in the Improvement Service. This work is to support preparation in the public sector for a potential Human Rights Bill in Scotland, as set out in the recent discussion paper. Plans are underway to deliver webinars, collaborate with stakeholders to gather practice and develop training resources such as an animation. A key challenge is that while the health and social care workforce play a key role in upholding human rights, confidence levels on identifying rights in practice and using the language of human rights is low. Opportunities to position this work in the new organisation have been discussed with the Scottish Government as part of the mid-year review on the project, held in October.

6.5. NES has communicated to staff what the Supreme Court ruling in relation to the definition of sex under the Equality Act (2010) means to ensure relevant education, training and digital products are updated to reflect this. We have emphasised that trans people remain protected under the Equality Act and we will continue to uphold our values of dignity, inclusion and respect. We await the revised Code of Practice from the EHRC which is currently with the UK Government for approval.

6.6. It is recognised that the establishment of the new organisation by 1 April 2026 may have implications for strategy delivery and resulting risks will be managed through our internal risk management mechanisms in the run up to and beyond the transition period.

7. Recommendations

7.1. The Board is asked to note and approve progress on NES's Equality, Diversity and Inclusion Strategy.

7.2. As this is the first mid-year report on the EDI Strategy Action Plan, the Board's feedback on whether this format provides sufficient assurance is welcome.

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

a) Have implications for NHS Delivery been considered?
- ☒ Yes
- ☐ No

b) Have educational implications been considered?
- ☒ Yes
- ☐ No

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

d) Alignment with Our Strategy 2023 – 26 People, Partnerships and Performance
- ☒ 1. People Objectives and Outcomes
- ☒ 2. Partnership Objectives and Outcomes
- ☒ 3. Performance Objectives and Outcomes

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

f) Have Equality, Diversity, Human Rights and health inequality issues been considered as per Fairer Scotland Duty: Guidance for Public Bodies and Corporate Parenting as per the Children and Young People (Scotland) Act 2014?
- ☒ Yes
- ☐ No

g) Has an Equality Impact Assessment (EQIA) been completed or in progress for this piece of work?
- ☐ Yes
- ☒ No

h) Have you considered Emergency Climate Change and Sustainability implications as per DL (2021) 38?
- ☒ Yes
- ☐ No

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

Author name: Katy Hetherington
Date: 20 November 2025
NES

Appendix 1: Progress on NES Equaltiy, Diversity and Inclusion Strategy 2025-2029

The NES Equality, Diversity and Inclusion Strategy Action Plan is divided into five sections. This mid-year report summarises progress on actions set out under each theme. This includes actions in the Anti-Racism Plan 2025/2026 which have been incorporated.

Specific actions in relation to the NES Equality Outcomes are set out in Appendix 2.

1. Leadership and Accountability

Progress with NES's Equality, Diversity and Inclusion Strategy is reported to the Partnership Forum, the Staff Governance, Education and Quality and Planning and Performance Committees as well as the Board every 6 months. The Equality and Human Rights Steering Group has met quarterly and has representatives from each Directorate. It is chaired by the Director for Social Care and Communities.

All NES staff have a corporate objective to increase learning on anti-racism, equality, diversity and inclusion. 441 staff have completed the mandatory module on Turas Learn (between 1 April and 24th September) and 1643 staff have completed the module since it was launched in December 2023. Further information on learning activities is included under the section on Culture.

Each staff network now has an Executive Lead sponsor.

A masterclass on equality and human rights aimed at Non-Executive Board members took place on 11th November. This was organised by the NES Board Development Team and included speakers from the Equality and Human Rights Commission, NHS Lothian and NES.

Pay gap data is reported annually to the Board as a strategic KPI and we have set out actions to address the pay gap as part of our Equal Pay Statement. Participation in Equally Safe at Work is supporting NES in actions that will address the causes of the gender pay gap. Specific work in relation to our Equal Pay Statement is the development of guidance for managers on starting salaries and a reviewed form if any starting salary is requested to be above the entry level. This will contribute to ensuring staff are informed about pay practices.

EQIA guidance and the report template incorporates children's rights and regular EQIA drop-ins are available to staff for guidance and support. In addition, EQIA training sessions have been offered to staff this year and 29 staff have attended training between June and October 2025. Quarterly reports to the Equality and Human Rights Steering Group from each Directorate include what EQIA activity is planned or in progress. All EQIAs are published on the NES website. One example of an EQIA NES is undertaking is on the MyCare.Scot programme due for launch in NHS Lanarkshire in December 2025.

2. Culture

During October as part of Black History Month, there have been 3 sessions promoted to all staff to discuss and learn about anti-racism, including the new Once for Scotland Racism Guide. A further bespoke session took place on 19th November at the line manager network in November 2025. A session delivered with Close the Gap took place at the network on 28th October on Equally Safe at Work. 'NES Way' is promoted across the organisation through corporate induction, Learning at Work Week and via the Line Manager Network. There have been specific sessions held with the Senior Leadership Team to explore culture and behaviours in the context of supporting organisational change.

NES staff have participated in a train the trainer session delivered by NHS Lothian's Medical Education Team on Beyond Bystander and plans are underway to offer training sessions to NES staff. Following the train the trainer session on anti-racism planned for early 2026, sessions will also be offered to NES staff.

NES Staff Networks continue to meet regularly. The 'neuro bureau' provides a peer support network for resident doctors and dentists in training. The Parent/Carer network held focus groups with staff and the findings were shared with the Executive Team. Pride, Carers Week and Black History Month was promoted via intranet articles, and a panel discussion was held during Carers Week. There are plans for Disability History Month to promote short videos from staff. The staff networks co-ordinator is working with each network to identify its areas of focus over the next 6 months. A development session took place in October for staff network chairs to share experiences and tips on chairing meetings and managing difficult conversations. Plans are in place to involve staff networks in the consultation process regarding NHS Delivery.

The latest staff inclusion survey, conducted in May 2025, saw a slightly lower response rate of 26%, but an improved average score. Staff were invited to indicate their Directorate, and results were distributed to Directors. Key findings have been communicated via intranet articles, Townhall meetings, and shared with all four staff networks. Summary results by demographics are in Annex B. The next survey is scheduled for December 2025.

NES has submitted evidence for the Equally Safe at Work accreditation. This was achieved ahead of schedule. The Equally Safe at Work Group has met regularly to oversee progress towards the milestones. Communication to staff is an important part of the programme. As well as all staff messages, a session was held for the line manager network in October and this raised awareness of the new NHS Once for Scotland sexual harassment guide. We have continued to promote and encourage all staff to complete the 'Preventing and Responding to Sexual Harassment' module on Turas Learn. NES is also participating in a new Scottish Government network with Health Boards which aims to maintain focus on preventing sexual misconduct and to provide a forum to share practice.

The Equality Team continue to promote the Cultural Humility module and resource pack, including it in the offer to health boards as part of the Scottish Government feedback meetings on anti-racism plans. The team piloted a workshop on cultural

humility at the NHS Lothian Equality, Diversity and Human Rights conference in June and supported the GP Director of Post-Graduate Education deliver a session to GP Trainers in October with further sessions plans later in the year.

3. Equity of Opportunity

Given the policy focus on anti-racism, the NES Equality, Diversity and Human Rights Team has commissioned work to support all health boards and social care organisations build knowledge and skills on anti-racism. This will include a 'train the trainer' approach to trainers in health and social care organisations, a webinar aimed at leaders and a contribution to a NES podcast. This will support other offers across the system, including a peer-support network on anti-racism work from Public Health Scotland. The NES team are also supporting the roll-out of the NHS Lothian Medical Education Team's 'Beyond Bystander' training to health boards and social care organisations. Digital learning offers are also available via Turas Learn, including the Cultural Humility resource and a suite of short film clips on anti-racism.

Leading to Change have launched Inclusive Leaders Hub to support an inclusive, compassionate leadership style that opens doors for aspiring leaders. The hub collates relevant opportunities, resources and best practice across the health and social care system. The National Ethnic Minority Forum was given advance notice of the Hub and the recently launched Leadership Success Profile. In addition, as part of Black History Month, Professor Joy Warmington MBE, CEO of brap and leading expert in Anti-racist action at work delivered a webinar to over 150 participants. An EQIA on the recruitment process for the Scottish Clinical Leadership Fellows (SCLF) will be undertaken this financial year, in collaboration with SCLFs and will report into the Addressing Equity in Medical Education Group.

Guidance is being developed for educators on how to create learning resources with a health equity approach. As well as a survey to understand the learning needs of staff and an all staff webinar on health inequalities that was held in June, existing resources from across the organisation are being gathered to support a health inequalities hub.

The Anti-racism plan includes actions relevant to mental health which are included under this theme. This includes reviewing information in the core mental health curricula to identify if there are any gaps. This has been progressed over the last 2 quarters by colleagues in Psychology and Medicine.

NES has recently established an Accessibility Working Group which will identify actions to ensure that the organisation is supported to meet its' responsibilities regarding accessible digital resources, and that an inclusive learning culture is promoted. Key tasks for the group will be the review of existing accessibility guidance resources and the identification of any gaps, and the development of actions required to highlight and promote these along with identifying any risks and issues for escalation.

Other activities in this theme are reported in Annex 2.

4. Addressing Concerns

Work is progressing to establish an incident reporting mechanism by March 2026 for NES staff, NES employed resident doctors and dentists in training and learners. This will provide an anonymous way (if preferred) to report to the organisation any experience of discrimination and harassment in NES. We are learning from the approach launched by NHS Lanarkshire in October and working with HR and Scotland Deanery colleagues.

Sessions at the Line Manager Network have been delivered to increase awareness about the Anti-Racism and Sexual Harassment guides. Scottish Government commissioned the Coalition for Racial Equality and Rights (CRER) to develop guidance documents for staff on anti-racism and we are working to upload these on Turas Learn. Further work in 2026, linked to our anti-racism training, will provide further opportunities to raise awareness of these.

An engagement session with Resident Doctors and Dentists in Training took place on 19th November with senior leaders in NES. The invite was promoted to all Residents and Dentists in training to listen to experiences and share feedback on the NES anti-racism plan.

5. Data

NES's Employment Equalities Workforce Monitoring report was approved by the Staff Governance Committee in August 2025 and published on the NES website. This includes data on our gender, disability and ethnicity pay gaps. As NES staff can now access the eESS system remotely, this should make it easier for staff to update their equality and diversity fields. Plans are in place to remind staff to do this and set it within the context of our work to be an inclusive organisation and to address discrimination and harassment.

The use of heat maps in relation to EDI questions within the Scottish Training Survey has been approved and analysis is currently underway. The heat maps look at what groups of resident doctors in training respond negatively to the EDI questions based on protected characteristics. This work aims to identify groups that may feel less supported. The work will include comparison with the results from pilot 2024 heat maps.

Appendix 2: Progress on Equality Outcomes

NES identified 5 Equality Outcomes to work towards over 2025-2029 and these are published in the Equality, Diversity and Inclusion Strategy.

Equality Outcome 1: By March 2029 The NES workforce will be representative of people from a minority ethnic background, disabled people and younger people to reflect the diversity of the health and social care workforce.

Equality Outcome 2: By March 2029 NES will have contributed towards reducing the UK-wide attainment gap for medical and pharmacy trainees from Black and Minority Ethnic backgrounds and International Medical Graduates

Equality Outcome 3: By March 2029 The voice and experience of people who have used or are using health and social care services will inform NES's educational resources to contribute to NES's role in addressing health inequalities

Equality Outcome 4: By March 2029 NES will have increased its knowledge about the diversity of learners accessing NES's education and training products to improve equity in education and training for health and social care staff

Equality Outcome 5: By March 2029 NES will meet the learning needs of the health and social care workforce on anti-racism, equality, diversity and inclusion

The Board is provided with an update on activities in relation to the Equality Outcomes relevant to its business

Equality Outcome 1:	**Measures**	**Timeframe**	**Progress update (Q1-Q2) April – October 2025**
By March 2029 The NES workforce will be representative of people from a minority ethnic background, disabled people and younger people to reflect the diversity of the health and social care workforce.			

Equality Outcome 1:	**Measures**	**Timeframe**	**Progress update (Q1-Q2) April – October 2025**
Relevant actions set out in the EDI Action Plan.			
3.4 NES will ensure all staff involved in recruitment are trained on inclusive recruitment practices and are aware of bias and how to mitigate it	Number of sessions delivered to staff on inclusive recruitment practices	March 2029	Work is underway to update information on NES intranet for recruiting managers, including the 'bias in recruitment' training SWAY. We are exploring ways to ensure that hiring managers are up to date with inclusive recruitment practice. It is proposed this will be completion of the mandatory Equality, Diversity and Human Rights module and the updated content on the intranet. Given organisational changes we have put on hold any review of the existing e-learning modules on NES's values-based recruitment.
3.5 Working towards Positive about Disability Leader Status and applying in 2026.	Plan in place to work towards Leader status Evidence in place for application in 2026	September 2026	No specific activity to report this period. Linked to other activities including action above.
3.6 Our support for career progression will be reviewed to make recommendations for improved recruitment and retention of ethnic minority, disabled and younger people and applicants	Review undertaken Recommendations identified for implementation	April 2029	The focus has been on apprenticeship models for existing staff. It aims to encourage hiring managers to enhance diversity and attract talent through appropriate apprenticeship routes. We are standardising experience for individuals joining NES through internships, student

Equality Outcome 1:	Measures	Timeframe	Progress update (Q1-Q2) April – October 2025
			placements, and similar opportunities, with the aim of giving potential employees a great experience who may apply to return to us at some point in the future lining with universities and other organisations. Connections have been made with organisations that other NHS Boards use to supply apprenticeship programmes and Higher Education/Further Education organisations that are looking for intern and student placements.

Equality Outcome 2:	Measures	Timeframe	Progress update (Q1-Q2) April – October 2025
By March 2029 NES will have contributed towards reducing the UK-wide attainment gap for medical and pharmacy trainees from Black and Minority Ethnic backgrounds and International Medical Graduates Actions towards this outcome as set out in Equality, Diversity and Inclusion Strategy 2025–2029			
3.7 Continue to identify, deliver and report on evidence-informed actions to reduce the attainment gap in medicine	Action plan and steering group to monitor progress	March 2029	The Advancing Equity in Medical Education Group (AEMEG) meets every 2 months and has a range of Directorates in NES represented as well as external partners (Director of Medical Education, Universities,

Equality Outcome 2:	**Measures**	**Timeframe**	**Progress update (Q1-Q2) April – October 2025**
overseen by the Addressing Equity in Medical Education Steering Group			Resident doctors, GMC, and BMA). The Group has developed an action plan for the current year and actions in progress include: • Fairer Feedback Sessions for Educators (enhancing feedback conversations between those from diverse backgrounds) are regularly being offered via NES Trainer Development collaborative. • Centre for Workforce Supply have developed a comprehensive resource on International Medical Graduates (IMGs) support on TURAS Learn. • Welcoming International Medical Graduates New to Scotland (WINS) regional events – over 250 IMGS have attended. • Reciprocal mentoring Pilot for Inclusivity highlighted through its findings the positive impact on discussing EDI issues, raising EDI concerns, giving feedback to people from diverse backgrounds and asking help to raise an EDI issue. • Scottish Trainee Survey- Questions on Equality and Inclusivity continue to be asked and responses monitored through our Quality workstream. • Trainee Development and Wellbeing Service continues to support learners needing additional support. Data on protected characteristics is monitored. Reasonable adjustments and neurodiversity remain a key

Equality Outcome 2:	Measures	Timeframe	Progress update (Q1-Q2) April – October 2025
			area of focus. A workshop for trainers on Supporting Neurodiversity was held.
3.8 Sharing learning from work done in medicine with colleagues in pharmacy to inform activities and measures to contribute to reducing the attainment gap in pharmacy	Director of Pharmacy is a member of the Addressing Equity in Medical Education Steering Group	March 2029	NES 'Pharmacy Foundation Training Year Equality, Diversity, and Inclusion Trainee Pharmacist Report 2023-2024' and 'National Recruitment Outcomes Report 2025 – 26 Training Year' has been shared with NES Pharmacy Quality and Safety Group for discussion. Recommendation from the group is to raise awareness of the attainment gap in Foundation Training Year trainees with employers and supervisors. Royal Pharmaceutical Society (RPS) Head of Professional Belonging and Engagement attending FTY Development and Delivery Stakeholder group (November) to discuss outcomes in both reports with Foundation Training Year stakeholders. NES Pharmacy representation on RPS Differential Attainment Oversight Group who collectively lead on delivering the actions highlighted in the 'Chasing Equality in Pharmacy Training – Closing the awarding and attainment gap for Black trainees in Pharmacy' report.

Equality Outcome 3:	Measures	Timeframe	Progress update (Q1-Q2) April – October 2025
By March 2029 The voice and experience of people who have used or are using health and social care services will inform			

Equality Outcome 3:	**Measures**	**Timeframe**	**Progress update (Q1-Q2) April – October 2025**
NES's educational resources to contribute to NES's role in addressing health inequalities Actions towards this outcome as set out in Equality, Diversity and Inclusion Strategy 2025–2029			
3.9 Developing, launching and embedding our Involving People and Communities Framework	Framework launched in the organisation	March 2026	The Framework has been approved by the Learning Education and Quality Strategy Board and the Transformation Group. It has been built into quality management processes and governance. All new learning products will be required to assess the involvement of people at the outset.
3.10 Developing policy and practice that will facilitate, support and remunerate people with lived experience who inform our work	Policy and practice in place to support lived experience contribute to NES work.	March 2026	The Remuneration Policy has been approved and is being tested. The Standard Operating Procedures necessary to support full implementation are currently being developed.
3.11 Upskilling our staff so they engage more effectively and routinely with people with lived experience in the development, design and delivery of our educational resources	Staff learning sessions to increase skills + KPI reported to the Board	March 2029	Educators have been involved in the development of the Framework. Testing in several Directorates and Programmes will support the identification of training needs and further action will be planned in response.
3.12 Seeking feedback from our learners on the value of those educational resources	Measures to gather feedback from learners in place	March 2029	We are developing measures to report on the implementation of the Framework. The LEQS 'User Engagement' Workstream has developed an approach to seek learner feedback and this

Equality Outcome 3:	**Measures**	**Timeframe**	**Progress update (Q1-Q2) April – October 2025**
that have been informed by people with lived experience			incorporates information on the contribution of people with lived experience.

Equality Outcome 4	**Measures**	**Timeframe**	**Progress update (Q1-Q2) April – October 2025**
By March 2029 NES will have increased its knowledge about the diversity of learners accessing NES's education and training products to improve equity in education and training for health and social care staff Actions towards this outcome as set out in Equality, Diversity and Inclusion Strategy 2025–2029			
5.5 Implementing an agreed set of equality, diversity and inclusion monitoring questions to improve our knowledge about learners	Agreed set of equality, diversity and inclusion monitoring questions to improve our knowledge about learners	March 2029	We have commenced a small-scale pilot of core equality monitoring questions for individuals registering courses offered through NES's SQA Centre. The response rate has been limited and we will consider methods to encourage learners to provide his data. There is activity across NES teams on gathering equality and diversity data on our learners and this outcome seeks to agree a consistent approach.
5.6 Analysing and using equality, diversity and inclusion data to make our education products more inclusive	Equality, diversity and inclusion data is used to make our education products more inclusive	March 2029	As indicated a 5.5 above, further work is required to improve data on our learners that will enable us to develop useful insights to enhance the inclusivity of education products.

Equality Outcome 4	Measures	Timeframe	Progress update (Q1-Q2) April – October 2025
			An example of recent work is the EQIA undertaken on NES's National Leadership and Management Programmes and Resources (excluding Leading to Change) where existing data that has been collected was used to inform the EQIA.

Equality Outcome 5	Measures	Timeframe	Progress update (Q1-Q2) April – October 2025
By March 2029 NES will meet the learning needs of the health and social care workforce on anti-racism, equality, diversity and inclusion Actions towards this outcome as set out in Equality, Diversity and Inclusion Strategy 2025–2029			
3.16 Develop resources to support implementation of the Knowledge and Skills Framework on Transgender Care	A resource has been developed to meet the essential learning needs for all NHS Staff as set out in the Knowledge and Skills Framework	March 2026	Work continues on the essential learning module with a target to handover for development by the Technology Enabled Learning Team in Q3.
3.17 Collaborating with the health and social care sector, including unpaid carers, to identify learning needs and deliver and evaluate education	Learning Needs Assessment undertaken with key partners	March 2029	The focus in this area has been on responding to the learning needs to support NHS Boards and social care organisations on anti-racism. A contract has now been awarded to build capability in health and social care sector to deliver local anti-racism

Equality Outcome 5	Measures	Timeframe	Progress update (Q1-Q2) April – October 2025
and training resources to meet these learning needs.			training, a webinar for leaders and a contribution to a podcast. NES's Equality Team is supporting the roll out of NHS Lothian Medical Education Team's Beyond Bystander training. A train the trainer session took place in October and a community of practice is being established to support local delivery. We are also exploring an on-line awareness session on bystander training. NES has organed a masterclass for Non-Executive Board members on equality, diversity and human rights in partnership with the Equality and Human Rights Commission (11th November 2025). This will supplement the existing e-learning module available to Board members on Turas Learn. NES continues to promote the 'Preventing and Responding to Sexual Harassment' module on Turas Learn to Health Boards and partners. Leading to Change has collaborated with health, social care and social work colleagues in the design and delivery of bespoke offers such as the Allyship Hub, the recent launch of the Inclusive Leaders Hub, the ongoing development of Diversity Leadership Blogs and the Diversity Coffee Connect event series. The learning content of these offers continues to be shaped by our ongoing inquiry to identify learning needs. This includes feedback and suggestions from

Equality Outcome 5	Measures	Timeframe	Progress update (Q1-Q2) April – October 2025
			registration and evaluation forms and developments relating to research and policy. An EDI Trainers network is facilitated by NES to share practice, identify learning needs and work collaboratively. The network meets quarterly and has good representation from Boards and social care sector. There are some gaps from territorial boards and we continue to promote the network to encourage collaboration. The Human Rights capability building project this financial year will also contribute to understanding learning needs in the workforce in relation to human rights.
3.18 Working across NES to strengthen education and training resources to reflect current issues, for example, sexual harassment and misogyny, anti-racism, transgender care, disability and neurodiversity, religion and belief	Number of resources produced to meet learning needs	March 2029	A facilitator's pack on cultural humility was developed to pilot with GP Trainers. This was delivered in October with further sessions planned for later in the year. Colleagues in dentistry and the Equality Team attended a General Dental Council workshop on sexual misconduct in September to share work NES has done in this area. A follow up meeting is arranged with the University of Glasgow who have undertaken research in the experience of sexual harassment in health care and colleagues in dentistry and the Deanery for November.

NHS Education for Scotland **NES/25/84**

Agenda Item: 9b

Date of meeting: 20 November 2025

NES Public Board

1. Title of Paper

1.1. NES iMatter Survey Report - Results for 2025

2. Author(s) of Paper

2.1. Janice Gibson, Associate Director OD, Leadership and Learning
Anne-Marie Campbell, Specialist Lead OD, Leadership and Learning

3. Lead Director(s)

3.1. Sybil Canavan, Director of People and Culture

4. Situation/Purpose of paper

4.1. To present the NES iMatter results for 2025 for discussion and noting.

5. Background and Governance Route to Meeting

5.1. The annual iMatter survey is a staff experience improvement tool, designed for the NHS Scotland workforce to help individuals, teams and organisations better understand and improve staff experience. It is aligned to the NHS Staff governance standards and provides an opportunity to measure how staff governance standards are being embedded in working practices.

5.2. In NES our goal is to be a collaborative, innovative and inclusive organisation that places the utmost value in its staff and one which constantly learns from each other. The results provide insight into how far this goal is being achieved.

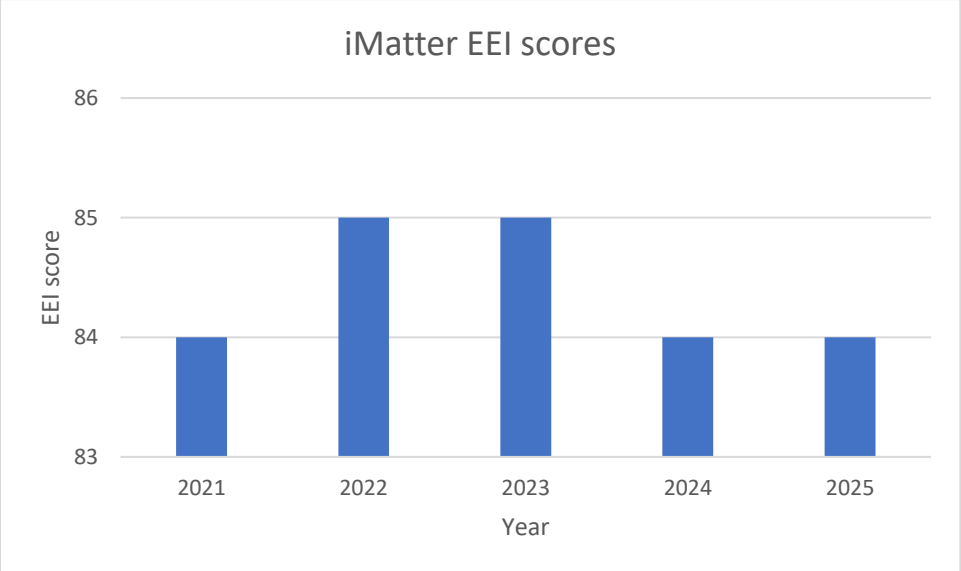
5.3. Given the fiscal situation, recent announcements regarding office moves and the creation of a new organisation, it was even more important to hear from our workforce at this challenging time.

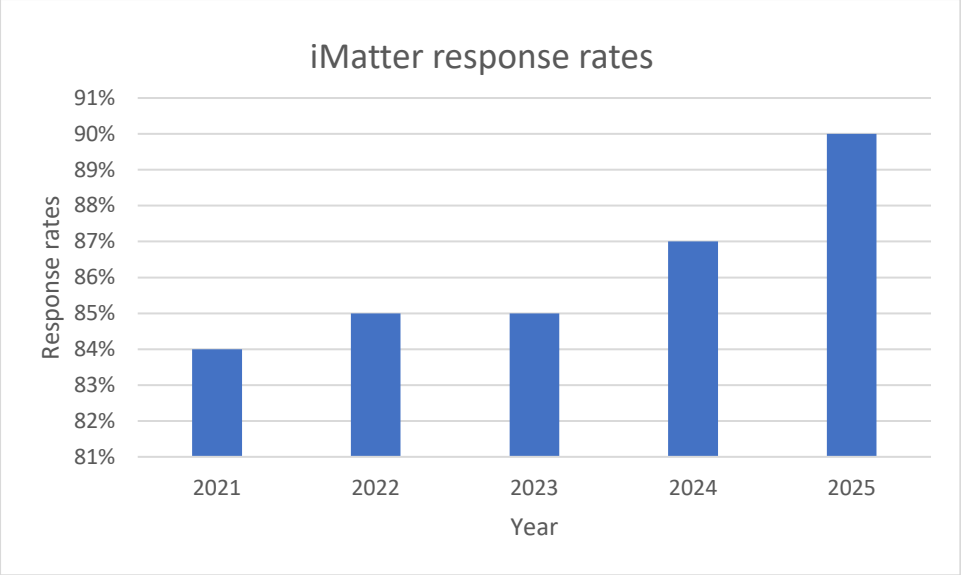
6. Assessment/Key Issues

6.1. Workforce engagement rates have remained high. This is positive given that the iMatter survey was issued and live at the time of the Scottish Government's announcement to create a new organisation.

6.2. Response rates increased to 90% (87% in 2024) and Employee Engagement Index (EEI) score remained at 84. The overall number of staff that the survey was sent to was 1,234. This is one less than in 2024 and an additional 26 surveys were completed compared to 2024.

6.3. For comparison the graphs below detail the EEI scores and response rates from 2021 to 2025.





6.4. Areas of strength

6.4.1. The survey is made up of 28 questions, which respondents score on a scale (1-10). Each question corresponds to a Staff Employee Engagement Component.

6.4.2. Comparing the scores from 2025 to those from 2024, 8 have increased (3 increased in 2024), 15 have remained the same (8 remained the same in 2024) and 5 decreased (17 decreased in 2024). See Appendix 1 for further detail.

6.4.3. NES continues to show strength in these areas:

- 'Assessing risk and monitoring work stress and workload' (first component).
- 'Visible and consistent leadership' (second component).
- 'Confidence and trust in management' (third component).

6.4.4. This suggests that the strong investment in culture, wellbeing and leadership is effective in supporting the workforce to deliver well and have confidence and trust at work in management.

6.5. Areas of development

6.5.1. These are the areas that scored lowest:

- Our lowest indicator over the four years is for partnership working although this has increased by 1 point (66 to 67) and relates specifically to the following question:
    - I feel sufficiently involved in decisions relating to my organisation

- Performance Management is measured through two questions with one remaining the same and the other increasing slightly:
    - I am confident performance is managed well within my team (86 – same as 2024)
    - I am confident performance is managed well within my organisation (71 to 72)

- The questions relating to the Board are measured under Confidence and trust in management and Visible and consistent leadership and although they are among those that scored the lowest, they did increase in 2025:
    - I have confidence and trust in Board members who are responsible for my organisation (73 to 75)
    - I feel that board members who are responsible for my organisation are sufficiently visible (72 to 75)

- There are two questions where the scores have dropped by 2 points from 2024:
    - I am confident my ideas and suggestions are listened to (87 to 85)
    - I am confident my ideas and suggestions are acted upon (83 to 81)

6.6. Comment on the areas of development

6.6.1. While these areas report as areas to develop it is important to recognise that these are still positive results. The slight increase in the Board related questions provide evidence that the additional investment and effort to increase visibility and engagement is moving in the right direction.

6.6.2. The performance related questions are a recurring theme annually. Previous inquiry around these with staff revealed that the questions are ambiguous and not always answered with consistent understanding. Some consider it to relate to staff behaviour while others consider it to be relating to

KPIs and performance delivery. There is an additional element in that when managing staff performance this is often a confidential matter between a line manager and employee and wouldn't be visible or known to the wider team.

6.6.3. The areas around decisions and ideas could relate to the tighter fiscal position faced during the course of the last year. Tighter focus and proportionate reframing of projects may have been perceived as a limitation on new ideas and decisions being fully considered. This is of course a hypothesis that would require testing.

6.7. Additional questions relating to 'Raising Concerns'

6.7.1. The scores for the additional standalone optional questions relating to Raising Concerns have remained the same as 2024. These relate to whistleblowing.

6.7.2. Appendix 2 shows the scores for these questions from 2023 to 2025. As optional questions, the number of staff completing them was slightly lower than the number completing the 28 survey questions.

6.8. iMatter Action Planning

6.8.1. The development of team action plans are critical to the ownership of team strengths and areas to develop. The completion rate increased by 3% taking it from 87 to 90% completion of action plans this year.

7. Recommendations

7.1. That the board note the results for NES iMatter 2025.

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

a) Have implications for NHS Delivery been considered?
☒Yes
☐No

b) Have Educational implications been considered?
☐ Yes
☒ No

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

d) Alignment with Our Strategy 2023 – 26 People, Partnerships and Performance
☒ 1. People Objectives and Outcomes
☐ 2. Partnership Objectives and Outcomes
☐ 3. Performance Objectives and Outcomes

e) Have key strategic risks and mitigation measures been identified?
☐ Yes
☒ No

f) Have Equality, Diversity, Human Rights and health inequality issues been considered as per Fairer Scotland Duty: Guidance for Public Bodies and Corporate Parenting as per the Children and Young People (Scotland) Act 2014?
☐ Yes
☒ No

g) Has an Equality Impact Assessment (EQIA) been completed or in progress for this piece of work?
☒ Yes
☐ No

h) Have you considered Emergency Climate Change and Sustainability implications as per **DL (2021) 38**?
☐ Yes
☒ No

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

Author name: Janice Gibson / Anne Marie Campbell
Date: 13/10/2025

Appendix 1

iMatter Questions	Staff Experience Employee Engagement Components	Average Response				
		2021	2022	2023	2024	2025
I feel my direct line manager cares about my health and well-being	Assessing risk and monitoring work stress and workload	94	94	95	94	95
My direct line manager is sufficiently approachable	Visible and consistent leadership	94	95	95	95	95
I have confidence and trust in my direct line manager	Confidence and trust in management	93	94	94	93	93
I would recommend my team as a good one to be a part of	Additional Question	91	91	91	91	91
I am treated with dignity and respect as an individual	Valued as an individual	92	93	92	92	91
I am treated fairly and consistently	Consistent application of employment policies and procedures	91	91	91	90	90
My team works well together	Effective team working	89	90	89	90	90
I feel appreciated for the work I do	Recognition and reward	85	86	87	87	87
I am clear about my duties and responsibilities	Role Clarity	86	87	88	88	87
I have sufficient support to do my job well	Access to time and resources	84	86	86	86	86
I would be happy for a friend or relative to access services within my organisation	Additional Question	88	89	88	86	86
I feel involved in decisions relating to my team	Empowered to influence	86	87	87	86	86
I get enough helpful feedback on how well I do my work	Performance development and review	84	85	86	86	86
I am confident performance is managed well within my team	Performance management	86	87	87	86	86
I would recommend my organisation as a good place to work	Additional Question	87	88	87	84	85
My work gives me a sense of achievement	Job satisfaction	84	86	86	85	85
I am confident my ideas and suggestions are listened to	Listened to and acted upon	86	86	86	87	85
I get the information I need to do my job well	Clear, appropriate and timeously communication	83	84	84	83	84
I understand how my role contributes to the goals of my organisation	Sense of vision, purpose and values	85	86	86	84	84
I feel my organisation cares about my health and wellbeing	Health and wellbeing support	85	86	84	81	82
I am given the time and resources to support my learning growth	Learning & growth	80	82	83	81	81
I am confident my ideas and suggestions are acted upon	Listened to and acted upon	81	82	83	83	81
I feel involved in decisions relating to my job	Empowered to influence	81	82	82	81	80
I get the help and support I need from other teams and services within the organisation to do my job	Appropriate behaviours and supportive relationships	80	81	80	78	78
I have confidence and trust in Board members who are responsible for my organisation	Confidence and trust in management	76	75	75	73	75
I feel that board members who are responsible for my organisation are sufficiently visible	Visible and consistent leadership	72	71	71	72	75
I am confident performance is managed well within my organisation	Performance management	73	75	74	71	72
I feel sufficiently involved in decisions relating to my organisation	Partnership working	69	68	68	66	67

Appendix 2

Raising Concerns questions (optional to answer)	**2023**		**2024**		**2025**	
	Number of respondents	Average score	Number of respondents	Average score	Number of respondents	Average score
I am confident that I can safely raise concerns about issues in my workplace.	1048 / 1075	86	1054 / 1079	85	1077 / 1105	85
I am confident that my concerns will be followed up and responded to.		83		81		81

NHS Education for Scotland **NES/25/85**

Agenda Item: 9c

Date of meeting: 20 November 2025

NES Public Board

1 Title of Paper

1.1. Annual Climate Emergency and Sustainability Report 2024/25 and Public Bodies Climate Change Duties Report 2024/25

2 Author(s) of Paper

2.1. Jim Boyle, Director of Finance

3 Lead Director(s)

3.1. Jim Boyle, Director of Finance

4 Situation/Purpose of paper

The purpose of this paper is to:

4.1. Present for review by the Board the 2024/25 Annual Report on the NHS Scotland Global Climate Emergency and Sustainable Development Policy and the 2024/25 Public Bodies Climate Change Duties Report. The obligation on all Boards to publish the Annual Report arises from the Policy for NHS Scotland on the Global Climate Emergency and Sustainable Development (the Policy), which was published by the Scottish Government in November 2021. The duty to report annually was also reinforced in the NHS Scotland Climate Emergency & Sustainability Strategy, published in August 2022. The instruction for Boards to comply with the Policy was contained in the Directors Letter DL (221) 38 and the 2022/23 report is due to be submitted by NHS Boards in Scotland by 30 November 2024. Following submission to the Scottish Government, reports then have to be published by each Board.

4.2. This report also contains at Appendix 2 NES' Public Bodies Climate Change Duties (PBCCD) Report for 2024/25. That report is submitted by all public

bodies that are required to report annually in accordance with the Climate Change (Duties of Public Bodies Reporting Requirements)(Scotland) Order 2015, as amended by the Climate Change (Duties of Public Bodies: Reporting Requirements) (Scotland) Amendment Order 2020, which took effect for reporting periods commencing on or after 1 April 2021. Subject to Board approval, the report will be submitted to the Sustainable Scotland Network by 30 November 2025.

5 Background and Governance Route to Meeting

5.1. All Boards are required to adopt the national Policy and Strategy, and each Board has a requirement to report publicly and via its own internal governance processes each year. As part of that reporting, each NHS Scotland body must assess its contribution to the achievement of the United Nation's Sustainable Development Goals on an annual basis. The proposed draft report is attached at Appendix 1.

5.2. Furthermore, as an NHS Board, NES is a 'Major Player' under the terms of the Climate Change (Scotland) Act 2009. Major players are public bodies:

- with large estates and large numbers of staff
- with a high impact and influence, e.g. Scottish Government, local authorities, SEPA, SNH
- with large expenditure
- that provide an auditing or regulatory function
- that have a legislative duty to submit an annual report on what it is doing to meet the statutory Public Bodies Climate Change Duties.

5.3. This report must be submitted to Scottish Government, via the Sustainable Scotland Network, by 30 November each year and will cover the most recently completed financial year. The Public Bodies Climate Change Duties Report has seven sections:

Part 1: Organisational Profile

Part 2: Governance, Management and Strategy in relation to climate change

Part 3: Corporate Emissions, Targets and Projects

Part 4: Adaptation to the impacts of climate change

Part 5: Procurement actions and achievements regarding climate change

Part 6: Data Validation and sign-off Declaration

Part 7: Reporting on Wider Influence (recommended completion only).

5.4. The first six parts apply to the Board's own carbon emissions reduction, climate change adaptation and sustainable procurement activities. Part 7 is the part of the report that has most relevance for NES, as our activities around Parts 1 to 6 are very limited when compared to Territorial Health Boards. The draft Public Bodies Climate Change Duties Report is attached as Appendix 2 of this report.

6 Assessment/Key Issues

6.1. All Boards are required to adopt the national Policy and Strategy, and each Board has a requirement to report publicly and via its own internal governance processes each year. As part of that reporting, each NHS Scotland body must assess its contribution to the achievement of the United Nation's Sustainable Development Goals on an annual basis.

6.2. A significant development in recent months is the ruling from the from the International Court of Justice in July 2025. The Court delivered an advisory opinion that individual states have an obligation to protect the environment from greenhouse gas (GHG) emissions and act with due diligence and co-operation to fulfil this obligation. This includes the delivery of obligations already agreed at the Paris Agreement on Climate Change, but it goes further in stating that if states breach their obligations, then they incur legal responsibility and may be required to cease the wrongful conduct, offer guarantees of non-repetition and make full reparation depending on the circumstances.

6.3. This ruling applies at state level and it may result in revisions to existing policy, strategy and guidance that might subsequently impact on individual organisations such as NES. In Scotland, NHS Boards are not at this stage required to take any immediate actions as a result of this ruling, as it applies at state level, but the Board should keep a watching brief for any changes to NHS Scotland policy in this area. More information, analysis and reporting on the ruling can be found at:

- Historic International Court of Justice Opinion Confirms States' Climate Obligations | International Institute for Sustainable Development
- ICJ issues landmark Advisory Opinion on States' legal obligations in respect of climate change
- Top UN court says countries can sue each other over climate change - BBC News
- Nations who fail to curb fossil fuels could be ordered to pay reparations, top UN court rules | Climate crisis | The Guardian

6.4. Many of the provisions of the Scottish Government's national Strategy and Policy for NHS Scotland apply to the Territorial Boards, which have large buildings estates, use metered dose inhalers and anaesthetic gases, and have large vehicle fleets. Clearly none of these areas of activity apply in any significant way to NES and some of the other National Boards, but we still have an obligation to fully comply with both the Policy and the Strategy.

6.5. The Annual Report (Appendix 1) sets out the activities that we have been engaged in over the 2003/24 reporting year, and also contains details of NES own CO_2 emissions which remain low, as we continue with the remote/hybrid working model that we implemented during the Covid pandemic period. The report demonstrates that we have continued to see very significant reductions in business mileage compared to the period before 2020, although some have increased from the previous reporting period. Appendix 2 of this report contains the Public Bodies Climate Change Duties Report for NES for 2023/24, to be submitted to the Sustainable Scotland Network on behalf of NES.

6.6. The major source of carbon emissions for NES is travel by staff in carrying out their duties. This has seen a very significant reduction as a result of the Covid pandemic and the move to a predominantly remote/hybrid method of working for staff. Although 2022/23 recorded an increase in emissions from the previous financial year, which was then carried through into 2023/24, the carbon emissions for both years as a result of staff travel represented very significant reductions from pre-pandemic levels of almost 80%. The emissions sources comparison with the previous year in tonnes of CO_2 Equivalent (tCO_2e) is shown below:

Table 1	**2023/24 (tCO_2e)**	**2024/25 (tCO_2e)**	**Annual Change (tCO_2e)**
Short-haul Flight	22.8	20.9	(1.9)
International Flight	16.3	4.7	(11.6)
Long-haul Flight	9.7	3.6	(6.1)
Rail	23.4	15.3	(8.1)
Car	32.8	24.1	(8.7)
Hotel Stay	22.5	13.7	(8.8)
Electricity Usage	91.5	86.4	(5.1)
Homeworking	662.9	664.4	1.5
Total	**881.9**	**833.1**	**(48.8)**

6.7. This represents a reduction in emissions of 5.5% from the previous year and this demonstrates that NES is making significant progress in reducing carbon emissions across all our business operations.

6.8. Emissions from travel in particular remain very low compared to pre-pandemic levels. A key focus of the Climate Emergency and Sustainability Group during 2024/25 and in future years will be to bring additional initiatives forward that can further reduce NES's carbon emissions and to support other Boards in their efforts to do likewise. Car travel has seen a further reduction in the level of CO_2 emissions from this source during 2024/25, possibly driven by the requirements to cease discretionary spending during the course of that financial year, leading to recused travel to events. Furthermore, the increased use of electric and hybrid vehicles, which attract a much lower tCO_2e conversion factor will also have contributed to this.

6.9. The Action Plan that has been produced to accompany the NES Strategy on Climate Emergency and Sustainability focuses some of that work on developing how our education and training programmes can further build in elements of awareness of climate change and sustainability and behavioural change in clinical practice to widen NES's influence in this area.

7 Recommendations

7.1. Review and approve the proposed Annual Report for 2024/25 on the NHS Scotland Global Climate Emergency and Sustainable Development Policy, as set out in Appendix 1 to this report.

7.2. Approve the submission of the 2024/25 Annual Report to the Scottish Government by 30 November 2025, subject to any further amendments the Board may wish to see made.

7.3. Review and approve the proposed Public Bodies Climate Change Duties Report, as set out in Appendix 2 to this report.

7.4. Approve the submission of the 2024/25 Public Bodies Climate Change Duties Report to the Sustainable Scotland Network by 30 November 2025, subject to any further amendments the Board may wish to see made.

Appendices

Appendix 1 Draft Annual Report for 2024/25 on the NHS Scotland Global Climate Emergency and Sustainable Development Policy

Appendix 2 Draft Public Bodies Climate Change Duties Report 2024/25

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

a) Have implications for NHS Delivery been considered?
☒Yes
☐No

b) Have Educational implications been considered?
☒ Yes
☐ No

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

d) Alignment with Our Strategy 2023 – 26 People, Partnerships and Performance
☐ 1. People Objectives and Outcomes
☐ 2. Partnership Objectives and Outcomes
☒ 3. Performance Objectives and Outcomes

e) Have key strategic risks and mitigation measures been identified?
☒ Yes
☐ No

f) Have Equality, Diversity, Human Rights and health inequality issues been considered as per **Fairer Scotland Duty: Guidance for Public Bodies** and **Corporate Parenting** as per the **Children and Young People (Scotland) Act 2014?**
☐ Yes
☒ No

g) Has an Equality Impact Assessment (EQIA) been completed or in progress for this piece of work?
☐ Yes
☒ No

h) Have you considered Emergency Climate Change and Sustainability implications as per DL (2021) 38?
☒ Yes
☐ No

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

Author name: Jim Boyle, Director of Finance
Date: 12 November 2025
NES

APPENDIX 1

NHS EDUCATION FOR SCOTLAND

CLIMATE EMERGENCY & SUSTAINABILITY

ANNUAL REPORT FOR 2024/25

1. Introduction

1.1. This is NHS Education for Scotland's (NES) annual Climate Emergency and Sustainability Report, covering the year 2024/25.

1.2. NES provides training and education to the entire NHS Scotland workforce and NES also supports the development of systems and data services to enhance the provision of digital healthcare in Scotland. NES is a key partner in ensuring that the Health and Social Care workforce has the right skills, in the right place, at the right time, for today and for future years.

1.3. In line with the wider NHS in Scotland, NES aims to become a net-zero organisation by 2045 for all our emission sources. NES does not provide direct clinical healthcare services to individuals within Scotland, we do not discharge harmful clinical gases, we only generate a very small amount of clinical waste in a limited number of training programmes, we do not operate a vehicle fleet and we operate from only a small number of premises. As a consequence, our direct carbon dioxide (CO2) emissions are very low when compared to territorial NHS Health Boards in Scotland.

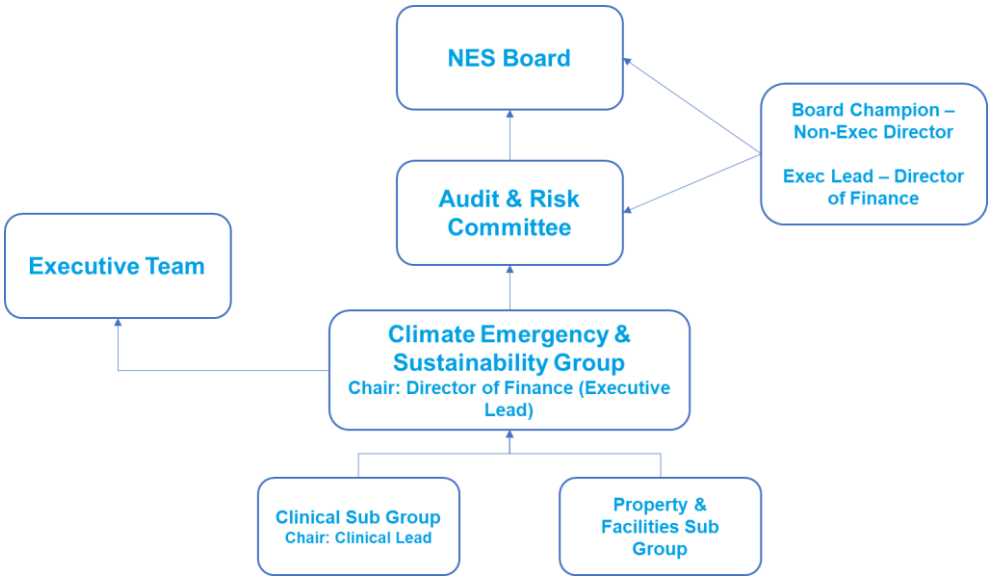
1.4. During 2024/25 NES employed 1,629 full-time equivalent people to directly provide its services. NES also acted as lead employer for almost 7,000 doctors in training, as well as 270 dentists in training.

2. Leadership and governance

- The Sustainability Champion on the Board is Gillian Mawdsley, who is a Non-executive Director on the Board of NES
- The Executive Lead is Jim Boyle, Director of Finance, who is also an Executive Director on the Board of NES
- The committee with lead responsibility for climate change and sustainability is the Audit and Risk Committee
- NES is showing leadership in tackling climate change and becoming environmentally sustainable in a number of ways
    - Supporting continued home and hybrid working to enable staff to carry out their duties where possible without the need to commute to offices

- Where staff are required to travel, NES encourages and promotes the use of public transport and other sustainable forms of transport, such as cycling
- Implementation of employee salary sacrifice schemes to encourage the move to low-emission electric vehicles and also to facilitate the use of cycling as a means of travel to work for employees.
- We are striving to build climate emergency and sustainability considerations into our education and training activities where appropriate, and we see this as the main focus of NES' contribution to helping to meet the Scottish Government's policy on Climate Emergency and Sustainability in future years.

2.1. The NES internal governance structure for Climate Emergency and Sustainability is represented as follows:



3. The NES Strategy on Climate Emergency and Sustainability

3.1. In May 2024 the NES Board approved a Strategy on Climate Emergency and Sustainability, and developing this this involved input from colleagues across the entire organisation. The Strategy was considered by the Audit and Risk Committee and was then approved by the Board in May 2024. The Strategy can be found at the following link:

NES Climate Emergency & Sustainability Strategy

3.2. As NES moves forward into NHS Delivery, it is anticipated that the policy aims of the current NES Strategy will be amalgamated into a new strategy for the new organisation, recognising that the efforts to address the harmful effects of climate change will evolve in response to the actions that are needed nationally

and globally, and as technological solutions evolve and as new research emerges.

3.3. Along with the new Strategy, an Action Plan has been regularly reported to the Audit and Risk Committee to give the Committee and the Board assurance that actions are being put in place to contribute towards the national Policy and Strategy.

4. Raising Awareness of Climate Emergency and Sustainability

4.1. There have been a number of initiatives aimed at raising awareness of the issues around Climate Emergency and Sustainability right across NES. A Board Development session has previously taken place on the issue. Board and Committee reports contain a checklist of NES and Scottish Government policies that should be considered when presenting reports and taking decisions, and Climate Emergency and Sustainability features highly on that list of policy considerations. This is aimed at ensuring that Climate Emergency and Sustainability actively features in discussions on NES business as a routine consideration, and not only when specific decisions are required.

4.2. Further awareness sessions will take place during 2025/26 with the wider NES workforce, although this will now be in the context of the formation of NHS Delivery from 1 April 2026. These sessions will be aimed at emphasising the importance of incorporating climate emergency awareness and mitigation into the core education and training programmes. The intention is to constantly cascade the messages around Climate Emergency and Sustainability to the entire workforce and then onto the NHS and Social Care workforce that NES currently engages with.

4.3. NES regularly participates in and contributes to national events aimed at raising awareness of Climate Emergency and Sustainability issues and developing strategies to combat the effects of climate change. This includes participation in Scotland's Climate Week in support of the Scottish Government, where NES delivered a programme of information sharing and activity between 29 September and 3 October 2025. Furthermore, the Board Champion attends the Climate Emergency and Sustainability Champions Network, and the Executive Lead attends the national forum for Board Executive Leads, so we are constantly connected the emerging policies and strategies and other developments in this area.

4.4. The Board will continue to play an active role in this national work to make sure that our own core work aligns with national policy, and that we play a role in supporting the wider NHS in effecting change in how we manage NHS resources to mitigate the impacts of climate change. From 2026 this will be in the context of NES' current areas of responsibility being part of the work of NHS Delivery.

4.5. We have also established an active staff Ambassador Network for Climate Emergency and Sustainability, and this group meets regularly to discuss how it can advance the work of NES in this policy area.

5. Climate Change Adaptation

5.1. The climate is changing mainly due to the greenhouse gases already emitted into the atmosphere. While efforts to reduce the rate and scale of climate change continue, we must also adapt to new conditions we are facing.

5.2. As a national Board with relatively few properties, negligible levels of surgical gas emissions and waste discharge, the activities of NES have a much more limited direct impact on the environment than those of the territorial Boards. However, NES is a key organisation in driving health and social care practice in Scotland, and we have a responsibility to show leadership to those to whom we educate and train, as well as our own employees, in reducing the impact on the environment from health and social care practice.

5.3. For those properties that we operate, and the staff travel that we generate, NES has a statutory duty to ensure that those activities are conducted in a manner that is not detrimental to the country's efforts to reverse the catastrophic damage to the planet. We are required to comply with the same statutory obligations as the territorial Boards.

5.4. NES takes the challenge of the climate emergency very seriously, and the Board stands ready to play a full part in meeting that challenge in whatever way it can, either through its own activities directly, or by supporting other Boards in their efforts. NES is ideally placed to support NHS Scotland by raising awareness of climate emergency and helping to disseminate information through education and training at all stages of the learning journey of the workforce.

5.5. During 2024/25 we worked closely with colleagues in National Services Scotland (NSS) to develop and host a range of resources aimed at supporting the wider NHS in Scotland to continue to raise awareness of the climate emergency, and to provide practical support information on how to minimise the environmental impact of the activities of the health and social care sector. The Sustainable Action Programme is hosted on NES' Turas platform, and both Boards will continue to work together to develop this resource. During 2024/25 these resources were further developed to be further targeted to the needs of the social care workforce.

5.6. NES has carried out awareness raising development sessions for the Board, with an emphasis on the importance of transforming our business activities to comply with climate change and sustainability requirements.

5.7. We have also established a Climate Emergency and Sustainability Group to manage and monitor the operational activities of NES to start to ensure that the impact on climate change and sustainability is at least neutral, and if possible, has a positive and beneficial impact. This impact will not be achieved in the very short term but will require a step-change approach to be adopted over the medium term.

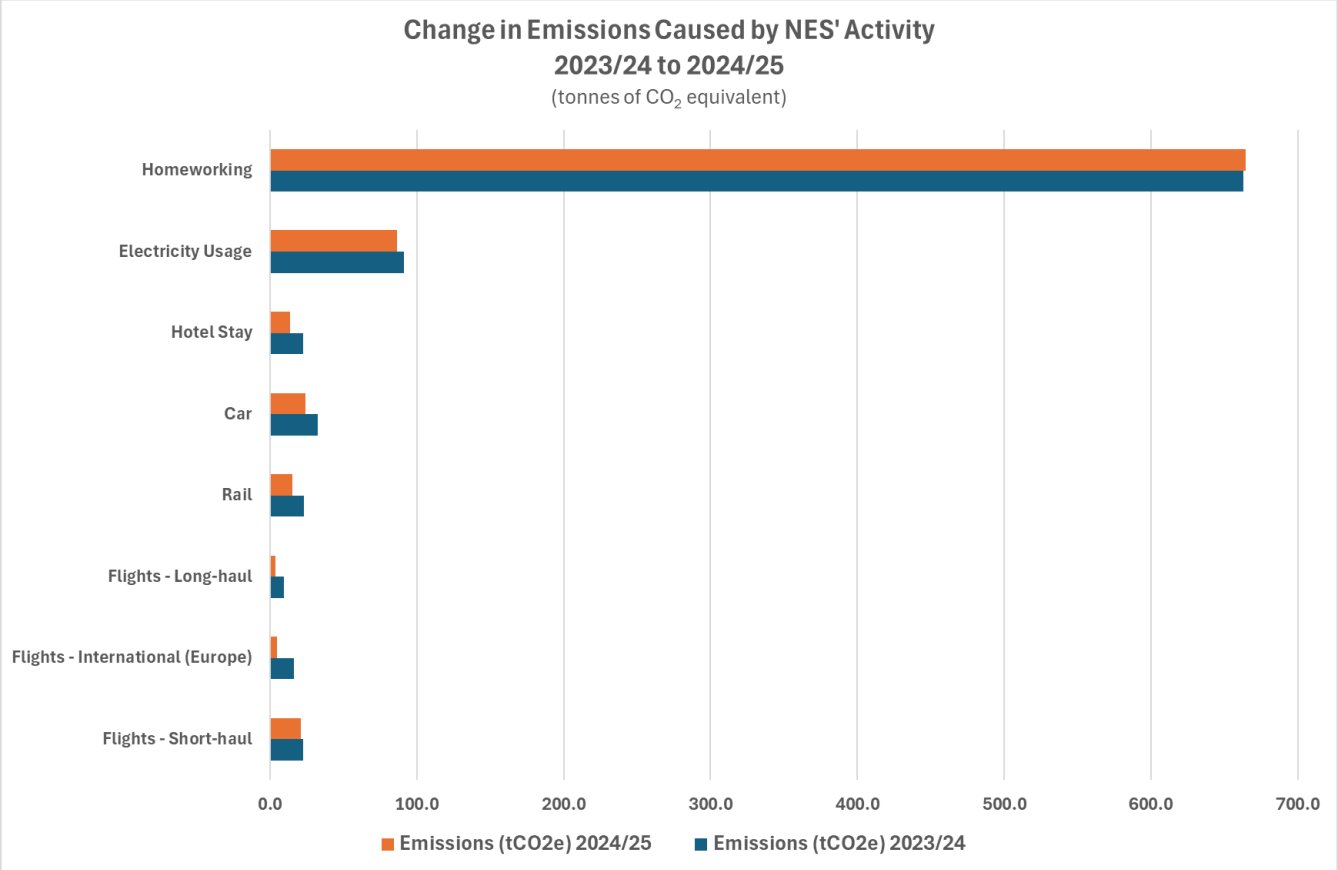
5.8. This group oversees and monitors activity across all of NES' clinical activities, to ensure that there is consistency across all clinical disciplines and that our programmes of work build in Climate Emergency and Sustainability elements wherever appropriate.

6. Emissions Produced in 2024/25

6.1. As with all public bodies, NES reports each year to the Sustainable Scotland Network on our Public Bodies Climate Change Duties. This describes the governance arrangements within the reporting body, any adaptation measures being implemented, as well as a full analysis of emissions produced. For 2024/25 a measure of emissions from homeworking has again been included in the NES return after being first reported in 2023/24. This shows a total emissions figure from that source of 664 tonnes of CO2 equivalent and represents 79.7% of the NES attributed emissions total of 833.3 tCO2e.

6.2. NES does not collect information from individual employees on their detailed working patterns, so the information on homeworking hours is based on an estimate of 75% of total worked hours being carried out in a home setting.

6.3. Overall, our emissions have fallen from the 2023/24 level of 881.9 tCO2e to a level of 833.1 tCO2e for 2024/25. This represents a reduction in emissions of 5.5% from the previous year and this demonstrates that NES is making significant progress in reducing carbon emissions across all our business operations. For individual emission sources the 2024/25 year-on-year comparison of emissions is shown below:



7. Travel and Transport

7.1. Domestic transport (not including international aviation and shipping) produced 26% of Scotland's greenhouse gas emissions in 2021. Car travel is the type of travel which contributes the most to those emissions. NES does not operate a fleet of vehicles, but our employees do routinely use their own vehicles and we also make extensive use of public transport in carrying out the services within our Strategic Plan.

7.2. The reduction in travel brought about by the Covid pandemic in 2020 saw a significant reduction in business travel for NES, with all travel practically ceasing for a period of time, before increasing slightly as Scotland moved out of the initial stages of the pandemic. This also created a reduction in distances travelled through all forms of transport by NES employees as we moved to a predominantly remote and hybrid model of working. As a result, we saw substantial reduction in the CO2 emissions generated by our business travel. From 2019/20 to 2022/23, we saw a 77% reduction in the value of our CO2 emissions attributed to our business travel as set out in the table below:

		Amount of greenhouse gas (tonnes of CO_2 equivalent)						**% change from 2019/20 to 2024/25**
Source	**Description**	**19/20**	**20/21**	**21/22**	**22/23**	**23/24**	**24/25**	
Business travel	Greenhouse gases produced by staff travel for work purposes, not using NHS vehicles, and also excluding personal commuting	493	58	53	115	103	69	-86%

7.3. Although business travel mileage increased significantly in 2022/23, it has stabilised since then and has fallen back significantly in 2024/25, and we have still seen a sustained reduction in business travel from the last full pre-pandemic year, 2019/20. With the continuation of remote and hybrid working, we see this as a long-term reduction in CO2 emissions from that source. We will strive where possible to further reduce those emissions, even from that low base point, to ensure that the low level of business travel represents our new baseline following the full emergence from the pandemic lockdown periods.

7.4. NES and the wider NHS Scotland are supporting a shift to a healthier and more sustainable transport system where active travel and public transport are prioritised, thereby reducing the need to use vehicles.

7.5. Prior to the Covid pandemic, NES already had a strong focus on delivering training and education, as well as our strategic and administrative functions, in

a digitally enabled manner. The pandemic increased the scope of this method of working and involved significant technological investment. As we move out of the pandemic, a significant proportion of the workforce continue with remote and hybrid working as the default means of working. NES strongly supports this strategy for the future, not only to provide employee flexibility and choice, but also as a strong contributor to reducing staff travel and commuting. Although we will make adjustments as working patterns and aspirations settle post-pandemic, the remote and hybrid model will continue as the default work style.

7.6. NES strongly supports active travel for its staff and provides a number of initiatives to enable and promote this. We support and operate the Cycle to Work Scheme. We took a decision during 2021/22 to increase the scheme financial limits to allow greater access to eBikes, to encourage more employees to participate in cycling to work.

7.7. As we look to reconfigure the NES buildings estate in the coming years, access to public transport will feature as one of the key options appraisal criteria, and we would be highly unlikely to support any options that involve employees, or those receiving our services, having any significant need for car transport.

7.8. Recognising that some form of car use will be inevitable for the delivery of our services for the foreseeable future, albeit with a policy of encouraging public transport and active travel, during 2023/24 NES implemented a salary sacrifice scheme for ultra-low emission electric vehicles (ULEVs). The scheme was launched in July 2023 and has seen good take up by staff since it was launched.

7.9. While NHS Boards more widely are working to remove all petrol and diesel-fuelled cars from their fleets by 2025, NES does not operate a fleet of vehicles, so our focus will be to reduce business travel through other forms and to offer more environmentally sustainable options.

8. Building Energy

8.1. We aim to use renewable heat sources for all of the buildings operated by NES by 2038.

8.2. NES operates from five buildings all of which are shared with other organisations. None are owned by NES and none are used by NES for direct clinical care. The buildings are:

- 102 Westport, Edinburgh
- 177 Bothwell Street, Glasgow
- UHI House, Inverness
- Forest Grove House, Aberdeen
- Frankland Building, University of Dundee Campus

8.3. In addition to the above sites, NES also has a presence in the Dental Education Centres in Glasgow, Edinburgh and Aberdeen.

8.4. Like many employers that are continuing to operate in a remote/hybrid manner, NES is currently considering the reconfiguration of its buildings estate, as we are currently carrying excess capacity. Reducing the buildings footprint will help to reduce our overall CO2 emissions, and the reconfiguration will also be designed in a manner that reduces the need for our employees to travel. Reduction in CO2 emissions will feature heavily in the decisions we make around our future estate requirements.

8.5. In terms of our Glasgow headquarters, NES made preparations during 2024/25 to relocate from our former site at 2 Central Quay, Glasgow to a new location at 177 Bothwell Street, Glasgow, sharing the site with Public Health Scotland. The building became operational on 7 July 2025. This building is highly energy efficient, using electricity exclusively from renewable sources, and with technology throughout the building that minimises energy use to achieve near net zero operation. This will help NES to make further reductions in its carbon emissions in future reporting periods, and the energy efficiency of this site was a key factor in NES' decision, supported by the Scottish Government, to relocate to Bothwell Street.

8.6. In relation to Edinburgh, our forthcoming relocation away from our Westport education and training centre, and a move to a distributed model of education and training venues will present us with a significant challenge in maintaining such low levels of emissions, but we will do what is possible to mitigate the anticipated increase in emissions as much as possible.

8.7. Greenhouse gas equivalent data collection as improved for the previous reporting period (2023/24) and the emissions measure for that year of 91.5 tCO2e has formed the new baseline for comparison in future years. For this reporting period the emissions from energy consumption reduced to 86.4 tCO2e, a reduction of 5.1 tCO2e or 5.6%.

8.8. NES is actively contributing towards the development of the Environmental Management System used by NHS Scotland which includes the monitoring of energy usage. We are using less energy than in previous years due to the move towards a hybrid presence and the impact of energy reduction measures in previous years, such as the introduction of Passive Infra-Red motion detectors for the lighting in our buildings.

8.9. In 2024/25, due to the nature and location of our shared estate, NES generated no energy from renewable technologies, but we do purchase energy that is generated from renewable sources.

9. Conclusion

9.1. As a non patient-facing NHS Board, NES is not exposed to the main causes of production of CO2 emissions that the Territorial Boards, and some of the National Boards are: operation of a large buildings estate; running a large fleet of vehicles; the production of large volumes of clinical and food waste; and the discharge of gases and propellants for clinical purposes. Nevertheless, we are required to be fully compliant with the Policy for NHS Scotland on the Global Climate Emergency and Sustainable Development and the NHS Scotland Climate Emergency & Sustainability Strategy.

9.2. The development, approval and publication of our Strategy on Climate Emergency and Sustainability represents significant progress since our previous Annual Report was published for 2023/24.

9.3. NES will continue to drive improvements in the environmental aspects of our business practices, in particular how we measure the climate impact of everything we do. The Action Plan that accompanies our Strategy will be the principal vehicle for monitoring our progress, and it will be reviewed on a regular basis through our governance structures.

9.4. The relocation to our new highly energy efficient Glasgow site at Bothwell Street will help us to drive our emissions down further, and we will make every effort to ensure that emissions from the rest of our estate as contained as much as possible, although this will be a challenge in Edinburgh.

9.5. However, our greatest contribution to NHS Scotland's efforts to minimise the climate impact of our health and social care services, will be to ensure that minimising the impact of those services on the climate emergency is fully built into all the programmes of education, training and employee development that we offer. By doing that, the wider workforce will be better equipped to make a positive contribution through all the work that they carry out.

9.6. As a Board, NES is now very climate aware, and we will ensure that we maintain our efforts to reduce our own CO2 emissions, as well as supporting the wider NHS in Scotland.

NHS Education for Scotland
Report submitted: tbc

Report approved by the NES Board on 20 November 2024

PART 1 Profile of Reporting Body

1a Name of reporting body

Provide the name of the listed body (the "body") which prepared this report.

NHS Education for Scotland

1b Type of body

Select from the options below

National Health Service

1c Highest number of full-time equivalent staff in the body during the report year

1629.3

1d Metrics used by the body

Specify the metrics that the body uses to assess its performance in relation to climate change and sustainability.

Metric	Units	Value	Comments
Please select from drop down box			
Other (please specify in comments)			

1e Overall budget of the body

Specify approximate £/annum for the report year.

Budget	Budget Comments
£780,000,000	

1f Report type

Please select the appropriate reporting period to ensure that the correct set of emissions factors is auto-populated in Q3b.

Reporting type	Report year comments
Financial/Calendar/Other	Financial year to 31 March 2025

1g Context

Provide a summary of the body's role and functions that are relevant to climate change reporting.

NHS Education for Scotland (NES) is a National Health Board, with its principal purpose being to provide education and training to the whole of the NHS and social care workforce in Scotland. NES only has a small property estate, no vehicle fleet and no activities that discharge harmful gases. NES therefore has a limited set of activities that cause CO_2 emissions, when compared to other NHS Boards. Nevertheless, we still have an important role to play in enabling NHS Scotland policy aims to be met, regarding Climate Emergency and Sustainability. Our key aim will to raise awareness of Climate Emergency and Sustainability in the healthcare environment through our programme of education and training, and to drive forward improvements in clinical practice that will help to address the policy aims.

PART 2 Governance, Management and Strategy

Governance and management

2a How is climate change governed in the body?

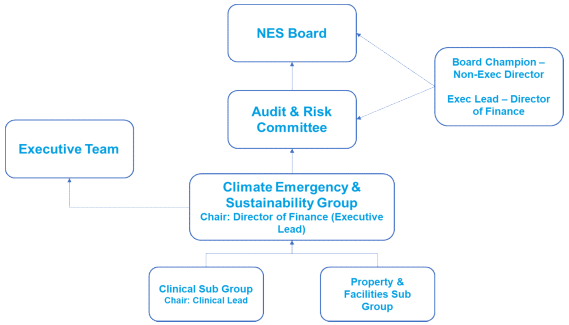
Provide a summary of the roles performed by the body's governance bodies and members in relation to climate change. If any of the body's activities in relation to climate change sit outside its own governance arrangements (in relation to, for example, land use, adaptation, transport, business travel, waste, information and communication technology, procurement or behaviour change), identify these activities and the governance arrangements. Provide a diagram / chart to outline the governance structure within the body.

NES has appointed a Board Sustainability Champion, Gillian Mawdsley, and an Executive Lead for Sustainability, Jim Boyle, Director of Finance.

NES has an active Climate Emergency & Sustainability Group, with identified relevant directorate representatives and with other corporate representatives e.g. Travel and Transport, Procurement, Energy and Waste. Those representatives have been delegated with the responsibility for ensuring the planned implementation of sustainable development activities within their area of authority. The Climate Emergency & Sustainability Group also has representation form the Board's nominated Clinical Lead, who is currently the Director of Dental Education. The Clinical Lead also chairs a Clinical Sub Group that takes forward Climate Change matters in our clinical education and training areas of activity.

The Board's objectives are to ensure that NES complies with the relevant elements of the public bodies duties of the Climate Change (Scotland) Act 2009, as well as the Policy for NHS Scotland on the Global Climate Emergency and Sustainable Development.

A clear management strategy is required for NES to help achieve the Scottish Government's target of Net Zero targets, and we will comply with all national reporting requirements to monitor national and individual Boards' performance against policy.



2b **How is climate change action managed and embedded in the body?**

Provide a summary of how decision-making in relation to climate change action by the body is managed and how responsibility is allocated to the body's senior staff, departmental heads etc. If any such decision-making sits outside the body's own governance arrangements (in relation to, for example, land use, adaptation, transport, business travel, waste, information and communication technology, procurement or behaviour change), identify how this is managed and how responsibility is allocated outside the body. Provide a diagram to show how responsibility is allocated to the body's senior staff, departmental heads etc.

Climate change action is managed by the NES Climate Emergency and Sustainability Group. The Terms of Reference of the Group contain the following key responsibilities:

The Group meet on a regular basis to consider NES' ongoing response to the climate emergency, and how NES will support the goal of NHS Scotland becoming a net zero greenhouse gas emissions health service by 2040 or earlier.

The Group will be responsible for the production and the subsequent updating of the NES Climate Emergency & Sustainability Strategy, for consideration by the Executive Team, the review and approval of the Audit and Risk Committee and final approval by the NES Board.

The Group will set Climate Emergency and Sustainability targets, including, but not limited to:

- direct CO2 emissions generated from the operation of NES's property estate and from staff and trainee travel in relation to NES's operational activities;
- incorporation of Climate Emergency and Sustainability awareness and mitigations into NES's programmes of education and training

Initially these will be operational targets for consideration by the Group, and some of these targets may be escalated up to augment the Strategic KPIs already approved by the Board in relation to Climate Emergency and Sustainability.

The Group will act as a forum for discussion on an ongoing basis, on how NES can drive forward a programme of continuous improvement in its core activities in relation to the Climate Emergency and Sustainability agenda. Furthermore, the Group will consider how NES can participate in regional, national and international initiatives to improve the performance of healthcare systems in relation to the Climate Emergency and Sustainability agenda. Consult and communicate appropriately with the Director of Finance and the Clinical Lead so far as to support and enable the successful discharge of their delegated responsibilities for NES Climate Emergency and Sustainability matters.

Identify total expenditure and areas of expenditure of Climate Emergency and Sustainability activities for reporting purposes.

Serve as a means of consultation with representatives of the NES workforce on the selection of appropriate Climate Emergency and Sustainability arrangements and to recommend ways of improving the overall Climate Emergency and Sustainability performance of NES.

Input to the production of and review of Climate Emergency and Sustainability reports that are required by the Scottish Government, the UK Government, the Sustainable Scotland Network, relevant professional organisations, and any other organisations that require to gather information from NES.

Government, the Sustainable Scotland Network, relevant professional organisations, and any other organisations that require to gather information from NES.

NES has also formed an Ambassadors Group which allows staff with an interest, either professional or personal, to participate in activities to further the aims of the NHS Scotland Policy and Strategy for Climate Emergency and sustainability.

Strategy

2c **Does the body have specific climate change mitigation and adaptation objectives in its corporate plan or similar document?**

Provide a brief summary of objectives if they exist.

Wording of objective	Name of document	Document Link
To reduce direct emmissions by 5% each year	Strategic KPI	

2d **Does the body have a climate change plan or strategy?**

If yes, provide the name of any such document and details of where a copy of the document may be obtained or accessed.

Yes, approved by the NES Board in May 2024

Link to Strategy: https://www.nes.scot.nhs.uk/media/lrwf3ogi/nes-climate-emergency-and-sustainability-strategy-2024.pdf

2e **Does the body have any plans or strategies covering the following areas that include climate change?**
Provide the name of any such document and the timeframe covered.

Topic area	Name of document	Link	Time period covered	Comments
Adaptation	No separate document - contained in NES Climate Emergency and Sustainability Strategy	https://www.nes.scot.nhs.uk/media/lrwf3ogi/nes-climate-emergency-and-sustainability-strategy-2024.pdf	27/02/2024	
Business travel	As above			
Staff Travel	As above			
Energy efficiency	As above			
Fleet transport	As above			
ICT	As above			
Renewable energy	As above			
Sustainable/renewable heat	As above			
Waste management	As above			
Water and sewerage	As above			
Land Use	As above			
Other (please specify in comments)	As above			
Please select from drop down box				

2f **What are the body's top 5 priorities for climate change governance, management and strategy for the year ahead?**
Provide a brief summary of the body's areas and activities of focus for the year ahead.

Monitoring the delivery of action in the Action Plan to accompany the NES Climate Emergency & Sustainability Strategy

Embedding awareness of CC&S issues in NES core programmes of education and training

Reprovision of office accommodation in Glasgow, incorporating Climate Emergency & Sustainability considerations as key to this initiative

Continuing to manage NES' limited office estate in a sustainably responsible manner, capturing further improvements in how we manage the estate's energy consumption and waste management practices.

Continuing with the hybrid working model for our workforce in order to minimise business and commuting travel, and to develop the Board's recently introduced Low Emission

2g **Has the body used the Climate Change Assessment Tool (a) or equivalent tool to self-assess its capability / performance?**
If yes, please provide details of the key findings and resultant action taken.

(a) This refers to the tool developed by Resource Efficient Scotland for self-assessing an organisation's capability / performance in relation to climate change.

The use of this tool was most recently used for year 2021/22, when NES was assessed as BRONZE. In April 2023, the NHS Scotland Climate Emergency & Sustainability Board agreed that NSAT assessments should be carried out bi-annually (every two years), although this requirement has now been amended.

Further information

2h **Supporting information and best practice**
Provide any other relevant supporting information and any examples of best practice by the body in relation to governance, management and strategy.

PART 3 Corporate Emissions, Targets and Project Data

Emissions

3a **Emissions from the start of the year which the body uses as a baseline (for its carbon footprint) to the end of the report year**

Complete the following table using the greenhouse gas emissions total for the body calculated on the same basis as for its annual carbon footprint / management reporting or, where applicable, its sustainability reporting. Include greenhouse gas emissions from the body's estate and operations (a) (measured and reported in accordance with Scopes 1 & 2 and, to the extent applicable, selected Scope 3 of the Greenhouse Gas Protocol (b). If data is not available for any year from the start of the baseline year to the end of the report year, provide an explanation in the comments column.

(a) No information is required on the effect of the body on emissions which are not from its estate and operations.

(b) This refers to "The greenhouse gas protocol. A corporate accounting and reporting standard (revised edition)", World Business Council for Sustainable Development, Geneva, Switzerland / World Resources Institute, Washington DC, USA (2004), ISBN: 1-56973-568-9.

Select appropriate baseline year. Total emissions for the latest year should equal total emissions in Q3b.

Reference year	Year	Year type	Scope 1	Scope 2	Scope 3	Total	Units	Comments
Baseline Year	2017/18	Financial/Calendar/Other			339.00	339.00	tCO_2e	
Year 1 carbon footprint	2018/19	Financial/Calendar/Other			333.00	333.00	tCO_2e	
Year 2 carbon footprint	2019/20	Financial/Calendar/Other			493.00	493.00	tCO_2e	
Year 3 carbon footprint	2020/21	Financial/Calendar/Other			58.00	58.00	tCO_2e	
Year 4 carbon footprint	2021/22	Financial/Calendar/Other		2.00	65.00	67.00	tCO_2e	
Year 5 carbon footprint	2022/23	Financial/Calendar/Other		27.00	810.50	837.50	tCO_2e	
Year 6 carbon footprint	2023/24	Financial/Calendar/Other		91.00	790.85	881.85	tCO_2e	
Year 7 carbon footprint	2024/25	Financial/Calendar/Other		86.41	746.89	833.30	tCO_2e	

3b **Breakdown of emissions sources** **Please do not delete rows or columns anywhere in this template. It is password protected to prevent corruption. Empty rows in tables can be hidden and panes can be frozen to enable scrolling in larger tables.**

Complete the following table with the breakdown of emission sources from the body's most recent carbon footprint (greenhouse gas inventory); this should correspond to the last entry in the table in 3(a) above. Use the 'Comments' column to explain what is included within each category of emission source entered in the first column. If there is no data consumption available for an emission source enter the emissions in kgCO2e in the 'Consumption' column of one of the "Other" rows and assign the scope and an emission factor of 1.

(a) Emissions factors are published annually by the UK Department for Energy Security & Net Zero

Emission Factor Year 2024

You can filter emission sources by "type" in column C to enable quicker selection of emission source in column D. See the list in the Emissions Tab.

Please only use "Other" (row 131) if there is no relevant emission source in the dropdown list or consumption emissions have been derived from e.g. a survey or non-standard methodology. Extra rows can be added by sending the template to ccreporting@ed.ac.uk.

Emission Type	Emission source	Scope	Consumption data	Units	Emission factor	Units	Emissions (tCO_2e)	Comments
Transport - public	Flights - Short-haul, to/from UK - Eco	Scope 3	114,338	passenger.km	0.18287	kg CO2e/passenger.km	20.90899	
Transport - public	Flights - International, to/from non-U	Scope 3	35,000	passenger.km	0.13465	kg CO2e/passenger.km	4.71275	
Transport - public	Flights - Long-haul, to/from UK - Econ	Scope 3	18,417	passenger.km	0.20011	kg CO2e/passenger.km	3.68543	
Transport - public	National rail	Scope 3	432,384	passenger.km	0.03546	kg CO2e/passenger.km	15.33234	
Hotel stay	Hotel stay - UK (London)	Scope 3	167	Room per night	11.50000	kg CO2e/Room per night	1.92050	
Hotel stay	Hotel stay - UK	Scope 3	1,136	Room per night	10.40000	kg CO2e/Room per night	11.81440	
Transport - car	Average car - Diesel	Scope 3	34,331	miles	0.27334	kg CO2e/miles	9.38404	
Transport - car	Average car - Petrol	Scope 3	46,330	miles	0.26473	kg CO2e/miles	12.26494	
Transport - car	Average car - Hybrid	Scope 3	8,594	miles	0.20288	kg CO2e/miles	1.74355	
Transport - car	Average business travel car - Battery	Scope 3	9,196	miles	0.07636	kg CO2e/miles	0.70221	
Electricity	Electricity: UK	Scope 2	417,348	kWh	0.20705	kg CO2e/kWh	86.41190	
Homeworking	Homeworking (office equipment + he	Scope 3	1,990,597	FTE Working Hour	0.33378	kg CO2e/FTE Working Hour	664.42156	
Other	Other (please specify in comments)	Please select from drop down box					-	
						Total Emissions	833.303	

3c **Generation, consumption and export of renewable energy**

Provide a summary of the body's annual renewable generation (if any), and whether it is used or exported by the body.

	Renewable Electricty		Renewable Heat		
Technology	Total consumed by the body (kWh)	Total exported (kWh)	Total consumed by the body (kWh)	Total exported (kWh)	Comments
Please select from drop down box					
Please select from drop down box					

Targets

3d **Organisational targets**

List all of the body's targets of relevance to its climate change duties. Where applicable, targets for reducing indirect emissions of greenhouse gases, overall carbon targets and any separate land use, energy efficiency, waste, water, information and communication technology, transport, travel and heat targets should be included. Where applicable, you should also provide the body's target date for achieving zero direct emissions of greenhouse gases, or such other targets that demonstrate how the body is contributing to Scotland achieving its emissions reduction targets.

Name of target	Type of target	Target	Units	Boundary/scope of target	Year used as baseline	Baseline figure	Units of baseline	Target completion year
5% reduction in emissions	Percentage	5	total % reduction	All emissions	2023/24	835	tCO2e	2044/45
	Please select from drop down box		Please select from drop down box	Please select from drop down box	Please select from drop down box		Please select from drop down box	Please select from drop down box

3da **How will the body align its spending plans and use of resources to contribute to reducing emissions and delivering its emission reduction targets?**

Provide any relevant supporting information.

Any budget decisions to be taken will set out any climate emergency considerations for the Board to consider

3db **How will the body publish, or otherwise make available, it's progress towards achieving its emissions reduction targets?**

Provide any other relevant supporting information, including links to published reports.

Referencing this report is unnecessary and an inadequate response.

Our Strategy and Action Plan will be for public record and the Strategy features on the Board's website. The Annual Report to Scottish Government will also be

PART 4 Adaptation - please do not include information in this part on measures that solely reduce emissions with no implications for climate adaptation. These are clim

Assessing and managing risk

4a **Has the body assessed current and future climate-related risks?**

If yes, provide a reference or link to any such risk assessment(s). **Please report assessments of current risk separate from future risk assessments, where feasible.**

NES has in the past participated in the Climate Change Risk Assessments which were produced by NHS National Services Scotland and NHS Health Scotland as part of the national Climate Change Risk Assessment programme undertaken on behalf of NHS Scotland. Where required this has used the NHSScotland mapping tool to assesses the risk and vulnerability of healthcare assets to climate change impacts across Scotland. In April 2023, the NHS Scotland Climate Emergency & Sustainability Board agreed that NSAT assessments should be carried out bi-annually (every two years).

4b **What arrangements does the body have in place to manage climate-related risks?**

Provide details of any climate change adaptation strategies, action plans and risk management procedures, and any climate change adaptation policies which apply across the body.

NES Climate Emergency and Sustainability Group oversees the delivery of the actions aimed at meeting the Scottish Government's national policy.

NES has a robust business continuity process with resilience leads established across each strategic business unit and directorate. We actively contribute towards the various reporting processes including the NSAT Report which confirmed the retention of our Bronze Award with an increased score. In future years, NES plan to address as many recommendations as possible from that report to ensure progress towards an increased award for the next assessable period.

Taking action

4c **What action has the body taken to adapt to climate change?**

Include details of work to increase awareness of the need to adapt to climate change and build the capacity of staff and stakeholders to assess risk and implement action. The body may wish to make reference to the Scottish Climate Change Adaptation Programme ("the Programme").

Much of the work to reduce direct impact on climate was put in place to meet the challenges of the Covid pandemic, e.g. reducting in employee travel. However, now that the initial phase of the pandemic has ended, it will be crucial to take a more active role in driving forward other actions aimed at reducing NES's carbon emissions and moving towards the medium-term aim of becoming carbon net-zero, in line with national policy. That will be the focus of the Climate Emergency & Sustainability Group during 2024/25 and in future years, although the structure of managing activity in this area will pass to NHS Delivery.

4d **Where applicable, what contribution has the body made to helping deliver the Programme?**

Provide any other relevant supporting information

NES activity is primarily aimed at Outcome 4: Our society's supporting systems are resilient to climate change. Our activity os principally focused on raising awareness of the need to take action on Climate Change through or core education and training work.

Review, monitoring and evaluation

4e **What arrangements does the body have in place to review current and future climate risks?**

Provide details of arrangements to review current and future climate risks, for example, what timescales are in place to review the climate change risk assessments referred to in Question 4(a) and adaptation strategies, action plans, procedures and policies in Question 4(b).

The NES Executive Team regularly reviews all of the Board's strategic risks, and a new category of risk for Climate Emergency has now been included. Also, a Strategic Key Performance Indication for carbon emissions has now been approved and will be moitored and reported to the NES Board on a quarterly basis.

4f **What arrangements does the body have in place to monitor and evaluate the impact of the adaptation actions?**
Please provide details of monitoring and evaluation criteria and adaptation indicators used to assess the effectiveness of actions detailed under Question 4(c) and Question 4(d).

This is a key role of the Climate Emergency and Sustainability Group within NES.

Future priorities for adaptation

4g **What are the body's top 5 climate change adaptation priorities for the year ahead?**
Provide a summary of the areas and activities of focus for the year ahead.

Ensuring that as many of our core education and training programmes have climate emergency and sustainability as part of their delivery plans

Further roll out of our low emission vehicle salary sacrifice scheme

Bedding in of our Glasgow base, incorporating the key principles of carbon net-zero in that building. We have already reduced the state footprint in Dundee, Inverness and Aberdeen, and are working to do the same in Edinburgh, although the provision of accommodation and training venues will funamentally change as we move away from our Westport base. These changes in themselves will make a positive contribution to reducing our emissions. Once these changes are fully implemented, we will be in aposition to report this on a regular basis.

Establishment of a Climate Emergency Ambassador Group among our workforce

Increasing participation of NES employees in the resources developed by NSS for the the entire NHS workforce

Further information

4h **Supporting information and best practice**
Provide any other relevant supporting information and any examples of best practice by the body in relation to adaption.

PART 5 Procurement

5a How have procurement policies contributed to compliance with climate change duties?

Provide information relating to how the procurement policies of the body have contributed to its compliance with climate changes duties.

NES adheres to more than 97% of applicable national framework agreements at Scottish Government and NHS National Procurement level. Examples of adherence – use of national stationery contract, travel contract, desktop and mobile client devices, cleaning consumables, etc, ensuring that all contractors adhere to the basic requirements of SG contract awards, including meeting environmental sustainability standards.

NES has a published NES Ethical Procurement Policy (available on NES internet) which requires all direct suppliers and contractors to observe the provisions of the policy and requires that such suppliers and contractors, in turn obtain similar compliance with its provisions from their suppliers and contractors including our environmental impact expectations when contracting with NES. The policy sets out NES's aims in this regard. It sets out a definition of ethical trade practices delivered through our Procurement and Commissioning activities; a clear statement of ethical and sustainable practice; the core objectives and promotes the adoption and improvement of ethical and sustainable practices across our supply chain.

NES Procurement Strategy identifies our commitment to Sustainability, environmental impact and ongoing continuous improvement.The NES Procurement Annual Report is published in accordance with the Procurement Strategy Guidance and Template issued by the Scottish Government in May 2017 and the Procurement Reform (Scotland) Act 2014 which requires public organisations with an estimated total value of regulated procurement spend of £5m or more (excluding VAT) in a financial year to prepare and publish a procurement strategy and to report on this annually. This report describes our commitment to Sustainability and our expectations of the supply base.

5b How has procurement activity contributed to compliance with climate change duties?

Provide information relating to how procurement activity by the body has contributed to its compliance with climate changes duties.

Further to the requirements of the Procurement Reform (Scotland) 2014 Act all regulated Procurements and open tendering contain a section devoted to Sustainability, which includes the NES Ethical Procurement Policy where suppliers must state their compliance to environmental impact, fair working practices, living wages commitments, community benefits and other associated impacts. In addition, beyond regulated procurement, all tenders above £25k require as commitment to accept our Sustainability requirements.

Regular quarterly measures are provided (via nationally designated Travel Management company) on carbon emissions from all forms of transport and travel activities, and these form part of NES's core Strategic KPI's and reported to the board.

Further information

5c Supporting information and best practice

Provide any other relevant supporting information and any examples of best practice by the body in relation to procurement.

The NES intranet has a page devoted to Sustainability guidance and have a published Suppliers Code of Conduct.
Stationery ordering and delivery - Since the advent of homeworking, the consumption of general stationery has dropped by over 63%. added to this our consolidated ordering and shipments means reduced frequency of site deliveries.

Post-Covid a significant amount of education and training has been designed and procured to be conducted online and remotely, reducing the travel and accomodation requirements. Examples include the Digital Coaching framework encouraging and increasing the amount of travel-free and hybrid training made available to staff. The use of a range of technology has increased post pandemic and forms an integral part of our service delivery models for education, training and CPD.

NES fully participates in the national Sustainable Procurement Steering Group. The SPSG is the focal point and core oversight group for sustainable procurement activities across NHSS Procurement teams. Its purpose is to ensure sustainable procurement activities are communicated, planned and delivered on an NHSS wide basis. The core objectives are to be a centralised discussion, planning and decision making group on matters of sustainable procurement activity; to take input from other sustainability networks; to be a gateway review for any new process or procedural introduction (NPI); to agree an activity plan, objectives and targets to present to senior NHS management and to provide effective oversight and monitoring on progress and report same to PS-SMT

PART 6 Validation and Declaration

6a Internal validation process

Briefly describe the body's internal validation process, if any, of the data or information contained within this report.

This report was collated within the Finance & Procurement Directorate, verified by the Executive Lead (Director of Finance) and submitted to the Board in November 2024 for approval.

6b Peer validation process

Briefly describe the body's peer validation process, if any, of the data or information contained within this report.

Not applicable

6c External validation process

Briefly describe the body's external validation process, if any, of the data or information contained within this report.

NES do not have external validation facility

6d No Validation Process

If any information provided in this report has not been validated, identify the information in question and explain why it has not been validated.

Not applicable

6e Declaration

I confirm that the information in this report is accurate and provides a fair representation of the body's performance in relation to climate change.

Name:	Jim Boyle
Role in the body:	Director of Finance
Date:	10/11/2025

Date in format (dd/mm/yyyy)

NHS Education for Scotland **NES/25/86**

Agenda Item: 10a

20 November 2025

Public Board Meeting

1. Title of Paper

1.1. Final Review of the Board Assurance Framework 2025-26

2. Author(s) of Paper

2.1. Drew McGowan, Board Secretary & Principal Lead for Corporate Governance

3. Lead Director(s)

3.1. Jim Boyle, Executive Director of Finance

3.2. Christina Bichan, Director of Planning, Performance & Transformation

4. Situation/Purpose of paper

4.1. To facilitate the final review of the Board Assurance Framework ahead of the creation of NHS Delivery in April 2026.

5. Background and Governance Route to Meeting

5.1. The Board Assurance Framework is reviewed biannually by the Audit & Risk Committee and the Board. The Audit & Risk Committee reviewed the Board Assurance Framework in October 2025, ahead of being considered by the Board at this meeting.

6. Assessment/Key Issues

6.1. The Blueprint for Good Governance requires NHS boards to have assurance frameworks in place that align strategic planning and change implementation with their purpose, aims, values, corporate objectives and organisational priorities. They are primarily used to identify and resolve any gaps in control and assurance and helps identify any areas where assurance is not present, insufficient or disproportionate.

6.2. The NES Board Assurance Framework, which adopts the three lines of defence model recommended by HM Treasury, has been in place since 2019. Since then, it has been subject to regular review and development.

6.3. The Audit & Risk Committee reviewed the framework at its meeting in October 2025. Members were content with the minor amendments to dates, names and titles. During the discussion, it was highlighted that while all champion roles are important, there are distinctions between them that are not currently articulated clearly in the framework. The Board Secretary & Principal Lead for Corporate Governance was asked to consider this and recommend appropriate changes.

6.4. The proposed amendments to the framework clarifies the unique nature of the Whistleblowing Champion role in its appointment by Scottish Ministers, oversight of the effectiveness of systems and responsibility to provide assurance to the Board and Scottish Government. Meanwhile, the Equality & Diversity Champion and Climate Emergency & Sustainability Champion support assurance through advocacy and challenge.

6.5. Since the last review, the Scottish Government announced that the functions of NES and NHS National Services Scotland (NSS) will be brought together to create NHS Delivery on 1 April 2026. This will, therefore, be the last review of the Board Assurance Framework. The final edition, along with NSS' framework, will be used to develop the new, unified Board Assurance Framework for NHS Delivery.

7. Recommendations

7.1. To review and approve the Board Assurance Framework.

7.2. To note that this will be the final review of the Board Assurance Framework.

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

a) Have implications for NHS Delivery been considered?
- ☒ Yes
- ☐ No

b) Have educational implications been considered?
- ☒ Yes
- ☐ No

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

d) Alignment with Our Strategy 2023 – 26 People, Partnerships and Performance
- ☒ 1. People Objectives and Outcomes
- ☒ 2. Partnership Objectives and Outcomes
- ☒ 3. Performance Objectives and Outcomes

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

f) Have Equality, Diversity, Human Rights and health inequality issues been considered as per Fairer Scotland Duty: Guidance for Public Bodies and Corporate Parenting as per the Children and Young People (Scotland) Act 2014?
- ☒ Yes
- ☐ No

g) Has an Equality Impact Assessment (EQIA) been completed or in progress for this piece of work?
- ☐ Yes
- ☒ No

h) Have you considered Emergency Climate Change and Sustainability implications as per DL (2021) 38?
- ☒ Yes
- ☐ No

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

Drew McGowan
30 October 2025
NES

NHS Education for Scotland

Assurance Framework

~~April~~November 2025

Document information

Consultation		**Executive Team** **NES Board** **Audit and Risk Committee**
Scope of Document		The sources of assurance used by the NES Board to obtain assurance on the delivery of the organisation's strategic, operational and financial plans
Objective		To enable the NES Executive Team and Board to assess the level of assurance provided in all corporate functions.
Linked Documentation		Committee ToRs
Document Sponsor	**Name**	**Jim Boyle**
	Job Title	**Executive Director of Finance**
	Division	**Finance and Procurement**
Approved by/ & Date		
Authors	**Name**	~~**Della Thomas**~~**Drew McGowan**
	Job Title	**Board Secretary & Principal Lead for Corporate Governance**

Amendment History (2023/24 – 2025/26~~)~~

Date	Page	Details of Change
18/04/23	**3**	Introduction updated to refer to second edition of the Blueprint.
24/09/23	**4**	Brief outline of Board delegated Committee Remits added.
24/09/23	**table**	Minor amendments in terminology e.g. Operational Plan to Delivery Plan and reference to Strategic Key Performance Indicators included and change from Digital and Information Committee to Technology and Information Committee
24/09/23	**22**	Reference to Covid-19 Recovery Plan removed from change management section.
25/09/23	**21**	Addition of reference to the new Transformation Group to the change management section.
31/10/23	**5 (table)**	Reference to SKPIs and delegated reporting to Committees as per Committee remits
31/10/23	**5 (table)**	Reference to Board Development involvement added in relation to the development of the NES Strategy and the Learning and Education Strategy
09/04/24	**4-5**	Revision to SGC remit to align with Board approved ToRs to better describe the SGC role beyond the governance of NES staff.
26/9/24	**9**	Inclusion of new quarterly complaints reporting scheduling.

Date	Page	Details of Change
26/9/24	**12**	Inclusion of reference to the NHS Corporate Governance Improvement Action Plan.
04/11/24	**6-11**	Changes to reflect Strategies are no longer in development and are approved and being implemented.
04/11/24	**5**	Inclusion of Remuneration Sub-Committee remit.
04/11/24	**6-25**	Revision to wording to align with new formatting of document
25/02/25	**4-30**	Amendments to remove reference to Technology and Information Committee, from 31 March 2025 this Committee has been dissolved. Updated to include reference to the role of newly constituted the Planning and Performance Committee. Other Committees roles updated in line with amended Committee ToRs approved by the Board at the 06/02/25 Board meeting. Updating of job titles. Updating of names of papers / reports.
22/09/2025	**2-28**	Date, names and job titles updated. Formatting corrected.
30/10/2025	**10-22**	Update to descriptions of Board Champion roles based on discussion at the Audit & Risk Committee in October 2025.

Introduction

The NHS Scotland Health Boards and Special Health Boards – Blueprint for Good Governance Second Edition (issued through DL (2022) 38) sets out the promotion and delivery of good governance starting with the development of an assurance framework. This brings together the organisation's purpose, aims, values, corporate objectives and risks with the strategic plans, change projects and operating plans necessary to deliver the desired outcomes.

The Blueprint reinforces the Scottish Government's requirements published in the revised Audit and Assurance Committee Handbook (April 2018) for health boards to develop an Assurance Framework. The purpose of the Framework is to enable the Audit Committee and the Board to understand the levels and sources of assurance it receives in relation to work, systems and processes. This will enable identification of areas where current levels of assurance are considered excessive or where further assurance mechanisms need to be identified and implemented.

The Audit and Assurance Handbook specifies the following corporate functions where the Board will require assurance regarding management, quality and performance:

- **Performance in delivering Strategic Plans** – setting the organisation's strategic direction and monitoring and managing performance against related objectives.
- **Quality Management** – monitoring quality, making improvements and rectifying quality deficits
- **Financial Management** –the organisation's financial resources are managed effectively
- **Human Resources Management** – NES employees are recruited, developed and managed fairly and effectively
- **Change Management** – organisational and service change is efficient and effective
- **Risk Management** – NES's processes and practices for identifying and managing operational, strategic and other risks are effective.
- **Information Management** – the policies, processes and for collecting, holding, using and sharing information safely and effectively.

Delegated Board Committee Remits

Audit and Risk Committee (ARC): Assurance relating to Internal Control, Risk Management and Corporate Governance, strategic financial planning and the integrity of the Annual Report and Accounts, Procurement, Counter Fraud, Property and Facilities and Climate Emergency and Sustainability. Delegated financial and climate change Strategic Key Performance Indicators (SKPIs).

Staff Governance Committee (SGC): Monitoring implementation of the Staff Governance Standard. Whistleblowing. Staff related equality and diversity outcomes. Delegated staff related strategic risks and staff related SKPIs. The Staff Governance Committee delegates the statutory requirements laid out in the Staff Governance Standard in respect of the remuneration of individual Executive Directors and Directors (and any other staff employed under Executive Managers' or Consultants' pay arrangements) to the Remuneration Sub-Committee.

Education and Quality Committee (EQC): Assurance that effective arrangements are in place to plan, commission, deliver and quality manage all of NES's education and training provision in line with the organisation's Strategic Plan; advise the NES Board, when appropriate on where, and how, its education systems and assurance framework may be

strengthened and developed further and provide assurance to the NES Board that effective arrangements are in place for the educational and quality governance of the NHS Scotland Academy accelerated education and training activities. Assurance relating to Clinical and Care via the Clinical and Care Assurance Sub-Group of the EQC. Educational equality and diversity outcomes. Delegated education and quality related strategic risks and education and quality related SKPIs.

Planning and Performance Committee (PPC): Review organisational outcomes and impact in line with Corporate Strategy and SKPIs, the requirements of the Annual Delivery Plan, the NES transformation programme and Scottish Government Commissions. Strategic horizon scanning role. Assurance of effective strategic management and delivery of NES's technology work and mitigation and service delivery compliance with statutory and regulatory requirements including, clinical and technical assurance; cybersecurity, safety. Technology related equality and diversity outcomes. Delegated strategic risks associated with technology, planning and delivery and transformation. Technology related equality and diversity outcomes.

Remuneration Sub-Committee: Provide assurance to the Board, through the SGC, that appropriate arrangements are in place to ensure that the Board meets the statutory requirements laid out in the Staff Governance Standard in respect of the remuneration of individual Executive Directors and Directors (and any other staff employed under Executive Managers' or Consultants' pay arrangements) and review submissions from the Chief Executive for any settlement agreements.

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance	Responsible Committee/Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
Performance in delivering Strategic Plans **(Making sure that our plans deliver against our strategy and that we deliver against our plans)**	NES Strategy	Annual Delivery Plan, includes plans to progress delivery of key strategic outcomes.	Feedback on NES Strategic aims from external partners and Scottish Government feedback through Annual Review Process	Planning and Performance Committee NES Board (Director of Planning, ~~and~~ Performance & Transformation) Quinquennial process	Managing the process to develop and implement the Strategic Plan and Financial Plan for approval and assurance by the Board.	Setting the Direction (Approval of Strategic Plan and Financial Plan)
	Strategic and Delivery Planning processes – ensuring strategic alignment	Annual Delivery Plan, includes plans to progress delivery of key strategic outcomes.	Internal Audit Reports on Performance Management, and Staff Governance External Audit review of Performance in Annual Report and Accounts	Planning and Performance Committee NES Board (Director of Planning, ~~and~~ Performance & Transformation) Audit & Risk Committee (Executive Director of Finance) Annual	Ensuring systems and processes at a local directorate level support high performance. Executive Team oversight of performance indicators, financial indicators and staffing indicators	Holding to Account (Receiving quarterly performance reports and challenging areas of poor performance) Assessing Risk (Achieving balance between ambition and realistic assessment of what is achievable given resources, environment etc (Board, standing committees)) Engaging Stakeholders (obtaining assurance that stakeholders

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance	Responsible Committee/Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
						have been involved in the setting of Strategy and in understanding annual operational plans).
	Strategic Key Performance Indicators (SKPIs)	Delegation of SKPIs to Board Committees in line with the Committee Remits and delegation of overview of SKPIs to Planning and Performance Committee	Internal Audit Report on performance reporting	Planning and Performance Committee NES Board (Director of Planning, ~~and~~ Performance & Transformation) Quarterly	Ensuring systems and processes at a local directorate level support high performance. Executive Team oversight of performance indicators, financial indicators and staffing indicators.	Holding to Account (Receiving quarterly performance reports and challenging any areas of poor performance)
	NES Learning and Education Strategy	Following Board approval, delegation to Education & Quality Committee to receive assurance on the implementation and the impact of the Strategy.	Consultation feedback on NES Strategy and stakeholder feedback	Director of NHS Scotland Academy and Learning and Innovation	Executive Team oversight of performance indicators, financial indicators	Implementation and impact reports to Education & Quality Committee
	Corporate Performance Management Dashboard and	Quarterly Performance Reports detailing progress against Strategic Key	Quarterly Delivery Reports to Scottish Government	Committees (Director of Planning, ~~and~~ Performance & Transformation)	Executive Team has oversight of progress against equality and diversity targets.	Quarterly Board reports Holding to Account (Both Annual

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance	Responsible Committee/Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
	quality control process Financial Plan aligns with Delivery plan	Performance Indicators.		Quarterly NES Board (Director of Planning, Performance & Transformation) Quarterly NES Board (Director of Planning, Performance & Transformation) Annual		Financial Plan and Annual Delivery Plan scheduled to Board at same time to enable governance line of sight).
	All staff have objectives that relate to delivery of key targets	Reports to Staff Governance Committee on personal objectives and Staff Governance Standard	Scottish Governance monitoring of Staff Governance Standard	Staff Governance Committee (Director of People and Culture) Annual		Influencing Culture (oversight of Staff Governance indicators)
	Performance against targets considered at Directorate meetings – measures taken to remedy areas of poor performance	Performance reports		(All NES Directors) Quarterly		
	Staff management – ensuring staff are managed in	Performance reports		Staff Governance		

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance	Responsible Committee/Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
	accordance with the Staff Governance Standard and NES policies to be high performing.			Committee (Director of People and Culture) Biannual		
	Equality and diversity targets developed annually in operational planning	Directorate updates on prioritised E&D targets		Education & Quality Committee Staff Governance Committee (Equality, Diversity and Human Rights Principal Lead) Planning and Performance Committee		Board Holding to Account (Receiving bi-annual and annual performance reports and challenging any areas of poor performance)
	Feedback, complaints handling, and participation processes implemented by directorates and corporate Complaints Handling team	Feedback, Comments, Concerns and Complaints (FCCC) report	Scottish Government and Scottish Public Services Ombudsman reviews FCCC report and provides feedback	Annual and quarterly complaints reporting through Planning and Performance Committee Quarterly complaints reporting to Board through CEO Report Annual Report to Board.		Board Holding to Account (Receiving quarterly updates and annual report and challenging any areas of poor performance)
	Engagement with stakeholders	Stakeholder Map, Communication		NES Board		Board Holding to Account (Receiving

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance	Responsible Committee/Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
		Strategy and Stakeholder survey feedback		(Head of Comms) and Director Planning, ~~and~~ Performance & Transformation Annual		annual plans and report and challenging any areas of poor performance)
	Fulfilling Emergency Climate Change and Sustainability Requirements NES Climate Emergency and Sustainability Strategy 2024-27	Standing Item Reports to Audit and Risk Committee	Board and Scottish Government Reports: Annual Climate Emergency and Sustainable Development Report and Public Bodies Climate Change Duties Annual Report	Audit and Risk Committee	Executive Director of Finance appointed as Climate Emergency and Sustainability Lead	Board Holding to Account (Receiving annual plans and report and challenging any areas of poor performance) Non-Executive Climate Emergency and Sustainability Champion promotes awareness ~~providing any updates~~ and supports assurance through advocacy and challenge.
Quality Management **(Making sure that what we deliver – in all areas, is of a**	Local processes in place to ensure quality and 'fitness for purpose' of educational programmes, resources.	Education & Quality processes including Directorate Review and Thematic Review	Internal Audit reviews. Formal Review by the GMC (every 5 years) of Medical	Education & Quality Committee (Directors of education directorates)	Managing local operational processes to assure, control and improve quality.	Setting the Direction (approving Education Governance arrangements)

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance	Responsible Committee/Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
high quality, and fit for purpose)			Education in Scotland.	Thematic and Directorate Reviews biannual	Ensuring appropriate stakeholder engagement in development of new products/review of existing programmes. Executive Team oversight of draft Educational Governance processes	
	Sharing of practice through the Educational Leadership Group and Thematic Review	Review of Thematic Review reports		Education & Quality Committee Principal Educator	Education & Quality Executive Leads)	Education & Quality Committee Holding to account (reviewing educational governance reports)
	Feedback collected from service users reviewed to identify quality issues	Review of local quality management outcomes, including those from trainee surveys		Education & Quality Committee Annual Executive Director of Medical		Education & Quality Committee Influencing Culture (advocating for proper oversight of learning environment at all NHS Boards)
	Assurance relating to clinical and care	Role of Clinical and Care Assurance Sub-Group of EQC		Education & Quality Quarterly Executive Director of Medical		
	Annual review of standing committee	Annual review of Board committee	External Audit	Audit & Risk Annual	Executive Director of Finance	Assessing Risk

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance	Responsible Committee/Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
	business to check performance against approved remits	reports confirming adherence to approved remits				(Identifying risks to receiving assurance related to performance and quality including compliance with statutory and policy duties (Board, standing committees))
	Development of standing committee annual Schedules of Business	Standing committee annual Schedules of Business approved		Board Secretary Annual	Executive Director of Finance	Committee assurance that the Terms of Reference and duties of the Committee are translated and sequenced effectively.
	Corporate Governance Blueprint Improvement Action Plan	ARC review action plan progress mid-year		Board Secretary / ARC		Board Assurance that Board governance is reviewed and improvements made in line with the NHS Corporate Governance Blueprint.
	Compliance with equality related statutory duties	Approval and monitoring of: Equality Outcomes and Mainstreaming Priorities	Review of Equality Outcomes and associated reports by Equality & Human Rights Commission	Staff Governance Committee Education & Quality Committee	Executive Team oversight of draft Equality Outcomes, Mainstreaming reports	Equalities Outcomes progress reports Equality and Diversity Non-Executive Champion ~~provides~~

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance	Responsible Committee/Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
		Equality Impact Assessments Fairer Scotland Duties		Planning and Performance Committee (Equality, Diversity and Human Rights Principal Lead) Annual and Biannual	Executive Equality and Diversity Champions	~~any~~ promotes awareness and supports assurance through advocacy and challenge. ~~to the Board~~
	Application of local quality management processes to digital developments	Scotland's Artificial Intelligence (AI) Strategy	NIS Audit	Planning and Performance Committee Quarterly	Director of NES Technology Service	Seeking assurance that AI and digital developments include innovative approaches and include quality monitoring, and any risks are identified and managed
	Application of local research governance process aligned with NES Research Framework	Approval of NES Research Governance Framework (aligned with UK Research Standards) and Research Governance annual report	Internal audit of research governance	Education & Quality Committee (Principal Educator) Annual	Director of Planning, ~~and~~ Performance & Transformation	Education & Quality Committee on behalf of Board, assurance and holding to account
Financial Management	Budget setting process aligned to Delivery Planning	Full details of process of developing an annual budget	Internal Audit (e.g. Budget Management, Fraud	Audit and Risk Committee NES Board	Detailed controls on expenditure at a Directorate level.	Ensures effective financial stewardship through considering value for money,

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance	Responsible Committee/Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
(Making sure that our resources are properly applied to deliver our Strategic Plans and that we do not breach our financial limits)	which aligns to Strategic Plan		prevention, Procurement)	(Executive Director of Finance) Annual	Adherence to delegated authorities Regular review of Finance monitoring reports Regular financial reports to the Executive Team	financial control and financial planning and strategy through the following: Setting the Direction (Approval of Strategic Plan and Financial Plan) and monitoring reports against these Holding to Account (Receiving quarterly Finance Report Assessing Risk (Understanding key areas of budget risk)) Engaging Stakeholders (Ensuring that stakeholders understand the budget) Influencing Culture (Setting a strong tone in relation to the proper use of public money)
	Operational level challenge to budget setting process		External Audit of Annual Accounts	Executive Director of Finance Annual	Detailed controls on expenditure at a Directorate level.	Ensures effective financial stewardship through considering value for money, financial control and

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance	Responsible Committee/Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
					Adherence to delegated authorities Regular review of Finance monitoring reports Regular financial reports to the Executive Team	financial planning and strategy through the following: Setting the Direction (Approval of Strategic Plan and Financial Plan) and monitoring reports against these Holding to Account (Receiving quarterly Finance Report Assessing Risk (Understanding key areas of budget risk)) Engaging Stakeholders (Ensuring that stakeholders understand the budget) Influencing Culture (Setting a strong tone in relation to the proper use of public money)
	Regular, accurate and clear reporting of actual against budget and forecast	Regular Financial reporting	Scottish Government scrutiny of Financial Performance	NES Board (Executive Director of Finance) Quarterly	Detailed controls on expenditure at a Directorate level.	Ensures effective financial stewardship through considering value for money, financial control and

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance	Responsible Committee/Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
			Reporting submissions		Adherence to delegated authorities Regular review of Finance monitoring reports Regular financial reports to the Executive Team	financial planning and strategy through the following: Setting the Direction (Approval of Strategic Plan and Financial Plan) and monitoring reports against these Holding to Account (Receiving quarterly Finance Report Assessing Risk (Understanding key areas of budget risk)) Engaging Stakeholders (Ensuring that stakeholders understand the budget) Influencing Culture (Setting a strong tone in relation to the proper use of public money)
	Production of Annual Accounts and sign-off by Accountable officer	Review of annual accounts	Auditor General for Scotland and the Scottish Government Health and Social Care Directorate review	Audit & Risk Committee (Executive Director of Finance) Annual	Detailed controls on expenditure at a Directorate level. Adherence to delegated authorities	Ensures effective financial stewardship through considering value for money, financial control and

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance	Responsible Committee/Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
			and provide feedback on Annual Accounts		Executive Team review of Annual Accounts	financial planning and strategy through Holding to Account (Receiving Annual Accounts and Annual Report)
	Annual Best Value review	Directors' assurance provided to the CEO to support signing of the Governance Statement.		Audit & Risk Committee linked to Best Value Principles	Executive Team role in reviewing savings and budget plans in line with NES Best Value Principles.	Ensures effective financial stewardship through considering value for money, financial control and financial planning and strategy Influencing Culture (Setting a strong tone in relation to the proper use of public money)
	Regular review of in-year financial performance at Directorate and Executive Team level, and amendment of financial plans if appropriate Development and adherence to Standing Financial Instructions setting		Internal Audit Review as part of Controls Framework review.	A&R and Board (Executive Director of Finance) Ongoing	Executive Team regular review	Holding to Account Receiving quarterly and Annual Finance Reports Assessing Risk Understanding key areas of budget risk

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance	Responsible Committee/Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
	out limits of financial delegation					
	Development and implementation of procurement controls	Monitoring of Procurement including performance of the compliance with Procurement Duty (through Procurement Annual Report)	Internal Audit Review as part of Controls Framework review	Audit & Risk Committee (Executive Director of Finance) Annual	Review of Procurement processes	Influencing Culture (Setting a strong tone in relation to the proper use of public money)
	Development and implementation of financial controls and reconciliations Savings plans and measurement of delivery		Internal Audit Review as part of Controls Framework review.	Audit & Risk Committee Controls (Executive Director of Finance) Ongoing		Ensures effective financial stewardship through considering value for money, financial control and financial planning and strategy through the following: Setting the Direction (Approval of Strategic Plan and Financial Plan) and monitoring reports against these Holding to Account (Receiving quarterly Finance Report Assessing Risk (Understanding key areas of budget risk)) Engaging Stakeholders

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance	Responsible Committee/Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
						(Ensuring that stakeholders understand the budget) Influencing Culture (Setting a strong tone in relation to the proper use of public money)
	Management and reporting of finance risks	Review of Corporate and local risk registers	Internal Audit	Board/ Audit & Risk Committee have oversight of all strategic risks in advance of Board. (Executive Director of Finance) All meetings	Regular risk reports to the Executive Team	Holding to Account (Receiving quarterly Finance Report and Strategic Risk Report. Understanding key areas of budget risk)
Human Resource Management **(Making sure that NES recruits, develops, manages and retains its staff fairly, efficiently and effectively)**	Workforce Strategy and Organisational Development Plan including Key Performance Indicators (including relevant workforce metrics)	Approval of Workforce Strategy and Organisational Development Plan (including SKPIs)	Internal audit External audit	Staff Governance Committee – role re. risk (Director of People and Culture) Triennial	Executive Team ensures alignment of human resources with strategic priorities and operational needs	Setting the Direction (Approving the Workforce Strategy and Organisational Development Plan)
	Reports on Staff Governance Standard	Review of progress against agreed SKPIs (through quarterly review of	Scottish Government reviews Staff Governance	Staff Governance Committee (Director of People and Culture)	Executive Team reviews performance against Workforce	Holding to account (Reviewing reports on Staff Governance, the Workforce Plan,

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance	Responsible Committee/Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
		metrics and dashboard with SKPIs) and reports on Staff Governance Standard	Monitoring data and provides feedback	Quarterly	Strategy OD Plan and SKPIs Executive Team reviews the reports on Staff Governance Standard	iMatter, performance against SKPIs)
	Use of feedback on staff satisfaction and team working through iMatter to identify issues and affect improvements	Review of NES and national iMatter reports	Publication of iMatter comparative data by Scottish Government and thematic review	Staff Governance Committee (Director of People and Culture) Annual	Executive Team reviews iMatter reports and initiates change where required	Assessing Risk (Identifying key risks relating to Human Resource Management and ensuring these are managed effectively) Engaging stakeholders (ensuring that Workforce Strategy and OD policy application is developed in partnership)
	Monitoring quality of staff performance objectives and personal development plans to ensure alignment with directorate and NES objectives	Report on outcomes from quality assurance of performance objectives and Personal Development Plans (PDPs)	Internal audit	Staff Governance Committee (Director of People and Culture) Annual	Equalities performance data reviewed by Senior Management Leadership Team and Executive Team	Board Influencing Culture and standards of people management across the organisation

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance	Responsible Committee/Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
	Compliance with the specific statutory duties under Equality and Fairer Scotland legislation	Approval of Equality Outcomes and Mainstreaming Priorities and monitors progress reports Monitor compliance and improvement in relation to specific equality duties through review of Equal Pay statement and workforce equality data (presented in Workforce Plan) and Fairer Scotland related reports	Equality and Human Rights Commission scrutiny	Staff Governance Committee (Director of People and Culture Quadrennial	Executive Equality and Diversity Champions	Board scrutiny role Equality and Diversity Non-Executive Champion ~~role~~ promotes awareness and supports assurance through advocacy and challenge .
	Ensure fair remuneration of senior staff	Remuneration Sub Committee considers pay levels and performance of senior staff.	National Performance Management Committee Evaluation Committee reviews performance ratings and provides feedback.	Remuneration Sub Committee (Chief Executive and Accountable Officer / Director of People and Culture) Annual	Accountable Officer and Board Chair role	
	Ensure fair access to development opportunities and training progression for staff and	Considers reports on Differential Attainment initiatives and information.		Education & Quality Committee (Executive Director of Medical and		

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance	Responsible Committee/Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
	employed trainees through 'Differential Attainment' actions			Executive Director of NMAHP)		
	Whistleblowing Policy and processes to encourage staff and others to raise public interest concerns and ensure these are investigated and reported effectively	Quarterly updates on the whistleblowing portfolio provided to Staff Governance Committee Annual report on handling of whistleblowing concerns Non-Executive Whistleblowing Champion appointed by Scottish Ministers, promotes awareness and monitors the effectiveness of systems in place.	Independent external review of Whistleblowing concerns referred to the Independent National Whistleblowing Officer.	Staff Governance Committee (Director of Planning, ~~and~~ Performance & Transformation) Quarterly	Executive Team role in reviewing reports	Holding to account for whistleblowing policies and practice. Assessing risks identified in whistleblowing concerns Influencing the culture to encourage staff and others to report public interest concerns Non-Executive Whistleblowing Champion role provides assurance to the Board and Scottish Government.
	Maintenance of risk registers relating to human resources	Review of corporate and directorate risk registers relating to NES workforce	Internal audit	Staff Governance Committee Audit and Risk Committee (Director of People and Culture)		

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance	Responsible Committee/Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
				Quarterly		
Change Management **(Making sure that NES manages significant service change and any consequential organisational change)**	Business cases and plans for service re-design and change (including explicit information on impact and efficiency and Stakeholder Engagement Plan)	Plans for service re-design and progress reports Organisational Change Policy and Procedures approved	Internal audit External audit	Staff Governance Committee (Director of People and Culture) If relating to external change role for Planning and Performance Committee	Executive Team reviews and authorises business cases and plans for service re-design and change	Setting the direction (Approving the Organisational Change Policy) Holding to account Assessing risk
	Organisational Change Policy and Procedures	Change Programme risk register reviewed			Change Management Programme Board authorises and monitors organisational change processes	Engaging stakeholders (Ensuring NES follows consultation and engagement processes (Board))
	Change Management Programme Board authorises and monitors organisational change processes	Minutes of Change Management Programme Board meetings			Transformation Group oversees delivery of Corporate Improvement Programme.	Influencing culture (Ensuring NES is focused on improvement in all aspects of its work)
	Organisational Performance Improvement	Quarterly report from the OPIP team		Staff Governance Committee (Director of People and Culture)		

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance	Responsible Committee/Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
	Programme processes					
Risk Management **(Making sure that NES identifies and manages key risks to its services, stakeholders and the organisation)**	ET review of NES Risk Strategy and Risk Management Framework and Risk Appetite	Review and approval of Risk Strategy and Management Framework Annual review of risk appetite	Internal audit reviews External audit Internal audit	Audit & Risk (Executive Director of Finance) As required Board (Executive Director of Finance) Annual	Executive Team reviews reports on risk registers Executive Team advises on Risk Strategy and Risk Management Framework	Setting the Direction (Approving the Risk Strategy Risk Appetite and Management Framework, determining NES's risk appetite)
	Development and local review of corporate and directorate risk registers.	Regular review of the Corporate Risk Register	Internal audit	Board (Executive Director of Finance) All Board meetings		Holding to account (Reviewing corporate and directorate risk registers to check key risks are identified and managed effectively)
	Recording and monitoring of directorate and project risks using Risk Management System	Review of the most significant (Primary rated) Directorate risks	Internal audit	All standing committees (Executive Lead Officers) Quarterly		Assessing risk (Identifying key risks to NES business)
	Quarterly Risk Register Review Process in directorates.	Reports on Standing Committees' review,				

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance	Responsible Committee/Officer/ Frequency of reporting		Executive Assurance Role	Board Governance Assurance Role
		handling and identification of risks					
	Reports to Exec Team on directorate risk registers	Review of Audit Scotland reports		(Executive Director of Finance) Quarterly			
Information Management **(Making sure that NES only collects the data it needs, the data is kept securely and is only accessed by the correct people)**	Development and implementation of Information Management Strategy	Review of Caldicott Guardian annual report	Internal audit External audit	Board Planning and Performance Committee Director of NES Technology Service Caldicott Guardian Annual		Executive Team approves organisational policies, plans and processes for information management.	Setting the direction (Approve strategy) Holding to account (Review and challenge progress reports from Digital. Review Data incident reports)
	Policies, plans and processes for information governance, cyber security, records management, Freedom of Information and intellectual property	Annual Information Governance & Security report reviewed	The Digital Health & Care Strategic Portfolio Board reviews and provides feedback on regular reports from the NES Digital Service	Planning and Performance Committee (Director of NES Technology Service) Annual		Executive Team monitors Information Management through reports in areas such as Freedom of Information and data protection.	Planning and Performance Committee on behalf of Board Holding to account (Review and challenge progress reports from Digital. Review Data incident reports)

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance	Responsible Committee/Officer/ Frequency of reporting		Executive Assurance Role	Board Governance Assurance Role
	Information management policies, plans and processes (including cyber security arrangements) aligned with relevant legislation, international quality standards and Scottish Government policy/strategies		Internal Audit. A specific IT Risk Universe conducted to target internal audit resource towards the areas assessed as most high risk.	Planning and Performance Committee (Director of NES Technology Service) As required			Assessing risk (Understand the kind of information risks NES could be exposed to and seek assurance on how these are addressed)
	Role-based access to information systems and dashboards and management of data breaches	NES Information Assurance Forum	Internal Audit	Planning and Performance Committee reports on data breaches (Director of NES Technology Service)			Planning and Performance Committee on behalf of the Board Holding to account Review and challenge progress reports from Digital. Review Data incident reports
	Development, implementation and audit of Information Security Management System		Internal audit	Planning and Performance Committee (Director of NES Technology Service)			

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance	Responsible Committee/Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
	Information Asset Register and Data Protection Impact Assessment Register			Planning and Performance Committee (Director of NES Technology Service)		
	Business continuity/disaster recovery systems and processes	(Director of NES Technology Service) As required Business Continuity plans.		Planning and Performance Committee (Director of NES Technology Service)		
	Provision of cloud-based information management systems for safe data storage, retrieval and sharing		External penetration testing of NES internal network	Planning and Performance Committee (Director of NES Technology Service)		
	Cyber security based on agreed processes for authentication and registration of system users and investment in firewall technologies	Scrutiny of training data	Annual Scottish Government audit of Information Governance and Information (Cyber) Security policies and procedures	Planning and Performance Committee (Director of NES Technology Service)		Board Assurance for mitigation of cybersecurity strategic risk
	Mandatory training of all NES staff on Information Governance.			Staff Governance Committee (Director of People and Culture)		

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance	Responsible Committee/Officer/ Frequency of reporting		Executive Assurance Role	Board Governance Assurance Role
	Assessment and management of risks relating to data management			Planning and Performance Committee (Director of NES Technology Service) Quarterly			
	Development of Information Governance and Information Security documentation to evidence compliance with Scottish Government Network and Information Systems (NIS) directive and regulations, 2018	Review of Digital Progress report	Annual Scottish Government audit of Information Governance and Information (Cyber) Security policies and procedures	Planning and Performance Committee (Director of NES Technology Service)			

NHS Education for Scotland **NES/25/86**

Agenda Item: 10b

20 November 2025

NES Public Board

1. Title of Paper

1.1 Blueprint Improvement Plan: Final Progress Report

2. Author(s) of Paper

2.1 Drew McGowan, Board Secretary & Principal Lead for Corporate Governance

3. Lead Director(s)

3.1 Christina Bichan, Director of Planning, Performance & Transformation

4. Situation/Purpose of paper

4.1 To provide a final progress report on the Blueprint Improvement Plan.

5. Background and Governance Route to Meeting

5.1 The Board approved the Blueprint Improvement Plan in March 2024 and a copy was subsequently submitted to the Scottish Government. The Board and the Audit & Risk Committee have received regular reports on NES' progress in implementing the plan.

6. Assessment/Key Issues

6.1 All NHS boards in Scotland are required to adopt the Blueprint for Good Governance in NHS Scotland as the framework to underpin the corporate governance model. The Blueprint sets out the need for boards to have a

consistent and systematic approach to assessing their current governance arrangements and identifying any new and emerging issues.

6.2 All NHS boards participated in a self-assessment on the Blueprint and their practices. Following the submission of NES' self-assessment, the Board held a workshop to facilitate discussion on required actions and develop the Blueprint Improvement Plan.

6.3 Significant progress has been made in implementing the Blueprint Improvement Plan. Since the Board reviewed the last progress report, the action (5.1) on equality and diversity on NHS boards being led by the NES Board Development team has moved from 'in progress' to 'complete'. With this update, all ten actions are now complete.

6.4 Since the last progress report, the Scottish Government announced that the functions of NES and NHS National Services Scotland (NSS) will be brought together to create NHS Delivery on 1 April 2026. Considering this, and the progress to date, this will be the final progress report on the Blueprint Improvement Plan.

7. Recommendations

7.1 To review and approve the Blueprint Improvement Plan Progress Report.

7.2 To note that all actions are complete and this will be the final progress report for the Blueprint Improvement Plan.

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

a) Have implications for NHS Delivery been considered?

☒ Yes
☐ No

b) Have educational implications been considered?

☒ Yes
☐ No

c) Is there a budget allocated for this work?

☒ Yes
☐ No

d) Alignment with Our Strategy 2023 – 26 People, Partnerships and Performance

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

e) Have key strategic risks and mitigation measures been identified?

☒ Yes
☐ No

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

☒ Yes
☐ No

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

☐ Yes
☒ No

h) Have you considered Emergency Climate Change and Sustainability implications as per DL (2021) 38?

☒ Yes
☐ No

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

☒ Yes
☐ No

Drew McGowan
30 October 2025
NES

Appendix 1

NES CORPORATE GOVERNANCE BLUEPRINT IMPROVEMENT PLAN

(Note: the headings in this table replicate the SG reporting template with the exception of the blue shaded columns)

Blueprint Priority Area	**Blueprint Sub-heading**	**High Level Action**	**Underpinning Actions**	**Interdependency**	**Joint Board Leads (Executive/Director Lead and non-executive director lead)**	**Timeline** (Target date for completion)	**Intended good governance outcome**	**Progress Update**
Function	**Setting the Direction**	1.Develop NES "Learning and Education Innovation Plan" to underpin delivery of the NES Learning and Education Strategy Develop NES "Learning and Education Research Plan" to underpin delivery of the NES Learning and Education Strategy	Progress NES Learning and Education Innovation Plan to 6 March 2025 EQC for assurance Progress NES Learning and Education Research Plan to 6 March 2025 EQC for assurance	NES Strategy NES Learning and Education Strategy	Director Lead: **Kevin Kelman** Operational Lead: **Fiona Fraser** Director Lead: Kevin Kelman Operational Leads: Jan Clarkson and Peter Johnston	March 2025	Board Members will have received assurance as to the overall strategic direction to facilitate innovation and research to drive change and transform NES service delivery to ensure it supports the future of health and social care and meets the needs of stakeholders.	**1. Complete** The NES Research and Innovation Plan was presented to the Education & Quality Committee and the Board in May 2025 and published in July 2025.

Blueprint Priority Area	Blueprint Sub-heading	High Level Action	Underpinning Actions	Interdependency	Joint Board Leads (Executive/Director Lead and non-executive director lead)	Timeline (Target date for completion)	Intended good governance outcome	Progress Update
Function	**Holding to account**	2. Embrace and report on Best Value in relation to strategic Once for Scotland and Once for NES Strategic work.	2.1 Provide a revised and improved Best Value Report which embraces a more strategic approach to reporting Best Value and includes a focus on Once for Scotland or Once for NES strategic work through June 2024 ARC and onwards to Private Board	Material and data required from across NES for inclusion	2.1 Executive Director Lead: **Jim Boyle** Operational Lead: **Laura Howard**	March 2024 – June 2024	Public money and resources are being used to secure 'best value' as set out in the Scottish Public Finance Manual demonstrating effective financial stewardship and also quality and excellence.	**2.1 Complete** The revised and improved Best Value Report was approved by ARC and 27 June 2024 Private Board
			2.2 As per agreement at 27 June 2024 Private Board, mature the NES Financial Principles to reflect Best Value principles and include quality and excellence.		2.2 Executive Lead: Karen Reid Operational Lead: Christina Bichan	Nov 2024		**2.2 Complete** This item was considered and approved at the 03 October 2024 Audit and Risk Committee. The Best Value Principles have been used to assist the development of the 2025-26 Annual Delivery Plan and 2025-26 Annual Budget process.

Blueprint Priority Area	Blueprint Sub-heading	High Level Action	Underpinning Actions	Interdependency	Joint Board Leads (Executive/Director Lead and non-executive director lead)	Timeline (Target date for completion)	Intended good governance outcome	Progress Update
Function	**Managing Risk**	3.Continue work to embed the corporate approach to risk management across the organisation, focusing on the inclusion of risks associated with clinical governance/clinical assurance.	Continue to progress and improve the overall approach to corporate risk Consider the strategic clinical governance risks for NES and revise risk register accordingly including the actioning of any required mitigations.	ARC and EQC governance interdependency	Executive Director Leads: **Karen Wilson and Emma Watson** Operational Lead: **Debbie Lewsley**	March 2024 – March 2025	The Board will have agreed NES risk appetite, approved risk management strategies and ensure they are communicated to the organisation's workforce considered current and emerging risks for all categories of healthcare governance, including clinical governance and overseen an effective risk management system that assesses the level of risk, identifies the mitigation	**3.Complete** NES has continued to embed the overall approach to risk management. The Audit and Risk Committee (ARC) receive regular overall reports, Committees receive regular reports on their Board delegated strategic risks and the Board receives quarterly strategic risk reports, Risk appetite is reviewed on an annual basis by the ARC and the Board. The Education and Quality Committee (EQC) approved the formation of the Clinical and Care Assurance Sub-Group. The EQC approved the Terms of reference for this Group. The Group aim to begin meeting in April 2025.

Blueprint Priority Area	Blueprint Sub-heading	High Level Action	Underpinning Actions	Interdependency	Joint Board Leads (Executive/Director Lead and non-executive director lead)	Timeline (Target date for completion)	Intended good governance outcome	Progress Update
							required and provides assurance that risk is being effectively treated, tolerated or eliminated.	
Function	**Engaging Stakeholders**	4.Develop NES stakeholder engagement reporting to reflect Community Planning Partnerships, third sector and those less represented in our work and consider benchmarking through liaison with the 3 other UK sister organisations. Continue to engage internally with staff through webinars and networks.	Develop the Stakeholder Engagement Strategy to embrace these aspects. Develop a mechanism for reporting progress to Board. Consider if these aspects are adequately reflected in the SKPIs as part of performance management review.	Links with Anchors Strategic Plan Strategic Key Performance Indicators (SKPIs)	Director Lead: **Christina Bichan** Operational Lead: **Nick Hay**	April 2024 – March 2025 iterative and continuing	NES have considered community empowerment through the lens of communities of interest and communities of practice in the workforce context and embraced our role in promoting community empowerment via the health and social care workforce. Our systems of governance are developed	**4. Complete** NES Stakeholder Survey issued, and analysis undertaken. Report presented to 21 November 2024 Board along with refreshed Stakeholder Map and update on collaborations and strategic partnerships. Action Plan approved to take forward resulting actions. Progress will be reported through annual Engaging Stakeholders Report to Board.

Blueprint Priority Area	Blueprint Sub-heading	High Level Action	Underpinning Actions	Interdependency	Joint Board Leads (Executive/Director Lead and non-executive director lead)	Timeline (Target date for completion)	Intended good governance outcome	Progress Update
							to enable and provide assurance on the effectiveness of our approach to community empowerment. NES continue to apply the principles of the staff Partnership Agreement and engage effectively with staff.	
Enablers	**Diversity, Skills and Experience**	5.Influence equality and diversity representation improvements in the appointments process for non-executives.	5.1A priority development for NES Board and requires discussion with Public Appointment Commissioner This is a priority development for the NES Board Development Programme.	Public Appointments Unit Board Chairs Group Existing priority initiatives for the NES Board	Non-Executive Director Leads: **Chair David Garbutt** Operational Lead: **Della Thomas / Claire Sweeney**	April 2024 to March 2025 Iterative and continuing	This links with the responsibility of the Scottish Government, working with the NES Board Chair, to ensure the necessary diversity, skills	**5.1 Complete** We continue to work with the Scottish Government's Public Appointments Team and the Ethical Standards Commissioner to support upcoming Chair appointments. Promotional activity is underway for around 10

Blueprint Priority Area	Blueprint Sub-heading	High Level Action	Underpinning Actions	Interdependency	Joint Board Leads (Executive/Director Lead and non-executive director lead)	Timeline (Target date for completion)	Intended good governance outcome	Progress Update
			5.2Discuss approaches to including a strengthened focus in the appointment process for our current non-executive director vacancy.	Development Team			and experience are present across the NES Board. This includes determining the Board's requirements during the recruitment of new Non-Executive Members and the on-going development of the skills of existing Board Members.	roles, with strengthened links to Changing the Chemistry and Women on Boards. Updated equalities materials and whole board development sessions have been shared with NHS Boards in collaboration with the Equalities Team. **5.2 Complete** We have now appointed to our non-executive director vacancy. The Chair discussed our aim to increase applications from people with diverse backgrounds with the Public Appointment Unit aiming to increase applications.
Enablers	**Diversity, Skills and Experience**	6. Explore participation in a Board member apprenticeship scheme	Identify a plan of implementation and support for a Board Apprenticeship scheme	NES Board and sponsor approval Participation in "Board Room Apprentice Scheme"	Executive Lead: **Karen Reid** Together with **Chair David Garbutt** Operational Lead: Della Thomas / Claire Sweeney	June 2024	Provide the opportunity for a younger voice around the Board room table with the potential to also introduce	**6. Complete** We have been successful in securing a Boardroom Apprentice. Louise Harker is our Boardroom Apprentice from 1 January – 31 December 2025.

Blueprint Priority Area	Blueprint Sub-heading	High Level Action	Underpinning Actions	Interdependency	Joint Board Leads (Executive/Director Lead and non-executive director lead)	Timeline (Target date for completion)	Intended good governance outcome	Progress Update
							a care experienced or a lived experienced individual to support the collective knowledge and understanding at Board level, in relation to equality, diversity and inclusion.	
Delivery	**The Assurance Framework**	7.Continue to improve how the organisation evidences impact, performance and improvement to the Board through the further development of the new performance management approach.	Undertake a review of the strategic KPI approach and report outcome and any arising recommendations to Board for approval.	7.1Outcome of Internal Audit on Performance Management 7.2Implementation of new National Performance Indicators for NHS Boards	Director Lead: **Christina Bichan** Operational Lead: **Simon Williams**	April 2024 – March 2025 iterative and continuing	The Board receive effective and measurable assurance in relation to strategic delivery	**Complete** **7.1** A new process for the governance of SKPIs was approved by 15 August 2024 Board. The creation of a new NES Committee which will include a performance remit was approved at the 26 September 2024 Board. The Planning and Performance Committee Terms of reference were approved by 6 February 2025 Board and the Committee begins it work as of 1 April 2025.

Blueprint Priority Area	Blueprint Sub-heading	High Level Action	Underpinning Actions	Interdependency	Joint Board Leads (Executive/Director Lead and non-executive director lead)	Timeline (Target date for completion)	Intended good governance outcome	Progress Update
								7.2 Complete Both of the relevant measures within the national suite of performance indicators for NHS Boards are being routinely reported via the quarterly Strategic KPI report.

Approved **NES/PPC/25/34**

NHS Education for Scotland

PLANNING & PERFORMANCE COMMITTEE (PPC)

11 August 2025 from 10:15am to 12:55pm

Approved minutes of the second meeting of the Planning & Performance Committee (PPC) held on Thursday 11 August 2025 as a hybrid meeting, in person at the Bothwell Street Office, Glasgow and via Microsoft Teams

Present: Ally Boyle (AB), Committee Chair, Non-Executive Director
Annie Gunner Logan (AGL), Non-Executive Director
Nigel Henderson (NH), Non-Executive Director
Angus McCann (AM), Co-opted Member

In Attendance: Jim Boyle (JB), Director of Finance
Rob Coward (RC), Principal Educator, Executive Secretary
Chris Duffy (CD), Senior Admin Officer, Minute-Taker
Michael Gibbons (MG), Management Trainee
Debbie Lewsley (DL), Manager, Planning
Stephen McNamee (SM), Head of Corporate Improvement
Gordon Paterson (GP), Director of Social Care
Karen Reid (KR), Chief Executive
Lorraine Scott (LS), Associate Manager, Planning
Alison Shiell (AS), Manager, Planning
Christopher Wroath (CW), Director of NES Technology Service

1. Welcome and Introductions

1.1 The Committee Chair welcomed all to the second meeting of the PPC.

2. Apologies for absence

2.1 Member apologies were received from David Garbutt, Board Chair and Jean Ford, Non-Executive Director.

2.2 Regular attendee apologies were received from Christina Bichan, Director of Planning, Performance and Transformation.

3. Declarations of interest

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

4. Previous Minutes of PPC meeting held on 02 May 2025

4.1 The Committee approved the 02 May 2025 PPC minutes as an accurate record of the meeting.

5. Action Log

5.1 There were 10 actions on the action log, 9 of which were complete. Stephen McNamee provided an update on the 1 action that was in progress. Updated guidance has been created for the production of the Corporate Improvement Highlight report that incorporate Committee feedback.

The Committee approved the action log.

6. Notification of any other business

6.1 There was no other business identified.

7. Deep Dive

7.1 Deep Dive – Digital ask of NES

7.1.1 The Committee Chair invited Christopher Wroath to introduce this item which provided the Committee with an update on the totality of the digital ask of NES, associated funding, timescales and outcomes. The Committee had requested this update at the meeting on 02 May 2025. In support of the major digital programmes, more in-depth information was provided for National Digital Platform (NDP), Digital Front Door (DFD) and Digital Prescribing & Dispensing Pathways (DPDP) work.

7.1.2 Christopher Wroath delivered a PowerPoint presentation which provided an overview of the NES Technology Service (NTS) Directorate establishment, structure and alignment of teams to delivery. Funding sources and allocations for the 2025/26 financial year and the scope of technology delivered in support of NES and Scottish Government priorities were presented. It was noted that the digital programmes are also in scope for the ongoing review of NES's externally commissioned programmes which are considered by the Executive Team.

7.1.3 The Committee Chair thanked Christopher Wroath for the presentation and opened the report for questions.

7.1.4 The Committee asked if the dermatology rollout in Lanarkshire will now be rolled out to the wider population. Christopher Wroath replied, that is the intention, for all of the products to be rolled out to whole of Scotland, but the timing of rollout for specific products is still being discussed with Scottish Government.

7.1.5 The Committee asked how stakeholders are involved in the development of the NTS products. Christopher Wroath responded, a huge number of stakeholders are engaged through the stakeholder delivery board and user engagement.

7.1.6 The Committee highlighted that it seems to have taken a long time to get to this position for Digital prescribing and asked if learning could be taken from the other parts of the UK in this area? Christopher Wroath replied, funding prioritisation was previously an issue but now digital prescribing is very much a priority. Furthermore, NTS have taken a comprehensive account of the work already done in England, Scandinavia and Estonia. The reason NTS can' just use a product that is already made is the back-end systems that need to interact with the product are all different.

7.1.7 The Committee noted the challenge with staff on fixed term contracts and asked what further could be done to reduce this? Karen Reid replied, the challenges are recognised where there are large numbers of staff on fixed term contracts. The executive team have developed criteria to review all staff on temporary arrangements, looking to permanise individuals where possible, with a meeting scheduled to address this. Discussions with Scottish Government are ongoing to secure assurances for areas like social care, aiming to provide enough comfort to convert more fixed-term contracts to permanent positions.

7.1.8 The Committee asked a question in relation to DPDP and national identity and access management. Christopher Wroath explained that identity and access management for DFD is focused on public access to their own data, using the Scottish Government Scot account, which is fully operational and tested successfully for DFD integration. The main challenge now is supporting the service for onboarding all adults in Scotland.

7.1.9 The Committee asked about the relationship with the Scottish Government's Digital Assurance Office and their technology assurance framework, specifically how it relates to the work being discussed. Also, could the perspective of the Digital Assurance Office be included in future reports for Committee assurance purposes. Christopher Wroath confirmed that the Digital Assurance Office will oversee assurance for DFD and all related work. The Digital Assurance Office is satisfied with the current processes and documentation. Christopher Wroath also agreed to include this assurance perspective in future reporting. **Action: CW**

7.1.10 The Committee confirmed the deep dive provided them with assurance.

8. Risk

8.1 Q4 PPC Strategic Risk Report

8.1.1 The Committee Chair welcomed Debbie Lewsley to the meeting to introduce the risk report. Debbie Lewsley presented the quarter one risk update, summarizing the eight strategic risks relevant to the Committee. It was highlighted that three risk ratings have increased due to the recent announcement of the formation of NHS Delivery. This has affected strategic risks related to delivery planning, resource redirection and the unknown scope of the new organisation. The risks remain within Board appetite, but additional mitigating actions are planned. The report also included Directorate risk reporting to Committees for the first time, with 27 directorate risks reviewed by the executive team which were shared for information.

8.1.2 The Committee Chair then opened the report to members for questions and discussion.

8.1.3 The Committee commented on the difficulty of identifying mitigating actions for risks related to NHS Delivery given the significant uncertainty and lack of information about the changes. The Committee asked if this uncertainty should be reflected as a risk for the Committee and Board. Debbie Lewsley acknowledged the challenge and explained that they are working through a detailed programme with NSS and the Scottish Government to identify necessary actions. It was clarified that the current risk scoring focusses on the impact for the remainder of the financial year and that risks may be rescored as more information becomes available.

8.1.4 The Committee enquired further and asked how risk management governance will function during the transition year, specifically with the introduction of a shadow board alongside the NES and NSS boards, considering avoiding duplication and ensuring risks are managed effectively. Karen Reid responded that once proper arrangements are in place for the NHS Delivery Programme Board, strategic rusks affecting both organisations will be addressed at that level. It was emphasised that NES and NSS will continue to manage their own specific risks until the transition is complete while the shadow board will handle longer-term risks related to NHS delivery.

8.1.5 The Committee requested that the wording for Strategic Risk 14 is reviewed as the Committee believes there are robust governance arrangements in place.

Action: DL

8.1.6 The Committee Chair thanked Debbie Lewsley for the report and the Committee confirmed it provided them with the necessary assurance.

9. Finance

9.1 Finance Update

9.1.1 The Committee Chair invited Jim Boyle to present the PPC Finance report. The report informed the Committee of the forecast financial outturn position at the end of Quarter 1 of financial year 2025/26, based on year to date activity and known spending commitments and anticipated funding for the remainder of the year. The forecast year-end position, as set out in this report is an overspend of £1.1m. The paper also reports the final Scottish Government in-year funding position and highlights the ongoing work with SG Health Finance and policy teams on outstanding funding.

9.1.2 The Committee Chair thanked Jim Boyle for introducing the report and opened the report for questions.

9.1.3 The Committee suggested that the reported overspend should be contextualised as a higher percentage of the budget that is actually flexible, not just as a small percentage of the total, to better reflect its impact. The Committee also

recommended that future reports address risks related to funding for temporary posts being made permanent, especially considering the transition to the new organisation. Jim Boyle agreed to consider both points for future finance reports. **Action: JB**

9.1.4 The Committee noted the finance update.

10. Executive Leads Report

10.1 Planning & Performance Executive Leads Report

10.1.1 The Committee Chair invited Karen Reid and Christopher Wroath to introduce the report and highlight any key points. Karen Reid highlighted the focus on health inequalities, NES's role in population health and as an anchor organisation. The positive response from government on the Annual Delivery Plan (ADP) with no changes required. Also, the strategic engagement and collaboration with academic partners at national, sub-national and local levels.

10.1.2 Christopher Wroath highlighted the delivery of the medical device hub within the NDP, describing it as a significant project with strong engagement from territorial boards and an example of growing recognition for the platform's importance.

10.1.3 The Committee Chair opened the report for questions.

10.1.4 The Committee asked about Scottish Government pausing the ADP workshops and asked if the alternative process was appropriate and useful. Karen Reid confirmed there were no concerns with the process, the pause was due to internal arrangements within Scottish Government. The feedback on the NES ADP was positive.

10.1.5 The Committee asked about the progress of strategic discussions with non-Turas boards regarding the wider adoption of Turas. Christopher Wroath confirmed that discussions were going very well, with all non-Turas boards agreeing to transition, contingent on resolving some statutory reporting issues which are being addressed in a dedicated work programme. It is expected that these boards will transition in the next three months.

10.1.6 The Committee highlighted the quality of the lead report, in particular the inequality and population health sections. The Committee recommended streamlining areas of the report that are covered by substantive agenda items, this can reduce burden for staff and avoid duplication. **Action: KM**

10.1.7 The Committee thanked the Executive Leads for the report and confirmed it provided the necessary assurance.

11. Performance Items

11.1 Governance of externally commissioned activity

11.1.1 The Committee Chair invited Stephen McNamee to introduce the report which outlined NES's approach to internal governance for externally commissioned

programmes. The report contained information following self-assessment and deep dives into three high-cost, high-risk programmes. DPDP, NDP and the National Centre for Remote and Rural Health and Care. Five shared risk themes were identified, late or unclear commissioning, complex governance models, weaknesses in benefits realisation, informal stakeholder management and funding uncertainty. The executive actions following this assessment were to consolidate the digital programmes into a single managed programme, enhance the initiation processes and to implement an internal delivery board for the National Centre for Remote and Rural Health and Care.

11.1.2 The Committee Chair thanked Stephen McNamee for the introduction and opened the report for questions.

11.1.3 The Committee asked about stakeholder management and if there were conflicts between stakeholders' views. Stephen McNamee responded recognising that conflicts did arise and these were often tracked back to unclear commissioning and lack of clarity on programme vision and deliverables. Work is being implemented to address this, to improve the commissioning process, with a focus on benefits management and deliverables.

11.1.4 The Committee asked about managing risk in relation to the DPDP programme which is hosted and managed by NSS during the transition period to become NHS Delivery. Christopher Wroath confirmed that the current collaboration between NES and NSS is working well, with focussed support from the NSS project team. Karen Reid added that she and the NSS Chief Executive meet monthly with the Joint Senior Responsible Officers for DPDP to ensure governance oversight.

11.1.5 The Committee asked if the findings about funding uncertainty and delays are communicated to the funders and Scottish Government. Karen Reid responded, the report is primarily for internal assurance but funding tensions are regularly raised with Scottish Government during strategic sponsorship meetings and with relevant policy teams.

11.1.6 The Committee noted the report and the approach being taken to strengthen governance and scrutiny in this area.

11.2 Q1 Whole Board Delivery Report

11.2.1 The Committee Chair welcomed Alison Shiell to the meeting to introduce this report that provided the Committee with a quarter one update on NES's delivery performance against the deliverables and milestones set out in the 2025/26 NES ADP. It was highlighted that 85% of deliverables are complete or on track, with 28 showing minor delays and 2 significantly delayed.

11.2.2 The Committee thanked Alison Shiell for a well-written, readable report and no questions were asked.

11.2.3 The Committee approved the Q1 delivery report for onward sequencing to the Board.

11.3 Q1 Strategic Key Performance Indicator (SKPI) Report

11.3.1 The Committee Chair invited Debbie Lewsley to introduce the Q1 SKPI Report which presented the SKPI update for review and approval prior to submission to the NES Board. It was reported that there is data for 80% of SKPIs with ongoing work to develop the remaining 20%. 63% of KPIs were green which is an increase from the previous period and improvement work has taken place in setting RAG parameters and tracking improvement actions. The positive results in staff engagement, doctor satisfaction progress in collaborative activity were highlighted.

11.3.2 The Committee were asked to approve the proposed pausing of data capture for SKPI22 due to the upcoming transition to NHS Delivery. Also, the Committee were asked to comment on the new dashboard format for KPI reporting.

11.3.3 The Committee Chair thanked Debbie Lewsley for the introduction and opened the report for questions.

11.3.4 The Committee expressed ongoing concern about the measures that have not yet been reported, noting that most these SKPIs are delegated to the Education and Quality Committee (EQC). It was asked why reporting is still not possible for some of them and if there is a timeline for being able to report on these SKPIs. Also, if there is a plan to resolve these before the transition to NHS Delivery, or a plan to pursue them afterward. It was noted that there is a meeting planned with Committee Chairs and the Director of Planning, Performance and Transformation to discuss these issues in more detail as part of a review of SKPI reporting.

11.3.5 The Committee observed that the dashboard was much better than previous excel spreadsheets and asked if the dashboard could be interactive, for example clicking on charts for more detail. Debbie Lewsley confirmed the dashboard is still in development and the team are working to make it more interactive, this feedback will be considered as part of the dashboard developments. **Action: DL**

11.3.6 The Committee Chair thanked Debbie Lewsley for the report noting that it was a good news story for the organisation. The Committee supported pausing the Net Promoter Score reporting.

11.3.7 The Committee approved the Q1 SKPI Report.

11.4 Feedback, Comments, Concerns and Complaints Annual Report 2024-25

11.4.1 The Committee Chair invited Rob Coward to present this report which is required by legislation for submission to the Scottish Government and the Ombudsman. The report is also required to be published on the NES website.

11.4.2 The report follows a prescribed format, detailing stakeholder engagement approaches and feedback collection from learners. The Committee were asked to note that very few complaints are received, with most resolved quickly at the front line, there are a small number that are escalated and take longer to resolve due to complexity. The report included diverse case studies to illustrate engagement

methods, emphasising that stakeholder engagement is integral to business operations.

11.4.3 The Committee Chair thanked Rob Coward for the introduction and opened the report to questions.

11.4.4 The Committee highlighted a point on the first table in the report that was confusing due to repetition regarding pharmacist education and training complaints and a case about a facebook post. The Committee suggested rewording these sections for clarity so that they are not misinterpreted.

Action: RC

11.4.5 The Committee approved the report for onward sequencing to the Board.

11.5 Q1 Complaints Report

11.5.1 The Committee Chair invited Rob Coward to introduce this report. The Committee receives reports on complaints received by NES in the previous quarter. These reports detail the complaints received, adherence to complaint handling standards and the complaint outcomes. The purpose of this paper was to provide assurance about the handling of NES complaints in quarter one 2025-26.

11.5.2 The Committee noted the report and confirmed it provided the necessary assurance.

12. Horizon Scanning

12.1 Horizon Scanning Report

12.1.1 The Committee Chair invited Michael Gibbons to introduce the report which provided the Committee with insight into recently published documents from the Scottish and UK Governments, and their potential impact on NES and the wider healthcare landscape. These included, The Population Health Framework, Health and Social Care Service Renewal Framework, NHS Scotland Operational Improvement Plan, Scotland's Public Services Reform Strategy and NHS England's 10 Year Strategy – Fit for the Future.

12.1.2 The Committee Chair thanked Michael Gibbons for the introduction and opened the report for questions.

12.1.3 The Committee asked practical actions would be taken as a result of the horizon scanning reports, asking how the organization would implement recommendations, such as increasing digital skills training and workforce development. Karen Reid responded, the reports are meant to inform the next ADP and NHS Delivery's strategic planning, helping to shape future roles and responsibilities. It was noted that further action would depend on decisions by the NHS Delivery interim Chair and Chief Executive.

12.1.4 The Committee noted the Horizon Scanning Report.

13. Technology and Information

13.1 Caldicott Guardian Annual Report 2024-25

13.1.1 The Committee Chair invited Gordon Paterson to introduce this report which provided the Committee with assurance regarding NES compliance with the Caldicott principles.

13.1.2 The Committee Chair thanked Gordon Paterson for the introduction and opened to the Committee for questions, but no questions were asked as the report was clear and provided the necessary assurance.

13.1.3 The Committee approved the Caldicott Guardian Annual Report for onward sequencing to the Board.

13.2 Information Governance Annual Report 2024-25

13.2.1 The Committee Chair invited Christopher Wroath to introduce this report which provided the Committee with an annual overarching report on Information Governance. It was highlighted that there were 44 information governance incidents over the year, with only one serious case involving external content that was formally reported to the Information Commissioner's Office (ICO) and resulted in no further action. It was noted that there was an 84% increase in personal information requests.

13.2.2 The Committee Chair thanked Christopher Wroath for the introduction and opened the report for questions.

13.2.3 The Committee asked if the compliance level for safe information handling essential learning could be improved. Karen Reid confirmed that this would be picked up as part of the Staff Governance Committee's remit to review all essential learning and to promote greater compliance levels.

13.2.4 The Committee approved the Information Governance Annual Report for onward sequencing to the Board.

13.3 NES Corporate Records Retention Schedule

13.3.1 The Committee Chair invited Christopher Wroath to introduce this report which presented the latest update of the NES Corporate Records Retention Schedule. The schedule follows industry standards and legislation and aims to support a move to a paperless environment.

13.3.2 The Committee Chair thanked Christopher Wroath for the introduction and opened the schedule for questions.

13.3.3 The Committee asked if staff can easily identify information types and if retention mechanisms are automated. Christopher Wroath responded that it is not currently easy for staff, there are plans to improve this through the extended use of SharePoint and piloting automatic document labelling.

13.3.4 The Committee asked about the future of records retention and if a 'once for Scotland' approach might be adopted across the NHS, what would NES's role be. Christopher Wroath confirmed that NES's senior information governance lead, Tracey Gill chairs the National Information Governance forum and is driving the national agenda.

13.3.5 The Committee approved the NES Corporate Records Retention Schedule.

14. Transformation and Corporate Improvement

14.1 Corporate Improvement Highlight Report

14.1.1 The Committee Chair welcomed Stephen McNamee to the meeting to introduce this report which was presented to the Committee to provide assurance that the Corporate Improvement Programme is being effectively managed and that the governance and oversight provided by the Transformation Group is functioning well.

14.1.2 The report contained updates on Learning and Education Quality System, Digital Learning Infrastructure, Business Transformation, HR Transformation and Digital Capability & Confidence. Highlighting areas of success, challenges and risks. It was noted that the programme is being refocused to support NES's transition into NHS Delivery, with three- and six-month delivery plans prioritizing work that adds value to the transition and is transferable, while pausing elements likely to be superseded.

14.1.3 The Committee thanked Stephen and colleagues for the report noting that it was helpful and provided the necessary assurance.

15. Items for noting/homologation

15.1 Digital Learning Infrastructure Programme Board minutes

15.1.1 The Committee noted the Digital Learning Infrastructure Programme Board minutes.

16. Committee Effectiveness

16.1 The Committee confirmed that reports to the Committee had communicated relevant information at the right frequency, time, and in a format that was effective. The Committee felt that they had benefited from the right level of attendance. The Committee felt the papers were of good quality. It was noted that the agenda was very large. It was recommended that repetition was reduced where possible, particularly in the lead executive report if there is a standalone agenda item on the same subject. **Action: KM**

The Committee recommended a forward-looking narrative in the risk register to anticipate how risks might evolve as the organisation transitions into NHS

Delivery, so that risks can be tracked, predicted and appropriately handed over to the new Board. **Action: DL**

17. Any other business

17.1 There was no other business to discuss.

18. Date and time of next meeting

18.1 The next meeting of the Planning and Performance Committee will be held on 10 November 2025, 10:15am – 12:45pm as a hybrid meeting.

NES
CD/AB/KR/CW
Sep 2025

Approved by Committee Chair Ally Boyle on 12th September 2025

Approved Minute

NHS Education for Scotland **NES/SGC/25/52**

Approved Minutes of the Eighty-Ninth Meeting of the Staff Governance Committee held on Thursday 14 August 2025, 10:15 - 13:00pm

The meeting was held in hybrid format via Microsoft Teams and in-person at the NES Westport office in Edinburgh.

Present:

Nigel Henderson (NH), Committee Chair
Shona Cowan (SC), Non-Executive Director
Lynnette Grieve (LG), Non-Executive Director / Employee Director
Gillian Mawdsley (GM), Non-Executive Director / Whistleblowing Champion
James McCann (JMcC), Ex-Officio member, Staff Side (Unison)

In attendance:

Karen Reid (KR), Chief Executive and Accountable Officer (Executive Lead for this meeting)
Ameet Bellad (AB), Senior Specialist Lead, Workforce (Item 13)
Clare Butter (CB), Associate Manager, Board Services, Chair and Chief Executive office (Minute-Taker)
Sybil Canavan (SC), Incoming NES Director of People and Culture (Observer)
Nancy El-Farargy (NEF), Specialist Research Lead, Planning, Performance and Transformation (Item 09)
Ann Gallacher, (AG), Senior Admin Officer (Minute-Taker)
Janice Gibson (JG), Associate Director, Organisational Development, Leadership and Learning (ODLL)
Katy Hetherington (KH), Equality & Diversity Lead (Item 16)
Laura Liddle (LL), Associate Director of HR (Items 12, 17 and 18)
Debbie Lewsley (DL), Risk Manager, Planning, Performance and Transformation (Item 14)
Alex Murray (AM), Health and Safety Advisor (Item 11)
Lorraine Scott (LS), Associate Manager, Board Services, Chair and Chief Executive office (Observer)

AGENDA

1.	**Chair's welcome and introductions**	

1.1	The Chair welcomed everyone to the 89th Staff Governance Committee (SGC) meeting especially Sybil Canavan, the new Director of People and Culture who is joining NES on 01 September 2025. Sybil Canavan will be the Executive Lead for SGC from the next Committee meeting.	
1.2	Lorraine Scott, Associate Manager, Board Services, Chair and CEO Office attended the meeting as part of her personal development.	
2.	**Apologies for absence**	
2.1	Apologies for absence were received from the following regular Committee meeting attendees: Christina Bichan, Director of Planning, Performance and Transformation, Rob Coward, Principal Educator, Planning, Performance and Transformation and David Garbutt, NES Chair.	
3.	**Notification of any other business**	
3.1	There were no notifications of any other business.	
4.	**Declarations of interests**	
4.1	As per the Model Code of Conduct, the Chair asked Committee members if there were any declarations of interest in relation to the business of today's meeting and if so, to clarify to which item this related.	
4.2	There were no declarations of interest.	
5.	**Draft Minutes of Staff Governance Committee meeting held on 01 May 2025**	**NES/SGC/25/38**
5.1	The Committee highlighted minor typographical errors on the minutes, and the paragraph points were emailed to SGC Chair. These will be emailed to Ann Gallacher for correction.	
5.2	The Committee confirmed the minutes were an accurate record of the meeting and were happy to approve the minutes with the typographical errors amended.	
6.	**Action Status Report and other matters arising**	**NES/SGC/25/39**
6.1	The Committee noted there were four actions still in progress on the Action Log.	
6.2	The benchmark data in relation to Action 11.26 is being sourced for SKPI 04. A revised RAG rating will be presented to SGC in the Quarter 3, 2025-26 report.	

6.3	Action 11.26 to include benchmarking data for various metrics, comparing NHS Scotland Boards and year-on-year comparison is in progress. This is being considered as part of the SKPI Review which is underway. The output of the review will be considered by the NES Board in October 2025. Karen Reid reported that benchmarking shows NES is not out of sync with other Boards.	
6.4	It was noted that Action 27.3 is to ensure that the climate and sustainability question in the Report Cover Paper Checklist is completed correctly and an update given at the next SGC meeting. The meeting noted that LTS is an abbreviation of Long-Term Sick. **Action: AG**	
6.5 6.6 6.7	It was noted that Action 9.5, Workforce, HR and Finance Data relates to the Lead Employer situation and the potential impact of payroll errors. Laura Liddle reported on the steps and actions taken to address payroll errors, including the National Systems Group work and the Lead Employers work to implement Standard Operating Procedures, develop processes and guidance to help reduce human error. Karen Reid reported that guidance has been developed to reduce human error in payroll processes and added that the Executive Team receive regular reports and updates on Payroll Overpayments and Underpayments issues. Karen Reid asked the SGC if the update provided assurance and if the action could be closed. The Committee agreed to mark this action complete.	
6.8	The Committee confirmed that the progress made with the open actions provided satisfactory assurance and approved the action log.	
7.	**Lead Executive Report** **Director of People and Culture Report**	**NES/SGC/25/40**
7.1	The Chair invited Karen Reid, the Executive Lead for SGC to introduce the Director of People and Culture report.	
7.2	Karen Reid thanked all for the work done on the report and highlighted the following key topics: the success of the Learning at Work Week, the progress made in the HR Transformation Programme noting the reduced strategic risk rating, and the iMatters scores.	

7.3	Karen Reid praised the National Trainee Services work, especially on the successful implementation of the PVG changes for doctors and dentists in training, noting the completion figure and that there were no rotation delays due to the changes.
7.4	The Committee welcomed the report and commended the work done on the Learning at Work week.
7.5	The Employee Director praised the success of the Learning at Work week and appreciated sessions are recorded for those unable to attend live sessions.
7.6	The Committee queried an overlap and consistency between the Lead Executive report and other Committee reports, specifically the discrepancies in the personal appraisal figures in the Staff Learning and Development Annual report and highlighted the need for clear trend data to track progress.
7.7	Janice Gibson responded that the Lead Executive report provides headline messages from the last quarter period which is from 01 April to 30 June 2025, and annual report covers 01 April 2024 to 31 March 2025. She explained the differences in the data and trends between the two reports and acknowledged the importance of this distinction and had planned to address this point when introducing the Staff Learning and Development Annual report on the agenda.
7.8	The Committee asked for clarification on the intended role of the Lead Executive report, and how it aligns with other committee reports. Janice Gibson responded that the Lead Executive report gives members an overview of recent activity in the People and Culture directorate and the exhaustive details are provided in the specific reports and highlighted that questions on related topics are welcome when reports are discussed on the agenda.
7.9	The Committee asked for more information on Viva Engage participation and if Non-Executives can attend all sessions. Janice Gibson responded that there has been a positive uptake of Viva Engage among staff and Board members. Karen Reid added that staff groups may prefer to develop their own spaces without executive or non-executive involvement and agreed to discuss this post meeting to balance inclusivity with staff comfort. **Action: KR/JG/DG**

7.10	The Employee Director praised the good work that has been done on the HR Transformation Programme, noted the positive changes in team confidence, collaboration and dynamics and welcomed the reduced risk rating and the transformation efforts during organisational change.	
7.11	The Employee Director commended the completion rate for essential learning and the iMatter staff engagement score.	
7.12	The Non-Executive Director, Whistleblowing Champion suggested specific references to whistleblowing and environmental sustainability within the HR transformation and committee work. Karen Reid responded that whistleblowing is included as part of essential learning completion and individual appraisals and there has been a good uptake of the climate change module in the learning suite. The Executive Team decided that climate change should not be included as an appraisal item.	
7.13	The Committee asked if the Equally Safe at Work (ESAW) e-learning module regarding sexual harassment was approved for inclusion to the NES essential learning suite. This will be confirmed post meeting. **Action: AG**	
7.14	There were no further questions raised by the Committee.	
7.15	The Chair thanked all for the work done in the report and the Committee noted the Director of People and Culture report.	
8.	**NES Staff Learning and Development Themed Annual Report**	**NES/SGC/25/41**
8.1	The Chair invited Janice Gibson to introduce the NES Staff Learning and Development Themed Annual Report.	
8.2	Janice Gibson introduced the report which provided an overview of the learning and development opportunities offered to the NES workforce and the associated outcomes for the period from 01 April 2024 to 31 March 2025. Janice Gibson highlighted the report does not include information regarding the May Learning at Work Week.	
8.3	The Committee thanked Janice Gibson for clarifying the report timeframes and asked if the learning and planning figure was a concern and if action should be taken to address it.	
8.4	Janice Gibson responded that the variation in the figures is due to a change in the Once for Scotland policy and they had introduced new steps for appraisal, recording objectives and learning needs. Janice Gibson outlined the work that had been done to increase completion and reduce barriers.	

	Karen Reid added that there is no concern with the trend figure and that the Executive Team continually monitor the figures.	
8.5	The Committee noted the appraisal activity, the quarter one figure and the importance of having objectives in place early to align individual goals. Janice Gibson agreed with the importance of setting objectives early, adding that teams may initially set draft objectives and then finalise them after operational planning. Regular staff communications are issued to remind staff to complete these and the numbers are continually monitored. **Action: JG** Karen Reid noted that there are no concerns with the quarter one figures and assured the Committee that this is continually monitored, and the necessary actions taken.	
8.6	The Employee Director agreed there are no concerns and highlighted the close collaboration working between HR, staffside and the Organisation and Development Team. She noted the successful implementation of the new HR policies, the development of well-being and digital champions networks, and hopes these initiatives continue into the new organisation.	
8.7	The Committee noted the line manager activity number and asked for more information on the numbers of line managers that attend the network sessions. Janice Gibson responded that the member figure for the line managers network is intentionally broad to be inclusive, but the actual number of line managers is approximately 115 and attendance rates are high, relative to that group. The network sessions are flexible and have a drop-in format and support managers, especially during organisational change.	
8.8	The Committee asked for information on the uptake of NES Matters and NES Wellbeing. Janice Gibson responded that they monitor readership of the communications and use multiple channels to optimise engagement.	
8.9	There were no further questions raised by the Committee.	
8.10	The Chair thanked Janice Gibson and the team for the report and the Committee approved the Staff Learning and Development Themed Annual Report.	
8.11	Nancy El-Farargy joined the meeting.	
9.	**Whistleblowing Quarterly Report**	**NES/SGC/25/42**
9.1	The Chair welcomed Nancy El-Farargy to the meeting and asked her to introduce the Quarter 1 Whistleblowing Report.	

9.2	Nancy El-Farargy introduced the report covering the period from 01 April 2025 to 30 June 2025 and reported there was no whistleblowing concerns received during the Quarter 1 period.	
9.3	Nancy El-Farargy highlighted a few whistleblowing performance activities including the line manager training compliance number, the “speak up” session during Learning at Work Week and the efforts to increase the number of confidential contacts.	
9.4	The Non-Executive Director, Whistleblowing Champion asked for clarity on the use of the word “cases” at paragraph 6.2 of the report. Nancy El-Farargy responded that “cases” referred to the analysis of outstanding line managers who have not completed the required training and confirmed it was not whistleblowing cases.	
9.5	There were no further questions raised by the Committee.	
9.6	The Chair thanked Christina Bichan and Nancy El-Farargy for the report and the Committee confirmed the Quarter 1 Whistleblowing Performance Report provided the necessary assurance.	
10.	**Whistleblowing Non-Executive Champion Report**	**Verbal update**
10.1	The Non-Executive Director, Whistleblowing Champion thanked Christina Bichan, Nancy El-Farargy for their leadership and for all the excellent work done since the standards came into place five years ago.	
10.2	The Non-Executive Director, Whistleblowing Champion welcomed the continued emphasis on whistleblowing training, the positive trends in participation and thanked the Executive Team for their support.	
10.3	The Non-Executive Director, Whistleblowing Champion highlighted the important role of the confidential contact, welcomed the increase in pool numbers and suggested that a report be brought to the Board. Karen Reid responded that the information is confidential, that a report was not appropriate however agreed to discuss this further post meeting. **Action: KR/LG**	
10.4	There were no further questions raised by the Committee.	
10.5	The Chair thanked The Non-Executive Director, Whistleblowing Champion for the update and the Committee confirmed it provided the necessary assurance.	
10.6	Nancy El-Farargy left the meeting, and Alex Murray joined the meeting.	

11.	**Annual Health & Safety Review 2024-25 and Action Plan for 2025-26**	**NES/SGC/25/43**
11.1	The Chair welcomed Alex Murray to the meeting and asked him to introduce the Health and Safety Annual Report.	
11.2	Alex Murray introduced the Annual Health and Safety Performance report setting out NES's performance against the 2024-25 action plan and the outlined action plan for the year 2025-26.	
11.3	Alex Murray reported that four actions had been marked complete and four actions were ongoing but had made significant progress.	
11.4	Alex Murray highlighted the health and safety essential learning completion figure, noting that a longstanding goal had been met, and emphasised the need to maintain this standard going forward.	
11.5	The Committee thanked Alex Murray for the easy-to-read report and appreciated the lay out and clear presentation of the completed actions, the rationale for the ongoing actions, and the visibility of the 2025-26 plan.	
11.6	The Employee Director welcomed the high completion rate, praised the informative and engaging module design and suggested it serve as a model for other essential learning modules.	
11.7	The Committee asked if the reported accidents all occurred in offices, and how accidents at home were reported for hybrid workers. Alex Murray responded that previously, accident reporting focused on office accidents, but now a Microsoft Forms-based system allows anyone to report accidents, including those occurring at home and noted some home accidents have been reported.	
11.8	Alex Murray highlighted the importance of reporting home-based accidents, especially those involving work equipment and acknowledged that underreporting still occurs, both at home and in the office.	
11.9	The Committee suggested that future reports capture home working accident information given the organisation's hybrid working model.	
11.10	The Committee asked how health and safety is managed for home workplaces. Alex Murray responded that the health and safety module includes a section on working from home.	
11.11	There were no further questions raised by the Committee.	

11.12	The Chair thanked Alex Murray for the report and the Committee approved the Annual Review of Health & Safety Performance 2024-2025 and the Action Plan for 2025-2026.	
11.13	Alex Murray left the meeting.	
	Performance Items	
12.	**Human Resource Transformation Update Report**	**Presentation**
12.1	The Chair invited Laura Liddle to present the Human Resource (HR) Transformation Programme Progress Update presentation.	
12.2	Laura Liddle shared a presentation with the Committee reporting on the work that has taken place in the HR Transformation Programme. The presentation outlined the programme vision, structure, aims, actions and next steps of the programme. The presentation will be shared with members post meeting and a report will come to the SGC in November. **Action: AG**	
12.3	Laura Liddle highlighted the HR team's iMatter response rate and positive engagement scores despite the recent transformational changes and the transition to NHS Delivery.	
12.4	The Committee thanked Laura Liddle for the update, noted the presentation provided an overall picture of progress made and praised the achievements of the HR team.	
12.5	The Employee Director praised the progress made by the HR team and welcomed the improvements in staff confidence, morale, and the successful recruitment to key vacancies.	
12.6	The Employee Director reported that she will continue to work with HR colleagues for continued improvement and on the job evaluation process changes.	
12.7	The Committee suggested a graphic or structure is added in the next report showing the number of staff involved, team composition, number of Senior Specialist Leads (SSLs) and teams there are in HR. **Action: LL**	
12.8	There were no further questions raised by the Committee.	
12.9	The Chair thanked Laura Liddle for the update and the Committee confirmed the update provided assurance.	

12.10	Ameet Bellad joined the meeting.	
13.	**Strategic and Operational Key Performance Indicator Report: Quarter 1**	**NES/SGC/25/44**
13.1	The Chair welcomed Ameet Bellad to the meeting and asked him to introduce the Strategic and Operational Key Performance Indicator (SKPI) Report.	
13.2	Ameet Bellad introduced the Quarter 1 report which provided an update on organisational performance in relation to the revised Strategic Key Performance Indicators (SKPIs) from 01 April to 30 June 2025.	
13.3	Ameet Bellad sought approval to revise the RAG thresholds for the disability SKPI (SKPI 7-8), proposing a reduction from 10-20% to 7%, based on benchmarking with NHS Scotland and advice from the Disability Forum advisor.	
13.4	The Employee Director supported the proposed change to the disability SKPI percentage and suggested discussing this at the staff network sessions. She added that staff may be reluctant to disclose a disability or that staff may have acquired them after joining the organisation. The Employee Director suggested staff are reminded that they can update their personal data whilst working from home, given the recent digital improvements.	
13.5	The Committee asked for more information on the sickness absence figure. Ameet Bellad responded that the sickness absence increase figure is due to improved line manager reporting and not an increase in staff absence.	
13.6	The Committee noted a typo on Appendix 2 in relation to SKPI 08. The previous staff inclusion score format should match the current score format.	
13.7	The Committee suggested changing the wording of the disabled staff SKPIs to reflect that it only captures formally reported disabilities. Karen Reid responded that the metric should be described as the percentage of staff who identify as having a disability, rather than the actual number of disabled staff and this wording change will be incorporated into the ongoing review of SKPI's. **Action: AB**	
13.8	There were no further questions raised by the Committee.	

13.9	The Chair thanked Ameet Bellad for the report. The Committee agreed to reduce the RAG thresholds for disabled staff SKPI to 7% and confirmed the report provided the necessary assurance.	
13.10	Debbie Lewsley joined the meeting.	
14.	**Delegated SGC Strategic Risk Report**	**NES/SGC/25/45**
14.1	The Chair welcomed Debbie Lewsley to the meeting and asked her to introduce the Delegated SGC Strategic Risk Report.	
14.2	Debbie Lewsley reported that there are four strategic risks considered relevant to Staff Governance and the Committee's Strategic Risks have been subject to a recent review by individual risk owners. She advised that within the last quarter reporting period, there has been movement to all the risk ratings, with the majority in response to the announcement by Scottish Government that NES and NHS National Services Scotland (NSS) are joining together to create a new organisation.	
14.3	The Committee noted the risk rating for staff engagement, and the effective steps taken to mitigate risk, and the need for continuous monitoring as staff disengagement may arise if clarity is not provided during periods of uncertainty.	
14.4	The Employee Director reported no concerns relating to the staff engagement figure. She praised the Executive Team and Board for responding quickly to the NHS Delivery announcement by arranging staff webinars and drop-in sessions and for their continued efforts to engage staff during this period of change. She added the iMatter report reflects staff remain engaged.	
14.5	The Committee noted the improvement on Strategic Risk 16 and praised the good work done by the HR and ODLL teams.	
14.6	The Committee noted that Directorate Risk is now reported at Committees and suggested this is discussed at a future meeting. Debbie Lewsley welcomed this suggestion. **Action: AG**	
14.7	There were no further questions raised by the Committee.	
14.8	The Chair thanked Debbie Lewsley for the report and the Committee confirmed the Delegated SGC Strategic Risk Report provided the necessary assurance.	

14.9	Debbie Lewsley left the meeting.	
15.	**Hybrid Working Policy Update Report**	**Verbal update**
15.1	The Chair invited Janice Gibson to provide a verbal update on the review of the Hybrid Working Policy.	
15.2	Janice Gibson reported that the review of the Hybrid Working Policy was paused due to the new organisation announcement and will be considered as part of the new organisation operational workstream.	
15.3	Karen Reid supported pausing the review adding that a further review could increase staff anxiety.	
15.4	The Employee Director supported pausing the review as it would be reviewed as part of the new organisation. She added that hybrid working is a benefit and not a contractual entitlement and both NES and NSS have similar policies in place.	
15.5	The Committee asked for information on the anxieties staff have about hybrid working in relation to the new organisation. Karen Reid responded that staff are concerned they may be mandated to attend the office for a set number of days per week. She clarified that NES is not planning to mandate this approach and fully supports the current hybrid ways of working. She added that communications have been issued to staff, clarifying the expectations to come into the office when requested by their line manager or for team meetings.	
15.6	The Employee Director reported that staff performance has not dipped, staff report improved well-being, the benefit of bringing staff together in person and would only reconsider the approach if performance declined.	
15.7	The Committee suggested discussions continue with staff as NES moves to the new organisation. Karen Reid responded that NES regularly monitors the hybrid working position, she referenced the iMatter results scores and the direct engagement with line managers.	
15.8	There were no further questions raised by the Committee.	
15.9	The Committee noted that the Hybrid Working Policy will not change before 31 March 2026 and will be taken forward by the new organisation.	
15.10	Katy Hetherington joined the meeting.	
16.	**Annual Employment Equalities Monitoring Report**	**NES/SGC/25/46**
16.1	The Chair welcomed Katy Hetherington to the meeting and asked her to introduce the Annual Employment Equalities Monitoring Report.	

16.2 16.3	Katy Hetherington presented the Annual Employment Equalities Monitoring Report which included data on applications, leavers, and pay gaps for ethnicity, disability, and gender from the 1st April 2024 to 31 March 2025 period. Katy Hetherington highlighted the report aligned with the EDI strategy and action plan. There were no new actions noted in the report, the progress made on the previous actions and the ongoing work to encourage staff to update their information.	
16.4	The Committee welcomed the report and suggested a reference to climate change and sustainability is noted in reports. Karen Reid asked for climate change and sustainability questions to be emailed directly to Katy Hetherington and herself. **Action: GM**	
16.5	The Employee Director welcomed the work taking place to ensure all staff involved in recruitment are trained in inclusive practice and unconscious bias and was pleased it was reflected in the report.	
16.6 16.7	The Committee asked if the trajectory was moving in the right direction. Katy Hetherington responded that the data trends are moving in the right direction, especially the pay gaps and the diversity of the organisation. She noted the challenges including the workforce age and the differential success rates in recruitment. Ameet Bellad added that the organisation attracts a diverse pool of candidates, but the conversion rate from application to employment is lower for the ethnic minority groups. He reported on the plan to disaggregate the data to separate those not eligible to work in the UK and then analyse conversion rates for eligible candidates to better understand the issue.	
16.8	The Committee asked why the age of a small percentage of staff was not recorded. Ameet Bellad responded that these are agency workers and contractors, and as they are not directly employed by NES, we do not hold their personal information.	
16.9	There were no further questions raised by the Committee.	
16.10 16.11	The Chair thanked Katy Hetherington and Ameet Bellad for the work done on the report. The Committee approved the Annual Equality and Diversity Employment Monitoring Report for publication on the NES website.	
16.11	Katy Hetherington and Ameet Bellad left the meeting.	
17.	**Employee Relations Analysis**	**NES/SGC/25/47**

17.1	Laura Liddle introduced the employee Relation Analysis report and highlighted a few key areas including: the strong focus on early intervention, the close collaboration with line managers and trade union colleagues, the ongoing HR policy development and awareness sessions, the use of dashboards and trackers for monitoring casework and timelines, and the plans to include more visual data in future reports.	
17.2	The Employee Director reported that informal employee relations cases are managed within the Once for Scotland policies under the Early Resolution Stage, and many are resolved before reaching the formal stage.	
17.3 17.4	The Committee asked if the number of cases are considered reasonable for the size of the organisation and if they are as expected. The Committee suggested including benchmarking data in future reports. The Employee Director expressed no concerns with the number of cases and noted numbers are what would be expected for the size of the organisation. She highlighted the challenges and the importance of building line manager confidence and training in applying the policies and the time constraints placed on HR.	
17.5	The Committee welcomed the inclusion of visual data in future reports to help identify trends and appreciated this would be for the new organisation to take forward.	
17.6	There were no further questions raised by the Committee.	
17.7 17.8 17.9	The Committee noted the employee relations activity data for the reporting period 01 July 2024 to 30 June 2025, including the volume, complexity, and nature of cases managed. The Committee acknowledge the broad themes that have emerged across the year, particularly in relation to attendance management, grievance handling, and the management of Doctors and Dentists in Training (DDiTs). The Committee recognised the key learning and improvement actions being progressed by the HR team to strengthen policy application, support line managers, and reduce organisational risk.	
18.	**NHS Board Implementation of NHSScotland Workforce Policies - Supporting Work Life Balance**	**Verbal update**
18.1 18.2	The Chair invited Laura Liddle to provide an update on the publication status of Phase 2.2 of the NHSScotland Workforce Policies and guides under the 'Once for Scotland' Workforce Policies Programme. Laura Liddle reported that the Scottish Government have been conducting an additional review in light of the Supreme Court ruling on the definition of sex under the Equality Act 2010. The Equality and Human Rights	

	Commission (EHRC) are also consulting on a revised Code of Practice. Due to potential impacts, publication of the Gender Transitioning Guide and the Equality, Diversity and Inclusion Policy (including associated guides) remains paused until alignment with the finalised Code is assured.	
18.3	Laura Liddle went on to say all other Phase 2.2 policies and guides would proceed to publication on Wednesday 6 August 2025 including: the Employment Checks, Facilities Arrangements for Trade Unions and Professional Organisations, Fixed Term Contracts, Gender-Based Violence, Personal Development Planning and Performance Review, Redeployment and Secondment. Racism, Reasonable Adjustments and Sexual Harassment guides have also been developed.	
18.4	There were no questions raised by the Committee.	
18.5	The Chair thanked Laura Liddle for the update and the Committee confirmed the update provided assurance.	
19.	**Identification of new risks**	**Verbal update**
19.1	The Committee noted there were no additional risks identified at the meeting.	
	Items for Noting	
	The Chair reported there were no Partnership Forum minutes included in the meeting papers as there have been no PF meetings since the 01 May 2025 SGC meeting.	
20.	**Employment Tribunals**	**NES/SGC/25/48**
20.1	The Non-Executive Director, Whistleblowing Champion suggested future reports reference that whistleblowing has been considered and dismissed and noted the misnomer in relation to Case 2. **Action: LL**	
21.	**Policy/Scottish Government Director Letters as appropriate to Staff Governance Committee**	**NES/SGC/25/49**
21.1	The Committee noted the Policy/Scottish Government Director Letters Report.	
22.	**Remuneration Committee Minutes from 18 June 2025**	**NES/SGC/25/50**
22.1	The Committee noted that the Remuneration Committee minutes from 18 June 2025 incorrectly stated that three points were awarded at the meeting and clarified that only one additional point was awarded at the meeting, making a total of three points as per the policy.	

22.2	Karen Reid confirmed that only one additional point was awarded making the total three points and requested that the Remuneration Committee Chair be notified and the minutes amended accordingly. **Action: AG**	
26.	**Any other business**	
26.1	There were no other items of business discussed at the meeting.	
27.	**Review of Committee Effectiveness** The Chair asked, do reports to the Committee communicate relevant information at the right frequency, time, and in a format that is effective? Has the Committee benefited from the right level of attendance from Lead Executive or Directors/Authors/Board Secretary/Others? Are there any areas where the Committee could improve upon its current level of effectiveness?	
27.1	The Committee praised the quality and content of reports specifically noting the equality and whistleblowing reports.	
27.2	The Committee raised concerns about the overlap and confusion between papers 7 and 8 in relation to timeframes and content and suggested a review to clarify their respective purposes and reduce repetition.	
27.3	Karen Reid responded that the Lead Executive report is for information and is a summary of the directorate activity, the detailed discussion and challenge occurs in the specific thematic reports.	
27.4	Karen Reid acknowledged the confusion due to the sequence of papers 7 and 8 and that the difference was due to timeframes as previously explained.	
27.5	Karen Reid explained that the lead report's purpose is distinct from the more detailed reports on specific issues and themes.	
27.6	The Committee confirmed they benefited from the right level of attendance and noted the meeting went slightly over the allocated time.	
28.	**Date and time of next meeting**	
28.1	The next meeting of the Staff Governance Committee will be held on Thursday, 6 November 2025.	
28.2	The Chair thanked all for attending the Staff Governance Committee meeting, for their contributions and closed the meeting.	

AG.JA.KR.NH
NES
August 2025