

## **NHS Education for Scotland**

NES/24/27

#### AGENDA FOR THE ONE HUNDRED AND EIGHTIETH BOARD MEETING

Date: Thursday 23 May 2024

Time: 10:15 – 13:00

**Venue:** Hybrid meeting: Microsoft Teams / and

Room 1 and 2, West Port 102, Edinburgh EH3 9DN

- 1. 10:15 Chair's introductory remarks
- 2. 10:16 Apologies for absence
- 3. 10:17 Declarations of interest
- 4. 10:18 Draft Minutes of the One Hundred and Seventy Nineth
  Board Meeting 28 March 2024
  For Approval
- 5. 10:20 Matters arising from the Minutes and notification of Any Other Business
- 6. 10:21 Actions from previous Board Meetings NES/24/29
  For Review and Approval
- 7. Chair and Chief Executive reports
  - a. 10:25 Chair's Report
     For Information and Assurance

     b. 10:35 Chief Executive's Report
     NES/24/31
- 8. Strategic Items
  - a. 11:05 NES Draft Climate Emergency and Sustainability
     Strategy 2024-27
     For Review and Approval (J. Boyle)
     b. 11:20 Draft 2024-25 NES Delivery Plan
     For Approval in principle (C. Bichan)
     c. 11:30 Strategic Key Performance Indicators: Review
     NES/24/34

#### 11.45 COMFORT BREAK

For Review and Approval (C. Bichan)

For Review and Assurance

#### 9. **Performance Items**

a. 11:55 Q4 Strategic Risk Report and NES Risk Appetite NES/24/35 **Proposal** For Review and Approval (J. Boyle / D. Lewsley) **Quarter 4 Performance Management Reports:** b. 12:00 Quarter 4 Strategic Key Performance Indicator NES/24/36 (SKPI) Report For Review and Approval (C. Bichan) c. 12:15 Quarter 4 Delivery Report NES/24/37 For Review and Approval (C. Bichan) **Annual Items** 

#### 10.

a. 12:30 Whistleblowing Executive Lead Annual NES/24/38 Whistleblowing Report 2023/24 For Review and Approval (C. Bichan) b. 12:35 Non-Executive Director Whistleblowing Champion NES/24/39 Report 2023/24 For Approval (G. Mawdsley) c. 12:40 2023-24 Equality and Diversity Annual Report NES/24/40 For Approval (K. Hetherington)

#### 11. **Governance Items**

#### 11.1 Significant issues to report from Standing Committees:

a. 12:45 Audit and Risk Committee 24 April 2024 (J. Ford, verbal update)

# b. 12:48 Staff Governance Committee

29 April 2024 (N. Henderson, verbal update)

#### c. 12:51 Education and Quality Committee 9 May 2024

(A.Gunner Logan, verbal update)

#### d. 12:54 Technology and Information Committee

13 May 2024

(D. Garbutt, verbal update)

#### 12. Items for Homologation or Noting

#### 12.1 **12:58 NES Standing Committee Minutes:**

| a. | Audit and Risk Committee, 18 January 2024              | NES/24/41 |
|----|--|-----------|
| b. | Staff Governance Committee, 22 February 2024           | NES/24/42 |
| C. | Education and Quality Committee, 07 March 2024         | NES/24/43 |
| d. | Technology and Information Committee, 13 February 2024 | NES/24/44 |
|    | For Homologation                                       |           |

#### 12:59 Any Other Business

#### **13:00** Date and Time of Next Meetings:

• Private Board: 23 May 2024 at 13:10 Hybrid Meeting

• Private Board: 27 June 2024 at 10:15 over TEAMS

• Public Board: 15 August 2024 at 10:15 Hybrid meeting

NHS Education for Scotland (NES)

e-mail: Chair & Chief Executive's Office <a href="mailto:ceo.nes@nes.scot.nhs.uk">ceo.nes@nes.scot.nhs.uk</a>

#### **NHS Education for Scotland**

# Draft Minutes of the One Hundred and Seventy-Nineth Board Meeting held on 28 March 2024 at 10:15am – 11:20am

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

**Present:** David Garbutt (DG) (Chair)

Ally Boyle (AB), Non-Executive Director Jim Boyle (JB), Executive Director of Finance Shona Cowan (SC), Non-Executive Director

Jean Ford (JF), Non-Executive Director – joined the meeting at 10.30am

during item 8a

Lynnette Grieve (LG), Non-Executive Director / Employee Director

Annie Gunner Logan (AGL), Non-Executive Director Nigel Henderson (NH), Non-Executive Director

Gillian Mawdsley (GM), Non-Executive Director / Whistleblowing

Champion

Karen Reid (KR), Chief Executive & Accountable Officer

Emma Watson (EW), Executive Medical Director

Karen Wilson (KW), Executive Director of Nursing Midwifery and Allied

Health Professionals / Deputy Chief Executive (Clinical)

In attendance: Tracey Ashworth-Davies (TAD), Director of Workforce / Deputy CEO

(Corporate)

Christina Bichan (CBi), Director of Planning & Performance Colin Brown (CB), Head of Strategic Development (CE Office) Peter Donnelly (PD), Co-opted Education and Quality Committee

Member (observing)

David Felix (DF), Postgraduate Dental Dean / Director of Dentistry

Nick Hay (NH), Public Affairs Manager

Kevin Kelman (KK), Director of NHS Scotland Academy, Learning &

Innovation

Claire Neary (CN), Policy and Briefings Manager (Social Care)
Gillian Nevin (GN), Assistant Postgraduate Dental Dean (observing)

Gordon Paterson (GP), Director of Social Care

Lorraine Scott (LS), Associate Manager Chair and CEO Office (minute

taker)

Andrew Sturrock (AS), Director of Pharmacy

Della Thomas (DT), Board Secretary / Principal Lead Corporate

Governance

Christopher Wroath (CW), Director of NES Technology Services

#### 1. Chair's Welcome

1.1. The Chair welcomed everyone to the meeting, particularly Peter Donnelly, attending as part of his induction into his role as co-opted Education Quality Committee (EQC) member. He also welcomed Gillian Nevin, Assistant Postgraduate Dental Dean, observing as part of her on-going personal development.

#### 2. Apologies for absence

- 2.1. Apologies were received from Board member, Olga Clayton Non-Executive Director.
- 2.2. Apologies were also received from regular Board attendees; John MacEachen, Head of Corporate Communications and Lindsay Donaldson, Deputy Medical Director.
- 2.3. The Chair noted that Jean Ford would join the meeting at around 10.30am.

#### 3. Declarations of interest

3.1. There were no declarations of interest made in relation to the business of today's meeting.

# 4. Draft Minutes of the One Hundred and Seventy-Eighth Board Meeting - 8 February 2024 (NES/24/18)

- 4.1. The Board reviewed the draft minute of 08 February 2024 meeting and noted some typographical errors for correction at paragraphs 5.1 and 11.1.
- 4.2. The Chair noted that Jean Ford had passed on some comments in relation to the draft minutes pertaining to paragraph 9.16 pertaining to cloud disaster recovery and cyber risk. The Chair asked that Jean Ford and Jim Boyle discussed this out with the Board meeting. The Chair noted that Jean Ford had asked the Board to note that she had already met with Debbie Lewsley, Risk Manager to discuss potential enhancements to the Risk Report.

  Action JF/JB
- 4.3. Further to amendments of the typographical errors, the Board approved the minutes.

#### 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. There were no notifications of any other business.

#### 6. Actions from previous Board Meetings

(NES/23/19)

- 6.1. The Board received the rolling Board action list for review and agreement. The Board noted that 8 actions were marked as completed.
- 6.2. The Board noted that 4 actions remained in progress and were content with the progress update, noting that a further update would be provided at the 23 May 2024 Board meeting.
- 6.3. The Action list was agreed.

#### 7. Chair & Chief Executive Updates

#### 7.1. Chair's Report

(NES/23/20)

- 7.1.1. The Chair presented his report, outlining his recent meetings and activity since the 08 February 2024 Board meeting in his roles as Chair of the NES Board and a member of the NHS Scotland (NHSS) Board Chairs Group (BCG).
- 7.1.2. No questions were raised, and the Board noted the content of the report.

#### 7.2. Chief Executive's Report

(NES/23/21)

- 7.2.1. The Chair invited Karen Reid to introduce the report.
- 7.2.2. Karen Reid introduced the report and highlighted the following areas:
  - a) Karen Reid congratulated Lynnette Grieve on her re-appointment by the Cabinet Secretary as NES Employee Director.
  - b) Karen Reid congratulated The NES Digitally Enabled Workforce (DEW) Team who were recently presented with the Digital Health and Care Team Award 2024 and acknowledged Tracey Ashworth-Davies excellent leadership of this team.
  - c) Karen Reid expressed her appreciation for the extensive efforts made by David Felix, Tracey Ashworth-Davies, and Karen Wilson in the recent submission to the COVID-19 UK Inquiry. She reported that NES had been well prepared and had adhered to the specified timeline and commended Della Thomas for her outstanding contribution and meticulous attention to detail, which resulted in a robust submission. Karen Reid thanked Nancy El-Farargy, Specialist Research Lead and Christopher Duffy, Senior Admin Officer, who had provided valuable support to Della Thomas in accomplishing this task.
  - d) Karen Reid advised that the Executive Team had been focusing on the budget since December 2023 in order to progress the necessary savings that NES must achieve, meanwhile considering how NES can continue to progress and fulfil the Annual Delivery Plan (ADP) for 2024-2025 and beyond. Karen Reid noted that despite the focus on savings,

- directorates are still producing outstanding work and advancing with the NES Transformation Route Map and Corporate Improvement Programme.
- e) The National Care Service Bill has reached agreement at Stage 1, Karen Reid advised that both she and Gordon Paterson are working as part of a tri-partite strategic group with colleagues in Convention of Scottish Local Authorities (COSLA) and Scottish Government to take forward and support the next stage of the process.
- f) A strategic partnership has recently been signed with University of St Andrews and Karen Reid thanked Colin Brown for his commitment to progressing this work.
- g) A webinar for staff, with over 600 participants, took place on 29 February 2024 to communicate NES' financial position and provide an opportunity for staff to ask questions. Karen Reid advised the Board that the answers from the session are now published on the NES intranet. Another webinar hosted by Karen Reid and the Executive Team is scheduled today to offer support to staff during these uncertain times and address any additional questions.
- 7.3. The Chair thanked Karen Reid for her introductory remarks and opened the meeting to questions.
- 7.4. The Board referred to paragraph 3.1.3 (a) of the report and asked what the implications were for teams due to the 48% increase in applications across the UK for doctors in training recruitment.
- 7.5. Emma Watson reported that this is a challenging issue for medical and dental systems, the increase in applicants is due to a change in Home Office rules for all speciality medical posts. She advised the Board that although this has increased the number of applicants, it doesn't match the number of posts available.
- 7.6. The Board referred to paragraph 3.1.4 of the report and asked what the response rate was in relation to the Turas Survey.
- 7.7. Christopher Wroath reported that this was a 50% return rate with over 1000 responses.
- 7.8. The Board asked for some additional information on NES's activity to support the Clinical Entrepreneurial Programme referenced at paragraph 3.1.5 (j) of the report.
- 7.9. Emma Watson advised the Board that Scotland is taking part in a UK wide clinical entrepreneurial programme. She reported that interviews had been held 6 weeks ago and Scottish Fellows had been appointed, 1 of whom will be based in NHS Grampian supporting the radiology entrepreneurship.

- 7.10. Kevin Kelman provided further details to the Board regarding the active participation of colleagues in a clinical entrepreneurial fellowship hosted by Anglia Ruskin University, as well as a further 3 colleagues taking part in the Chief Scientific Officers Innovation Fellowship programme hosted by Guy's and St Thomas NHS Trust, London.
- 7.11. Emma Watson went on to report that the further development of a Scottish Entrepreneurial programme will continue to be explored and asked the Board to note that this development will be dependent on the financial position.
- 7.12. Kevin Kelman suggested that the Board might consider a more detailed update on the entrepreneurial programme at a future meeting given the complexity of the environment.
- 7.13. Karen Reid agreed that this would be a helpful update Action: KK/DT
- 7.14. Karen Wilson remarked on the innovative nature of the ePad and referred the Board to paragraph 3.1.6 of the report. She advised that this includes a single practice assessment document for all of Scotland, making it the first national ePad. Karen Wilson reported that there is significant potential for further development, with current plans to introduce it for paramedics. She advised the Board that the Care Inspectorate is also interested in collaborating with Health Improvement Scotland (HIS) to explore potential funding opportunities to support Social Care.
- 7.15. David Felix commented that undergraduate dental has a similar platform called Lift-Up which has been implemented for approximately ten years and is used across the UK.
- 7.16. The Board noted that the report references a Social Care Commission and asked if there were any further details on this.
- 7.17. Karen Reid reported that NES have been commissioned by Scottish Government to work alongside COSLA colleagues and the Scottish Social Services Council (SSSC) to repurpose Turas resources to make these suitable for the Adult Social Care workforce.
- 7.18. The Board noted the roles Karen Reid was undertaking in relation to co-chair of the Joint Negotiating Committee on contract reform and NHS Chief Executive Lead on pay negotiations for 2024-25 and National Care Service and asked for some clarification in relation to these roles.
- 7.19. Karen Reid confirmed that she is not negotiating pay for the National Care Service. She reported that she is, however, part of the tri-partite group and is supporting local government colleagues progressing to Stage 2 of the National Care Service (Scotland) Bill.
- 7.20. The Board referred to the ongoing advancements in Pharmacy that could well assist with backlogs of services, as people become more aware of the support that can be received in Pharmacies and noted this as a positive development.

- 7.21. The Board noted the appointment of Gordon Paterson as the Wellbeing Lead for the Executive Team as a favourable development.
- 7.22. Jim Boyle asked the Board to note that paragraph 3.3.1(b) refers to the Climate Emergency and Sustainability Group meeting. He added that the group discussed the refreshed intranet resources. He advised the Board that these resources will be available to all employees. He asked the Board to note that the group also discussed the common themed work between NES and National Services Scotland (NSS) and noted that it has been agreed that NSS will host an NHS wide package of resources.
- 7.23. Jim Boyle advised that the next Board Development Session on 18 April 2024 will provide an opportunity for the Board to discuss the draft Climate Emergency and Sustainability Strategy in informal session. He went on to report that the Strategy will include a contribution from Gillian Mawdsley, the Non-Executive Director Climate Change Champion, and a foreword from Karen Reid. Jim Boyle advised the Board that there is also an intention to compile a video to assist with the launch of the Strategy document.
- 7.24. Kevin Kelman updated the Board on the skills and simulation infrastructure for NHS Scotland Academy situated within NHS Golden Jubilee. He advised the Board that this is now operational. Kevin Kelman informed the Board that an additional 2 ultrasound training rooms opened in November 2023, and a further 2 endoscopy training rooms are scheduled to open in the next few months.
- 7.25. Tracey Ashworth-Davies updated the Board on the recent changes associated with the non-pay element of the agenda for change pay negotiations which took place at the end of 2023. She reported that as agreed, Agenda for Change staff will reduce their working hours by 30 minutes per week starting on 01 April 2024. Tracey Ashworth-Davies advised the Board that the Partnership Forum will review proposals next week, including a suggestion that the reduction should start on 01 May 2024 with interim measures that staff shall receive 30 minutes of overtime pay between April and May 2024. She went on to advise that line managers will be responsible for coordinating and implementing the reduced working week for staff working remotely.
- 7.26. Karen Reid added that it was important to the establishment of a trusting culture to enable colleagues to manage their workload within the 36-hour workweek.
- 7.27. Karen Reid advised that protective learning time is already provided by NES to ensure employees have sufficient time for necessary job-related learning, which the positive outcomes of mandatory training and iMatter feedback demonstrate this commitment by NES.
- 7.28. The Chair suggested that it might be helpful to establish a monitoring process to ensure staff receive their allocated protected time.

- 7.29. Karen Reid confirmed that NES already provides protected learning time, so there will be no major change in current practice.
- 7.30. Tracey Ashworth-Davies reminded the Board that there is an opportunity for nursing staff to apply for transition from Band 5 to Band 6, and asked the Board to note that NES does not currently employ any Band 5 nurses. She went on to remark that the Unions may propose extending this model to other roles. Karen Reid reported that Christopher Wroath is developing a portal to assist with the transition in response to the Scottish Government's monitoring requirements, the information system is being explored to track submissions from Band 5 nurses for job evaluations. Christopher Wroath is working with NSS to progress a technological solution.
- 7.31. Lynnette Grieve advised the Board that submissions are currently individual, and not from staff groups and asked the Board to note that this may potentially require additional support from NES.
- 7.32. Karen Reid advised the Board that the NHS Chief Executive / SG AfC working group agreed the current approach, with concerns about increased workload noted.
- 7.33. There were no further questions from the Board and the Chair thanked Karen Reid and the Executive Team for the report and the assurance it provided.
- 7.34. The Chair noted the technological difficulties experienced and apologised for the disruption of sound during the discussions on the Chief Executive report. The Chair called a 5-minute break to rectify the technology support and improve sound and quality issues.

#### 8. Governance Reports

- 8.1. Draft Corporate Governance Blueprint Improvement Plan (NES/24/22)
- 8.1.1. The Chair invited Della Thomas to present the Draft Corporate Governance Blueprint Improvement Plan to the Board for approval.
- 8.1.2. Della Thomas highlighted the Board Development workshop that had taken place on 19 January 2024 to discuss the results of the NES Corporate Governance Blueprint Self-Assessment. She reported that this had been attended by Board members and regular attendees of the Board and the excellent existing levels of governance in place had been acknowledged and received positive feedback from those present. Della Thomas reported that suggestions for areas of improvement were made during the session, and these have been added to the Scottish Government template which is included within the report. Della Thomas advised that the initial deadline for submission of the governance improvement plan to Scottish Government was the end of March. She remarked that we have recently been notified that this has been extended to 26 April 2024. She suggested that since the NES Governance Improvement Plan is complete, it is proposed to submit to Scottish Government before the extended date, subject to Board approval.

- 8.1.3. The Chair opened the meeting to members for questions.
- 8.1.4. The effectiveness of the process was noted by the Board. The Board suggested that the engaging with stakeholders section could be further developed to include our approach to internal staff engagement. **Action: DT**
- 8.1.5. The Board asked for clarification in relation to taking forward cost efficiency and savings and Best Value.
- 8.1.6. Karen Reid reported that the Transformation Group had discussed this and whilst cost savings are important, evaluating quality improvement is equally important. She advised that by implementing the 7 principles of best value, which demonstrate the Board's application of these principles to develop projects, it strengthens the emphasis in these areas and supports the organisations operational methods and business model.
- 8.1.7. There were no further questions from the Board and the Chair thanked Della Thomas for her work in preparing the Corporate Governance Blueprint Improvement Plan.
- 8.1.8. Further to the amendment agreed, the Board approved the NES Corporate Governance Blueprint Improvement Plan for onward submission to Scottish Government.

#### 8.2. **Draft Board Schedule of Business 2024-25**

(NES/24/23)

- 8.2.1. The Chair invited Della Thomas to introduce this item.
- 8.2.2. Della Thomas reported that the Schedule of Business (SoB) is brought to the Board on an annual basis and is based on the 2023-24 rolling schedule of business. She reported that additions to the 2024-25 Board SoB are detailed in paragraph 6.2 of the cover paper.
- 8.2.3. Della Thomas advised that the Annual Delivery Plan (ADP) shall now come to the NES Board on the 23 May 2024, for approval and this will be an amendment to the SoB.
- 8.2.4. Della Thomas asked the Board to note that the Boards compliance was last reviewed in 2020-21. She reported that as part of due diligence, compliance is currently being reviewed and she advised that this may result in some amendments to the SoB.
- 8.2.5. Karen Reid requested a further amendment to the SoB noting that the Vice Chair Review of appointment is Biennial and will not take place this financial year.
- 8.2.6. The Board approved the Schedule of Business for 2024-25 following the above amendments.

#### 8.3. Re-appointment of Employee Director

- 8.3.1. The Chair invited the Board to homologate the re-appointment of Lynnette Grieve as NES Employee Director for another 4 years and congratulated her on this position.
- 8.3.2. The Board homologated this decision.

#### 8.4. Significant Issues to Report from Recent Standing Committees

#### 8.4.1. Technology and Information Committee – 13 February 2024

- a) The Chair gave a brief overview from the meeting held on the 13 February 2024 highlighting that the Committee had discussed issues associated with funding the NES and Scottish Government Digital Health and Care workplans and had noted that NES Technology Service senior leadership team were scenario planning for potential impact to delivery. The Chair reported that cyber security was discussed and increasing staff awareness of cyber security had been raised. He advised that the Committee had asked if the Executive Team could review the cyber security top tips staff training module to determine whether it should be included as essential learning for staff. The Chair went on to report that there is now a degree level programme for digital skills and leadership. The Chair asked the Board to note that the Turas Refresh Programme Board provides progress reports to the Technology and Information Committee.
- b) Christopher Wroath updated the Board that whilst the funding issues have slowed progression with some programmes, a recent meeting with the Digital Health and Care Directorate at Scottish Government provided positive feedback on the funding for the 3 major projects. He outlined that these are the National Digital Platform, the Digital Front Door and the Digital Prescribing Pathways.
- c) The Board noted the recent Cyber security risk to the NHS and asked how this affected NES.
- d) Karen Reid advised that when the security breach was raised colleagues liaised with the security network and were given assurance that NES was not impacted by this.
- e) Christopher Wroath reported that this incident had no effect to NES and advised that it was the security operation centre which identified the inappropriate activity in a particular Board. He asked the Board to note that NES have been working with the operation centre to protect the organisation, and that NES are one of the 3 lead Boards.

#### 8.4.2. Staff Governance Committee – 22 February 2024

a) Nigel Henderson provided an update from the last meeting on 22 February 2024 and noted that this was Anne Currie's last meeting as Chair. He reported that the Strategic Key Performance Indicators (SKPI) and strategic risks delegated to the Committee were reviewed, noting that the current fiscal environment may have an impact on these in relation to workforce. Nigel Henderson reported that Christina Bichan presented the Whistleblowing report for Quarter 3 highlighting that NES achieved the highest score in the iMatter survey for questions asked relating to whistleblowing. Although these questions are not mandatory, NES staff demonstrated a commendable rate of completion. The trends observed through these responses will be reviewed in the coming years.

#### 8.4.3. Education and Quality Committee – 7 March 2024

a) Annie Gunner Logan, the Chair of the Committee provided an update from the last meeting on 7 March 2024. She advised that the plans for the medical education reform will be shared through the EQC and then to a future NES Board meeting. Annie Gunner Logan reported that the Committee delegated SKPIs were discussed, and she asked the Board to note that these will be monitored through the Learning Education and Quality Strategy. She advised that the EQC noted that Committee members were keen to contribute to the review of the SKPIs in a way that is appropriate.

#### 8.5. **NES Standing Committee Minutes:**

8.5.1. Technology and Information Committee, 30 October 2023 (NES/24/24)

The minutes of this meeting were homologated by the Board.

8.5.2. Staff Governance Committee, 2 November 2023 (NES/24/25)

The minutes of this meeting were homologated by the Board.

8.5.3. Education and Quality Committee, 7 December 2023 (NES/24/26)

The minutes of this meeting were homologated by the Board.

#### 9. Any Other Business

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

# 10. Date and Time of Next Meetings

a) Private Board: 28 March 2024 follows on from Public Board (hybrid)

b) Public Board: 23 May 2024, Hybrid Meeting

The Chair thanked everyone for their attendance and closed the meeting at 11:20am

LS/DT/KR/DG NES March 2024 v.03

# **Rolling Action List arising from Board meetings**

| Minute   | Title   | Action  | Responsibility | Date required | Status and date of completion  |  |  |
|--|---|---|----------------|---------------|--|--|--|
| Actions agreed at Board meeting on 23 March 2024 |   |   |                |               |  |  |  |
| 4.2  | Draft Minutes of the<br>Public Board Meeting - 8<br>February 2024 | JF and JB to discuss the cloud disaster recovery and cyber risk as noted in paragraph 9.16 of the 8 February 2024 Public Board minute               | JF/JB          | 23 May 2024   | Complete This topic was discussed in detail at the Technology and Information Committee on 13 May 2024.  |  |  |
| 7.13   | Chief Executive's Report  | KK to provide a more detailed update to the Board on the entrepreneur programme   | KK /DT         | 23 May 2024   | Complete A session on the Clinical Entrepreneurial Programme has been scheduled for the 24 October 2024 Board Development meeting.   |  |  |
| 8.1.4  | Draft Corporate<br>Governance Blueprint<br>Improvement Plan       | The engaging with stakeholders section of the improvement plan to be further developed to include the Boards approach to internal staff engagement. | DT             | 02 April 2024 | Complete The addition was made, and the revised version was approved by the Chair and CEO. The Draft Corporate Governance Blueprint Improvement Plan was submitted to Scottish Government (SG) on 02 April 2024 ahead of the SG submission deadline. |  |  |
| Actions  | agreed at Board meeting   | on 8 February 2024  |                | ,             |  |  |  |
| 8.7  | Learning and Education<br>Strategy                                | A process to be agreed to thank stakeholders who have contributed to the development of the strategy.   | RR/KK          | 23 May 2024   | In Progress  |  |  |
| 8.8  | Learning and Education<br>Strategy                                | The strategy is to be distilled into a short summary document that could used for such things as NES corporate induction.                           | RR/KK          | 23 May 2024   | In Progress  |  |  |
| 9.10   | Q3 Finance Report   | KR/JB to re-visit the framing of the Turas project beyond phase one risk and to make any amendments as appropriate.                                 | KR/JB          | 23 May 2024   | Complete This risk was reviewed and is reported  |  |  |

| Minute | Title                       | Action  | Responsibility | Date required | Status and date of completion  |
|--------|-----------------------------|---|----------------|---------------|--|
|        |                             |   |                |               | back to Board as part of the Q4 Risk reporting process due on 23 May 2024.   |
| 9.18   | Q3 Strategic Risk<br>Report | JB and KR to review Strategic Risk number 8 to see if risk could be reframed to reflect the mitigating actions. | JB/KR          | 23 May 2024   | Complete This risk was reviewed, and scoring was reduced due to mitigating actions. It will be reported back to Board as part of the Q4 Risk reporting process due on 23 May 2024. |

NES LS/DT April 2024



NES/24/30

#### **CHAIR'S REPORT**

David Garbutt, Chair of NES Board 23 May 2024

#### 1. Introduction

1.1. Since the last Board meeting on the 28 March 2024, I have attended meetings and events in addition to internal NES meetings, Board and Standing Committees. I have provided a summary below.

#### 2. Summary of Engagement March 2024

- 2.1. On the 25 March 2024, I joined the NHS Board Chairs Private (BCG) Private Meeting with other NHS Board Chairs and the Chief Executive NHS Scotland. Discussion focused on NHS Reform, Audit Scotland and BCG Away Days.
- 2.2. I joined the NES and Scottish Social Services Council (SSSC) Chair and Chief Executive meeting on 25 March 2024. The meeting discussed the Joint Delivery Plan and the Joint NES Board and SSSC Board Council development session. Della Thomas, Board Secretary is developing the programme and finalising requirements for the session.
- 2.3. At the 27 March 2024 Improving Wellbeing and Workforce Culture Strategy Board we discussed funding, leadership and General Medical Council workshops.

## 3. Summary of Engagement April 2024

- 3.1. In early April I attended a Board Chairs meeting to discuss the future approach to Primary Care and to develop the Chairs future thoughts about the priorities needed for fundamental change. This was to prepare a presentation to the Cabinet Secretary on 17 April when a wide ranging discussion was held on population Health and the potential for improving primary care.
- 3.2. During the month of April, I held 6-month review meetings with our new non-executive colleagues, Olga Clayton, Nigel Henderson, Ally Boyle and Shona Cowan and had appraisal meetings with Jean Ford, Gillian Mawdsley, Lynnette Grieve & Annie Gunner Logan, non-executive members. I have also conducted my grandparent and appraiser roles for the NES Executive Team's end of year reviews.
- 3.3. I attended the Chair Action Learning Set meeting on the 11 April. The meeting looked at the barriers presented when implementing transformational change
- 3.4. I participated in the NHS Chairs Meeting with the Cabinet Secretary for NHS Recovery, Health and Social Care on 17 April. The meeting covered NHS Recovery and performance, preventative and proactive care and reform.

- 3.5. Liz Mallinson, Non-Executive Director, NHS 24, is shadowing me as part of her Aspiring Chair role. Liz has joined me at various meetings as part of this and I will be mentoring Liz during her time on the Aspiring Chair Programme.
- 3.6. The NHS Board Chairs Group private meeting was held on the 22 April. The agenda covered Primary Care, the reshaping of services to focus on population health, proposals for a National Strategic Planning Group and developed the programme for the next Board Chairs Group away day.
- 3.7. I attended The Board Development Reference Group on 22 April 2024. This reference group discussed the role of the Reference Group in light of the creation of an SG led Governance Group; the financial report; the 2024 aspiring chairs programme and the blueprint self-assessment themes across Scotland.
- 3.8. On 3 May I attended a joint BCE/BCG meeting with Audit Scotland representatives. This meeting considered the options for priority areas for Scrutiny, by Audit Scotland, into NHS areas. These would include Finance and delivery performance, a series of spotlight audits to provide a deep dive into thematic areas and services, and other health performance audits such as mental health and the GMS contract. Other options remained for further consideration and these were; Governance, Urgent and Unscheduled Care. Service specific areas such as oncology, orthopaedics, and ophthalmology.
- 3.9. On 8 May I met with Tom Steele, in relation to his work with Innovation and digital development. We also included colleagues from The Promise Scotland to ascertain if there were opportunities to support The Promise activities through the digital agenda
- 3.10. NES Annual Virtual Conference 2024 Developing a Compassionate, Skilled and Sustainable Workforce Through Innovative Education and Technology

I had the pleasure of closing the annual conference which took place over the 25 and 26 April. The event was very successful and welcomed over 1900 virtual attendees. It focused on a range of topics from civility in healthcare to how Artificial Intelligence will impact and support healthcare. A thank you to all colleagues, presenters and organisers who made this such a success.

#### 3.11. Non-Executive Board Recruitment

A successful NES Board Non-Executive Applicants Session was held on 1 April 2024 which allowed interested applicants to hear about NES, the Role of Non-Executives and provided the platform for questions to be asked and answered. A shortlisting meeting was on held on 23 April 2024 which resulted in five candidates being invited for interviews which will take place on 15 May 2024.

# Chief Executive's Report Professor Karen Reid, Chief Executive



Date: May 2024

#### 1. Introduction

- a) The agenda for our May Board meeting includes two key strategic items which demonstrate our direction of travel and future priorities as an organisation. The Draft 2024-25 NES Delivery Plan sets out our intended areas of focus for the 2024/25 financial year in the context of our 2023-26 NES Strategy and the medium-term priorities agreed with our Scottish Government sponsor team as part of our three-year Medium-Term Plan. NES's strategy on Climate Emergency and Sustainability for 2024–27 will support the wider NHS Scotland effort to address the climate emergency. To support NES's ambition in this area, we have developed a detailed Action Plan comprising both short- and long-term actions and goals.
- b) The Board will also receive a number of annual, performance and governance items for review and approval including the Non-Executive and Executive annual reports as per the NHS Scotland's national Whistleblowing standards, the 2023-24 Quarter 4 Strategic Risk and Appetite Report and Performance reports. The 2023-24 Equality and Diversity Annual Report is also for Board approval.

## 2. Updates and Announcements

#### 2.1. COVID-19 Public Inquiries

- a) NES continues to engage in the regular meetings organised by the Central Legal Office. This provides an opportunity to receive updates on progress of both Scottish and UK Inquiries and resolve queries.
- b) It is likely that work will continue for NES in respect of both Public Inquires throughout the 2024-2025 business year.
- c) The Scottish Inquiry Health and Social Care 'Impact Hearings' are running from 15 April 2024 until 1 June 2024. The Scottish Inquiry Education and Young People 'Impact Hearings' are expected to commence August/September 2024.
- d) Module 3 of the UK Inquiry is focusing on the impact of COVID-19 on the UK's healthcare systems. The NHS Scotland territorial and national Health Boards (including NES), Public Health Scotland and National Services Scotland have all been granted Core Participant status. A preliminary hearing took place on 10 April 2024 and the hearing dates for oral evidence have been scheduled for 10 weeks over September to November 2024.

#### 2.2. National Care Services (NCS)

- a) Minister for Social Care, Mental Wellbeing and Sport Maree Todd has written to the Health, Social Care and Sport Committee to provide the Scottish Government's <u>full</u> response to the Committee's Stage 1 report.
- b) Within this, the Minister responded to the particular conditions the Committee had set out for recommending that the general principles of the Bill be approved:

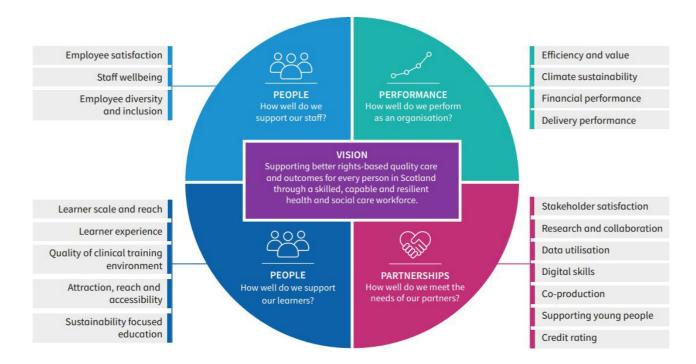
- An Expert Advisory Group (ELAG) has been established to supplement and augment current engagement and to bring specific focus to the process for the further development of Stage 2 amendments. The <u>Terms of Reference</u> have been published and the first meeting took place on 28 March.
- The Scottish Government will work with Parliament to agree timings for the Stage 2 deadline.
- The Scottish Government have agreed to provide the full text of amendments intended to be lodged at Stage 2, a marked-up version of the Bill and an updated Policy Memorandum and Explanatory Notes to the Committee no later than June 2024.

#### 2.3. Announcements

a) Dr Ailsa Power, Associate Postgraduate Pharmacy Dean
I would like to wish Alisa Power well in her retirement. Alisa is retiring at the
beginning of June 2024 and has been with NES since April 2004. She has
successfully led the Pharmacist Initial Education & Training Team through periods
of significant development and growth for the profession and more recently
responding to large scale General Pharmaceutical Council reforms of Pharmacy
education and training across the UK.

## 3. Our Strategic Themes

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



# 3.1. People – How are we supporting our staff, learners and trainees

#### 3.1.1. Chief Executive Update

a) I continue to enjoy meeting with a range of NES staff either to discuss key NES programmes and initiatives or as part of their induction. Since the last Board meeting, I am continuing to connect with NES staff to communicate key strategic messages through all-staff webinars. We continue to get good attendance at these sessions which provide colleagues with a platform to share their views, raise concerns and ask questions. The most recent webinar on NES fiscal position had over 600 participants with many questions being asked. A formal Q & A response will be published on the intranet.

I am looking forward to engaging with staff at the next all staff webinar on 5 June 2024.

b) I had the pleasure of opening the 2024 NES Annual Virtual Conference. The focus was on developing a compassionate, skilled and sustainable Workforce Through Innovative Education and Technology. NES welcomed over 1900 virtual attendees over 25 and 26 April 2024. The multi-directorate, multi-professional conference had more than 300 presenters and topics ranged from civility in healthcare to how Artificial Intelligence will impact and support healthcare. The enthusiasm and passion for health and care education from all participants and presenters was palpable. A huge thank you to staff all who organised and supported the event.

# 3.1.2. Dental including Healthcare Science

#### a) **Dental Trainee Recruitment**

Recruitment to Dental Core Training (DCT) posts starting in September 2024 is currently underway. This is undertaken on a UK wide basis and there has been a 142% increase in applications for DCT1 posts.

#### b) **Dental Vocational Training Trainer Recruitment**

There has been a 25% increase in trainer applications compared to last year. This includes a significantly higher number of 'new' applicants. A revised approach to advertising was applied, including significant use of social media, to heighten awareness of the recruitment dates. The level of interest in becoming a trainer in Scotland contrasts with a significant reduction in applications in other parts of the UK.

#### c) General Dental Council (GDC) Workforce Report

The General Dental Council has published a summary of the working patterns of dental registrants. The data can be accessed <a href="here">here</a>. Currently the data that is available is at a high level although it is anticipated that it will be possible to break this down by individual health boards in Scotland.

d) Safe Practitioner Framework Transition Action Plan
Working with our regulatory and awarding bodies we are currently producing

'Transition Action Plans' that will formulate how the existing pre-registration qualifications for Dental Nurses and Orthodontic Therapists will be adapted to meet the requirements of the GDC Safe Practitioner Framework by August 2025.

## e) Orthodontic Therapy

A new cohort of trainees will commence in Autumn 2024. More than one third of successful applicants will be based in remote and rural NHS Boards.

- f) Modern Apprenticeship in Dental Nursing
  - Skills Development Scotland (SDS) have now completed the evaluation of all tenders received for the 2024-2025 contract. NES Dental submitted a bid for a total of 100 funded places for the Modern Apprenticeship in Dental Nursing (Scottish Credit and Qualifications Framework (SCQF) 7). A total of 65 places have been allocated to NES for the coming contract year.
- g) Jennifer Knights, Specialist Research Lead in Clinical Effectiveness
  Congratulations to Jennifer who has been nominated for a Universitas 21 (U21)
  Leaders of the Future Award for her PhD studies. Universitas 21 is a unique
  global network that brings together 29 world-leading, research-intensive
  universities who are leading change, empowering and educating others and
  collaborating globally.

#### 3.1.3. Healthcare Science (HCS)

- a) Our guide to Healthcare Science support worker development was published in March 2024 which completed the project commission from Scottish Government. We will promote the framework through 2024 with an impact study planned for the Autumn.
- b) As an adjunct to this work, we will continue to offer support for science graduates in laboratory support worker roles undertaking non-accredited degree assessment by the Institute of Biomedical Science. This scheme gives applicants guidance on the top-up modules needed for Health and Care Professions Council (HCPC) registration. 25 applicants were offered support in 2023-24 and we are gathering information on their progress towards registration.
- c) We have issued service level agreements to NHS Boards that support 3-year clinical scientist training posts. We expect to support 24 postgraduate clinical scientist trainees from September 2024. We will also run our annual expressions of interest exercise from service in May 2024 to gauge demand for the next cohort of training posts in 2025.
- d) The Scottish Government has published an overarching strategy document Healthcare Science in Scotland: Defining our Strategic Approach that will be supplemented by a series of position papers during 2024 from subgroups including education and training, which is co-chaired Dr Robert Farley, Health Care Science Associate Director at NES. We expect a report from Scottish Government on the education and training strategy in July 2024.

- e) We are commencing work with colleagues from the NHS Academy in two specific areas relating to Decontamination Unit workforce training and a laboratory placement pathway to assist with Biomedical Scientist registration.
- f) Our Spring Newsletter Notice Board was published April 2024.

#### 3.1.4. Medical

#### a) Official launch of Gateway C – 30 April 2024

Cancer remains the largest burden of disease across Scotland. Around 35,400 people are diagnosed with cancer in Scotland each year – more than 4 people every hour. The Cancer Strategy for Scotland 2023–33 reflects on Cancer Research UK evidence that cancer incidence is expected to increase, with the number of cases projected to rise by nearly one fifth, to around 42,100 new cases per year by 2040. Earlier diagnosis has a crucial role to play in improving cancer outcomes across Scotland.

To support this, the Scottish Government's Detect Cancer Earlier (DCE) Programme in partnership with NHS Education for Scotland (NES) have commissioned the rollout of Gateway C across NHS Scotland, following a successful launch across NHS England and Wales. Gateway C is a free online education resource that supports clinical decision-making, earlier detection of cancer and improved management, care and support for people affected by cancer. The resource is evidence-based and available to any member of the primary care clinical team. The content has been clinically reviewed to ensure that it is relevant and specific to NHS Scotland. 22 courses will be available from the 30 April 2024, with additional educational resources released throughout the year.

#### b) **Enhanced Monitoring**

There are no new cases of enhanced monitoring, and the Deanery continues to support 5 cases. All cases are currently receiving Deanery support to address remaining concerns: -

- NHS Greater Glasgow and Clyde (GG&C) QEUH (General Medicine & Acute Medicine) An Enhanced Monitoring re-visit took place with the General Medical Council (GMC) on 13 and 14 March 2024. Significant continuing engagement and collaboration was noted, and the visit report is in progress. A meeting has taken place with the GMC regarding the Enhanced Monitoring case and a formal update is awaited from them. A SMART objective setting meeting will take place on 30 May 2024 and an Action Plan Review Meeting will take place on 15 August 2024.
- NHS Ayrshire and Arran (A&A), University Hospital Ayr (General (Internal)
   Medicine & Acute Medicine) An enhanced monitoring re-visit with the GMC
   took place on 12 April 2024. The visit panel noted a huge improvement in the
   site, with progress being made in patient safety and training opportunities for
   trainees. The visit report is in progress. Discussion took place with the GMC
   after the visit, and it was agreed a meeting will be held in four months to review

the two outstanding GMC requirements. If it is found that progress has been maintained, then GMC & NES will discuss if a referral to de-escalate would be appropriate. SMART objective setting meeting and an Action Plan Review meeting dates have still to be agreed.

#### c) National Centre for Remote and Rural Health and Care

The National Centre for Remote and Rural Health and Social Care (the Centre) delivered by NES on behalf of the Scottish Government, continues to deliver priority programme of work in response to identified needs and to identify new and emerging priorities to be addressed in improving rural and island health and care recruitment, retention, education, research, leadership and good practice. The Centre was established in October 2023 with an agreed plan to deliver impact across rural and island Primary Care in Phase 1 until September 2025. The Centre team have delivered on all 0–6 month targets.

#### d) Remote and Rural Education and training

Funding was awarded for 15 multidisciplinary rural practitioners to undertake the new National Centre Rural Advanced Practitioner MSc and Diploma Programme. The programme is delivered by the University of Highlands and Islands. The funding call to support another 10 rural practitioners to undertake the programme will be opened in early 2024.

#### e) Rural Workplace Supervision Hub

The hub has been established with accessible resources and a rural supervisor network to support and grow a cohort of multidisciplinary rural supervisors who will promote excellence in rural practice and supervision across Scotland.

#### f) Remote and Rural Research and Evaluation

A first round of funding has been awarded to support increased rural practitioner educational and research development. Applications for further practitioner funding awards will open in May 2024.

A range of priority research and evaluation programmes are underway to support work across the 4 pillars of the National Centre programme of work for 2024.

#### 3.1.5. NES Technology Service (NTS)

#### a) The Knowledge Network Redesign

The Knowledge Network is a <u>website</u> which provides free access for health and social care staff to a wide range of evidence summaries, journals, books, and databases. The site was rebuilt with new technology and redesigned in collaboration with the Knowledge Services team to ensure the services are easy to use and can be accessed securely. The new Knowledge Network website went live on 30 April 2024. The knowledge services team will be providing daily tours of the new site running from 1-10 May 2024 along with some train the trainer sessions in early May to support library services in the health boards. A communication toolkit is also being developed to support promotional activities.

b) Electronic Practice Assessment Document (ePAD)
New functionality allows student nurses to record placement assessments and

progress digitally for review and sign-off. New functionality has been developed to implement a Learning Development Support Plan to support student nurses in area(s) that need specific support to achieve learning outcomes or professional standards.

#### c) Workforce Data Enhancements

NES Technology Service has managed to successfully import eESS data. This capability will allow establishment of a nightly import to enhance the workforce data held by NES. This has been complex and difficult due to the challenging structure of the technology supporting eESS. Further analysis work is underway on how to maximise the value across all NES systems that consume workforce data.

#### 3.1.6. NHS Scotland Academy, Learning and Innovation (NHSSA, L&I)

#### a) Learning Strategy and Collaboration

The Directorate is supporting Strategic Key Performance Indicators (SKPIs) under the auspices of Education and Quality Committee (EQC) through a sub-group of Education and Quality Executive Group (EQEG). The sub-group composed of EQEG members has been augmented to include additional representation from NES Technology Services and Planning and Corporate Resources and is continuing to review the status of those SKPI measures related to the remitted responsibilities of the EQC. Following discussion of the SKPI measures at EQC meeting on 7 March 2024, the remainder were considered by the sub-group on 19 March 2024. Once there is consensus on the defined purpose and scope of each SKPI, the sub-group will focus its attention on identifying appropriate metrics, understanding current data collection (including gaps) and reporting capabilities. Progress will be reported via EQEG to EQC, with Board oversight via the quarterly Board performance report.

## b) Learning and Education Quality System (LEQS)

The LEQS project is making good progress and the following workstream updates are noted below: -

- Analysis of the external requirements of the Quality Policies Framework is complete and focus is now on the commissioning strand of the product lifecycle to build an 'as is' vision which will be developed over the coming weeks.
- A User Engagement literature review is currently in progress and discovery work is also underway. A User Engagement Workshop was held on 29 April 2024.
- The Educator Capabilities Framework received a positive response at NES
  Partnership Forum. Following feedback from the educator review group, this
  went to the NES Executive Team for approval on 27 March 2024 and was
  launched as a pilot in early May.
- A draft Glossary of Terms for the Practice Learning Environment has been developed, covering supervisors and practice learning itself and a list of

ambiguous terms is currently being reviewed. Assessing commonality in the preparation of supervisors in practice is also being carried out.

Discovery work for the Learning Design and Practice workstream is being analysed, fleshing out what resources and guidance will look like, and grouping those resources together into 4 broad areas across the Archetypes: (i) identifying learner needs, (ii) planning and designing learner resources, (iii) development and delivery to the learner, and (iv) evaluating impact on the learner.

- The former Lived Experience and Co-Production workstream title has changed to Involving People and Communities to better reflect the wide array of ways to engage with external communities (with co-production being just one of those methods). Feedback on the "The Involving People and Communities Framework" which had featured at a recent Educational Leadership Group has been analysed prior to submission to the NES Executive Team on 23 April 2024 with a set of recommendations on requirements ahead of implementation.
- A second Quality Management, Assurance and Enhancement workshop has been held to seek and collate details of the mechanics of existing processes to help inform the development of the governance and decision-making structures around the Quality System. Programme management data mapped against Archetype 4 which comprises of four main education archetypes Archetype 1: Non-interactive learning resources, Archetype 2: Interactive learning resources, Archetype 3: Facilitated courses, Archetype 4: Programmes of learning. This is being captured and this will be re-worked proportionately for the other Archetypes. The mapping process closed on 22 March 2024, and this has been followed by a period of consolidation.
- A staff Webinar on the Learning and Education Strategy was held on 24 April 2024 for all NES Staff, while Involving People & Communities and the Educator Capabilities Framework both featured in the learning at Work Week.

#### c) Turas Learn Update

12 out the 22 NHS Boards in Scotland are using Learn as their learning management system. NHS Golden Jubilee will start using Learn on 1 May 2024 for mandatory and induction training moving to a full-go live at the end of the month. As of 19 April 2024, 25.4K learning resources are hosted on Turas Learn. New modules for the Scottish National Blood Transfusion Service went live as planned for 1 April 2024. Other recent NES Turas Learn content projects completed include Scottish Improvement Leader Programme's (ScIL) new learning programme and new and updated modules along with a restructure of the learning site for Promoting Effective Immunisation Practice (PEIP). In addition to this, a Content Governance Report has been developed which provides a Dashboard for NES Directorates and other organisations using Learn to periodically review their content.

#### d) **eLearning Team**

The eLearning Team within NHS Education for Scotland designs, develops and tests modules for content owners and educators across NES Directorates, and supports a network of staff across NES who develop modules within their

disciplines/directorates. From 1 April 2023 to 31 March 2024 59 new modules completed, 304 modules tested, 58 modules rebuilt and 59 modules updated.

The eLearning module development projects re-build of the 24 x Promoting Effective Immunisation Practice (PEIP) modules and testing and accessibility updates for Scottish Government Children's Rights module have recently completed. These are now ready to be hosted on Turas Learn.

#### c) Technology Enhanced Learning (TEL) Update

Design and development work continues to progress on the completion of the suite of TEL Facilitation modules which are hosted on the Technology Enhanced Learning Design and Facilitation Turas Learn page. There are two suites of eLearning modules, Design and Facilitation, hosted on Turas Learn which are intended to support staff holistically in developing quality educational products, with effective use of technologies. Modules can be completed individually, or together to form a programme which is produced and maintained by NES TEL team. Modules are also linked to relevant guidance, checklists and templates.

A pilot programme of short sessions providing guidance on effective use of technologies for learning for Greater Glasgow and Clyde (GG&C) colleagues has now been completed. This set of seven sessions, which ran from September 2023 to March 2024, will be evaluated by GG&C Learning and Education colleagues, with an evaluation report expected in April 2024. An 'Introduction to Generative AI' Sway resource has been launched, which was developed by the TEL Team in collaboration with NES Information Governance colleagues.

#### d) **Digital library services**

Planning for the next tender of subscription resource, started in April 2024. The Knowledge Network value and impact survey which opened during February and March 2024 received 948 responses. The results from this survey have been analysed and a report was published at the end of April 2024. Two years' worth of usage data from the current Tender period (April 2022-March 2024) is also being collated and reviewed to inform purchasing decisions.

The team have been working with one of our external suppliers to transition their leadership and self-development resource MindTools to a new platform. This will happen on 21 May 2024.

# e) Innovation & Workforce Diversification - Accelerated National Innovation Adoption (ANIA) Pathway

Workforce and education checklists capture baseline skills, skills gaps and education needs are now embedded and consistently used with effect in ANIA programmes.

Heart Failure and Pharmacogenetics ANIA programmes continue to progress, with NES input to education needs and workforce models. Considerations for Point of Care Testing (POCT) is now underway.

With NES Technology Services (NTS) now confirmed as the ANIA preferred digital provider, both NTS and NES workforce can increasingly work closely with

stakeholders and at early-stage consideration of ANIA workstreams, maximising utility of intelligence.

#### f) Collaboration and Partnerships

Partnership activity is progressing with the Digital Health and Care Innovation (DHI) Centre and University of Strathclyde specific to innovation.

Discussions are developing regarding specifics of innovation in NES and Scottish Funding Council (SFC) joint action plan.

Collaborative discussion is also developing with Glasgow School of Art (GSA).

#### g) NHS Clinical Entrepreneur Programme (CEP)

Active participation in Scotland's coordination group for the NHS Clinical Entrepreneur programme, following contribution to recruitment and selection of fellows to cohort 8. This cohort launched in March 2024 and NES represented Scotland at the welcome event for cohort 8 on 19 March 2024. Ongoing discussions led by The Digital Health and Care Innovation Centre (DHI) regarding funding for Scottish participants.

#### h) Medical Associate Professions (MAPs)

Medical Associate Professions implementation plan is ongoing. NES delivered the national event on 26 March 2024: "MAPs – Next Steps for NHS Scotland". This event brought together stakeholders and strategic partners to progress and enhance service understanding and opportunities for greater integration of MAPs for service resilience. A session was also held at the NHS Education Conference. We are actively communicating a cautious expansion in Scotland to try to mitigate some of the negative views from the BMA, junior doctors, and others.

Collaboration is continuing with Scottish Government and General Medical Council with regard to regulation of Physician Associate and Anaesthesia Associate. The Anaesthesia Associates and Physician Associates Order 2024 passed the House of Lords scrutiny late February 2024, proceeding to Royal Assent. GMC consultation on the processes for regulation has now commenced.

#### i) TURAS Refresh

The Turas Refresh Programme has come to the end of its first phase which focused on discovery and has culminated in the drafting of an Outline Business Case (OBC). This phase included a series of engagements including an externally commissioned Organisational Requirements Project; an externally commissioned Technical Review of the existing technology and a user survey on the Turas Platform.

The OBC was presented to the Technology and Information Committee at its meeting on the 13 May 2024. The OBC will next be presented to Scottish Government to gain formal backing.

In the meantime, the programme team have started work on Phase Two of the programme which will cover the six months from April 2024 – September 2024 and will focus on establishing specific requirements, developing a detailed programme plan and continuing and enhancing engagement with key

stakeholders including learners, educators and organisations both within and beyond NES.

#### 3.1.7. Nursing, Midwifery & Allied Health Professions (NMAHP)

a) The first nurse endoscopy career development framework was published in 2019, to help address workforce and service needs identified by the Scottish Government (SG) Endoscopy Action Plan (2019). The covid pandemic had a significant impact on endoscopy services and as a result SG published a revised Endoscopy and Urology Diagnostic Recovery and Renewal Plan (2021).

Aligned to the Endoscopy and Urology Diagnostic Recovery and Renewal Plan, NES NMAHP undertook to review the original career development framework. Subsequently, a revised <a href="Career development framework for non-medical endoscopist">Career development framework for non-medical endoscopist</a> launched in March 2024. This framework reflects the evolving clinical, educational and legal requirements of the role.

The purpose of the non-medical endoscopy career development framework is to provide a structured approach to education and training that ensures all non-medical endoscopists in Scotland qualify with the same core skills and capabilities required to contribute to safe and effective service delivery, while informing experienced practitioners of the development opportunities available within their professional career.

The document is a supporting framework that builds on the wider <u>NES NMAHP</u> <u>Development Framework</u>, to provide a consistent pathway for non-medical endoscopists negotiating career levels 6 through 8. It has been developed in collaboration with key clinical, educational and strategic stakeholders to ensure that it is relevant, valid and has been informed by wider policy direction, such as Transforming Roles.

The framework consists of 3 main components:

- A model defining the educational attainments, clinical practice responsibilities and knowledge/skills/behaviours for each level of practice
- An educational pathway to help practitioners to achieve these requirements
- Identification of the key clinical skills courses provided by the NHS Scotland Academy (NHSSA) National Endoscopy Training Programme (NETP) available and required to support advanced clinical skills and role development.

#### 3.1.8. Pharmacy

# a) The Pharmacy Simulation Strategy: Accelerating workforce development with simulation-based education

This has now been published and is available on the newly launched Pharmacy Simulation <u>Turas page</u>. Interprofessional immersive simulation programmes are also underway involving medical, nursing and physiotherapy students learning alongside trainee pharmacists (76 trainee pharmacists in total); taking place in Edinburgh, Glasgow and Lanarkshire. The first 32 Pre-registration Trainee Pharmacy Technicians have completed Diplomas in Pharmacy Services (SCQF 8) as part of the NES supported Scottish Government scheme. In addition, as part of this funded scheme 57 work-based assessors have completed training.

#### 3.1.9. Psychology

#### a) Supportive Supervision

Aligned with the enhanced recognition of the importance of supporting staff wellbeing, as outlined in Scottish Government's <u>NHS Recovery Plan</u> (SG, 2021) and <u>Caring for Those Who Care For Us</u> (SG, 2021), NES Psychology have developed the Supportive Clinical Supervision Training for practitioners delivering psychological therapies and interventions.

This resource was designed as an enhanced supervision training to build on existing supervisory experience to further refine and increase restorative supervision competencies for supervisors who have completed prior NES Generic Supervision training. It trains supervisors how to provide their supervisees with invaluable emotional, practical and social support to support their wellbeing at work and aims to:

- Ensure safe and effective clinical practice.
- Supports quality assurance and patient safety in relation to psychological therapies and interventions.
- · Buffers against staff burnout
- Enhances supervisee wellbeing.

The course is available in both a 4 and 6 hour version, the latter allowing greater time for the skills building elements of the training, enhancing the learner's experiential learning through interactive video, role play and group activities. Both versions can be delivered in person or online.

Since launching in 2022, 177 staff have been trained in Supportive Supervision. A train the trainer's model has been developed to promote the cascade of this training and both of Scotland's DClinPsy practice teams and 6 NHS boards have been trained to deliver the training so far.

Post-course evaluation has been extremely positive with supervisors appreciating the opportunity to try out new techniques, increase their self-awareness and reflection around supporting wellbeing through their supervisory role, and support in active goal setting around implementing this approach.

#### 3.1.10. Social Care Directorate

- a) During the past month the Social Care Directorate has welcomed colleagues from NES's Unpaid Carers Team to the Directorate, as well as a Senior Educator, Specialist Lead and Head of Programme. Colleagues have benefitted from a positive onboarding experience and induction programme and are looking forward to contributing to the directorate's emerging work plans.
- b) Angella Fulton, Associate Director has been invited to join the Scottish Government's Rural and Islands Workforce Recruitment Strategy stakeholder focus group, to inform and influence consideration of the challenges facing the social care providers in Scotland.

#### 3.1.11. Workforce

a) Non-Pay Elements of Agenda for Change Pay Agreement 2022-23

NES implemented the nationally agreed NHS Scotland working week reduction for Agenda for Change (AfC) staff, from 37.5 hrs to 37 hrs per week (pro rata for part-time staff), from 1 April 2026. This is the first step in reducing to a 36 working hour week by 2026 and is intended to support staff with an improved work-life balance.

NES is also implementing the provisions relating to a second non-pay element of the AfC Pay Agreement regarding Protected Learning Time, requiring all line managers to ensure time within working hours for their staff to complete essential learning related to both NES statutory/mandatory and role specific training. NES already provides time and, therefore, there are no significant changes required as a result of the national agreement.

There are no immediate implications for NES relating to the third non-pay element of the national agreement which is a review of the Band 5 role for nurses, apart from the commission from Scottish Government to NES Technology Services for the development of a portal enabling re-evaluation applications from staff in this role across health boards.

#### b) Recruitment Activity

Recruitment across NES reduced significantly in Quarter 4 (Q4) Financial Year (FY) 2023-24. Activity reduced by over a third, in comparison to the high volumes of FY 2022-23. Agency headcount also decreased in Q4 FY 2023-24 by 14% with a further anticipated reduction between April and June 2024. The challenging fiscal environment is expected to impact recruitment activity throughout FY 2024-25.

#### c) National Trainee Services

During Q4 FY 2023-24, focus was on planning and preparation for the August intake of Doctors and Dentists in Training with forecasted volumes: 485 requiring visa sponsorship; 1,450 Protecting Vulnerable Groups (PVG) clearances; onboarding 140 General Practitioner (GP) new starts, 300 GP rotators and 170 Vocational Dental Practitioners (VDPs). Volumes are comparable to the August 2023 intake, with an anticipated 13% increase in VDPs (150 in 2023).

#### d) **Hybrid Working**

A key workforce priority to supporting sustainability and climate change is NES's successful embedding of hybrid working. A refreshed policy and guidance developed in partnership was approved by the NES Executive Team. Implementation of the policy will be underpinned by the launch of a Line Managers Handbook and supporting resources by end of June 2024. The Handbook will have 10 chapters covering a range of topics including Wellbeing, Managing Attendance, Recruitment and Selection and Hybrid/ Flexible Working. The Handbook will clearly set out the role, responsibilities and expected behaviours of line managers. It draws on National good practice and once for Scotland Workforce Policies making it an important resource for new and existing Managers. This will be supported by an Induction for Line Managers learning module and a 12 month programme of online learning sessions through the existing line managers' network. The network provides an opportunity for managers to share peer learning and to build skills, knowledge and capability.

# 3.2. Partnerships - how we are supporting our partners

#### 3.2.1. Strategic Partnerships

- a) NES continues to develop new strategic partnerships and build on the already established partnerships. Each collaboration will impact the health and social care workforce and achieve improved outcomes. These ambitious collaborations demonstrate NES's commitment to engaging with key partners in order to deliver shared priorities which improve outcomes and create sustainability and value across the health and social care system.
- b) The successful strategic partnership between NES and NHS Golden Jubilee NHS Scotland Academy (NHSSA) continues to deliver a diverse portfolio of national workforce programmes and explore potential new workstreams. The impact of individual NHSSA projects continues to be significant in reducing waiting times for a number of diagnostic tests as part of our imaging and endoscopy programmes, which have directly supported seven-thousand five- hundred and twenty-four (7,524) patients in the last twelve months. The quality and impact of NHS Scotland Academy programmes are highlighted within the Annual Review presented to EQC in May which showcases the remarkable work undertaken in the past year, providing training opportunities for six-thousand eight-hundred and thirty-eight (6,838) people who do, or who will, work in roles in social care or health care.

#### 3.2.2. Chief Executive Update

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

- a) The NES Executive Team (ET), Transformation Group (TG) and Strategic Implementation Group (SIG) continue to meet formally. Collectively these are focusing on strategic matters, strategic scrutiny, cross- organisational leadership and ensuring the direction of strategy with the focus on our people, partnerships, and performance.
- b) My engagement with a wide range of key stakeholders across health and social care continues. This includes a wide range of colleagues across NHS Scotland including Chief Executives and other senior colleagues. The NHS National Board Chief Executives (BCEs), NHS BCEs and Scottish Government, NHS Board CEs Private meeting, Strategy and Business meetings. All Accountable Officers also meet monthly with Caroline Lamb (Director-General of Health and Social Care and Chief Executive of NHS Scotland).
- c) I had the opportunity to attend the Realistic Medicine Senior Leaders Event hosted by the Scottish Government in April 2024. This event focused on how Realistic Medicine and Value Based Health & Care can inform development and delivery of the vision for health and social care, including long-term planning for Population Health and Integrated Care.
- d) Currently I am Chairing / co-chairing Joint Negotiating Committee on contract reform and the NHS Chief Executive lead on pay negotiations 24/25 and the NHS CE Lead on National Care Service.
- e) Engagement with Scottish Government (SG) continues through my regular 121 meetings with a number of SG colleagues and my attendance at wider SG meetings. NES continues to engage with SG through the Strategic Sponsorship involving myself, NES Chair and SG's Director of Health Workforce. The focus of discussions has been on funding arrangements and NES priorities. Our next meeting is scheduled for 21 June 2024.

#### 3.2.3. Medical

a) Rural and Remote Credential (Unscheduled and Urgent Care) Launch Following a soft launch at the Scottish Medical Education Conference, the Rural and Remote Credential (the Credential) will launch in June 2024. For those embarking on the Recognition Route and the Learner Route, this will open in September 2024. The Credential, developed in a UK-wide partnership and led by NHS NES, will play a pivotal role in continuing to support the health and wellbeing of rural communities.

# b) National Centre for Remote and Rural Health and Care - Collaboration and Partnerships

Partnership activity and joint working is underway with a wide range of partners across the UK and internationally. Joint knowledge exchange workshop sessions are in planning with Public Health Scotland, Health Improvement Scotland, and the Scotlish Ambulance Service. Planning is underway for National Centre joint programmes of remote and rural work with Scotlish Ambulance Service, University of Aberdeen, University of Highlands and islands, University of Augusta and University of Georgia.

#### c) Stakeholder Engagement Networks

The National Centre currently has around 900 stakeholders on the communications and circulations list with new requests to join our stakeholder group continuing to grow. Requests to be involved come directly to the team and via our National Centre Turas Information site.

Work has begun on the development of new networks for ongoing stakeholder engagement and knowledge sharing across each of the four priority areas of the National Centre workplan.

The first stakeholder network session for remote and rural recruitment and retention was held in March 2024, with a series of monthly sessions being planned for 2024 and 2025. This work is being taken forward collaboratively with the Scottish Government Workforce Directorate and will support their objective to develop a Remote and Rural Workforce Strategy in 2024. <a href="National Workforce">National Workforce</a> Strategy for Health and Social Care in Scotland (www.gov.scot)

#### d) International R&R Partnerships

The National Centre team have developed a map of all existing international remote and rural specialist fora and networks. This resource will be published in May 2024 and circulated to all UK and international remote and rural stakeholders. This work will provide an important platform for the National Centre and wider international partners to establish ongoing and effective partnership working around the key remote and rural priority areas for health and care.

#### 3.2.4. NES Technology Service (NTS)

#### a) Accelerated National Innovation Adoption (ANIA)

NES Technology Service has appointed a new Head of ANIA Technology Delivery on an interim basis whilst recruitment continues for the roles agreed to bring digital leadership to the ANIA pathways. The role is focused on the Digital Dermatology programme and has made progress in bringing the delivery partners together to define the end-to-end digital solution and finalise plans that will form part of the overall Digital Dermatology Programme Plan by 10 May 2024.

#### b) Future Care Planning

NES Technology Service are working in collaboration with the Scottish Government around technology to support Future Care Planning, previously 'Anticipatory Care Planning'. Future Care Planning will support more opportunities for people to have conversations about their future health and care and make plans that can be recorded, reviewed, and shared by health and care teams and services. Those plans include what matters to the person and clinical recommendations to guide staff delivering care. This work will form part of the Integrated Social Care and Health record.

C) Data Engineering capabilities via National Seer Platform
Work has been progressing with colleagues in NHS National Services Scotland
(NSS) and Amazon Web Services (AWS) to have access to generic data
engineering capabilities via the national Seer platform, which will simplify our
ability to import, transform and analyse workforce data. This is at the proof-ofconcept stage, focusing initially on securing national eRostering data. The
technical components are in place and awaiting Information Governance (IG)
documentation to be completed to enable the flow of eRostering data. Additionally,
a positive first meeting of the National Rostering Reporting Forum, chaired by
NES, took place to discuss scope, approach and membership to enable
requirements for national reporting related to Rostering to be progressed with key
stakeholders in the coming months.

# 3.2.5. Nursing, Midwifery & Allied Health Professions (NMAHP)

a) Mental Health Improvement, prevention of self-harm and suicide programme - 'Inequalities in Mental Health in Scotland - Exploring the Challenges'

<u>Creating Hope Together – Scotland's Suicide Prevention Action Plan 2022-2025</u> has set out a vision 'to reduce the number of suicide deaths in Scotland, whilst tackling the inequalities which contribute to suicide'.

Since 2019, NHS Education for Scotland (NES) and Public Health Scotland (PHS) have been working in partnership to develop and deliver educational solutions for the health, social care and wider public sector workforce in mental health improvement and the prevention of suicide in line with the delivery outcomes of Creating Hope Together Strategy and Action Plan.

In order to live well, good mental health and wellbeing is required. In achieving this we must however also recognise the need to address the impact that poorer socio-economic status and disadvantage has on the mental health of individuals and communities across Scotland. In 2023 there were 762 probable deaths from suicide a rise of 9 (1%) from the previous year, with the rate of suicide 2.6 times higher in deprived areas as compared with the least deprived areas.

 In 2020 the NES/PHS, Mental Health Improvement and Suicide Prevention team developed a set of Skilled level learning byte resources. The 'Promoting mental health and tackling inequalities' learning byte, to date has been the most accessed and downloaded learning resource within the programme. This reflects the relevance to practice of tackling mental health and health inequalities across the wider workforce. Responding to the workforce interest and building upon our masterclass series, we commissioned a masterclass with 2 Public Health experts, Dr Sarah Couper, Consultant in Public Health, (PHS) and Dr Trevor Lakey, Health Improvement and Inequalities Manager, Mental Health, Alcohol and Drugs, NHS Greater Glasgow and Clyde to co-present the session titled, 'Inequalities in mental health in Scotland – exploring the challenges'.

The session provided the following overview:

- The challenges, dilemmas, and opportunities to address inequalities in mental health.
- A summary of evidence of the nature and scale of challenge
- Provide thoughts on principles for action.
- Examples of practical responses from practice

# 3.2.6. Psychology

# a) Psychosocial Interventions (PSI) Psychosis

Psychosis and the diagnosis of schizophrenia are significant mental health issues, where a person's perceptions, thoughts, mood and behaviour are significantly altered. Individuals have their own unique combination of symptoms and experiences. The enormous impact psychosis can have for an individual and those that love and care for them is clear. Over the past 3 decades adjunct psychological therapies and interventions to pharmacological treatments for treating psychosis have gained evidence and the potential for improved person-centred care and improvement in functioning by use of these types of cognitive behavioural based interventions is established.

NES Psychology co-produced the Psychosocial Interventions (PSI) for Psychosis Learning Programme, with a range of academic, clinical and lived experience experts, to upskill the multidisciplinary workforce. The programme aids staff in developing a shared understanding of the experience of psychosis and helping people make sense of their experiences. Delivering this psychosocial approach destigmatises psychotic experiences, enhances engagement and addresses the risk of relapse. An e-learning module, 2-day interactive training and follow up coaching support, all aid implementation of skills into practice. Several boards in NHS Scotland have training teams consisting of multidisciplinary practitioners and experts by experience.

We ensure engagement with our national network of PSI trainers via regular meetings, and they deliver this training to teams in their local boards.

A further Training for Trainers opportunity in May and June 2024 is being offered by NES Psychology to augment existing teams and allow boards without trainers to consider this potential area for development. Mental Health Services in Northern Ireland have identified a skills gap in their multidisciplinary practitioners regarding PSI for psychosis and are keen to have their staff undertake the Learning Programme

and develop training capacity. To that end, Northern Ireland are sending staff on the scheduled Training for Trainers workshops.

### 3.2.7. Social Care

- a) Our new colleagues who have recently joined the team will be joining our counterparts from the Scottish Social Services Council (SSSC) for a development day, to continue to develop our partnership working and to begin to advance the work that the Scottish Government have commissioned us to take forward. The Joint Social Services Workforce Taskforce, chaired by Ms Maree Todd, Minister for Social Care, Mental Wellbeing and Sport and Councilor Paul Kelly, COSLA is particularly interested in the work we will be doing to develop the National Induction Framework and to create a portable passport for colleagues who complete it, as well as work on mapping career pathways.
- b) Gordon Paterson, Director of Social Care continues to represent NES on the National Social Work Agency (NSWA) Advisory Group. The Scottish Government intend that aligned to the establishment of a National Care Service, the NSWA will become 'a dedicated resource to support Social Workers' education, training, learning and development and promote improvement.' This is leading to further discussion on how the social care workforce will be resourced and supported to the same degree.
- c) In supporting the National Care Service Tri-partite group, Gordon Paterson is coordinating NHS Scotland representation on relevant Short Life Working groups and is contributing to a number of these groups himself. This includes a new group on 'Social Care in Prisons', where he will be advocating for a wider perspective that includes prison healthcare, prison Social Work to build a more resilient and integrated service response.
- d) With confirmation of funding for a new Specialist Lead (Health Inequalities) post, the Director is liaising with Public Health Scotland on how best to collaborate to advance a health equity approach in our education and training provision, to raise awareness of the impact of health and social inequalities and the contribution that the health and social care workforce can make to mitigate these.
- e) The Social Care Directorate have been asked to join the Care Inspectorate and SSSC as members of Scottish Care's 'Regulatory Forum' and to provide input on our education, workforce development, knowledge services and digital offers to Care Home, Housing Support and Care at Home providers.

# 4. Performance - how we are performing as an organisation

# 4.1.1. Climate Change Emergency and Sustainability (CES)

- a) "The NES Climate Emergency & Sustainability Strategy" features on the agenda for this meeting of the Board. This is the culmination of a large amount of work across all directorates and it has already been discussed at the Board Development Session on 18 April 2024 and at Audit and Risk Committee on 24 April 2024. Board participation at both of those discussions was very much appreciated and changes have been made to the Strategy as a result. This Strategy clearly sets out NES' intentions in this policy area and our responsibilities and indeed our commitment remain unchanged following recent amendments to the national targets on carbon emissions reduction.
- b) Subject to Board approval the Strategy will be published, and the launch will be accompanied by a video message from the Board Champion, Gillian Mawdsley and by the Executive Lead, Jim Boyle. The NES Climate Emergency and Sustainability Group will consider the Action Plan to accompany the Strategy and a draft of that has been included in today's Board report for information.
- c) NES has also been working with NHS Assure to host on Turas some national video material on how Boards across Scotland can engage in a practical sense with the principles of carbon emission reduction. That material will be available very shortly."

## 4.1.2. Medical Directorate

a) Medical Appraisal & Revalidation Quality Assurance (MARQA) Review 2023-24

Since 2010 an annual review of appraisal and revalidation has been commissioned by the Revalidation Advisory Board for Scotland (RABS) on behalf of the Scottish Government (SG). This was initially undertaken by Health Improvement Scotland (HIS) but since appraisal year 2017-18 it has been produced by NES.

The process involves the completion of a self-assessment questionnaire by all designated bodies in Scotland. A review panel (convened by NES) considers the submissions, looking at appraisal completion rates and revalidation recommendations across Scotland, including descriptions of local governance processes. NES then prepares and submits a report to the RABS with the panel's findings and where applicable, recommendation of actions for HIS to follow up on. The report is then published thereafter, and past reports can be found on the Medical Appraisal Scotland.

Following a pause due to the pandemic, SG has sponsored NES to restart the MARQA review for appraisal year 2023/24. A review panel has been convened and the questionnaire pack has been distributed with a return deadline of end of May. A draft report is expected in August prior to a final report being presented to RABS in November.

# 4.1.3. NES Corporate Improvement Programmes

# a) Ways of Working & Property

The project deliverables remain on target. The Line Manager Support and Wellbeing workstream deliverables have been delivered. This leaves the project now focused on the reconfiguration of our property footprint. A lead advisor has been appointed and is progressing the development of (re)configuration plans for Glasgow, Inverness, and Dundee sites. A 'Property Blueprint' covering all sites is in development to allow coherent and coordinated communications to be undertaken.

# b) Learning & Education Quality System

This project is progressing at pace. An Educator Capabilities Framework has been developed and approved at Executive Team. This will now be tested by staff during the annual appraisal and objective setting cycle. An Involving Communities Framework has been developed and was supported by the Executive Team in April. The review and development of Quality Policies to underpin the quality system continues and will be brought through Board committees over coming months.

# c) The Business Transformation Programme

This has developed a pipeline process to work up ideas into actionable improvement and efficiency projects. A key component of this is project scoping which will focus on the measurable improvement in terms of time or finance. It will also help identify the elements of the project work including milestones and resource required. This information will allow the programme board to make an informed decision on whether to progress each project area. Project Scoping has started on Meetings Management. A prioritised list for future idea scoping is in development and will be managed by the Business Transformation programme board.

# 4.1.4. NES Technology Service (NTS)

# a) National Digital Platform – Digital Dermatology

The National Digital Platform is supporting the Digital Dermatology programme in providing the following capabilities:

 NDP Workforce Identity - NDP teams are designing and building a workforce identity service which in the first instance will mean Primary Care users can use their existing NHS Scotland identity to access the PhotoSAF application, which is used to securely capture and share Dermatology images. This work is in progress with integration specifications to be shared with the supplier by 8 May 2024.

- NDP Demographics Work is progressing to enable Consultant Connect, supplier of the PhotoSAF application, to integrate with the NDP Demographics service. This will provide Primary Care users with the ability to search for a patient and associate the patient with any Dermatology images taken using their Community Health Index (CHI) number.
- NDP Data Storage Dermatology images taken by the PhotoSAF application will be posted to the NDP Data Storage service. The Dermatology images will then be made available to the Primary Care user via SCI-Gateway, to search and select the appropriate Dermatology image(s) for attaching to a Dermatology referral. This will enable consultant dermatologists to conduct Active Clinical Referral Triage (ACRT) to determine if a face-to-face appointment is required. Work is progressing to design and build the NDP Data Storage service to support this.

# 4.1.5. Psychology

a) Increasing access to psychological therapies and interventions for adult mental health

Between April 2023 – April 2024, the NES Psychology Directorate has supported local territorial Health Boards to widen access to psychological therapies through the provision of a national education programme for multidisciplinary staff working with adults who have mental health problems.

This workforce includes nurses and allied health professionals. Over this period, we have supported:

- 2 cohorts of learners (33 learners in total) on the Enhanced Psychological Practice Adult (EPP-Adult) programme.
- 150 training places in psychological therapies including: Cognitive Behavioural Therapy Post Graduate Certificate / Diploma places, Interpersonal Therapy (IPT) training places, Mindfulness-based Cognitive Behavioural Therapy (MCBT) training places, Mentalisation -based Therapy (MBT) training places, Cognitive Behavioural therapy for Suicide Prevention (CBT- SP) and Cognitive Behavioural therapy for Eating Disorders (CBT-ED).
- 959 training places in psychological interventions including, Behavioural Activation (BA), An Introduction to CBT for Anxiety (ICBT-A), Psychosocial Interventions for Psychosis (PSIp), Motivational Interviewing (MI), Core Skills for working with Substance Use, Psychological Interventions for Forensic Settings (PIF), Systems Training in Emotional Predictability and Problem Solving (STEPPS)
- 22 Facilitating Learning training places for Trainers in local boards.

Through this work we are supporting the Scottish Government's aim to ensure that there is a well-functioning psychological care system, which helps people to receive the right information, support, intervention, or service appropriate for their needs and to make an informed decision relating to their own care and support.

# 4.1.6. Social Care Directorate

a) Angella Fulton, Associate Director was asked to participate in the judging panel for this year's Scottish Care, Care at Home national awards, to support recognition of the excellent work happening across Care at Home Services in Scotland.



**NHS Education for Scotland** 

**NES/24/32** 

**Public Board Meeting** 

Agenda Item: 8a

Date of meeting: 23 May 2024

- 1. Title of Paper
- 1.1. Proposed Climate Emergency and Sustainability Strategy
- 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
- 4.1. To present to the Board for approval the proposed Climate Emergency and Sustainability Strategy, following discussion at the Audit and Risk Committee on 24 April 2024 as well as the Board development session on 18 April 2024. Changes have been made to the Strategy as a result of those discussions. The proposed Strategy and Action Plan are included as appendices to this report.
- 5. Background and Governance Route to Meeting
- 5.1. The Audit and Risk Committee has delegated responsibility from the Board for the oversight and scrutiny of NES' activities in meeting the Board's responsibilities towards the NHS Scotland Climate Emergency and Sustainability Policy. The Audit and Risk Committee has received previous detailed updates on progress within the Board on compliance with the national policy in combatting the global climate emergency. The Board has also had updates directly in the area, principally via the Chief Executive's update reports to the Board. This report sets out the proposed draft Strategy for NES, prior to formal Board consideration/approval. The Strategy has also been considered in detail at the Board development session on 18 April 2024.

# 6. Assessment/Key Issues

- 6.1. The Scottish Government's policy on combatting the climate emergency, as it pertains to the NHS in Scotland was set out in DL (2021)38, and it was published in November 2021, during the COP26 Conference in Glasgow. It was then followed up with the publication of the NHS Scotland Strategy in August 2022. Under the Policy, all Boards were required to appoint an Executive Lead, a Board Champion, and subsequently a requirement was set to appoint a Clinical Lead. Boards are also required to publish a Strategy for Climate Emergency and Sustainability and to report appropriately and periodically on their progress in meeting the aims of the Policy.
- 6.2. The recent announcement by the Scottish Government of the removal of the target of reducing carbon emissions by 75% by 2030 will not have any immediate impact on NHS Boards, and the existing policy and strategy remain in force. It should be noted that the target of becoming carbon-neutral by 2024 remains in place.
- 6.3. Within NES a Climate Emergency and Sustainability Group was established, chaired by the Director of Finance, and with a Clinical Sub Group chaired by the Postgraduate Dean of Dental Education. Those groups have been responsible for the production of the version of the Draft Strategy that is being considered by the Committee today. The report has also been considered by the NES Executive Team.
- 6.4. Although the Strategy has been discussed during the Board Development session on 18 April, the Audit and Risk Committee has also had the opportunity to discuss the Strategy formally, as the responsibility for Climate Emergency and Sustainability has been delegated to the ARC by the NES Board. ARC considered the Strategy on 24 April 2024.
- 6.5. The Strategy sets out the Board's aims under the following headings:
  - Education and training
  - Clinical
  - Transport and Travel
  - Procurement
  - Digital Infrastructure
  - Governance and Policy
  - Waste
  - Capital Projects and Adaptation
  - Greenspace and Biodiversity

- 6.6. Under each aim, the Strategy sets out the current assessed position for NES and what our commitment is under each aim for improvement over the course of the Strategy period, 2024-2027. The Board should note that this Strategy covers the next three-year period, but it will require to be refreshed thereafter to make sure that the work of NES remains focused and relevant to support the aims of NHS Scotland in achieving progress in combatting this long-term problem. Given the fast-moving nature of this global problem, the future iterations of the Strategy may require significant shifts in the directions of travel for NES and other NHS Scotland Boards.
- 6.7. Following discussion at the Board Development session and at the Audit and Risk Committee, a reference will be included in the Strategy, under Our Commitment in the Clinical section (Page 11). The proposed wording for this will be:

"One of the main aims of Realistic Medicine is for people using healthcare services and their families to feel empowered to discuss their treatment fully with healthcare professionals. Everyone should feel able to ask their healthcare professional why they've suggested a test, treatment or procedure, and all decisions about a person's care should be made jointly between the individual and their healthcare team. We will work to make sure that NES' education and training programmes allow healthcare professionals to have discussions with patients that take account not only of the direct clinical impacts and implications, but also of the wider environmental impacts of courses of action. This will allow healthcare professionals and patients to agree treatments that consider the wider impacts of decisions they might make."

6.8. Subject to Board agreement, this will be inserted into the final clean version of the Strategy that will be published. A reference to Realistic Medicine is also contained in the draft Action Plan (Page 5) at Appendix 2.

### **Draft Action Plan**

6.9. To accompany the Strategy that the Board is asked to approve, the Climate Emergency and Sustainability Group have been producing a Draft Action Plan across each of the thematic areas within the Strategy (set out in paragraph 6.5 above). The Draft Action Plan has still to be considered by the Climate Emergency and Sustainability Group, but it is attached as Appendix 2 for information for the Board.

| 7 | Recommendations | _ |
|---|-----------------|---|
| , | Pacammanastians | - |
|   | Necommendadons  |   |

- 7.1. To approve the proposed NES Climate Emergency and Sustainability Strategy at Appendix 1 of this report, including the proposed wording relating to Realistic Medicine contained in paragraph 6.7 above.
- 7.2. To note and comment on the draft Action Plan (Appendix 2) that will be discussed with the NES Climate Emergency and Sustainability Group.

|    | or to complete <b>checklist.</b> or to include any narrative by exception in Section 6 of the cover paper.   |
|----|--|
| a) | Have Educational implications been considered?  ☑ Yes □ No   |
| b) | Is there a budget allocated for this work?  ☑ Yes □ No   |
| c) | Alignment with Our Strategy 2023 – 26 People, Partnerships and Performance  ☐ 1. People Objectives and Outcomes ☐ 2. Partnership Objectives and Outcomes ☐ 3. Performance Objectives and Outcomes  |
| d) | Have key strategic risks and mitigation measures been identified?  ☑ Yes □ No  |
| e) | Have Equality, Diversity, Human Rights and health inequality issues been considered as per <u>Fairer Scotland Duty: Guidance for Public Bodies</u> and Corporate Parenting as per the <u>Children and Young People (Scotland) Act 2014?</u> ☐ Yes ☐ No |
| f) | Has an Equality Impact Assessment (EQIA) been completed or in progress for this piece of work?  ☐ Yes ☐ No   |

| g)    |             | cations as per DL (2021) 38?                                     |
|-------|-------------|--|
|       | $\boxtimes$ | Yes  |
|       |             | No   |
| h)    | Have        | you considered a staff and external stakeholder engagement plan? |
|       | $\boxtimes$ | Yes  |
|       |             | No   |
| Autho | r nam       | e: Jim Boyle   |
| Date: | 16 Ma       | ay 2024  |



# CLIMATE EMERGENCY AND SUSTAINABILITY STRATEGY 2024-2027





# **Foreword**

I am delighted to present the NHS Education for Scotland (NES) Strategy on Climate Emergency and Sustainability for 2024–2027 to support the wider NHS Scotland effort to address the climate emergency. The challenges facing our planet, our country and our healthcare systems because of the effects of the climate emergency are unprecedented and the impacts are already with us. These will only accelerate in future unless we take urgent action. We must act now, to mitigate the harms that will be caused to society which may be irreversible unless we act now.

NHS Scotland is an important partner in the fight against climate change, and the harms caused by the climate emergency will manifest themselves in a greater need for healthcare across the globe. It is essential therefore that our healthcare systems stand ready to support the global response, and for NES to play its part in that response.

In terms of sustainability, we must reduce our impact on natural and physical resources, so they are available in the long term, and that includes the resources that we have to deliver health and social care services, now and for future generations.

Healthcare is responsible for the discharge of over 4% of carbon emissions, which are the greatest cause of global warming. Healthcare systems, including the Health and Social Care system in Scotland, must therefore examine their own activities, and make necessary changes to delivery models, to make sure that they operate in such a way that enables them to reduce their causative effects on the climate emergency.

NES is a key enabler in supporting the wider NHS and Social Care sector in Scotland. As the principal provider of education and training to the workforce, we will influence how awareness of the climate emergency is raised and understood, and how and when changes to clinical practice are developed and embedded into our education and training programmes and technology development.

As part of our broader NES Strategy, we will be focusing on how we mitigate the impact of climate change in the way we use technology and innovation to support the development and delivery of our education and training for the Health and Social Care workforce. We will always seek to deliver education and training in ways that reduce carbon emissions while supporting the need for multi-disciplinary and team learning.

Those living in the most deprived communities in Scotland continue to experience poorer health and wellbeing and life expectancy is falling as a result. Improving population health, tackling health inequalities and action to address the climate emergency are interlinked. The resilience of communities to the impact of climate change and the actions to respond to it are not distributed equally across the population.

NHS Education for Scotland will look for opportunities to align our work on climate change and sustainability with our vision: "Supporting better rights-based quality care and outcomes for every person in Scotland through a skilled, capable and resilient health and social care workforce."

NES is also working to make changes to how we currently operate to reduce our own direct carbon emissions. How we operate our buildings, deliver our education and training and carry out travel for business activities will all be reviewed, and improvement programmes developed.

Given the importance to the entire planet of tackling this climate emergency with the utmost urgency, I present this Strategy to summarise NHS Education for Scotland's activity in support of the wider NHS and Social Care response. This Strategy covers the three-year period 2024 to 2027, but this Strategy will be reviewed on a regular basis, as the actions to address the climate emergency will be a long-term project for all of us.

Professor Karen Reid, Chief Executive, NHS Education for Scotland







Climate change presents one of the most significant risks to both physical and mental health that we face in the 21st century. The severity of the impact it will have on the health of populations and the planet depends on urgent action taken now, providing us with the opportunity to address both current and future threats with our choices.

The impact will not affect communities equally and principles of equity and the right to the highest attainable standard of health will underpin our approach to our Climate Emergency and Sustainability Strategy.

The Scottish Government has already published its Policy for NHS Scotland on the Climate Emergency and Sustainable Development (DL (2012) 38) in November 2021, followed by the publication of the NHS Scotland Climate Emergency and Sustainability Strategy in August 2022.



own estate through implementation of robust policies and practices, NHS Education for Scotland (NES) is in a unique position to effect real, long-term positive change through the discharge of its core statutory responsibility education and training for the NHS and social care workforce.

By teaching and training the NHS Scotland and social care workforce, NES can support the delivery of the national Strategy, including the achievement of net zero NHS by 2040. NES can help to support the implementation of a consistent level of knowledge and best practice, and to embed sustainability throughout the national workforce and thereby contribute to NHS Scotland's overall success in improving both our current position and future outcomes in health and sustainability.



# United Nations Sustainable Development Goals

The Sustainable Development Goals identified by the United Nations in their '2030 Agenda for Sustainable Development' (2015) are incorporated into Scotland's National Performance Framework, shown in the accompanying image.

The Scottish Government and NHS Scotland have committed to pursuing these goals within their own strategies to achieve a sustainable health service, and NES will join all other NHS Scotland Health Boards in contributing to this aim by utilising its unique strengths and position within the service.





# **Our Aims**

Our principal aims are to comply with the Scottish Government
Policy for NHS Scotland on the Climate Emergency and Sustainable
Development and to support the delivery of the <a href="NHS Scotland Climate">NHS Scotland Climate</a>
Emergency and Sustainability Strategy. To that aim we are structuring our efforts in a number of key areas of activity.





# **Education and Training**

We are collaborating with other health Boards and social care organisations to implement meaningful and accessible education and training programmes that actively embed a strong climate emergency and sustainability culture in all areas of our work.

We are focusing on developing education and training that can be delivered in a remote/hybrid manner to reduce travel and minimise the effect on service provision within other NHS health and social care settings.

We are designing and implementing meaningful, data-driven behaviour change campaigns to inform frontline and other staff on best practice for climate emergency and sustainability in their area.



### Clinical

We are working with our clinical colleagues to ensure robust, consistent education and training on the specific sustainability requirements related to clinical practice and waste.



# **Transport and Travel**

Work-related travel is minimised to the furthest extent possible, leading with a 'digital first' approach to the delivery of education and training where possible, as well as for day-to-day business requirements.

The health and wellbeing of our staff in terms of travel for work purposes is factored into decisions regarding NES's overall estate and reflected in our travel policies.

We develop resources to assist attendees of training events. Where in-person learning is required, we make informed choices about their travel to the education and training site.



### **Procurement**

We are proactively engaging and complying with all legislation, regulations and other guidance on measures to assess the climate emergency and sustainability credentials of contractors and other partners from whom we commission services to support our own activities.

Our tendering, evaluation and contracting processes pay full regard to the activities that partners carry out to ensure that they, in turn, support the aims of the national Strategy for NHS Scotland. Our tendering documentation explicitly seeks assurance from partners that they are working towards measures to reduce harmful emissions.



# **Digital Infrastructure**

A strategic plan for Infrastructure & Operations will include the rationalisation of all data centres and server rooms, and decommissioning/repurposing of hardware while capturing the reduction in carbon metrics. Scoping of any new data centre requirements will also consider and reflect sustainability requirements in support of significantly reducing our environmental impact.



# **Governance and Policy**

We are developing a robust governance structure to monitor and progress our approach to sustainability within NES, ensuring we stay on track in achieving our goals.



### Waste

In our buildings, education and training programmes we prevent and/or reduce unnecessary waste in the first instance, and reuse and/or re-purpose items where possible. Where no further use can be found we prioritise recycling of suitable waste.



# **Capital Projects and Adaptation**

Energy efficiency is considered when making changes to the NES estate, and energy saving measures implemented where practically, and financially, viable.

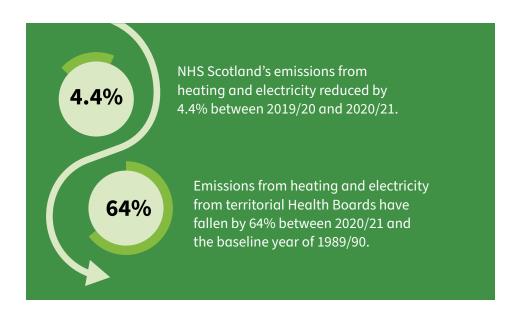


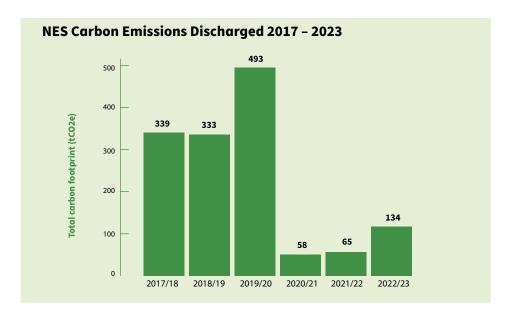
# **Greenspace and Biodiversity**

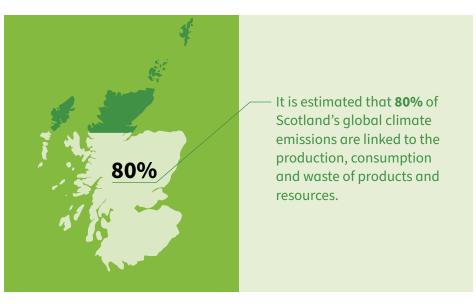
Where services under NES management have access to greenspace, information and guidance are provided to staff to maximise its utilisation within the service.



# **Our Impact**









# **Education and Training**

# People, Partnership, Performance

NHS Education for Scotland (NES) helps people who work in health and social care to get the education and skills they need to provide good quality care for people in Scotland. This puts our Board in a unique position to educate, train and influence the knowledge and behaviour of staff to embed a culture of health equity and sustainability within a broad spectrum of clinical and non-clinical areas of health and social care. Focusing on delivering robust, accessible education and training on sustainability to disseminate consistent information and best practice to health Boards and social care organisations will contribute significantly to meeting environmental targets, and achieving overall sustainability and population health equity aims. NES will collaborate with Public Health Scotland to ensure our education and training on sustainability reflects the link between climate change, population health and equity.

# **Digital First**

NES's 'digital first' approach, both to the work of its own staff and the delivery of training, is influential in informing the Board's direction of travel in terms of sustainability. Not only does this reduce our own emissions, leading to a smaller carbon footprint, but we can help other Boards and social care organisations eliminate needless travel by opting for remote learning where possible.

While we understand that, especially in health and social care settings, in-person learning will always be required for certain areas and specific skills, our aim is to move to a digital model outwith these exceptions. Work to ensure consistency and quality in the delivery of remote training is paramount, and the investment of time by our staff in this will see benefits across NHS Scotland and the wider social care sector.

# **Collaborative Delivery**

Collaboration between health Boards and social care organisations is one of our most important tools in tackling the climate crisis. In 2024 we are embarking on a project with National Services Scotland (NSS) to develop and deliver a suite of eModules providing training on both general aspects and specific topics within sustainability.

Utilising the specialist knowledge of their team, the modules will be developed internally within NSS. Following this, NES will be instrumental in hosting and delivering these to the NHS Scotland workforce, including data tracking for uptake and completion.



# Clinical

# Where we are-2024

While NES does not carry out direct clinical work, we have various directorates that represent clinical areas and a range of networks that bring clinical staff together to effect change in their area. Our position in centralising the response to education and training needs within the NHS Scotland and social care workforces allows us unique opportunities to influence operational elements throughout health and social care.

# **Our commitment**

NES is committed to continuing to engage both internal and external clinical staff with specialist knowledge of their area and utilise this engagement to develop appropriate approaches to address the sustainability needs within clinical practice. To help achieve this, the NES Climate Emergency and Sustainability Clinical Subgroup was established in 2023 and is working towards formalising their approach throughout 2024 and beyond.





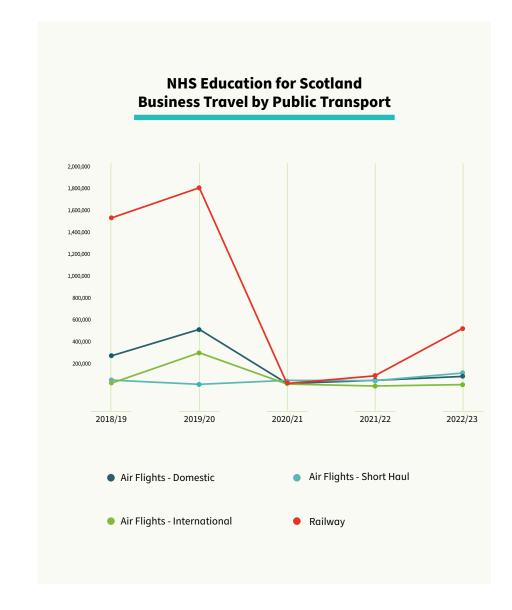
# **Transport and Travel**

### Where We Are - 2024

Mirroring the trend seen across many sectors following the COVID-19 pandemic, business travel for NES declined significantly from early 2020 and has remained well below pre-pandemic levels in 2024.

However, where the delivery of in-person education and training is deemed essential and unavoidable, there are implications for travel in terms of NES staff, trainees and external trainers travelling to delivery sites.

As the Board continues with it remote-friendly approach to working and to delivering training and education, new data will be required to accurately measure the environmental impact of the reduction in, as well as residual travel.



# **Our Commitment**

We are continuing with our approach to supporting remote-friendly working, education and training and to encourage consideration of 'digital first' methods of service delivery to further reduce the impact of travel by staff, trainers and attendees. This will ensure that no unnecessary travel is undertaken for meetings, training or events that can be held effectively remotely. It will also establish provision of necessary support for all staff.

Additionally, the NES travel policy will be reviewed and updated to reflect the prioritisation of a digital approach. This will provide information on the 'travel hierarchy' and guidance on applicable exceptions.

To ensure the Board's continued improvement, new metrics for data collection on travel associated with NES's work will be developed. This will be carried out through cross-department collaboration to consider all elements required in measuring the Board's impact, and a practical approach to meaningful collation implemented. The ability to benchmark is crucial in NES being able to set and achieve targets.





# **Procurement**

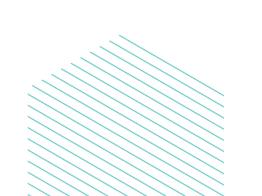
# Where we are-2024

NES is uniquely positioned to positively impact the procurement process within NHS Scotland. In support of the Sustainable Procurement Duty we also believe that it would be most effective if NHS Scotland Procurement act as one. There is now an established and formalised steering group (SPSG) reporting to the NHS Scotland Procurement Services Senior Management Team (PS-SMT), who formulate and drive action planning across all procurement teams.

The steering group is chaired by a member of the PS-SMT with a core of procurement professionals on the group, sustainability experts and representation from Scottish Government. It also has links to other sustainability groups such as the National Environmental Sustainability Group and Transport & Logistics Services Experts Group. The role of the SPSG is to provide a core oversight group for sustainable procurement activities across NHS Scotland.

We continue to ensure that there is a focus on Sustainable Procurement training for staff which is critical in addressing the wider issues with sustainable procurement.

While NES's procurement of physical goods is limited in the context of the organisation as a whole, the service providers utilised by the Board are required to give due consideration in relation to their environmental impact.





# **Our commitment**

Our Procurement Strategy is structured to support effective sustainable procurement across NES to ensure that we deliver the NES vision. It allows NES to respond to the changing public-sector Procurement environment whilst encouraging continual improvement and innovation. Our outcomes are aligned to the Sustainable Procurement Duty, which requires us to buy in a way which is:

- > good for businesses and employees
- > good for society
- > good for places and communities
- > open and connected

NES recognise the commitment of the educational institutions we work with in terms of their own sustainability strategies. We will proactively engage with all guidance from the Scottish Government on measures to assess the sustainability of contractors engaged in our procurement process.





# **Digital Infrastructure**

### Where we are -2024

The NES Digital Infrastructure very much reflects the pre COVID19 world where supporting a remote-working user base, and delivering remote Digital Services were not the primary considerations they are today.

Typical Hardware lifecycles of three to five years mean that NES has an ideal opportunity over the next few years to reimagine how we better meet our commitments to our staff and service users, with heavy emphasis placed upon delivering on our environmental responsibilities.

# **Our commitment**

We are committed to consolidation and reduction of our on-premises architecture, alongside maintaining and being an exemplar for the 'Cloud-First' approach which is a cornerstone of NES being able to demonstrate our green credentials.

We will ensure that our digital infrastructure and associated supply chains are rationalised, responsible, and resilient, creating environmental and economic benefits by default.

Our decision-making processes will ensure that the climate emergency and sustainability impacts are always considered and we will focus on three key outcomes:

- **1** The reduction of carbon and cost through removal of waste (redundant services, duplication, legacy systems)
- **2** Consolidation of services upon common platforms to ensure efficiencies
- **3** Enterprise Architecture as strategy to facilitate us to meeting all our sustainability and environmental objectives.



# **Governance and Policy**

## Where we are-2024

NES's development of its sustainability governance is ongoing, utilising the knowledge and work of staff throughout different directorates within the organisation.

Our existing policies that impact environmental sustainability, such as the NES travel policy, require updating in line with this Strategy. New policies will come into being based on the aims and targets identified by the Board.

# **Our commitment**

In all our decision-making processes, we will make sure that climate emergency and sustainability impacts are considered, where appropriate. We will create a culture of consistency and accountability in relation to environmental sustainability in how we structure our service delivery.

We will make sure that our policies are updated with evolving best practice in addressing climate emergency and sustainability. We will also continue to build relationships with other stakeholders to advance our compliance with the NHS Scotland agenda, and to support the sharing of knowledge and resources in this area.





# Waste

## Where we are-2024

The creation of waste happens at all levels of industries, and healthcare generates both universal and specific types of waste that must be reduced (where prevention isn't possible), handled, processed and, if required, disposed of in a way that reduces negative environmental outcomes.

Some of these have already been addressed, such as paper and food waste being actively prevented within NES's office sites, through only printing when justifiably required and the conscious ordering of catering to ensure no food waste is generated. In others areas, especially in clinical settings, efforts to determine the most beneficial approach are ongoing.

# **Our commitment**

NES recognises its role in preventing, reducing and processing waste in both its own estate as well contributing towards how this is carried out in other areas such as clinical settings.

Continued improvement at a Board level to minimise the contribution of NES sites is a priority. We will work towards a comprehensive circular economy approach, adhering to the waste hierarchy by preventing and reducing unnecessary waste in the first instance, reusing/repurposing items where possible, recycling where no further use can be found, and recovering any elements of the waste where practical prior to disposal where unavoidable.

Additionally, waste will remain a focus of development and training for those working in health and social care roles, to ensure staff are informed on how specific waste is reduced and dealt with. Current areas NES staff are involved in include disposal of medication and prescribing of inhalers.





# **Capital Projects and Adaptation**

### Where we are -2024

While NES has a relatively small physical estate, this does not diminish our responsibility in contributing to NHS Scotland's attainment of net zero at the earliest opportunity. Work has been carried out over recent years within each site to assess the level of utilisation of office and meeting space to inform decision making in relation to the provision of on-site facilities.

While reductions and consolidations are being identified in this area, opportunities for prudent investment within the retained estate must also be evaluated to increase efficiency and reduce the Board's remaining environmental impact.

# **Our commitment**

Over the coming years, NES will be reviewing its property estate to make sure it is fit for our business needs, but also is no greater than it needs to be. As well as driving out cost efficiencies for the benefit of the wider NHS Scotland, we will also be conducting the review with tackling the climate emergency very much at the forefront of our considerations. Energy efficiency and sustainability will feature very heavily in the decisions we will make, and our overall business model will also be structured in a way that minimises our impact on the environment. Decision taken will be taken with the aim of contributing substantially to NES's progress in achieving its net zero targets in relation to its physical estate.

Within the retained estate, an evaluation of potential changes that can improve the environmental performance of sites will be carried out. These can be implemented during required or routine maintenance, or as standalone projects where the justification exists.

When moving locations or removing sites from the estate, NES is committed to eliminating any unnecessary waste by repurposing, relocating and recycling as much of the obsolete elements of the former site as is practically possible.





# **Greenspace, Nature and Biodiversity**

### Where we are -2024

Due to the nature of its physical estate and limited involvement in clinical settings, Greenspace, Nature and Biodiversity is a more limited area for NES. However, there are two distinct areas where we can have a positive impact on behaviour and, therefore, outcomes: sustainable prescribing and the disposal of medication and medical waste, and service access to greenspace.

While NES has no significant greenspace within its estate, other areas related to NES's work, such as childcare facilities and care homes, often do. In our training and education programmes we will raise awareness of the potential to use such spaces for in the provision of health and care services.



# **Our commitment**

In our development and implementation of training throughout the NHS Scotland workforce, our aim is to effect meaningful learning in all areas with the potential to have an impact on the organisation's net zero progress. While many of these can be easy to identify, some can be less obvious. The effects of medication in water supplies and impacts of certain inhalers and medical gases on the environment are pertinent examples of these within a healthcare setting. Robust education and training on prescribing and disposal will contribute to an improved environmental outlook in these areas.

Providing practical, accessible guidance on utilising greenspace, where available in services, to access both the environmental benefits and improved health outcomes will allow NES to positively impact an area where it has reduced opportunities in its own estate. This will inform the development and dissemination of relevant information in collaboration with other health Boards and areas.



## **ALTERNATIVE FORMATS**

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



# **NHS EDUCATION FOR SCOTLAND**

Westport 102 West Port Edinburgh EH3 9DN

www.nes.scot.nhs.uk

© NHS Education for Scotland 2024

You can copy or reproduce the information in this document for use within NHSScotland and for non-commercial educational purposes. Use of this document for commercial purposes is permitted only with the written permission of NES.

NESD1914 | Produced by the NES Design Service



# CLIMATE EMERGENCY AND SUSTAINABILITY ACTION PLAN 2024-2027





# **Introduction**

To support NES' ambition, we have developed a detailed Action Plan comprising both short- and long-term actions and goals. The Action Plan includes actions that can be implemented promptly and those that may need a longer lead in time.

The Climate Emergency and Sustainability Action Plan will be reviewed annually and updated to reflect and report on progress with regular reports to the NES Audit and Risk Committee and the NES Board.

We will ensure that our actions complement national such as the National Performance Framework, the Scottish Government's emissions reduction targets and the Scottish Climate Change Adaptation Programme.





# **Education and Training**

| Action   | Owner   | Timescale        |
|--|---|------------------|
| > We will ensure that Climate Emergency and Sustainability is a key component of how NES delivers education and training.                                    | <ul> <li>Director of NHS Scotland<br/>Academy, Learning &amp; Innovation<br/>Directorate</li> </ul> | > Continuous     |
| > Work with NSS to develop an initial eModule for staff training to provide a general overview of the NHS's role in addressing the climate crisis.           | > Workforce Directorate   | > June 2024      |
| > Work with NSS to expand the collection of eModules available to staff to include further information on both broad and specific topics.                    | > Workforce Directorate   | > September 2024 |
| > Develop a robust tracking and reporting process in relation to staff<br>participation in the sustainability modules developed by NSS and hosted<br>by NES. | > Workforce Directorate   | > August 2024    |
| > Amend Dental Vocational Training curriculum to incorporate a learning outcome on sustainability.   | > Dental Directorate  | > 1 August 2024  |
| > Deliver sessions on Climate Emergency and Sustainability in the Dental VT study day programme.   | > Dental Directorate  | > 31 July 2025   |



# **Education and Training** (continued)

| Action   | Owner                                | Timescale         |
|--|--------------------------------------|-------------------|
| > Identify and promote opportunities to further influence how awareness of the climate emergency is raised and maintained through education and training resources, and how changes to clinical practice are developed and embedded into our programmes. | > All Directorates                   | > Medium          |
| <ul> <li>Incorporate environmental sustainability messages in all new or updated<br/>national dental clinical guidance provided by Scottish Dental Clinical<br/>Effectiveness Programme (SDCEP).</li> </ul>  | > Dental Directorate / Doug Stirling | > Medium          |
| > Work with Colleges and Faculties to encourage inclusion of sustainability and healthcare implications of climate change in postgraduate curricula.   | > Medical Directorate                | > 18 to 24 months |
| > Support of Quality Improvement projects in climate change and sustainability with cascading of support via trainers.   | > Medical Directorate                | > Continuous      |
| <ul> <li>Ongoing development of new methods of delivering training and<br/>education via online resources and SIM.</li> </ul>  | > Medical Directorate                | > Continuous      |
| > Embed principles of sustainability, where relevant, in educational resources and promote relevant educational resources to support sustainable Care.   | > Pharmacy Directorate               | > Ongoing         |
| > Deliver education using a variety of formats to increase awareness of<br>Sustainability across the Health and Social Care workforce  | > Pharmacy Directorate               | > Ongoing         |



# Clinical

| Action  | Owner                 | Timescale        |
|---|-----------------------|------------------|
| > Identify and promote opportunities to embed the NHS Climate<br>Emergency Strategy into all NES education and training resources.  | > All Directorates    | > Short          |
| > Where appropriate, design education and training that can be delivered in remote/hybrid way   | > All Directorates    | > Short / Medium |
| > We will ensure that pillars of Realistic Medicine feature consideration of Climate Emergency & Sustainability aspects when designing healthcare plans. This will particularly apply to the pillars of shared decision making and reducing harm and waste. | > Medical Directorate | >                |



# **Transport and Travel**

| Action  | Owner                 | Timescale         |
|---|-----------------------|-------------------|
| > Evaluation of all face-to-face meetings to ensure added value and if none – default to virtual meetings.  | > All Directorates    | > Continuous      |
| > Virtual recruitment processes for all trainees.   | > Medical Directorate | > Continuous      |
| > Review of training placements outside of base region to identify what is essential to meet curricular requirements and resources that require development to support reduction in rotation. | > Medical Directorate | > 18 to 24 months |
| > Review potential of move towards longer placements in rotations to minimise travel.   | > Medical Directorate | > 18 to 24 months |



# **Procurement**

| Action   | Owner                     | Timescale    |
|--|---------------------------|--------------|
| > Engage critical suppliers to understand their net zero plans, mapping out anticipated scope three emissions.   | > Finance and Procurement | > Q3 2024    |
| > Promote the use of the NHS Scotland Community Benefits Gateway within the NES supply chain   | > Finance and Procurement | > Continuous |
| > Ensure all Procurement staff have been fully trained on the Scottish<br>Government's Sustainable Procurement Tools relating to Climate Literacy<br>and Circular Procurement modules. | > Finance and Procurement | > Q4 2024    |



# **Digital Infrastructure**

| Action  | Owner          | Timescale |  |
|---|----------------|-----------|--|
| > <b>Datacentre Consolidation:</b> Work underway to evaluate Microsoft proposal of migrating NHS Scotland VMWare environments into their Azure Cloud. Should NES adopt this solution, this may significantly reduce or remove the requirement for any on-premise Datacentres. This strategic decision must be carefully considered, and as such the evaluation and decision will conclude Q3 2024.  | > David Wilson | > Q3 2024 |  |
| > Carbon Footprint: Produce and disseminate an environmental impact report following removal of redundant hardware from all data centres.   | > David Wilson | > Q3 2024 |  |
| Work to remove redundant hardware from all datacentres has been ongoing, and some sites have been cleared entirely. Following completion, an environmental impact report will be produced and disseminated. This work is scheduled to conclude Q3 2024.   |                |           |  |
| > Infrastructure refreshment programme proposals: Much of the NES Infrastructure hardware is approaching end of life and will soon require modernisation in order that it does not fall out of support by the vendors. The hardware encompasses Server, Network, Unified Communications and some Endpoint, and as such there is an opportunity to align the Enterprise Architecture, and to do so in a 'Cloud First' context. To this end a comprehensive modernisation proposal with included finance will be completed Q4 2024. | > David Wilson | > Q4 2024 |  |



# **Governance and Policy**

| Action  | Owner   | Timescale       |
|---|---|-----------------|
| > Climate change and sustainability will be referenced in all new policy and guideline development as a core requirement.   | > All Directorates                                | > Continuous    |
| > The Audit and Risk Committee and the NES Board will continue to receive updates from the Executive Lead and the NES Climate Emergency and Sustainability Group and Clinical Sub Group,  | > Director of Finance                             | > Continuous    |
| Nominations will be sought for an employee-focused and maintained<br>sustainability group, to help to further promote awareness of the<br>challenge facing NES as an NHS Scotland Board and to generate<br>additional initiatives for addressing the challenge. | > NES Climate Emergency &<br>Sustainability Group | > End June 2024 |



# Waste

| Action  | Owner              | Timescale    |
|---|--------------------|--------------|
| > The portfolio of education and training products offered by NES will build in consideration of how the entire NHS Scotland workforce, and those from whom we procure services can play a role in reducing waste and recycling materials where possible. | > All Directorates | > Continuous |
| > Review how NHS Education for Scotland (NES) tracks its waste and create a process for reporting on this.  | > Property & FM    | > 6 months   |



# **Capital Projects and Adaptation**

| Action  | Owner                 | Timescale    |
|---|-----------------------|--------------|
| > Where changes to the NES property estate are being considered, Climate Emergency and Sustainability considerations will be taken account of in decision making. Funding will also be explored to effect any works or accommodations to deliver Climate Emergency and Sustainability improvements. | > Director of Finance | > Continuous |



# **Greenspace, Nature and Biodiversity**

| Action   | Owner              | Timescale    |
|--|--------------------|--------------|
| > Options will be explored for making sure that interaction with greenspace<br>by NHS and social care staff can be included in our education and<br>training programmes. | > All directorates | > Continuous |



#### **ALTERNATIVE FORMATS**

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



#### **NHS EDUCATION FOR SCOTLAND**

Westport 102 West Port Edinburgh EH3 9DN

www.nes.scot.nhs.uk

© NHS Education for Scotland 2024

You can copy or reproduce the information in this document for use within NHSScotland and for non-commercial educational purposes. Use of this document for commercial purposes is permitted only with the written permission of NES.

NESD1936 | Produced by the NES Design Service



#### **NHS Education for Scotland**

**Public Board Meeting** 

Agenda Item: 8b

Date: 23 May 2024

#### 1. Title of Paper

1.1. Draft 2024/25 NES Delivery Plan (as part of draft Three Year Delivery Plan for 2024/27)

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

- Christina Bichan, Director of Planning & Performance
   Alison Shiell, Planning & Corporate Governance Manager
- 3. Lead Director(s)
- 3.1. Christina Bichan, Director of Planning & Performance

#### 4. Situation/Purpose of paper

- Following the creation of Medium Term Plans (MTPs) as part of the 2023-24 NHS Scotland (NHSS) planning guidance, all NHSS Health Boards have been asked to develop their MTPs into Three Year Delivery Plans with detailed deliverables for 2024/25 and indicative actions for 2025/26 and 2026/27.
- This paper presents the draft NES Three Year Delivery Plan for 2024/27 to the Board for approval **in principle**. Alongside the information and context provided in the cover paper, the delivery plan consists of an overarching narrative document and a high level overview of our three-year plan (Appendix 1), a set of detailed deliverables for 2024/25 (Appendix 2) and the NES Medium Term Plan (Appendix 3).

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

5.1. The 2023/24 NHSS planning guidance set out the first steps towards a greater level of co-ordination across NHSS after the volatility of the previous three years as a result of the COVID-19 pandemic and a changing operating environment. With a particular focus on the delivery of services based on population, NHSS Boards were

asked to produce an 2023-24 Annual Delivery Plan and Medium Term Plans for 2023-26.

5.2. The current NHSS planning framework is shown in Figure 1 and highlights how the component parts of NHSS support Boards and partners in planning and delivering services to meet population needs. Work is continuing across both NHSS and Scottish Government (SG) to establish increased planning coherence at national, regional and local levels.

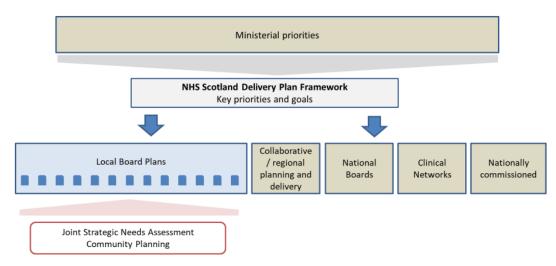


Figure 1

- 5.3. On 4 December 2023 a letter from Richard McCallum (Director of Health and Social Care Finance, Digital and Governance / SG) and John Burns (NHS Scotland Chief Operating Officer) issued to all Boards and set out a joint commissioning approach for 2024/25 financial and delivery plans. Enclosed with the letter, Boards received a set of guidance documentation to support the development of aligned financial and delivery plans.
- 5.4. The strategic context for the 2024/25 planning approach is informed by the former First Minister's Equality, opportunity, community: New leadership A fresh start outcomes document, published in April 2023. The document sets out a refreshed strategic context for NHSS whilst remaining consistent with the recovery drivers that framed the 2023/24 planning guidance.
- 5.5. The draft NES Delivery Plan was considered by the Board in private session before submission (in draft form) to SG March 2024. It has since been further developed with input from all NES directorates and updated to reflect the most recent position in respect of our delivery priorities and financial position. Regular discussions with our SG Sponsor Team and verbal feedback received specifically on our draft Delivery Plan, have also supported development of this updated document.

#### 6. Assessment/Key Issues

- 6.1. For 2024/25, Boards have been asked to build on the 2023/24 planning approach and develop their MTPs into Three Year Delivery Plans that are aligned to both their Financial Plans and ministerial priorities. The Three Year Delivery Plan must include detailed deliverables for 2024/25 and indicative actions for 2025/26 and 2026/27.
- 6.2. Whilst delivery plans must link to the high-level priorities contained in the 2024/25 planning guidance, it is intended that Boards also have the flexibility to plan within their own financial and delivery context to ensure plans are both ambitious and achievable.
- 6.3. Building on Figure 1, which demonstrates how the work of all Boards is guided by ministerial priorities and the NHS Scotland Delivery Plan Framework, Figure 2 seeks to set this Delivery Plan in the context of our organisation and demonstrate its position in respect of other key corporate documents.

Figure 2 Setting NES Corporate Strategy •Learning & Education Strategy Direction Climate Change and Sustainability Strategy •Medium Term Plan & Annual Delivery Plans Delivering •Financial Plan •Workforce Plan Intent Anchors Strategic Plan •Transformation Routemap Performance Management Measuring Approach including Strategic Key Performance Performance Indicators

6.4. Approval in principle for this draft delivery plan is being sought at this stage in recognition of the ongoing discussions with SG colleagues which are being facilitated by our Sponsor Team, and the further evolution and amendment which may be necessary as a result. The Board will be kept apprised of these amendments through regular updates, with delivery performance being reported on a quarterly basis in line with the Board's schedule of business.

#### 7. Recommendations

| 7.1.                   | The Board are asked to approve the 2024/25 NES Delivery Plan <b>in principle</b> , noting that this is a dynamic document which will further evolve over the course of the year.  |
|------------------------|---|
| a)                     | Have Educational implications been considered?  ☑ Yes □ No  |
| b)                     | Is there a budget allocated for this work?  ☑ Yes □ No  |
| c)                     | Alignment with Our Strategy 2023 – 26 People, Partnerships and Performance  □ 1. People Objectives and Outcomes □ 2. Partnership Objectives and Outcomes □ 3. Performance Objectives and Outcomes   |
| d)                     | Have key strategic risks and mitigation measures been identified?  ☐ Yes ☐ No   |
| e)                     | Have Equality, Diversity, Human Rights and health inequality issues been considered as per Fairer Scotland Duty: Guidance for Public Bodies and Corporate Parenting as per the Children and Young People (Scotland) Act 2014?  ☐ Yes ☐ No |
| f)                     | Has an Equality Impact Assessment (EQIA) been completed or in progress for this piece of work?  ☐ Yes ☐ No  |
| g)                     | Have you considered Emergency Climate Change and Sustainability implications as per DL (2021) 38?  ☑ Yes □ No   |
| h)                     | Have you considered a staff and external stakeholder engagement plan?  ☐ Yes ☐ No   |
| Christ<br>May 2<br>NES | ina Bichan / Alison Shiell<br>024   |



# 2024/25 DRAFT Annual Delivery Plan

**Template: ADP1** 

**NHS Board: NHS Education for Scotland** 

# **2024/25 Annual Delivery Plan Introduction**

As the education, training, workforce development, data and technology provider for health and social care in Scotland, NHS Education for Scotland (NES) supports people who work in health and social care to get the education, training and skills they need to provide good quality care for people in Scotland.

Our vision and purpose are set out in our <u>Corporate Strategy 2023-26</u>, and through the delivery of our work programmes we are seeking to create a workforce that meets the needs of the health and social care system and the people of Scotland - by working in partnership with our staff, learners and stakeholders.

As an organisation, we are adaptable, creative and responsive to the needs of the workforce and the communities they serve. We work with our learners, educators, partners, stakeholders and people with lived and living experience to continually improve our education and training to support good quality health and social care. We do this by developing learning that has robust academic underpinnings and is informed by research.

We use data and intelligence to help us plan, in partnership for the future, using technology and innovations to support the best clinical and social care practice and education and training.

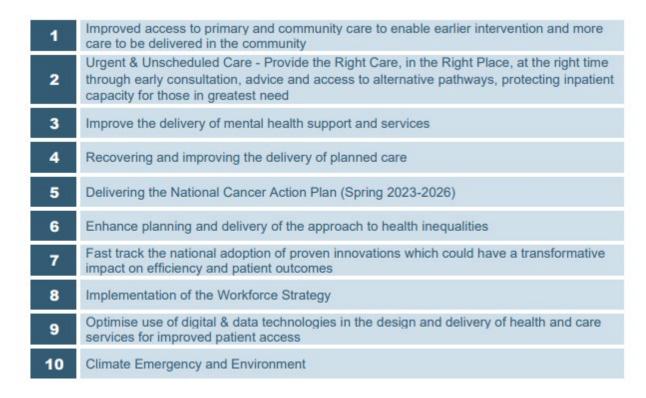
We are firmly committed to improving population health, reducing health inequalities and working nationally and locally with partners to make a positive and lasting impact to the wellbeing of the people of Scotland.

Our Annual Delivery Plan (ADP) for 2024/25 as set out herewith and in Appendices 1 and 2, outlines our intended areas of focus for the 2024/25 financial year in the context of our NES Strategy 2023-26 and the Medium Term Priorities, agreed with our Scottish Government sponsor team in 2023 as part of developing our Medium Term Plan (Appendix 3). This document sets out our delivery intent aligned to the approved, NES Financial Plan for 2024/25. It is however recognised that this ADP will continue to evolve in line with ongoing dialogue with the Scottish Government Health and Social Care Directorate in respect of priorities and will thus be updated regularly throughout the year.

# **Section A.1: Recovery Drivers**

Our Delivery Plan has been developed in line with NHS Scotland Delivery Plan Guidance issued for 2024/25, taking account of ministerial priorities and ongoing activity to achieve more coherent planning across the health and social care system. The Plan seeks to set out what will be delivered in the coming year in support of the Medium Term Plan which was developed during 2023/24 and thus we have continued to reflect our alignment with the national drivers of recovery. As a national Health Board with a remit for educating and training the health and social care workforce, the work of NES spans and supports all 10 of the recovery drivers, outlined below. Through our work we support better rights-based quality

care and outcomes for every person in Scotland and play an important part in reducing health inequalities in communities across Scotland.



A high level overview of our deliverables for 2024/25 is set out in Appendix 1, with the alignment to the recovery drivers shown, clearly demonstrating how our priority work areas align with and support the national recovery effort. It should however be noted that in some instances more than one driver would have been appropriate given the nature and breadth of much of our work.

Within Appendix 2 we have articulated 175 deliverables for 2024/25, some of which are dependent on funding that is yet to confirmed. Quarterly milestones have also been provided to ensure delivery of our plan can be subject to robust performance management and progress reporting.

Deliverables have been aligned to our Medium Term Priorities, strategic themes and our strategic KPIs to build a picture of how the activity carried out throughout 2024/25 will contribute to the achievement of NES's longer term goals and strategic objectives as well as national priorities.

This delivery plan has been developed in line with the general Financial and Delivery Planning guidance provided to all Boards in December 2023. Where appropriate (e.g. NHS Scotland Academy) deliverables have been developed in collaboration with our partner Boards and shared across our Plans.

Through the National Directors of Planning Group, we are supporting and participating in an integrated approach to recovery and delivery planning across NHSScotland. We are also actively participating in the National Boards Collaborative, where we are seeking to maximise the efficiency and effectiveness of arrangements across Boards to enhance existing collaborations and reduce cost. This builds on work outlined in our 2023/24 ADP in respect of forging strategic partnerships which add value such as our work with SAS, NHS24 and the

North Boards on workforce diversification and our partnership with NHS Golden Jubilee through the NHS Scotland Academy.

#### **Section A.2: NES Priorities**

Appendix 2 outlines the deliverables in respect of our work priorities for 2024/25 and has been shaped in the context of our 14 Medium-Term Priorities (presented in Table 1 / page 5), Medium-Term Plan (Appendix 3) and the NES Corporate Strategy for 2023-26. It also reflects national priorities in respect of health and social care and the specific commissions received to date from Scottish Government Health and Social Care Directorate for delivery during 2024/25.

An extension of the strategic priorities outlined in the NES Strategy into 2026/27 and beyond has been assumed for planning purposes given the ambitious nature of the direction set, its alignment with national recovery drivers and the significant support expressed to date by our stakeholders.

#### **Table 1: NES Medium Term Priorities**

- 1 Continue to provide leadership for and delivery of high quality education, training and workforce development, including:
  - Advising on the education and training capacity for health and social care disciplines across Scotland to ensure it meets future workforce requirements.
  - Managing recruitment and progression for many health and social care professions including medical, dental, pharmacy, optometry and health care science.
  - Refocusing elements of medical education to improve trainee experience in partnership with SG, 4 nations, Boards, GMC, Royal Colleges and other relevant partners.
  - Delivering education, training and workforce development activity to support continuous professional development, role development and transformation across the range of health and social care disciplines.
  - Providing a modern, engaging, attractive, digital learning platform/learning management system.
  - Developing and delivering accelerated training programmes through NHS Scotland Academy
- Improve the range, quality and granularity of workforce data, through understanding and ensuring we meet user needs with initial focus on official published NHS workforce statistics then extending to all other workforce data including in respect of the unregistered workforce. In addition to understanding and responding to user needs this will also be done through the development, promotion and adoption of coherent systems across partners. Undertake a continuous review of priority areas across health and social care in respect of data gathering and analysis. Linked to this, improve the analysis and reporting of data, providing a holistic understanding of the characteristics of the health and social care workforce including entry routes, career paths, skills mix and attrition.

In service of the Digital Health & Care Strategy, continue to lead on development of the National Digital Platform in support of major programmes of work as prioritised by the Enabling Technology Board, including, but not limited to, NHS recovery, major system replacement, vaccinations, digital prescribing and dispensing, diabetes support, workforce data and identity management and supporting innovation via the ANIA programme. In addition to this, lead on the technical delivery of the Digital Front Door programme and continue to deliver on the Digitally-Enabled Workforce Programme. Phase 1 of the redesign of the Turas platform to provide an accessible, dynamic learning and education platform for Health and Social Care alongside development of a NES prospectus. Work with the Chief Scientist's Office, Scottish Health and Industry Partnership Group, 5 Accelerated National Innovation Adoption (ANIA) Pathway, Innovation Design Authority and HEIs to scope the skills and training required to deliver and implement health care research, development and innovation to inform the learning needs of the health and social care workforce. Working with partners across the system and Centre for Sustainable Delivery in .6 particular, lead on the identification, assessment and implementation of new workforce models which involve role re-design and transformation to optimise care pathways, complementing wider service reform and transformation activity being driven forward through the Care and Wellbeing Portfolio. 7 Build the capability of the Centre for Workforce Supply to develop resourcing strategies which address workforce supply shortages and assist NES and local boards in articulating the case to overcome said shortages. The Centre will provide centralised co-ordination and recruitment expertise, supporting local Board and Health and Social Care Partnership infrastructure with the implementation of these strategies and acting on evidence to increase response rates to recruitment efforts. The Centre should play a key role in promoting the NHS Scotland Brand identity. 8 Working in conjunction with partners across the social care sector including SSSC, scope, design and deliver a programme of workforce development activity to increase the capacity and capability of the social care workforce. Ahead of any future decision on the training, education and workforce development needs associated with the National Care Service, with appropriate funding, this work should focus on repurposing NES resources for adult social care, reviewing and developing the national induction and CPD frameworks, including the introduction of GIRFE Pathfinders. In addition, scope the options for enhanced international recruitment for social care. In partnership with NHS Golden Jubilee, position the NHS Scotland Academy as the key developer and deliverer of accelerated training underpinned by NES academic governance, in areas of need to support NHS recovery and reform.

As commissioned by the Scottish Government, take forward the development of a National Centre for Remote and Rural Health and Social Care to raise the profile of remote and rural practice as a career choice. In doing so, ensure the needs and circumstances of those communities are considered, support a multi-agency collaborative approach and ensure the priorities remain agile to respond to need. Working in conjunction with senior leaders and partners across the system, build on 11 existing activity, to scope and deliver a range of national leadership and quality improvement programmes and resources for the health, social care and social work workforce, supported by relevant digital infrastructure. Furthermore, provide a range of products that will support the talent management and succession planning process across the system, building networks to share learning and facilitate collaboration. 12 Actively contribute to the national effort around workforce wellbeing through increasing capacity and capability to deliver psychological interventions and therapies to support staff mental health and wellbeing across the Health and Social Care workforce. 13 NES and SG to actively engage with NHS Boards, education providers and wider partners to develop the education, training and tools required to support health and care professionals to practise Realistic Medicine and deliver value based health and care. 14 Identify and adopt actions designed to maximise the efficiency of the organisation, clearly demonstrating best value in its work and ensuring coherence with activity being delivered by partners in order to deliver a more sustainable and affordable Health and Social Care system. In supporting the development and delivery of key priorities, both existing and new, ensure appropriate financial controls and governance is in place, including exploring the financially sustainable delivery of all priorities and embedding continuous quality improvement in all corporate activities.

During 2024/25 we will continue to develop and strengthen our planning and delivery approach by working in an increasingly integrated manner across NES, building on new arrangements introduced in 2023/24 such as our refreshed performance management approach and the introduction of our Corporate Improvement Programme.

# **Section B: Finance and Sustainability**

The financial plans developed prior to the budget announcement on 19 December 2023 were based on the initial Scottish Government (SG) planning assumptions and set out a balanced position for 2024/25. The budget announcement on 19 December confirmed a reduced baseline budget for NES of £550.2m in 2024/25. Further work was undertaken to develop a savings plan of £3.5m to ensure a balanced financial position for 2024/25. The financial plan and the savings were approved by the NES Board at the private Board meeting on 28 March 2024 and submitted to Scottish Government in April 2024.

For future years our position is currently not balanced; it is anticipated that we will need to develop a programme of recurring savings in the medium to long term to ensure financial sustainability.

#### **Section C: Workforce**

The <u>NES Strategic Workforce Plan 2022-2025</u> was developed in partnership with input from stakeholders across NES in order to plan for a flexible and adaptive workforce that can support NES in the successful delivery of our strategic ambitions. The plan was also developed in accordance with Scottish Government guidance and aligned to the Six Steps of Workforce Planning methodology.

Delivery of our Workforce Plan is a strategic priority for NES as set out in our Strategy for 2023-26 and will be at both organisational and directorate levels with the key themes being building future capability, succession planning, attraction and retention. The Workforce Plan is supported by a strategic action plan which continues to be progressed with the aim of delivering effective change to practices and processes to enable having the right people, with the right skills, in the right place, at the right time.

Delivery of the strategic action plan is progressing through a phased approach, linking to the strategic workforce plan actions and involving the use of both quantitative and qualitative data across directorates to monitor progress, reporting via the Staff Governance Committee.

During 2023/24 delivery included launching a succession plan for a senior cohort pilot and supporting directorates to build future capability by identifying and enabling their development requirements.

Looking ahead, we will continue to apply more stringent internal process to our recruitment practices in response to the challenging financial landscape and budgetary constraints and to work collaboratively with partners to identify opportunity for workforce diversification, shared roles and new ways of working which increase our efficiency and effectiveness. In our role as the official provider of workforce statistics, we will also prioritise working closely with Health Board colleagues to support them in addressing issues impacting on the timeliness of workforce data.

# **Section D: Improvement Programmes**

During 2023/24 NES launched a programme of corporate improvement aligned to the delivery of its new Strategy for 2023-26 and published a <u>Transformation</u> Routemap articulating the significant change activities being progressed across the organisation over the next three years to support and enable delivery of our Strategy and Medium Term Plan, ensuring we are able to meet the needs of our stakeholders both now and into the future. Our corporate improvement activity is referenced in Appendix 2 through our deliverables and associated milestones.

The delivery of strategic priorities, organisational corporate improvement and transformational change is facilitated by our Programme Management Office (PMO) and overseen by a Transformation Group, reporting to the NES Executive Team. The PMO will continue to work with colleagues across all directorates to ensure a cross-directorate approach is taken to delivering organisational priorities.

In the final quarter of 2023/24 NES published its first <u>Learning and Education</u> <u>Strategy</u>, setting out how we will provide high quality learning opportunities, aligned to and informed by the needs of the health and social care system, individuals, and partners to support the delivery of better outcomes for people across Scotland and the sustainability of health and social care services. Learning and education is at the heart of what we do in NES and we will progress in line with the direction, principles and priorities outlined throughout 2024/25 to fulfil our overall purpose and vision as an organisation.

## **Section E: Risk Management**

Within NES we manage risk through an integrated risk management approach. Risks are managed through programme, Directorate and Strategic risk registers supported by escalation and de-escalation processes which ensure good governance.

Our delivery plan as outlined is subject to a number of current risks on the Board's strategic risk register. The relevant risks and their position in respect of adherence to the Board's current risk appetite is shown below. Mitigating actions to address areas outwith appetite are identified and being implemented as far as possible within the organisation's scope of control.

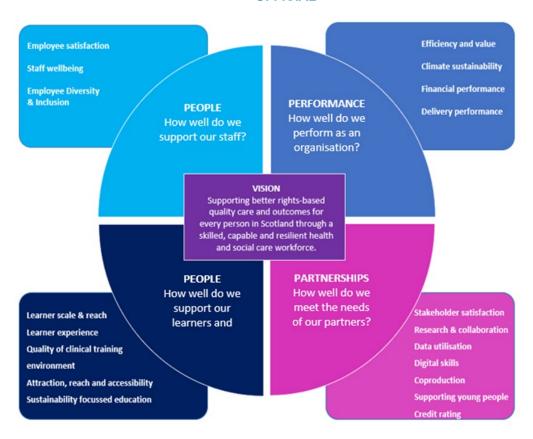
| Risk | Title  | Position |
|------|--|----------|
| SR2  | Disproportionate amount of non-recurring funding without   |          |
|      | conversion to recurrent funding.                           |          |
| SR3  | Failure to recruit and retain sufficiently experienced and |          |
|      | knowledgeable people.                                      |          |
| SR5  | NES does not put in place adequate corporate               |          |
|      | infrastructure to support the Transformation Routemap.     |          |
| SR9  | NES does not put sufficient measures in place to address   |          |
|      | ongoing cost and funding pressures.                        |          |
| SR10 | Failure to adequately anticipate and mitigate the impacts  |          |
|      | of policy, legislative, economic and societal change.      |          |
| SR11 | Poor learning outcomes and learning experience for our     |          |
|      | stakeholders.  |          |
| SR12 | Insufficient investment in TURAS Learn and other NES       |          |
|      | learning platforms.  |          |

Management of these risks will continue as part of business as usual processes with quarterly reporting of all strategic risks to the Audit and Risk Committee and NES Board. In addition to the strategic risks outlined above, it should also be noted that ongoing discussions in respect of priorities and funding for 2024/25 and the impacts which may result in respect of resource pose an ongoing operational risk to the delivery of the activities outlined in this draft plan. This will be borne in mind as discussions reach their conclusion and be reflected through risk management arrangements.

### **Section F: Measuring Impact**

The work we do in NES affects everyone who works in and with health and social care services, as well as every person in every community in Scotland. Our NES Corporate Strategy for 2023-26 outlines the difference we want to make, in line with national ambitions for health and social care, and our commitment to preparing and shaping the workforce for the future to deliver quality care and services and improve outcomes for people in Scotland.

In 2023/24 we introduced a new way of managing performance through the introduction of strategic Key Performance Indicators aligned to our strategic priorities.



In 2024/25 we will undertake a review of our progress so far and identify areas where we need to further evolve our performance management approach to ensure that we have the data and intelligence to guide our strategic decision making and evidence our impact, as well as delivering on the relevant areas of the national performance framework. We will also seek to operationalise our performance management approach by developing our second tier of performance metrics to aid operational management and ensure all of our activities are aligned with and contributing to the achievement of our priorities and the commitments set out within this document.

#### Appendix 1: NHS Education for Scotland Delivery Plan - NHS Scotland Recovery Driver Alignment Overview

#### Primary & Community Care

- Recruitment and management of Doctors & Dentists in Training
- Continuing professional development
- Clinical Fellowships
- · Clinical skills and simulation training
- Delivery of National Centre for Remote & Rural Health and Care

#### **Urgent & Unscheduled Care**

- Education and training across health & social care
- Patient Safety
- Supporting discharge without delay

#### Mental Health & Support Services

- Dementia education and training
- Education and training to support Mental Health and Suicide Prevention strategies
- Increased service capacity, education and training in relation to CAMHS and Adult Mental Health services

#### Planned Care

- Accelerated training via NHSS Academy
- Open Eyes
   Optometry
   Electronic Record
- SCI Diabetes

#### National Cancer Action Plan

- Increased diagnostic capacity via NHSS Academy
- Prehabilitation resources

#### Health Inequalities & Population Health

- NES approach to participation and engagement with people with lived / living experience
- NES approach to health equity / addressing health inequalities
- Infection prevention and control workstream
- · Widening Access Framework
- Equality, diversity and human rights education and training

#### Digital & Data Technologies

- · SG Delivery partner for Scotland's Digital Health and Care Strategy
- Supporting the Accelerated National Innovation Programme (ANIA)
- Digital Front Door delivery
- National Digital Platform delivery
- Provision of TURAS and progression of TURAS Refresh
- Knowledge Network and Digital Library for Health & Social Care
- Technology Enhanced Learning
- · Digitally Enabled Workforce Programme

#### Workforce Strategy

- · Developing career and learning pathways
- Transforming Roles
- Supporting Safe Staffing
- National provider of official NHS Scotland workforce statistics
- · National leadership and development programmes
- Centres for Workforce Supply (Health / Social Care)
- Armed Forces Talent Programme

#### Women & Children

- NES approach to Children's Rights
- Supporting The Promise / UNCRC
- Family Nurse Partnership
- Scottish Multidisciplinary Maternity Development Programme
- CAMHS education and training
- Perinatal, Paediatric, Parenting and Infant Mental Health

#### Climate Emergency & Environment

- NES Climate Emergency Strategy
- Reduction in carbon emissions
- Sustainability in education and training programmes
- · Asset reuse / IT donation

# Appendix 3



# **Medium Term Delivery Plan**

NHS Board: NHS Education for Scotland

#### **NES Medium Term Plan**



#### Our Purpose:

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



#### Our Visio

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

| NES Strategic Theme | NES Strategic Objective   | Medium Term Priority | Key Performance Indicator(s)         | National Recovery Driver(s)   | Delivery Activities  |
|---------------------|---|----------------------|--------------------------------------|---|--|
| People              | Support NES staff to be the best they can be through developing new career pathways and ways of working, well being initiatives and enabling their professional development.  | 1, 12 and 14         | 1, 2, 5.                             | 8. Workforce; 10. Climate   | Delivery of the NES Workforce Plan and Organisational Development Plan focusing on workforce wellbeing, capability, training and development including delivery of the senior cohort succession planning pilot.  |
| People              | Seek to eliminate the gender pay gap across all protected characteristics and engage younger people in the NES Workforce.   | 14                   | 6                                    | 8. Workforce; 6. Health Inequalities  | Delivery of NES Action Plan encompassing equality outcomes, equal pay, employment monitoring and our staff equality network. Development and delivery of our approach to Apprenticeships to create entry level roles within NES.   |
| People              | 3. Support role re-design and transformation to enable early<br>intervention and prevention, optimise care pathways, address workforce<br>shortages and complement wider service reform and transformation<br>activity across the health and social care system.                                      | 1,6,7,8,9,10         | 23, 24, 29                           | Improved access to Primary and Community<br>Care; 2. Urgent & Unscheduled Care; 4. Recovery<br>of Planned Care; 8. Workforce        | Supporting the development of the GP, Nursing and broader health and social care workforce to enable the transformation of Primary Care. Supporting the development of Community Glaucoma Services and upskilling the Opthalmic workforce. Development of resources targeting peripoerative, acute and trauma career pathways and workforce pipelines. Supporting expansion of the clinial skills, leadership skills and capacity of SAS Doctors and Dentists in training. Development of the Medical Associate Professions workforce. Supporting development of the Pharmacy First Service, the health scare support worker framework and delivery of the Childsmile programme. |
| People              | <ol> <li>Scope, design and deliver a programme of workforce development<br/>activity to increase the capacity and capability of the social care<br/>workforce, working collaboratively with the Scottish Social Services<br/>Council (SSSC).</li> </ol>   | 8                    | 9, 10, 11, 18                        | 8. Workforce; 9. Optimising Digital & Data ; 10.<br>Climate   | Supporting the development of the National Induction Framework, a CPL framework for social care and the development of an SVQ in Integrated Care, working in partnership with SSSC.  |
| People              | <ol> <li>Increase capacity and capability to deliver psychological interventions<br/>and therapies to support the people of Scotland including the health and<br/>social care workforce.</li> </ol>   | 12                   | Tracked through Annual Delivery Plan | Improved Access to Primary and Community<br>Care; 2. Urgent and Unscheduled Care; 3. Mental<br>Health; 4. Recovery of Planned Care. | Suporting delivery of the Mental Health Strategy and new Dementia Strategy, by training and development of the Psychology Workforce. Working alongside the Mental Welfare Commission to support workforce development in respect of the Adults with Incapacity Act. Increasing multi disciplinary team capacity to deliver evidence based brief psychological interventions.   |
| People              | <ol> <li>Lead and deliver high-quality education, training and continuous<br/>professional development (CPD) across all health and social care<br/>disciplines.</li> </ol>  | 1                    | 9, 11, 13, 14, 15, 30                | Improved access to Primary and Community Care; 8. Workforce   | Delivery of a broad range of CPD programmes and activities to meet the needs of the Medical, Nursing, Pharmacy, Optometry, Dental, AHP, Healthcare Science, Social Care and Psychology workforce.  |
| People              | 7. Develop the education, training and tools required to support health<br>and care professionals in meeting the Health and Social Care standards,<br>practising Realistic Medicine and delivering value-based health and care<br>in a way which is meaningful to their roles and those they support. | 13                   | 21                                   | 8. Workforce; 10. Climate Emergency   | Support the healthcare workforce to practice Realistic Medicine and deliver Value Based Health & Care through the delivery of NES Realistic Medicine and Value Based Health and Care Action Plan   |

#### **NES Medium Term Plan**



#### Our Purpose:

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



#### Our Vision

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

| NES Strategic Theme | NES Strategic Objective  | Medium Term Priority | Key Performance Indicator(s)         | National Recovery Driver(s)   | Delivery Activities  |
|---------------------|--|----------------------|--------------------------------------|---|--|
|                     |  |                      |                                      |   |  |
| People              | <ol> <li>Support the health and social care workforce including children,<br/>young people and justice services to become trauma informed and<br/>trauma responsive.</li> </ol>          | 1                    | Tracked through Annual Delivery Plan | 8. Workforce; 3. Mental Health  | Delivery of the National Trauma Training Programme.  |
| People              | <ol> <li>Support professionalism in education across health and social care,<br/>with a particular focus on digitally enabled learning.</li> </ol>                                       | 1,3                  | 26, 30                               | 8. Workforce 9. Optimising Digital & Data 10. Climate   | Delivery of a national programme to improve the digital capability of the health and social care workforce across Scotland. Delivery of our Education and Learning Strategy and online education and learning prospectus. Developing the NHSSA learning environment to meet the needs of mixed model educational delivery. Achievement of credit awarding body status. |
| People              | Deliver the NES Workforce Plan and Organisational Development Plan.  | 14                   | Tracked through Annual Delivery Plan | 7. Innovation Adoption; 8. Workforce; 10. Climate   | Delivery of the NES Workforce Plan and Organisational Development Plan focusing on workforce wellbeing, capability, training and development including delivery of a senior cohort succession planning pilot.  |
| Partnerships        | In Improve the range, quality, detail, analysis, and reporting of workforce data linked to population health and care needs, working in collaboration with partners.                     | 2                    | 25, 28                               | Primary and Community Care; 2. Urgent and<br>Unscheduled; 3. Mental Health; 7. Innovation<br>Adoption; 8. Workforce 9. Optimising Digital and<br>Data | Development and implementation of a workforce planning tool which enables the development and articulation of a national picture of workforce need, informed by the health needs of the population and the future shape of services.   |
| Partnerships        | <ol> <li>Work in partnership to scope the skills and training required to<br/>deliver and implement health care research, development and<br/>innovation.</li> </ol>                     | 5                    | 23                                   | 7. Innovation Adoption; 8. Workforce; 9.<br>Optimising Digital and Data; 10. Climate  | Consolidation of our position as a national centre for evidence on the health and social care workforce. Development and delivery of NES Research and Innovation Plans to underpin our Learning and Education Strategy.  |
| Partnerships        | 13. Build our capability around workforce supply to develop resourcing<br>strategies which address supply shortages and provide centralised co-<br>ordination and recruitment expertise. | 7                    | Tracked through Workforce Plan       | Primary Care; 3. Urgent and Unscheduled Care; 4. Planned Care; 8. Workforce   | Further developing the NES Centre for Workforce Supply, including leading on international recruitment to accelerate recruitment within health and social care. Delivery of the widening access programme and a healthcare pilot qualification for senior phase school students to enhance recruitment and attraction into the health and social care workforce.       |
| Partnerships        | Develop and deliver accelerated training in areas of need through the NHS Scotland Academy.  | 9                    | Tracked through Annual Delivery Plan | Planned Care; 7. Innovation; 8. Workforce; 9.     Optimising Digital and Data   | Delivery of the National Ultrasound, Endoscopy and Bronchoscopy Training Programmes. Research and development acivity to support accelerated training and development programmes. Development of technology to support the Accelerated National Innovation Adoption programme.   |
| Partnerships        | 15. Act as the strategic delivery partner to Scottish Government on<br>activities which target skills development in areas such as leadership,<br>digital and data.                      | 2,3,11               | 28                                   | 8. Workforce; 9. Optimising Digital and Data  | Design & delivery of a national prgramme of development and peer learning opportunities to develop leadership skills, knowledge and behaviour to creat a culture of collaborative working. Delivery of the Digitally Enabled Workforce Programme.  |
| Partnerships        | 16. Scope and develop a National Centre for Remote and Rural Health and Social Care.   | 10                   | Tracked through Annual Delivery Plan | Primary and Community Care; 8. Workforce; 6.<br>Health Inequalities   | Delivery of education and training for the health and social care workforce that improves access in remote, rural and island settings. Dvelopment of the National Centre for Remote and Rural Health and Social Care.  |

#### **NES Medium Term Plan**



#### Our Purpose:

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



#### Our Visio

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

| NES Strategic Theme | NES Strategic Objective   | Medium Term Priority | Key Performance Indicator(s)                            | National Recovery Driver(s)  | Delivery Activities  |
|---------------------|---|----------------------|---|--|--|
|                     |   |                      |   |  |  |
| Partnerships        | <ol> <li>Develop and implement engagement and participation activities in<br/>partnership with people with lived experience to inform our work.</li> </ol>  | 14                   | 27  | Health Inequalities; 9. Optimising Digital and Data; 10. Climate   | Development and implementation of an engagement and participation framework for those with lived or living experience as part of broader activity on enhancing our education and learning quality ecosystem within NES.  |
| Partnerships        | 18. Work with partners and staff to provide high quality and relevant<br>equality and human rights education and learning resources.  | 1                    | Tracked through Annual Delivery Plan                    | 8. Workforce; 6. Health Inequalities   | Developing education and training resources for the health and social care workforce focussing on Equality, Diversity, Inclusion and Human Rights.   |
| Partnerships        | <ol> <li>Support development of a portable passport of learning – to support<br/>professional development, which will be portable across employers and<br/>aid career development.</li> </ol>   | 1                    | Tracked through Annual Delivery Plan (24/25 and beyond) | Primary and Community Care; 2. Urgent and<br>Unscheduled; 8. Workforce                                   | Scoping and development of portable passport of learning in partnership with other Boards.   |
| Performance         | 20. Develop and deliver the National Digital Platform, Digital Front Door<br>and Digitally Enabled Workforce Programme in collaboration with<br>partners such as Scottish Government, COSLA, NHS National Services<br>Scotland and the Digital Health and Care Innovation Centre. | 3                    | 22, 40 and tracked through Annual Delivery Plan         | Urgent and Uncheduled; 8. Workforce; 9.     Optimising Digital and Data; 10. Climate                     | Development and delivery of technology to support the Digital Front Door programe. Continue to deliver on the development of the National Digital Platform including the integration of Openeyes and supporting digital prescribing and dispensing pathways. Support and maintain the Turas Vaccination Management tool to support the national Vaccination Improvement Programme.           |
| Performance         | <ol> <li>Maximise the efficiency of our organisation, clearly demonstrating<br/>best value in our work.</li> </ol>  | 14                   | 31, 32, 33  | 8. Workforce; 9. Optimising Digital and Data; 10. Climate  | Delivery of a programme of transformational change across NES (as outlined in our Transformation Routemap) which enables the delivery of our strategic objectives and enhances our effectiveness and efficiency as an organisation and our impact in supporting the wider health and social care system.   |
| Performance         | 22. Refresh and redesign our learning experience platforms and user interfaces to reduce duplication, promote quality, consistency and best value as well as responding to Board, Health and Social Care Partnership/Third and Independent sector needs.                          | 4                    | 12, 28  | 7. Innovation and Adoption; 8. Workforce; 9. Digital; 10. Climate  | Delivery of the NES Education & Learning Strategy and through our NES corporate improvement programme, delivery of the Turas Refresh project to enhance our educational offering and ensure the learning needs of the health and social care workforce can be met.   |
| Performance         | 23. Scope and deliver a range of national leadership and quality<br>improvement programmes and resources for the health and social care<br>workforce.   | 11                   | Tracked through Annual Delivery Plan                    | Urgent and Uncheduled; 7. Innovation Adoption; 8. Workforce; 9. Optimising Digital and Data; 10. Climate | Development of quality improvement capacity and capability through delivery of national Quality Improvement programmes such as the Scottish Quality and Safety Fellowship and the Scottish Improvement Leader course across the public sector. Delivery of a range of national programmes to support leadership development such as Developing Senior Systems Leaders and Leading to Change. |
| Performance         | 24. Develop education and training products that encompass<br>sustainability and climate change to develop the knowledge and skills of<br>the workforce in protecting our environment and tackling the climate<br>emergency.  | 1                    | 21  | 8. Workforce; 10. Climate  | Embedding of climate change and sustainability in programmes of education and training as part of delivery of the NES Education & Learning Strategy and NES Sustainability and Climate Change Strategy.  |
| Performance         | 25. Strengthen our organisational focus on sustainability and climate change to achieve carbon efficiency.  | 14                   | 34, 35  | 9. Digital; 10. Climate  | Development and delivery of the NES Sustainability and Climate Change Strategy.  |

|    | NES Medium Term Priorities   |
|----|--|
| 1  | Continue to provide leadership for and delivery of high quality education, training and workforce development, including:  |
|    | Advising on the education and training capacity for health and social care disciplines across Scotland to ensure it meets future workforce requirements.   |
|    | Managing recruitment and progression for many health and social care professions including medical, dental, pharmacy, healthcare science.  |
|    | Refocusing elements of medical education to improve trainee experience in partnership with SG, 4 nations, Boards, GMC, Royal Colleges and other relevant partners.   |
|    | Delivering education, training and workforce development activity to support continuous professional development, role development and transformation across the range of health and social care disciplines.  |
|    |  |
|    | Providing a modern, engaging, attractive, digital learning platform/learning management system.  |
|    | Developing and delivering accelerated training programmes through NHS Scotland Academy   |
| 2  | Improve the range, quality and granularity of workforce data, through understanding and ensuring we meet user needs with initial focus on official published NHS workforce statistics then extending to all other  |
|    | workforce data including in respect of the unregistered workforce. In addition to understanding and responding to user needs this will also be done through the development, promotion and adoption of coherent  |
|    | systems across partners. Undertake a continuous review of priority areas across health and social care in respect of data gathering and analysis. Linked to this, improve the analysis and reporting of data, providing a  |
|    | holistic understanding of the characteristics of the health and social care workforce including entry routes, career paths, skills mix and attrition.  |
|    | and the state and the characteristics of the result and social care works for mending entry routes, career parties, skills mix and state of the stat |
| 3  | In service of the Digital Health & Care Strategy, continue to lead on development of the National Digital Platform in support of major programmes of work as prioritised by the Enabling Technology Board, including,  |
|    | but not limited to, alleviating winter pressures, major system replacement, vaccinations, digital prescribing and dispensing, diabetes support, workforce data and identity management and supporting innovation via the   |
|    | ANIA programme. In addition to this, lead on the technical delivery of the Digital Front Door programme and continue to deliver on the Digitally-Enabled Workforce Programme.  |
|    | ANIA programme. In addition to this, lead on the technical delivery of the bigital Front book programme and continue to deliver on the bigitally-chabled workforce Programme.  |
| 4  | Redesign of the Turas platform to provide an accessible, dynamic learning and education platform for Health and Social Care alongside development of a NES prospectus (additional funding required).   |
|    | , , , , , , , , , , , , , , , , , , ,  |
| 5  | Work with the Chief Scientist's Office, Scottish Health and Industry Partnership Group, Accelerated National Innovation Adoption (ANIA) Pathway, Innovation Design Authority and HEIs to scope the skills and training   |
|    | required to deliver and implement health care research, development and innovation to inform the learning needs of the health and social care workforce.   |
| 6  | Working with partners across the system and Centre for Sustainable Delivery in particular, lead on the identification, assessment and implementation of new workforce models which involve role re-design and  |
|    | transformation to optimise care pathways, complementing wider service reform and transformation activity being driven forward through the Care and Wellbeing Portfolio.  |
|    | and the second particles of the second secon |
| 7  | Build the capability of the Centre for Workforce Supply to develop resourcing strategies which address workforce supply shortages and assist NES in articulating the case to overcome said shortages. The Centre will  |
|    | provide centralised co-ordination and recruitment expertise, supporting local Board and Health and Social Care Partnership infrastructure with the implementation of these strategies and acting on evidence to increase   |
|    | response rates to recruitment efforts. The Centre should play a key role in promoting the NHS Scotland Brand identity.   |
|    | response tales to redulation the control should play a key tale in promoting the time section.   |
| 8  | Working in conjunction with partners across the social care sector including SSSC, scope, design and deliver a programme of workforce development activity to increase the capacity and capability of the social care  |
|    | workforce. Ahead of any future decision on the training, education and workforce development needs associated with the National Care Service, with appropriate funding, this work should focus on repurposing NES  |
|    | resources for adult social care, reviewing and developing the national induction and CPD frameworks, including the introduction of GIRFE Pathfinders. In addition, scope the options for enhanced international  |
|    | recruitment for social care.   |
| 0  | In partnership with NHS Golden Jubilee, position the NHS Scotland Academy as the key developer and deliverer of accelerated training in areas of need, including supporting the readiness of a skilled workforce for the   |
|    | National Treatment Centres and begin to explore the commercial opportunities available.  |
| 10 | As commissioned by the Scottish Government, take forward the scoping and development of a National Centre for Remote and Rural Health and Social Care to raise the profile of remote and rural practice as a career  |
| 10 | choice. In doing so, ensure the needs and circumstances of those communities are considered, support a multi-agency collaborative approach and ensure the priorities remain agile to respond to need.  |
|    | choice. In doing so, ensure the needs and circumstances of those communities are considered, support a multi-agency consourative approach and ensure the priorities remain agile to respond to need.   |
| 11 | Working in conjunction with senior leaders and partners across the system, build on existing activity, to scope and deliver a range of national leadership and quality improvement programmes and resources for the  |
|    | health, social care and social work workforce, supported by relevant digital infrastructure. Furthermore, provide a range of products that will support the talent management and succession planning process across the   |
|    | system, building networks to share learning and facilitate collaboration.  |
| 12 | Actively contribute to the national effort around workforce wellbeing through increasing capacity and capability to deliver psychological interventions and therapies to support staff mental health and wellbeing across  |
| 12 | the Health and Social Care workforce.  |
| 12 |  |
| 13 | NES and SG to actively engage with NHS Boards, education providers and wider partners to develop the education, training and tools required to support health and care professionals to practise Realistic Medicine and  |
|    | deliver value based health and care.   |
| 14 | Identify and adopt actions designed to maximise the efficiency of the organisation, clearly demonstrating best value in its work and ensuring coherence with activity being delivered by partners in order to deliver a  |
|    | more sustainable and affordable Health and Social Care system. In supporting the development and delivery of key priorities, both existing and new, ensure appropriate financial controls and governance is in place,  |
|    | including exploring the financially sustainable delivery of all priorities and embedding continuous quality improvement in all corporate activities.   |
|    |  |

| NES Strategic Key Performance Indicators |   |  |  |  |
|--|---|--|--|--|
| Ref No.                                  | Measure   |  |  |  |
| 1  | Employee Engagement Index (iMatter)   |  |  |  |
| 2  | Proportion of staff who report having the time and resources to support their learning and growth (iMatter)                       |  |  |  |
| 3  | Staff retention rate (voluntary leavers)  |  |  |  |
| 4  | Vacancy Rate  |  |  |  |
| 5  | Sickness Absence Rate   |  |  |  |
| 6  | Gender, disability and ethnicity pay equality.  |  |  |  |
| 7  | % of staff n protected characteristic groups.   |  |  |  |
| 8  | % of staff who experience NES as an inclusive organisation.   |  |  |  |
| 9  | Total number of accesses to NES learning products.  |  |  |  |
| 10                                       | Number of health and social care staff accessing NES learning products as a % of the health and social care workforce.            |  |  |  |
| 11                                       | % of learners that tell us their education and training will improve their practice.  |  |  |  |
| 12                                       | % of learners who score their learning experience as 80% or above.  |  |  |  |
| 13                                       | Funded trainee placements - Fill rate.  |  |  |  |
| 14                                       | Funded trainee placements - Completion rate.  |  |  |  |
| 15                                       | Experience of Doctors and Dentists in Training.   |  |  |  |
| 16                                       | Quality of clinical training environment.   |  |  |  |
| 17                                       | Total accesses of the NHS Scotland Careers Website.   |  |  |  |
| 18                                       | Uptake of learning products by sector as % of total reach (10).   |  |  |  |
| 19                                       | % of learners and trainees from the 20% most deprived data zones in Scotland (SIMD).  |  |  |  |
| 20                                       | % of learners and trainees by protected characteristics as compared to population of Scotland.                                    |  |  |  |
| 21                                       | % of learning products which include a focus on sustainability, climate, Net Zero and value based health and social care.         |  |  |  |
| 22                                       | % of stakeholders who rate themselves likely to recommend NES to colleagues and associates.                                       |  |  |  |
| 23                                       | Number of education, research and strategic collaborations.   |  |  |  |
| 24                                       | Number of innovation initiatives invested in, including in collaboration with other stakeholder organisations.                    |  |  |  |
| 25                                       | % of Service Providers who report utilising NES provided workforce data.  |  |  |  |
| 26                                       | % of health and social care workforce who report being confident in using digital ways of working.                                |  |  |  |
| 27                                       | Number of NES programmes that can demonstrate active engagement of people with lived or living experience in the development of   |  |  |  |
|  | educational resources designed to support interaction with those who use health and social care services.                         |  |  |  |
| 28                                       | % of staff, leaner and partner feedback that states technology, data and digital developments meet their needs.                   |  |  |  |
| 29                                       | Number of young people* participating on a school-based pilot pathway. *Intent to work with partners to identify care experienced |  |  |  |
|  | individuals participating in school based pilot pathways as part of future measure development.                                   |  |  |  |
| 30                                       | Number of NES programmes of educaiton and training which are credit rated.  |  |  |  |
| 31                                       | Achievement of agreed savings % against annual budget.  |  |  |  |
| 32                                       | % of aduti actions which are completed wihtin agreed timescale.   |  |  |  |
| 33                                       | Benefits realisation/ROI from corporate change activities.  |  |  |  |
| 34                                       | CO2 emissions (Estates).  |  |  |  |
| 35                                       | CO2 emissions (staff and business travel).  |  |  |  |
| 36                                       | Projected variance of budgeting within 0.5% at year end.  |  |  |  |
| 37                                       | Number of complaints upheld or partially upheld.  |  |  |  |
| 38                                       | Availability of NES systems (internal and external).  |  |  |  |
| 39                                       | % NIS Audit Compliance Score for Cybersecurity.   |  |  |  |
| 40                                       | % of Annual Delivery Plan deliverables not on track and number delayed 0-3 months and 4-6 months.                                 |  |  |  |
| 41                                       | Adverse events: Number of Category 1 Information Governance events of events requiring reporting under RIDDOR.                    |  |  |  |



**NHS Education for Scotland** 

NES/24/34

**NES Public Board Meeting** 

Agenda Item: 08c

Date: 23 May 2024

- 1. Title of Paper
- 1.1. Strategic Key Performance Indicators: Review
- 2. Author(s) of Paper
- 2.1. Simon Williams, Principal Educator Planning & Corporate Resources
- 3. Lead Director(s)
- 3.1. Christina Bichan, Director of Planning and Performance
- 4. Situation/Purpose of paper
- 4.1. This report presents the findings of the review of strategic KPIs commissioned by the Board.
- 4.2. The Board is asked to review and approve this report.
- 5. Background and Governance Route to Meeting
- 5.1. The Strategic KPIs were introduced alongside the new NES strategy at the beginning of 2023-24. A review to be reported to the Board after the first year of implementation was built into development plans. The review took place in the last quarter of 2023-24 through into April 2024.
- 6. Assessment/Key Issues
- 6.1. Review of Strategic KPIs Methods
- 6.1.1. The review was made up of a number of activities:
  - Internal Audit of KPIs and Performance Management
  - Feedback from measure owners / Executive Leads focussing on:

- What has worked well
- What could have been better
- o How well current measures align to strategic intent
- o Recommendations for year 2 of implementation.
- Horizon scanning by KPI Project Team
- Input from Strategic KPI Advisory Group
- Input from Board Development Session (18 April).

#### 6.2. Review of Strategic KPIs - Results

The results of the review were positive with some useful recommendations for future improvements being made.

#### 6.2.1. Areas of good practice identified through internal audit include:

- Defined roles for the input and approval of KPI data: Responsibility for the input and subsequent approval of Strategic KPI data and narrative is separated through the designated roles of the 'Data Owner' and 'Measure Owner'.
- ii. Delegated ownership of KPIs: Each actively reported Strategic KPI within the suite has a Measure Owner and associated delegated Committee, except for four KPIs which are owned solely by the Board.
- iii. KPI Data input guidance video: A two-part Guidance Video has been produced for Strategic KPI Measure and Data owners, which details the requirements for the input of data and additional narrative into the Reporting template.

#### 6.2.2. Other positive aspects identified during the review include:

- iv. The fact that the development and implementation processes were open and transparent and also standardised, based on clear and standardised templates and guidance. The KPI team and a number of other colleagues were trained in the PuMP methodology.
- v. The iterative / cumulative approach where perfection is not expected immediately. Time was taken for reflection and incremental change.
- vi. The existence of clear leadership and clear roles and responsibilities of all involved (project team, measure owners, data owners, Advisory Group and so on). The fact that the ownership of the KPIs was delegated was also welcomed.
- vii. Measures feel very real world, not abstract, and align well with NES strategy. Work to implement reporting over the course of the year has supported broader corporate change and improvement activity and been supportive in connecting areas of work and conversations in furtherance of our strategic direction.

viii. Establishing linkage with the Annual Delivery Plan process was also commented on positively.

#### 6.3. Review of Strategic KPIs - Actions and implications for the future

- 6.3.1. Areas for improvement identified by the auditors include:
  - i. Steps should be taken to ensure that performance data is scrutinised by the relevant Standing Committee prior to being presented to the NES Board. This will imply reports being delivered to Board slightly later than has been the case in 2023-24 but will give assurance that KPIs have been reviewed by the appropriate Committee before coming to Board.
  - ii. A Performance Management Policy and Procedures should be developed which encapsulates NES's key performance principles and outlines the responsibilities of the Executive Team, relevant Standing Committees and the Board.

Management actions in respect of both of these areas have been developed and will progressed in line with the timescales presented to Audit and Risk Committee.

- 6.3.2. Other areas for improvement identified during the review include:
  - iii. Continue to horizon scan for developments (e.g. National Performance Framework, Anchors metrics). We are already benchmarking some of our measures (e.g. iMatter across NHS Scotland) and will continue to extend this to other measures, linking to the recently developed Blueprint for Good Governance Improvement Plan action to develop benchmarking approaches where these do not exist.
  - iv. Continue to work on those measures which have not yet been fully implemented, most of which focus on the quality of the education being offered by NES and have been delegated to the Education and Quality Committee. We will also continue to ensure Board approval is sought for any proposed amendments to measures which arise as a result of our development processes or changes in our operating environment.
  - v. In due course, and when appropriate for each measure, we will include further information on trends as part of the "active governance" approach to performance reporting and finally,
  - vi. We will consider a more technologically supported reporting structure over the next year to minimise handling and increase the efficiency and effectiveness of our monitoring and reporting processes.

#### 7. Recommendations

7.1. The Board is asked to review this report and approve the actions in 6.3.

| a)            | Have Educational implications been considered?  ☑ Yes □ No   |
|---------------|--|
| b)            | Is there a budget allocated for this work?  ☑ Yes □ No   |
| <b>c)</b> ⊠ ⊠ | Alignment with Our Strategy 2023 – 26 People, Partnerships and Performance  1. People Objectives and Outcomes 2. Partnership Objectives and Outcomes 3. Performance Objectives and Outcomes  |
| d)            | Have key strategic risks and mitigation measures been identified?  ☑ Yes □ No  |
| e)            | Have Equality, Diversity, Human Rights and health inequality issues been considered as per <u>Fairer Scotland Duty: Guidance for Public Bodies</u> and Corporate Parenting as per the <u>Children and Young People (Scotland) Act 2014</u> ?  ☑ Yes □ No |
| f)            | Has an Equality Impact Assessment (EQIA) been completed or in progress for this piece of work?  ☑ Yes □ No   |
| g)            | Have you considered Emergency Climate Change and Sustainability implications as per DL (2021) 38?  ☑ Yes □ No  |
| h)            | Have you considered a staff and external stakeholder engagement plan? ☑ Yes □ No   |
|               | or: Simon Williams<br>May 2024   |



**NHS Education for Scotland** 

**NES/24/35** 

**NES Public Board** 

Agenda Item: 09a

Date: 23 May 2024

#### 1. Title of Paper

1.1. Q4 Strategic Risk Report and NES Risk Appetite Proposal

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

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

#### 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 fourth quarterly strategic risk update for 23/24 for review and approval.
- 4.2. At its April meeting, the Audit & Risk Committee approved proposals to NES's Risk Appetite Levels for both the existing and additional categories that have been added to NES's risk profile. This followed the approval and implementation of the revised NES Scoring Definitions and Matrix by the Audit and Risk Committee in January 2024 and the NES Board at their February 2024 meeting.
- 4.3. In addition to reviewing and approving the Q4 strategic risk report, Board members are asked to consider and approve the proposed Risk Appetite Levels as recommended by the Audit and Risk Committee.

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

- 5.1. NES has well established risk management processes which are subject to frequent review by the Risk Management Group, Executive Team, the Audit and Risk Committee and NES Board. Our risk management infrastructure is predominantly in place, with established directorate risk leads, risk log format and, following the review of the Board risk appetite, a revised risk Strategy.
- 5.2. Reporting of Strategic Risks that relate to individual Board Governance Committees remitted responsibilities, are presented quarterly for consideration of the degree of assurance provided that the individual risks are being effectively managed by the mitigating controls and planned actions identified.
- 5.3. At the August 2023 NES Board meeting it was agreed that a review of the Board's risk appetite should be conducted to determine if the appetite for individual risk categories was still appropriate. It was recommended at the October 2023 Audit and Risk Committee and approved by the NES Board in November 2023, that prior to considering the appropriateness and proportionality of the Board's appetite scorings, a review of the NES Scoring Definitions and Matrix should be completed. This was undertaken by the Executive Team and the new NES Scoring Matrix (Appendix 4) was approved at the Audit and Risk Committee in January 2024 and the NES Board at their February 2024 meeting.
- 5.4. Following implementation of the approved NES Scoring Matrix, the Executive Team conducted a full review at their April 2024 meeting of the amended Risk Appetite Matrix, which included the additional categories added to NES's risk profile. The proposal (as shown in Appendix 5) was presented to the Audit & Risk Committee at their April 2024 meeting, members discussed, reviewed and approved the proposal, including the Appetite Levels for the additional categories.

#### 6. Assessment/Key Issues

#### **NES Strategic Risk Register**

- 6.1. The Strategic Risk Register (summary Appendix 1, detail Appendix 2) has been subject to a recent review by the Executive Team and individual risk owners. Within the last reporting period there has been considerable movement to the scoring of several risks, as shown below, due to the current changing external environment. The Strategic Risk Register will continue to be reviewed quarterly by the Executive Teams, with an ask that risk owners reconsider the frequency of review for each individual risk.
- 6.1.1. **Strategic Risk 2** (relating to the disproportionate amount of non-recurrent funding, without conversion to recurrent funding). The gross likelihood rating has been increased from 4 to 5 resulting in the overall gross score increasing from 16 to 20. This reflects that reductions in levels of non-

recurrent funding have not yet been confirmed. The net impact rating has also been increased due to the current fiscal environment, resulting in an increase of the overall net risk rating from 12 to 16. Additional actions have been identified to potentially reduce the net score but are dependent on progress on discussion with Scottish Government.

- 6.1.2. **Strategic Risk 4** (relating to NES not adequately engaging with its employees). The net risk score has been decreased due to the effectiveness of current control measures in place, including the newly launched Wellbeing Matters Hub and ongoing actions identified. This assessment has resulted in the overall net risk rating being reduced from 9 to 6.
- 6.1.3. **Strategic Risk 5** (relating to an adequate corporate infrastructure being in place to support the Transformation Route Map) The net risk score has been decreased due to current control measures in place and additional actions identified to further control the risk. This assessment has resulted in the overall net risk rating being reduce from 12 to 9.
- 6.1.4. **Strategic Risk 8** (relating to NES failing to put sufficient employee training and other operational controls in place to minimise the risk of breaches of Information Governance) The net likelihood rating has been decreased due to the implementation of mandatory training, resulting in a decrease of the net risk rating from 12 to 8. The risk still sits out with the Boards appetite for risks in the "Governance" category but has resulted in a reduction in the gap from 7 to 3.
- 6.1.5. **Strategic Risk 9** (relating to NES not putting sufficient measures in place to address ongoing cost and funding pressures) The net risk score has been increased with the net likelihood and impact rating being changed from 3 to 4, resulting in an increase of the overall net risk rating from 9 to 16. This is due to the significantly tightening financial outlook for NHS Scotland, and the proposed funding reductions for NES. Additional actions have been identified to help mitigate the risk and support controls. The risk continues to sit out with the Board's appetite for risks in the "Finance" category, with an increase in the gap from 4 to 11.
- 6.1.6. **Strategic Risk 10** (relating to failure to adequately anticipate and mitigate the impacts of policy, legislative, economic and societal change) Following a review by the Executive Team it was agreed to include technological change within the scope of the risk. Due to the current fiscal and political environment the net likelihood rating was increased, and the overall net risk rating was increased from 8 to 12. The risk continues to sit within the Boards appetite, but an additional control and action have been identified that relate to the linkage with Strategic Risk 2.
- 6.1.7. **Strategic Risk 13** (relating to failure to recruit sufficient numbers of appropriately skilled and experienced staff) Following a review by the Executive Team it was agreed to widen the scope of Strategic Risk 13 to cover recruitment within all Directorates not just specifically NES Technology. This resulted in a change of risk owner who has reviewed and

updated the risk to reflect the change within the cause, effect and result and the control and actions. The net risk rating has also been reviewed and increased from 8 to 12, due to the net likelihood of the risk being increased on account of the uncertainty on non-recurrent funding. The risk continues to sit within the agreed Board appetite; however, an additional action has been identified that will help to further control the risk.

6.1.8. Table 1 (as shown in Appendix 3) provides a summary of the current Net risk exposure across each of the categories within the Strategic Risk Register, with Table 2 providing the last reported position for reference. Following recommendations from the Audit & Risk Committee chair the tables reflect the number of risks rather than the net risk scores as previously presented. As can be seen there has been an increase in risks exposure to High Level risks and a decrease in risk exposure to Medium Level risks. This is a result of the increase to the net risk ratings to Strategic Risks 9 and 13, that have been impacted by the current fiscal position. Currently 40% of Strategic Risks sit out with the Board's risk appetite, this is attributed to the risks within the Financial and Governance categories. Further controls and actions have been identified to further control the risks where the net score is out with the Board's appetite. Risks outwith the Board's agreed appetite will be the focus of an Executive Team 'Deep Dive' discussion of strategic risks.

#### **NES Board Risk Appetite Proposal**

- 6.2. Risk Appetite is the amount and type of risk that NES is willing to seek or accept in the pursuit of its objectives. NES recognise that, to meet its strategic objectives and achieve its vision of Supporting better quality care and outcomes for every person in Scotland, it needs to pursue activities that expose the organisation to a measure of risk.
- 6.3. NES defines its 'risk appetite' as the amount of risk that it is prepared to accept, tolerate or be exposed to at any point in time. Risk appetite is about taking well managed risks where the exposure to threat is justified by the potential returns to NES, and health and care services. The Board's appetite depends on the type of risk and the relative maturity of the workstream being assessed (concept, pilot or business as usual).
- 6.4. The proposed Risk Appetite Matrix with the new scoring matrix implemented (as shown in Appendix 5) must be reviewed and consideration given to the appropriateness and proportionality of the scoring for the existing risk categories, in relation to the changing external demands and fiscal constraints and for the four new risk categories that have been added to the NES risk profile.
- 6.5. Risk Appetite Levels were developed using the UK Government Orange Book Risk Appetite Guidance and tailored to NES for each category (as shown in Appendix 6) to support the review of NES's Risk Appetite.

#### **Staff Communication and Engagement**

6.6. The Risk Management Group discussed the need for staff engagement to promote awareness of the purpose and importance of risk management at directorate, project and programme level. Risk Management training has been developed, focusing on identifying risks to be managed, escalating risks, risk scoring and using the risk log template. Several training sessions have been delivered to date, including a session at the NES Learning at Work Week 2024, and further sessions are scheduled.

#### 7. Recommendations

The NES Board is invited to:

- 7.1. To review and approve NES Strategic Risk Q4 update and provide any feedback as appropriate.
- 7.2. To review and approve the NES Risk Appetite proposal.

Author to complete **checklist**.

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

|             | a) | Have Educational implications been considered?  |  |  |  |  |  |
|-------------|----|---|--|--|--|--|--|
|             |    |   |  |  |  |  |  |
|             |    | □ No  |  |  |  |  |  |
|             | b) | Is there a budget allocated for this work?  |  |  |  |  |  |
|             |    |   |  |  |  |  |  |
|             |    | □ No  |  |  |  |  |  |
|             | c) | Alignment with Our Strategy 2023 – 26 People, Partnerships and Performance  ☐ 1. People Objectives and Outcomes   |  |  |  |  |  |
|             |    | 2. Partnership Objectives and Outcomes  |  |  |  |  |  |
| $\boxtimes$ |    | Performance Objectives and Outcomes   |  |  |  |  |  |
|             | d) | Have key strategic risks and mitigation measures been identified?  ☑ Yes  |  |  |  |  |  |
|             |    | □ No  |  |  |  |  |  |
|             | e) | Have Equality, Diversity, Human Rights and health inequality issues been considered as per <u>Fairer Scotland Duty: Guidance for Public Bodies</u> and Corporate Parenting as per the <u>Children and Young People (Scotland) Act 2014</u> ?  ☐ Yes |  |  |  |  |  |
|             |    | ⊠ No  |  |  |  |  |  |
|             | f) | Has an Equality Impact Assessment (EQIA) been completed or in progress for this piece of work?  ☐ Yes   |  |  |  |  |  |
|             |    | ⊠ No  |  |  |  |  |  |
|             | g) | Have you considered Emergency Climate Change and Sustainability implications as per DL (2021) 38?   |  |  |  |  |  |
|             |    |   |  |  |  |  |  |
|             |    | □ Yes  ☑ No   |  |  |  |  |  |
|             |    |   |  |  |  |  |  |
|             | h) | Have you considered a staff and external stakeholder engagement plan?   |  |  |  |  |  |
|             |    | ⊠ Yes   |  |  |  |  |  |
|             |    | □ No  |  |  |  |  |  |

Author name: Rob Coward, Debbie Lewsley, Jim Boyle

Date: May 2024

NES

#### Summary of Risk Log

| Risk No. | Risk Title   | Risk Date  | Date due for next review | Gross Total | Net Total | Risk Category | Risk Appetite | Risk appetite vs net score |
|----------|--|------------|--------------------------|-------------|-----------|---------------|---------------|----------------------------|
| SR1      | NES Strategic Plan does not align with the needs and expectations of stakeholders  | 19/04/2023 | 07/07/2024               | 15          | 9         | Strategic     | 12-16         |                            |
| SR2      | Disproportionate amount of non-recurrent funding, without conversion to recurrent funding  | 19/04/2023 | 02/06/2024               | 20          | 16        | Finance       | 1-5           | Gap 11                     |
| SR3      | Failure to recruit and retain sufficiently experienced and knowledgeable people to the Board, Executive Team and senior management establishment | 19/04/2023 | 07/07/2024               | 16          | 8         | Operational   | 12-16         |                            |
| SR4      | NES does not adequately engage with its employees  | 19/04/2023 | 06/06/2024               | 16          | 6         | Operational   | 12-16         |                            |
| SR5      | NES does not put in place an adequate corporate infrastructure to support the Transformation Route Map.  | 19/04/2023 | 07/07/2024               | 16          | 9         | Operational   | 12-16         |                            |
| SR6      | Failure to develop and maintain adequate Business Continuity arrangements to deal with the risk of adverse events and threats                    | 19/04/2023 | 11/06/2024               | 16          | 9         | Governance    | 1-5           | Gap 4                      |
| SR7      | Failure to put in place measures to adequately protect against breaches of cyber security  | 19/04/2023 | 11/06/2024               | 20          | 15        | Governance    | 1-5           | Gap 10                     |
| SR8      | Failure to put sufficient employee training and other operational controls in place to minimise the risk of breaches of Information Governance   | 19/04/2023 | 11/06/2024               | 20          | 8         | Governance    | 1-5           | Gap 3                      |
| SR9      | NES does not put sufficient measures in place to address ongoing cost and funding pressures  | 19/04/2023 | 01/05/2024               | 25          | 16        | Finance       | 1-5           | Gap 11                     |
| SR10     | Failure to adequately anticipate and mitigate the impacts of policy, legislative, economic, technological and societal change                    | 19/04/2023 | 07/07/2024               | 12          | 12        | Strategic     | 12-16         |                            |
| SR11     | Poor learning outcomes and learning experience for our stakeholders  | 19/04/2023 | 03/06/2024               | 16          | 9         | Operational   | 12-16         |                            |
| SR12     | Insufficient investment in TURAS Learn and other NES learning platforms.   | 19/04/2023 | 11/06/2024               | 12          | 12        | Operational   | 12-16         |                            |
| SR13     | Failure to recruit sufficient number of appropriately skilled and experienced staff within NES.  | 19/04/2023 | 07/07/2024               | 12          | 12        | Operational   | 12-16         |                            |
| SR14     | Inadequate Board governance, systems, processes and scrutiny of them   | 19/04/2023 | 07/07/2024               | 25          | 4         | Governance    | 1-5           |                            |
| SR15     | NES is not an evidence based data driven organisation, lacking intelligence and insights from its Information Assets.                            | 14/12/2023 | 11/06/2024               | 12          | 6         | Governance    | 1-5           | Gap 1                      |



| Risk no:   | SR1   |                        |  |           |              |       |         |         |                          |
|--|---|------------------------|--|-----------|--------------|-------|---------|---------|--------------------------|
| Risk Short Title:                                      | NES Strategic Plan does not align with the needs and expectations of stakeholders |                        |  |           |              |       |         |         |                          |
| Date Added to Register: 19/04/2023                     |   |                        |  |           |              |       |         |         |                          |
| Risk Owner:  | Kayan Daid  |                        |  |           | 07/07/2024   |       |         |         |                          |
| RISK Owner:  | Karen Reid  | Frequency of Review:   |  | Quarterly |              |       |         |         |                          |
|  |   | Committee/Group overse | Committee/Group overseeing                 |           | NES Board    |       |         |         |                          |
| Risk Category(s)                                       | Strategic   | Reputational           |  |           |              |       |         |         |                          |
| Risk impacts on<br>NES Strategy Key<br>Area of Focus : |   |                        |  |           |              |       |         |         |                          |
| Date of Score  | Net Score   |                        | nt Net Risk Rating:<br>prity 1, 2, 3 or 4) | Risk I    | Movement: (个 | (↓,↔, | Board A | ppetite | Within Board<br>Appetite |
| 19/04/2023   | 12  |                        | High                                       |           |              |       | Open    | 12-16   |                          |
| 26/09/2023   | 12  |                        | High                                       |           | <b>⇔</b>     |       |         |         |                          |
| 11/12/2023   | 9   |                        | Medium                                     |           | Û            |       |         |         |                          |
| 08/04/2024   | 9   |                        | Medium                                     |           | <b>⇔</b>     |       |         |         |                          |
|  | -   |                        |  |           |              |       |         |         |                          |

| Gross Impact<br>(1-5) | Gross Likelihood<br>(1-5) |
|-----------------------|---------------------------|
| 5                     | 3                         |
| Gross Total:          | 15                        |

The implications for NES from the Adult Social Care Review and the establishment of the National Care Service are discussed with our

Sponsor Directorate and Mental Health & Social Care Directorate to

allow for forward Planning

Partially controlled

Existing control rating:

| Net Impact<br>(1-5) | Net Likelihood<br>(1-5) |
|---------------------|-------------------------|
| 3                   | 3                       |
| Net Total:          | 9                       |

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

| Caus | se:   | Effe  | ct:  |  |  |  |
|------|---|-------|--|--|--|--|
| NES  | Strategic Plan does not align with the needs and expectations of  | This  | his could lead to a failure of the NHS and social care workforce's ability to respond to the existing  |  |  |  |
| stak | eholders  | and   | changing health and social care needs of Scotland's population   |  |  |  |
|      |   |       |  |  |  |  |
|      |   | Resu  | ılt:   |  |  |  |
|      |   | This  | could result in high levels of dissatisfaction with the role of NES and loss of credibility as the   |  |  |  |
|      |   | stati | utory education, training, workforce development, data and technology provider in health and   |  |  |  |
|      |   |       | al care in Scotland. It could also mean that the health and social care workforce do not have the  |  |  |  |
|      |   | nece  | essary skills and knowledge to meet the needs of the population.   |  |  |  |
|      |   |       |  |  |  |  |
| Con  | trol:   | Acti  | Actions:   |  |  |  |
| 1    | Revised NES Strategic Plan clearly articulates the importance of education and training to a sustainable workforce and has been widely consulted upon   | 1     | Executive engagement sessions with Territorial Health Boards, Health & Social Care Partnerships, Scottish Government, Social Care Sector and Academia to develop relationships and understanding of needs. |  |  |  |
| 2    | Annual Operating Plan, incorporating desired outcomes, forms the baseline for organisational activities   | 2     | ADP 2023/204 submitted to SG - Completed ADP 2024/2025 submitted to SG   |  |  |  |
| 3    | Development of focused communications to support management of stakeholder expectation in relation to NES capacity to deliver and support new systems development.                                    | 3     | SG signed off new NES Strategy July 2023<br>Update Dec 2023 - Action Closed - Strategy now published   |  |  |  |
| 4    | Work has been undertaken with NHS Boards, statutory education bodies in the four nations, and professional regulators, to mitigate disruption and allow trainees/learners to progress where possible. | 4     | Ongoing SG engagement and commissions to NES for social care workforce education and training  |  |  |  |

5



| Risk no:   | SR2   |                      |  |                                |                   |           |          |                          |  |  |
|--|---|----------------------|--|--------------------------------|-------------------|-----------|----------|--------------------------|--|--|
| Risk Short Title:                                      | Disproportionate amount of non-recurrent funding, without conversion to recurrent funding |                      |  |                                |                   |           |          |                          |  |  |
|  | Date Added to Register: 19/04/2023  |                      |  |                                |                   |           |          |                          |  |  |
| Risk Owner:  | Jim Boyle   |                      | Review Date:                               |                                | 02/06/2024        |           |          |                          |  |  |
| KISK OWIIEI.   | Jilli Boyle   | Frequency of Review: |  | Quarterly                      |                   |           |          |                          |  |  |
|  |   |                      | Committee/Group overse                     | Committee/Group overseeing NES |                   | NES Board |          |                          |  |  |
| Risk Category(s)                                       | Finance   |                      |  |                                |                   |           |          |                          |  |  |
| Risk impacts on<br>NES Strategy Key<br>Area of Focus : |   |                      |  |                                |                   |           |          |                          |  |  |
| Date of Score  | Net Score   |                      | nt Net Risk Rating:<br>prity 1, 2, 3 or 4) | Risk N                         | Novement: (↑,↔,↓) | Board A   | Appetite | Within Board<br>Appetite |  |  |
| 19/04/2023   | 12  |                      | High                                       |                                |                   | Averse    | 1-5      |                          |  |  |
| 26/09/2023   | 12  |                      | High                                       |                                | <b>⇔</b>          |           |          |                          |  |  |
| 04/12/2023   | 12  |                      | High                                       |                                | <b>\$</b>         |           |          |                          |  |  |
| 04/03/2024   | 16  |                      | High                                       | Û                              |                   |           |          |                          |  |  |
|  | -   |                      |  |                                |                   |           |          |                          |  |  |

| Gross Impact<br>(1-5) | Gross Likelihood<br>(1-5) |
|-----------------------|---------------------------|
| 4                     | 5                         |
| Gross Total:          | 20                        |

and in converting posts to permanent. Funding is carefully considered as part of these decisions

Partially controlled

Existing control rating:

| Net Impact<br>(1-5) | Net Likelihood<br>(1-5) |
|---------------------|-------------------------|
| 4                   | 4                       |
| Net Total:          | 16                      |

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

| Cause:  |  |      | Effect:   |  |  |  |  |
|---|--|------|---|--|--|--|--|
| NES continues to experience a disproportionate amount of non-recurrent funding, without conversion to recurrent funding |  |      | 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 |  |  |  |  |
| Con   | trol:  | Acti | ons:  |  |  |  |  |
| 1   | NES Exec Team maintain strong engagement with relevant leads at Scottish Government, as well as with the Sponsorship Team  | 1    | Baselining and bundling impact will be assessed when proposals are made available by the Scottish Government, and will be reported to the Board at the earliest opportunity Update Nov 2023 - This is more likely to impact on 2024/25.   |  |  |  |  |
| 2   | Maintain clarity in relation to NES's role and influence - through regular engagement with SG sponsor team, and relevant executive director groups, including SAMD, SEND, DoFs and HRDs.   |      | Any requests by Scottish Government to decommission any work streams will be fully considered by the Executive Team, considering education and training impacts, as well as staffing and financial implications   |  |  |  |  |
| 3   | Executive Team has approved an approach to career development and succession planning. This includes mapping of key roles; a process to identify potential successors; work with potential successors on individual development plans. | 3    | Further response to SG has been sent, highlighting the policy risks of reducing in-year funding by 5% in 2023/24. Completed - Sent October 2023.  |  |  |  |  |
| 4   | Chief Executive and NES Directors to maintain links with other UK organisations  | 4    | NES will be invloved 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.  |  |  |  |  |
|   | Executive Team actively and regularly consider risk in extending posts   |      |   |  |  |  |  |

5



| Risk no:   | SR3  |                 |  |        |                            |                |                |                          |  |
|--|--|-----------------|--|--------|----------------------------|----------------|----------------|--------------------------|--|
| Risk Short Title:                                      | Failure to recruit and retain sufficiently exp | erienced and kn | nowledgeable people to the                 | Board, | Executive Team and         | senior manager | nent establish | iment                    |  |
|  |  |                 | Date Added to Register:                    |        | 19/04/2023                 |                |                |                          |  |
| Risk Owner:  | Tracer Ashmerth Device                         |                 | Review Date:                               |        | 07/07/2024                 | 024            |                |                          |  |
| KISK OWNER:  | Tracey Ashworth Davies                         |                 | Frequency of Review:                       |        | Quarterly                  |                |                |                          |  |
|  |  |                 | Committee/Group overse                     | eeing  | Staff Governance Committee |                |                |                          |  |
| Risk Category(s)                                       | Operational                                    |                 |  | ,      |                            |                |                |                          |  |
| Risk impacts on<br>NES Strategy Key<br>Area of Focus : |  |                 |  |        |                            |                |                |                          |  |
| Date of Score  | Net Score                                      |                 | nt Net Risk Rating:<br>prity 1, 2, 3 or 4) | Risk I | Movement: (↑,↔,↓           | ) Board        | Appetite       | Within Board<br>Appetite |  |
| 19/04/2023   | 8  |                 | Medium                                     |        |                            | Open           | 12-16          |                          |  |
| 26/09/2023   | 8  | Medium          |  |        | <b>⇔</b>                   |                |                |                          |  |
| 11/01/2024   | 8  | Medium          |  |        | ⇔                          |                |                |                          |  |
| 08/04/2024   | 8  |                 | Medium                                     |        | <b>⇔</b>                   |                |                |                          |  |
|  | -  |                 |  |        |                            |                |                |                          |  |

| Gross Impact<br>(1-5) | Gross Likelihood<br>(1-5) |  |  |  |  |
|-----------------------|---------------------------|--|--|--|--|
| 4                     | 4                         |  |  |  |  |
| Gross Total:          | 16                        |  |  |  |  |

Existing control rating: Controlled

| Net Impact<br>(1-5) | Net Likelihood<br>(1-5) |  |  |  |  |
|---------------------|-------------------------|--|--|--|--|
| 4                   | 2                       |  |  |  |  |
| Net Total:          | 8                       |  |  |  |  |

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

| Cau | se:   | Effe | ct:   |  |  |  |  |  |
|-----|---|------|---|--|--|--|--|--|
| peo | NES fails to recruit and retain sufficiently experienced and knowledgeable beople 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  |  |  |  |  |  |
|     |   | Resi | ult:  |  |  |  |  |  |
|     |   |      | This would result in a deterioration of NES performance and credibility at all levels and would increase the risk of serious failures in governance   |  |  |  |  |  |
| Con | trol:   | Acti | ons:  |  |  |  |  |  |
| 1   | NES has access to a wide pool of nationwide talent in terms of non-<br>executive recruitment and has a robust process and a good track record<br>for attracting high quality candidates when Board vacancies occur. | 1    | Succession planning exercise covering cohort of executive and senior management roles has resulted in risk rating each role based on identifying potential internal candidates within a 2 year period of being ready for the role. Internal candidates are producing development plans which they and their line manager will regularly review supported by ODLL. A second cohort of senior management roles has been identified and a further succession planning exercise will take place by June 2024. |  |  |  |  |  |
| 2   | NES recruits executives and senior managers from across the public and private sectors to ensure a wide spread of skills and experience in its senior leadership.   | 2    |   |  |  |  |  |  |
| 3   | A programme of executive and senior manager development is in place to make sure that those in post are given the opportunity to develop in the role, and to acquire new professional skills and experience.        | 3    |   |  |  |  |  |  |
| 4   | Senior leaders are encouraged to participate in a wide range of national professional networking groups to make sure they have access to best practice across the sector.   | 4    |   |  |  |  |  |  |
| 5   |   | 5    |   |  |  |  |  |  |



| Risk no:   | SR4  |   |                         |        |                      |         |          |                          |  |
|--|--|---|-------------------------|--------|----------------------|---------|----------|--------------------------|--|
| Risk Short Title:                                      | NES does not adequately engage with its er | mployees  |                         |        |                      |         |          |                          |  |
|  |  |   | Date Added to Register: |        | 19/04/2023           |         |          |                          |  |
| Risk Owner:  | Tracer Ashmerth Device                     |   | Review Date:            |        | 06/06/2024           |         |          |                          |  |
| KISK OWNER:  | Tracey Ashworth Davies                     |   | Frequency of Review:    |        | Quarterly            |         |          |                          |  |
|  |  |   | Committee/Group overse  | eing   | Staff Governance Com | mittee  |          |                          |  |
| Risk Category(s)                                       | Operational                                |   |                         |        |                      |         |          |                          |  |
| Risk impacts on<br>NES Strategy Key<br>Area of Focus : |  |   |                         |        |                      |         |          |                          |  |
| Date of Score  | Net Score                                  | Current Net Risk Rating:<br>(Priority 1, 2, 3 or 4) |                         | Risk I | Movement: (↑,↔,↓)    | Board A | Appetite | Within Board<br>Appetite |  |
| 19/04/2023   | 9  | Medium  |                         |        |                      | Open    | 12-16    |                          |  |
| 26/09/2023   | 9  | Medium  |                         |        | <b>⇔</b>             |         |          |                          |  |
| 11/01/2024   | 9  |   | Medium                  |        | <b>⇔</b>             |         |          |                          |  |
| 08/03/2024   | 6  |   | Medium                  | Û      |                      |         |          |                          |  |
|  | -  |   |                         |        |                      |         |          |                          |  |

| Gross Impact<br>(1-5) | Gross Likelihood<br>(1-5) |
|-----------------------|---------------------------|
| 4                     | 4                         |
| Gross Total:          | 16                        |

| Net Impact<br>(1-5) | Net Likelihood<br>(1-5) |  |  |  |
|---------------------|-------------------------|--|--|--|
| 3                   | 2                       |  |  |  |
| Net Total:          | 6                       |  |  |  |

| Board Risk Appetite v Net Total |   |  |  |  |  |  |  |
|---------------------------------|---|--|--|--|--|--|--|
| Open 12-16                      |   |  |  |  |  |  |  |
| Medium                          | 6 |  |  |  |  |  |  |

| Existing control rating: | Controlled |  |
|--------------------------|------------|--|
|                          |            |  |
| Cause:                   |            |  |
|                          | <br>       |  |

Effect: NES does not adequately engage with its employees, including the wellbeing There could be a breakdown in understanding of the roles that employees play and the contributions and pastoral care of staff and trainees for whom we have responsibility. that are expected of them in the delivery of the Strategic Plan and the individual Directorate Operational Plans Result: That could result in a significant deterioration in NES' ability to deliver on those plans Control: Actions: 1 - Strong partnership working arrangements in place and maintained through regular contact with the Employee Director and via the Change iMatter action plans by iMatter Teams are completed and submitted annually. Management Programme Board. 2 - Communication plan to be a key focus on all organisational change Continue to increase attendance at monthly directorate townhalls. projects. Rollout OD Plan (Phase 1) launched in Oct 2023 supported by a communications and engagement 3 - Strong focus on communication and visibility, both at a corporate and plan. The aim is to engage and involve our workforce in each step of the journey so that the 3 directorate level through, for example, monthly directorate townhalls 3 outcomes are owned and embedded in how NES works. and executive led webinars enabling 2 way participation. Update March 23024 - Phase 1 completed - Action Closed 4 - Strong focus on support to line managers through the line managers Increase all staff communications via intranet. network. 5 - Organisational priority to complete team action plans resulting from annual iMatter NHS Scotland employee survey exercise. 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: nealthy work, healthy mind, healthy life, and healthy body



| Risk no:   | SR5  |   |                              |         |  |  |         |         |                          |
|--|--|---|------------------------------|---------|--|--|---------|---------|--------------------------|
| Risk Short Title:                                      | NES does not put in place an adequate corp | oorate infrastrud                                   | cture to support the Transfo | ormatio | n Route Map.   |  |         |         |                          |
|  | Date Added to Register: 19/04/2023         |   |                              |         |  |  |         |         |                          |
| Risk Owner:  | Tracer Ashmerth Device                     |   | Review Date:                 |         | 07/07/2024   |  |         |         |                          |
| KISK OWner:  | Tracey Ashworth Davies                     |   | Frequency of Review:         |         | Quarterly  |  |         |         |                          |
|  |  |   | Committee/Group overse       | eeing   | Staff Governance Committee                             |  |         |         |                          |
| Risk Category(s)                                       | Operational                                | Reputational  |                              |         |  |  |         |         |                          |
| Risk impacts on<br>NES Strategy Key<br>Area of Focus : |  |   |                              |         |  |  |         |         |                          |
| Date of Score  | Net Score                                  | Current Net Risk Rating:<br>(Priority 1, 2, 3 or 4) |                              | Risk I  | Risk Movement: $(\uparrow,\leftrightarrow,\downarrow)$ |  | Board A | ppetite | Within Board<br>Appetite |
| 19/04/2023   | 12   |   | High                         |         |  |  | Open    | 12-16   |                          |
| 26/09/023  | 12   | High  |                              |         | <b>⇔</b>   |  |         |         |                          |
| 11/01/2024   | 9  |   | Medium                       |         | Û  |  |         |         |                          |
| 08/04/2024   | 9  |   | Medium                       |         | <b>⇔</b>   |  |         |         |                          |
|  | -  |   |                              |         |  |  |         |         |                          |

| Gross Impact<br>(1-5) | Gross Likelihood<br>(1-5) |  |  |  |  |
|-----------------------|---------------------------|--|--|--|--|
| 4                     | 4                         |  |  |  |  |
| Gross Total:          | 16                        |  |  |  |  |

| Net Impact<br>(1-5) | Net Likelihood<br>(1-5) |
|---------------------|-------------------------|
| 3                   | 3                       |
| Net Total:          | 9                       |

| Board Risk Appetit | e v Net Total |
|--------------------|---------------|
| Open               | 12-16         |
| Medium             | 9             |

| Cause:  |   | Effe | ct:   |
|---|---|------|---|
| 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 the right number of people, suitably skilled, as well as having the right systems and other resources to |   |      | Board might not adequately deliver the aims of its own Strategic Plan or the external commissions ed with the Scottish Government   |
| drive improvements in transformation and best value.  |   | AOP  | ult:  could result in NES having insufficient corporate infrastructure staff to support delivery of the , Transformation Activity and potential efficiency savings. Resulting in reputational damage and act on stakeholder engagement. |
| Con   | trol:   | Acti | ons:  |
| 1   | Worforce Planning takes place alongside AOP processes so that resourcing can be aligned on an annual basis.   | 1    | Development of Business Process Transformation Project as part of Corporate Improvement Programme to drive efficiency and effectiveness in business operations. Update Jan 2024 PID completed and approved.                             |
| 2   | In year changes to resourcing are made in alignment with in year consideration of new projects through the Corporate Radar process.   | 2    | Implementation of Businees Process Transformation Project - Completing Phase 1 delivery in Quarter 1 2024/25  |
| 3   | Via the Post prioritisation process we identify issues associated with funding posts required to deliver the AOP and/or Corporate Radar approved projects and loop back to considering the impact on committed deliverables.  | 3    |   |
| 4   | Recruitment authorisation and other recruitment processes are being reviewed with the aim of achieving a more efficient, risk-based approach reducing time across NES and, all things being equal, reducing the time to recruit new staff. This could include how to bundle recruitment into groups of authorised roles, rather than recruiting to each post individually, etc. | 4    |   |
| 5   | Discussions on the implications of continued non-recurrent funding have been and will continue to be held with the Scottish Government, although no significant movement in the Scottish Government's position has been achieved at this point. Corporate process to ensure centralised view of commissions and impact on infrastructure in place by Dec 22.                    | 5    |   |



| Risk no:   | SR6  |                            |  |                                    |              |       |         |         |                          |
|--|--|----------------------------|--|------------------------------------|--------------|-------|---------|---------|--------------------------|
| Risk Short Title:                                      | Title: Failure to develop and maintain adequate Business Continuity arrangements to deal with the risk of adverse events and threats |                            |  |                                    |              |       |         |         |                          |
|  |  |                            | Date Added to Register: 19/04/2023         |                                    |              |       |         |         |                          |
| Risk Owner:  | Christopher Wroath   |                            | Review Date: 11/06/2024                    |                                    |              |       |         |         |                          |
| KISK Owner:  |  |                            | Frequency of Review: Quarterly             |                                    | Quarterly    |       |         |         |                          |
|  |  | Committee/Group overseeing |  | Technology & Information Committee |              |       |         |         |                          |
| Risk Category(s)                                       | Governance   |                            | Operational                                |                                    |              |       |         |         |                          |
| Risk impacts on<br>NES Strategy Key<br>Area of Focus : |  |                            |  |                                    |              |       |         |         |                          |
| Date of Score  | Net Score  |                            | nt Net Risk Rating:<br>ority 1, 2, 3 or 4) | Risk I                             | Movement: (个 | ,↔,↔) | Board A | ppetite | Within Board<br>Appetite |
| 19/04/2023   | 9  |                            | Medium                                     |                                    |              |       | Averse  | 1-5     |                          |
| 26/09/2023   | 9  |                            | Medium                                     |                                    | <b>⇔</b>     |       |         |         |                          |
| 13/12/2023   | 9  |                            | Medium                                     |                                    | <b>⇔</b>     |       |         |         |                          |
| 13/03/2024   | 9  |                            | Medium                                     |                                    | <b>⇔</b>     |       |         |         |                          |
|  | -  |                            |  |                                    |              |       |         |         |                          |

| Gross Impact<br>(1-5) | Gross Likelihood<br>(1-5) |
|-----------------------|---------------------------|
| 4                     | 4                         |
| Gross Total:          | 16                        |

| Net Impact<br>(1-5) | Net Likelihood<br>(1-5) |
|---------------------|-------------------------|
| 3                   | 3                       |
| Net Total:          | 9                       |

| Board Risk Appetit | e v Net Total |
|--------------------|---------------|
| Averse             | 1-5           |
| Medium             | 9             |

| Cause:  |  |       | ct:   |
|---|--|-------|---|
| 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 |  |       | e may be an inability to deliver normal levels of service, or even an inability to deliver services at extreme circumstances. |
|   | · ·  | Resu  | ılt:  |
|   |  |       | could result in failure to achieve strategic outcomes.  |
| Con   | trol:  | Actio | ons:  |
| 1   | Disaster Recovery Plan and Business Continuity Plans have been approved by the Executive Team.   | 1     | Outside contractors been engaged to complete and close all relveant KMG Audit actions to an agreed timetable with CEO.        |
| 2   | The plans were robustly tested in a desktop exercise and recommendations were considered by the ET and incorporated into the current version of the plans. | 2     |   |
| 3   |  | 3     |   |
| 4   |  | 4     |   |
| 5   |  | 5     |   |



| Risk no:   | SR7  |                               |  |                                    |                  |         |          |                          |  |  |
|--|--|-------------------------------|--|------------------------------------|------------------|---------|----------|--------------------------|--|--|
| Risk Short Title:                                      | Title: Failure to put in place measures to adequately protect against breaches of cyber security |                               |  |                                    |                  |         |          |                          |  |  |
|  |  |                               | Date Added to Register:                    |                                    | 19/04/2023       |         |          |                          |  |  |
| Risk Owner:  | Christophor Wrooth   |                               | Review Date: 11/06/2024                    |                                    |                  |         |          |                          |  |  |
| Risk Owner:  | Christopher Wroath   |                               | Frequency of Review:                       |                                    | Quarterly        |         |          |                          |  |  |
|  |  | Committee/Group overseeing Te |  | Technology & Information Committee |                  |         |          |                          |  |  |
| Risk Category(s)                                       | Governance   |                               | Operational                                | perational                         |                  |         |          |                          |  |  |
| Risk impacts on<br>NES Strategy Key<br>Area of Focus : |  |                               |  |                                    |                  |         |          |                          |  |  |
| Date of Score  | Net Score  |                               | nt Net Risk Rating:<br>ority 1, 2, 3 or 4) | Risk                               | Movement: (↑,↔,↓ | Board A | Appetite | Within Board<br>Appetite |  |  |
| 19/04/2023   | 15   |                               | High                                       |                                    |                  | Averse  | 1-5      |                          |  |  |
| 26/09/2023   | 15   |                               | High                                       |                                    | <b>⇔</b>         |         |          |                          |  |  |
| 13/12/2023   | 15   |                               | High                                       |                                    | <b>⇔</b>         |         |          |                          |  |  |
| 13/03/2024   | 15   |                               | High                                       |                                    | ⇔                |         |          |                          |  |  |
|  | -  |                               |  |                                    |                  |         |          |                          |  |  |

| Gross Impact<br>(1-5) | Gross Likelihood<br>(1-5) |
|-----------------------|---------------------------|
| 5                     | 4                         |
| Gross Total:          | 20                        |

| Net Impact<br>(1-5) | Net Likelihood<br>(1-5) |
|---------------------|-------------------------|
| 5                   | 3                       |
| Net Total:          | 15                      |

| Board Risk Appetit | e v Net Total |
|--------------------|---------------|
| Averse             | 1-5           |
| High               | 15            |

| Cau | se:   | 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   |  |  |  |  |  |  |
|     |   | repu    | could significantly affect our ability to continue normal business operations and would risk stational damage and the imposition of punitive financial fines by regulatory authorities |  |  |  |  |  |  |
| Con | trol:   | Acti    | ons:   |  |  |  |  |  |  |
| 1   | Digital team ensures firewall logs, including changes to the firewall rule base, are added to the (Security Information and Event Management) SIEM tool in use and continue to be monitored frequently  | 1       | Continue to use the NIS Audit framework to manage and build on NES' cyber security posture.  |  |  |  |  |  |  |
| 2   | Senior Management and Executive level involvement and oversight of Cyber security related risk through updates in the Technology and Information Committee and Audit & Risk Committee meetings and through the NES Assurance Group.   | 2       | Review our early adoptor status for the NHSS Security Operations Centre (Dundee).  |  |  |  |  |  |  |
| 3   | Staff awareness of Cyber security matters is raised through information security webinars provided by the Information Security Manager, which includes phishing emails and security regarding the use of public Wi-fi, reporting security breaches and determining key NES contacts, password guidance, information / data management under GDPR as well as analysing key current trends in Cybercrime. |         | Identifying capacity for Band 7 Cyber Security support post to join the Infrastructure and Operations Group within NTS.  |  |  |  |  |  |  |
| 4   |   | 4       |  |  |  |  |  |  |  |
| 5   |   | 5       |  |  |  |  |  |  |  |



| Risk no:   | SR8   |                           |  |                         |   |                |     |                          |  |  |
|--|---|---------------------------|--|-------------------------|---|----------------|-----|--------------------------|--|--|
| Risk Short Title:                                      | Failure to put sufficient employee training | se the risk of breaches ( | of Information                             | Governance              |   |                |     |                          |  |  |
|  |   |                           | Date Added to Register:                    |                         |   |                |     |                          |  |  |
| Risk Owner:  | Christophor Wrooth                          |                           |  | 11/06/2024<br>Quarterly |   |                |     |                          |  |  |
| Risk Owner:  | Christopher Wroath                          |                           |  |                         |   |                |     |                          |  |  |
|  |   |                           | Committee/Group overseeing                 |                         | Technology & Information Committee                |                |     |                          |  |  |
| Risk Category(s)                                       | Governance                                  |                           | Reputational                               |                         |   |                |     |                          |  |  |
| Risk impacts on<br>NES Strategy Key<br>Area of Focus : |   |                           |  |                         |   |                |     |                          |  |  |
| Date of Score  | Net Score                                   |                           | nt Net Risk Rating:<br>ority 1, 2, 3 or 4) | Risk                    | Movement: $(\uparrow,\leftrightarrow,\downarrow)$ | Board Appetite |     | Within Board<br>Appetite |  |  |
| 19/04/2023   | 12  |                           | High<br>High                               |                         |   | Averse         | 1-5 |                          |  |  |
| 26/09/2023   | 12  |                           |  |                         | <b>⇔</b>  | 1              |     |                          |  |  |
| 13/12/2023   | 12  |                           | High                                       |                         | <b>⇔</b>  | 1              |     |                          |  |  |
| 13/03/2024   | 8   |                           | Medium                                     |                         | Û   | 1              |     |                          |  |  |
|  | -   |                           |  |                         |   | 1              |     |                          |  |  |

| Gross Impact<br>(1-5) | Gross Likelihood<br>(1-5) |
|-----------------------|---------------------------|
| 4                     | 5                         |
| Gross Total:          | 20                        |

| Net Impact<br>(1-5) | Net Likelihood<br>(1-5) |
|---------------------|-------------------------|
| 4                   | 2                       |
| Net Total:          | 8                       |

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

| 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 |  |  |  |  |  |  |
|  |   | This<br>regu   | Result:  This could result in serious reputational damage and the imposition of punitive financial fines by egulatory authorities.           |  |  |  |  |  |
| Con  | trol:   | Actio  | ons:   |  |  |  |  |  |
| 1  | Statutory and relevant data security processes in place, with specific reference to the new General Data Protection Regulations.  | 1  | NES' Executive Team to increase all IG/IT security training to mandatory.  Update March 2024 - Action Closed Mandatory Training implemented. |  |  |  |  |  |
| 2  | Specific additional policies, procedures and practices (based on ISO27001) have been put in place to ensure robust security applies to the TURAS platform and the being developed National Digital Platform.  | 2  |  |  |  |  |  |  |
| 3  | Whistleblowing arrangements are in place with information and resources available to staff via the Intranet including Whistleblowing standards, policy and process. These resources include reference to whistleblowing in relation to loss or misuse of data and are part of the essential learning programme for all NES employees. | 3  |  |  |  |  |  |  |
| 4  | Safe Information Handling features as an element of the NES essential learning programme, and the Executive Team regularly review compliance  | 4  |  |  |  |  |  |  |
| 5  |   | 5  |  |  |  |  |  |  |



| Risk no:   | SR9  |                            |  |                         |   |         |          |                          |  |  |  |
|--|--|----------------------------|--|-------------------------|---|---------|----------|--------------------------|--|--|--|
| Risk Short Title:                                      | tle: NES does not put sufficient measures in place to address ongoing cost and funding pressures |                            |  |                         |   |         |          |                          |  |  |  |
|  |  |                            | Date Added to Register:                    |                         | 19/04/2023  |         |          |                          |  |  |  |
| Risk Owner:  | line Davide  |                            |  | 01/05/2024<br>Quarterly |   |         |          |                          |  |  |  |
| Risk Owner:  | Jim Boyle  |                            |  |                         |   |         |          |                          |  |  |  |
|  |  | Committee/Group overseeing |  | NES Board               |   |         |          |                          |  |  |  |
| Risk Category(s)                                       | Finance  |                            |  |                         |   |         |          |                          |  |  |  |
| Risk impacts on<br>NES Strategy Key<br>Area of Focus : |  |                            |  |                         |   |         |          |                          |  |  |  |
| Date of Score  | Net Score  |                            | nt Net Risk Rating:<br>ority 1, 2, 3 or 4) | Risk I                  | Movement: $(\uparrow,\leftrightarrow,\downarrow)$ | Board A | Appetite | Within Board<br>Appetite |  |  |  |
| 19/04/2023   | 9  |                            | Medium                                     |                         |   | Averse  | 1-5      |                          |  |  |  |
| 26/09/2023   | 9  |                            | Medium<br>Medium                           |                         | <b>\$</b>   |         |          |                          |  |  |  |
| 04/12/2023   | 9  |                            |  |                         | <b>⇔</b>  |         |          |                          |  |  |  |
| 01/02/2024   | 16   |                            | High                                       |                         | 仓   |         |          |                          |  |  |  |
|  | -  |                            |  |                         |   |         |          |                          |  |  |  |

| Gross Impact<br>(1-5) | Gross Likelihood<br>(1-5) |
|-----------------------|---------------------------|
| 5                     | 5                         |
| Gross Total:          | 25                        |

| Net Impact<br>(1-5) | Net Likelihood<br>(1-5) |
|---------------------|-------------------------|
| 4                   | 4                       |
| Net Total:          | 16                      |

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

| Cau  | se:   | Effect: |  |  |  |  |  |  |
|--|---|---------|--|--|--|--|--|--|
| funding pressures as well as a high level of non-recurrent funding from SG |   |         | The Board will experience financial constraints and will risk the inability to set sustainable financial plans and to take remedial actions necessary to remain in financial balance  Result: 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 |  |  |  |  |  |
|  |   |         |  |  |  |  |  |  |
| 1  | The Annual Operational Planning process within NES gives Directorates indicative budgets to plan their own activities and expenditure and identifies cost pressures and potential savings across NES.                             | 1       | The financial implications of any requests to decommission specific activities, or to reduce funding generally will be fully explored, with the financial, staffing and service impacts fully set out  |  |  |  |  |  |
| 2  | The Senior Operational Leadership Group, chaired by the Director of Planning reviews budget submissions from across NES to ensure congruence, no duplication and identify opportunities for collaboration and efficiency savings. | 2       | The Operational Planning process for 2024/25 will have a significantly sharpened focus on the achievement of savings, as required by the SG's Sustainability & Value programme, and with the increasing liklihood of reductions to baseline funding  |  |  |  |  |  |
| 3  | This process enables decisions to be taken by the ET on prioritisation measures needed to deliver a balanced budget to the Board to be based on the impact of the planned activities.   | 3       | NES are working with SG to identify how baseline and additional commission activity can be modelled to match reduced funding availability.   |  |  |  |  |  |
| 4  | NES Board considers measures and makes approvals to balance the annual budget, including the measures suggested by the ET to reach a balanced position.   | 4       | Implications and risks of reducing activity will be set out for SG to allow decisions to be taken in the full knowledge of their impact to the wider NHS in Scotland   |  |  |  |  |  |
| 5  | Close working with SG to address the underlying deficit resulting from the expansion of TGs and uplifts that have been less than cost pressures in this area. SG have agreed to underwrite the in-year deficit position on MTG's. | 5       |  |  |  |  |  |  |



| Risk no:   | SR10   |                            |  |           |                         |         |         |                          |  |  |
|--|--|----------------------------|--|-----------|-------------------------|---------|---------|--------------------------|--|--|
| Risk Short Title:                                      | Title: Failure to adequately anticipate and mitigate the impacts of policy, legislative, economic, technological and societal change |                            |  |           |                         |         |         |                          |  |  |
|  |  |                            | Date Added to Register:                    |           | 19/04/2023              |         |         |                          |  |  |
| Risk Owner:  | Karan Daid   |                            |  |           | 07/07/2024<br>Quarterly |         |         |                          |  |  |
| Risk Owner:  | Karen Reid   |                            | Frequency of Review:                       |           |                         |         |         |                          |  |  |
|  |  | Committee/Group overseeing |  | NES Board |                         |         |         |                          |  |  |
| Risk Category(s)                                       | Strategic  |                            |  |           |                         |         |         |                          |  |  |
| Risk impacts on<br>NES Strategy Key<br>Area of Focus : |  |                            |  |           |                         |         |         |                          |  |  |
| Date of Score  | Net Score  |                            | nt Net Risk Rating:<br>ority 1, 2, 3 or 4) | Risk I    | Movement: (↑,↔,↓)       | Board A | ppetite | Within Board<br>Appetite |  |  |
| 19/04/2023   | 8  |                            | Medium<br>Medium<br>Medium                 |           |                         | Open    | 12-16   |                          |  |  |
| 26/09/2023   | 8  |                            |  |           | <b>⇔</b>                |         |         |                          |  |  |
| 11/12/2023   | 8  |                            |  |           | <b>⇔</b>                |         |         |                          |  |  |
| 08/04/2024   | 12   |                            | High                                       |           | 仓                       |         |         |                          |  |  |
|  | -  |                            |  |           |                         |         |         |                          |  |  |

| Gross Impact<br>(1-5) | Gross Likelihood<br>(1-5) |
|-----------------------|---------------------------|
| 4                     | 3                         |
| Gross Total:          | 12                        |

Existing control rating: Controlled

| Net Impact<br>(1-5) | Net Likelihood<br>(1-5) |
|---------------------|-------------------------|
| 4                   | 3                       |
| Net Total:          | 12                      |

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

| Cause: Effect: |  |  |  |  |  |  |
|----------------|--|--|--|--|--|--|
|                | is not able to adequately anticipate and mitigate the impacts of policy, lative, economic, technological and societal change   | ı  |  |  |  |  |
|                |  |  |  |  |  |  |
|                |  | This could result in a compromise in our ability to deliver on our Strategic Plan or significant it, or to deliver Directorate Operational Plans   |  |  |  |  |
| Con            | trol:  | 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  Actions: |  |  |  |  |
| 1              | There are many regular engagements with a wide range of stakeholders - governmental, professional, peer Boards - to ensure that NES is aware of changes to policy, demographic trends, technological change, which will feed into the NES Strategic Plan | 1  |  |  |  |  |
| 2              | Scottish Government Priorities are fully discussed with the NES/SG<br>Sponsorship Team and are then incorporated into the Annual Delivery<br>Plans that drive the core activity of the Board   | 2  | Ongoing SG discussions on fiscal impact on NES ADP.                            |  |  |  |
| 3              | Monitoring of Strategic Risk 2 in relation to funding in current fiscal and political enviroment.  | 3  | Policy Parliamentary Team within NES meets regularly with Scottish Government. |  |  |  |
| 4              |  | 4  | Strengthening financial reporting to be implemented.                           |  |  |  |
| 5              |  | 5  |  |  |  |  |



| Risk no:   | SR11  |   |                         |  |                   |             |           |                          |  |
|--|---|---|-------------------------|--|-------------------|-------------|-----------|--------------------------|--|
| Risk Short Title:                                      | Poor learning outcomes and learning experience for our stakeholders |   |                         |  |                   |             |           |                          |  |
|  |   |   | Date Added to Register: |  | 19/04/2023        |             |           |                          |  |
| Risk Owner:  | Karen Wilson  |   | Review Date:            |  | 03/06/2024        |             |           |                          |  |
| Risk Owner:  | Karen wiison  |   | Frequency of Review:    |  | Quarterly         |             |           |                          |  |
|  |   |   | Committee/Group overse  | Committee/Group overseeing Education & Quality C |                   | y Committee | committee |                          |  |
| Risk Category(s)                                       | Operational   | Reputational  |                         |  |                   |             |           |                          |  |
| Risk impacts on<br>NES Strategy Key<br>Area of Focus : |   |   |                         |  |                   |             |           |                          |  |
| Date of Score  | Net Score   | Current Net Risk Rating:<br>(Priority 1, 2, 3 or 4) |                         | Risk I   | Movement: (个,↔,、) | Board       | Appetite  | Within Board<br>Appetite |  |
| 19/04/2023   | 9   |   | Medium                  |  |                   | Open        | 12-16     |                          |  |
| 26/09/2023   | 9   |   | Medium                  |  | <b>⇔</b>          |             |           |                          |  |
| 12/12/2023   | 9   |   | Medium                  |  | <b>⇔</b>          |             |           |                          |  |
| 05/03/2024   | 9   |   | Medium                  |  | <b>⇔</b>          |             |           |                          |  |
|  | -   |   |                         |  |                   |             |           |                          |  |

| Gross Impact<br>(1-5) | Gross Likelihood<br>(1-5) |
|-----------------------|---------------------------|
| 4                     | 4                         |
| Gross Total:          | 16                        |

| Net Impact<br>(1-5) | Net Likelihood<br>(1-5) |
|---------------------|-------------------------|
| 3                   | 3                       |
| Net Total:          | 9                       |

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

| E  | xisting control rating: Controlled   |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|
| Caus   | se:  | Effe   | ect:   |  |  |  |  |
| NES delivers poor learning outcomes or a poor quality learning experience to our stakeholders, or if we are inflexible in evolving the methods of delivery of training and education |  |  | This could lead to the Health and Social Care workforce not having the necessary knowledge and skill to deliver good quality care  |  |  |  |  |
|  |  | Result:  This could result in NES becoming disconnected from the needs of the wider workforce and fameet the needs of staff, trainees, learners and stakeholders, leading to serious reputational cand reassessment of the Board's role in delivering education and training |  |  |  |  |  |
| Con  | trol:  | Acti   | ions:  |  |  |  |  |
| 1  | Chief Executive and/or NES Directors maintain open and collaborative relationships/arrangements with counterparts in partner organisation  | 1 1  | Development of a Learning & Education Strategy.  Update March 2024 - Learning & Education Strategy approved by February 2024 Board - moving into implementation.   |  |  |  |  |
| 2  | Ensure Chair is well briefed to manage relationships with other Board/organisational Chairs  | 2  | Development of a strategy and resources for coproduction & engagement.  Update March 2024 - Strategy renamed to Involving Peoples & Community Framework - Draft version gone to ELG 29.02.204.                                     |  |  |  |  |
| 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 regustaff video and Intranet updates |  | Learning and Education Framework being developed.  |  |  |  |  |
| 4  | Widespread evaluation of education programmes, including the use of feedback from learners to effect improvement.  | of 4   | 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. |  |  |  |  |
| 5  | Education Governance arrangements in place to ensure quality and performance is monitored and improved where necessary.  | 5  |  |  |  |  |  |



| Risk no:   | SR12   |              |  |        |   |                                      |          |                          |  |  |
|--|--|--------------|--|--------|---|--------------------------------------|----------|--------------------------|--|--|
| Risk Short Title:                                      | Insufficient investment in TURAS Learn and other NES learning platforms. |              |  |        |   |                                      |          |                          |  |  |
|  |  |              | Date Added to Register:                    |        | 19/04/2023  |                                      |          |                          |  |  |
| Risk Owner:  | Christophor Wrooth   |              | Review Date:                               |        | 11/06/2024  |                                      |          |                          |  |  |
| Risk Owner:  | Christopher Wroath   |              | Frequency of Review:                       |        | Quarterly   |                                      |          |                          |  |  |
|  |  |              | Committee/Group overse                     | eeing  | Technology & Informa                              | tion / Education & Quality Committee |          |                          |  |  |
| Risk Category(s)                                       | Operational  | Reputational |  |        |   |                                      |          |                          |  |  |
| Risk impacts on<br>NES Strategy Key<br>Area of Focus : |  |              |  |        |   |                                      |          |                          |  |  |
| Date of Score  | Net Score  |              | nt Net Risk Rating:<br>ority 1, 2, 3 or 4) | Risk I | Movement: $(\uparrow,\leftrightarrow,\downarrow)$ | Board A                              | Appetite | Within Board<br>Appetite |  |  |
| 19/04/2023   | 12   |              | High                                       |        |   | Open                                 | 12-16    |                          |  |  |
| 26/09/2023   | 12   |              | High                                       |        | ⇔   |                                      |          |                          |  |  |
| 13/12/2023   | 12   |              | High                                       |        | ⇔   |                                      |          |                          |  |  |
| 13/03/2024   | 12   |              | High                                       |        | ⇔   |                                      |          |                          |  |  |
|  | -  |              |  |        |   |                                      |          |                          |  |  |

| Gross Impact<br>(1-5) | Gross Likelihood<br>(1-5) |
|-----------------------|---------------------------|
| 4                     | 3                         |
| Gross Total:          | 12                        |

| Net Impact<br>(1-5) | Net Likelihood<br>(1-5) |
|---------------------|-------------------------|
| 4                   | 3                       |
| Net Total:          | 12                      |

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

| E>         | xisting control rating: Uncontrolled   |      |   |  |  |  |  |
|------------|--|------|---|--|--|--|--|
| Caus       | se:  | Effe | ct:   |  |  |  |  |
| , ,, ,, ,, |  |      | This would lead to the Board being unable to meet the learning needs and expectations of all stakeholders   |  |  |  |  |
|            |  | Res  | Result:   |  |  |  |  |
|            |  | mee  | could result in NES becoming disconnected from the needs of the wider workforce and failing to<br>et the needs of staff, trainees, learners and stakeholders, leading to serious reputational damage<br>reassessment of the Board's role in delivering education and training |  |  |  |  |
| Cont       | trol:  | Acti | ons:  |  |  |  |  |
| 1          | A significant amount of time and resource is invested to establish the learning needs of a very wide stakeholder group | 1    | Turas Refresh Programme Outline Business Case to be presented to Scottish Government. Update April 2024 - OBC currently going through governance groups prior to submission to Scottish Government.   |  |  |  |  |
| 2          | Strategic case for investment has been prepared for discussion with t<br>Scottish Government                           | he 2 |   |  |  |  |  |
| 3          | Turas Refresh Programme as part of Transformation Programme.   | 3    |   |  |  |  |  |
| 4          |  | 4    |   |  |  |  |  |
| 5          |  | 5    |   |  |  |  |  |



| Risk no:   | SR13  |   |                         |  |            |                            |       |                          |
|--|---|---|-------------------------|--|------------|----------------------------|-------|--------------------------|
| Risk Short Title:                                      | failure to recruit sufficient number of appropriately skilled and experienced staff within NES. |   |                         |  |            |                            |       |                          |
|  |   |   | Date Added to Register: |  | 19/04/2023 |                            |       |                          |
| Risk Owner:  | T   |   | Review Date:            |  | 07/07/2024 |                            |       |                          |
| Risk Owner:  | Tracey Ashworth Davies  |   | Frequency of Review:    |  | Quarterly  |                            |       |                          |
|  |   |   |                         | Committee/Group overseeing                               |            | Staff Governance Committee |       |                          |
| Risk Category(s)                                       | Operational   |   |                         |  |            |                            |       |                          |
| Risk impacts on<br>NES Strategy Key<br>Area of Focus : |   |   |                         |  |            |                            |       |                          |
| Date of Score  | Net Score   | Current Net Risk Rating:<br>(Priority 1, 2, 3 or 4) |                         | Risk Movement: $(\uparrow, \leftrightarrow, \downarrow)$ |            | Board Appetite             |       | Within Board<br>Appetite |
| 19/04/2023   | 8   |   | Medium                  | 1edium   |            | Open                       | 12-16 |                          |
| 26/09/2023   | 8   |   | Medium                  |  | ⇔          |                            |       |                          |
| 11/01/2024   | 8   | Medium  |                         | ⇔  |            |                            |       |                          |
| 08/04/2024   | 12  |   | High                    |  | Û          |                            |       |                          |
|  | -   |   |                         |  |            |                            |       |                          |

| Gross Impact<br>(1-5) | Gross Likelihood<br>(1-5) |
|-----------------------|---------------------------|
| 4                     | 3                         |
| Gross Total:          | 12                        |

Existing control rating:

| Net Impact<br>(1-5) | Net Likelihood<br>(1-5) |
|---------------------|-------------------------|
| 4                   | 3                       |
| Net Total:          | 12                      |

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

| Cause:  |
|---|
| Failure to recruit sufficient number of appropriately skilled and experienced |
| staff within NES.   |

Controlled

Effect:

NES having insufficient staff to support delivery of the AOP, Transformation Route Map and Strategic Plan

| stai | Willin NES.   | Result: This could result in reputational damage and impact on stakeholder engagement. |  |  |  |
|------|---|--|--|--|--|
| Con  | trol:   | Actions:   |  |  |  |
| 1    | Monitoring and continuously improving job packs to ensure they attract an appropriate number of high quality candidates.  | Work with Higher/Further Education establishments in Scotland, in addition to ta       |  |  |  |
| 2    | Monitoring and continuously improving recruitment routes eg career sites, social media to ensure they attract an appropriate number of high quality candidates. | 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).                    |  |  |
| 3    | Monitoring and continuously improving our Equality and Diversity Practices in order to ensure they attract and retain underrepresented staff groups.            | 3  | The NES Equality & Human Rights Team continue to off online anti-racism training for NES Line Managers which will enable our line managers to better understand key actions they can take to support NES as an inclusive organisation. |  |  |
| 4    | Monitor and report on the composition of the NES workforce and sex/gender/ethnicity/disability pay gaps to the Board.   | 4  | Development of Talent Attraction Strategy.   |  |  |
| 5    | Risk based decisions regarding termination of temporary staff in the event of uncertaintly of funding.  | 5  | Finance/HR and Planning to advise the CEO on risk based decisions needed.  |  |  |



| Risk no:   | SR14   |     |  |  |            |           |                |     |                          |
|--|--|-----|--|--|------------|-----------|----------------|-----|--------------------------|
| Risk Short Title:                                      | Inadequate Board governance, systems, processes and scrutiny of them |     |  |  |            |           |                |     |                          |
|  |  |     | Date Added to Register:                    |  | 19/04/2023 |           |                |     |                          |
| Risk Owner:  | Kayan Daid   |     | Review Date:                               |  | 07/07/2024 |           |                |     |                          |
| KISK OWner:  | Karen Reid   |     | Frequency of Review:                       |  | Quarterly  |           |                |     |                          |
|  |  |     | Committee/Group overseeing                 |  | NES Board  | NES Board |                |     |                          |
| Risk Category(s)                                       | Governance   |     |  |  |            |           |                | ·   |                          |
| Risk impacts on<br>NES Strategy Key<br>Area of Focus : |  |     |  |  |            |           |                |     |                          |
| Date of Score  | Net Score  |     | nt Net Risk Rating:<br>prity 1, 2, 3 or 4) | Risk Movement: $(\uparrow, \leftrightarrow, \downarrow)$ |            | ,↔,↓)     | Board Appetite |     | Within Board<br>Appetite |
| 19/04/2023   | 4  | Low |  |  |            |           | Averse         | 1-5 |                          |
| 26/09/2023   | 4  | Low |  |  | <b>⇔</b>   |           |                |     |                          |
| 11/12/2023   | 4  |     | Low  |  | <b>⇔</b>   |           |                |     |                          |
| 08/04/2024   | 4  |     | Low  |  | <b>⇔</b>   |           |                |     |                          |
|  | -  |     |  |  |            |           |                |     |                          |

| Gross Impact<br>(1-5) | Gross Likelihood<br>(1-5) |
|-----------------------|---------------------------|
| 5                     | 5                         |
| Gross Total:          | 25                        |

and maintain close working with relevant professional and other

Partially controlled

Existing control rating:

regulatory bodies

| Net Impact<br>(1-5) | Net Likelihood<br>(1-5) |
|---------------------|-------------------------|
| 2                   | 2                       |
| Net Total:          | 4                       |

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

| Cause:   |  |      | Effect:   |  |  |  |  |
|--|--|------|---|--|--|--|--|
| NES does not put sufficient arrangements in place in relation to Board |  | This | This could lead to corporate non-compliance and failure to comply with statutory, legislative and   |  |  |  |  |
| gove   | overnance, systems, processes and scrutiny of them   |      | climate emergency/sustainability requirements   |  |  |  |  |
|  |  |      |   |  |  |  |  |
|  |  | Resi | Result:   |  |  |  |  |
|  |  |      | could result in a loss of credibility towards the Board, from the Scottish Government as well as a  |  |  |  |  |
|  |  |      | ge of audit and scrutiny bodies, which could pose a threat to the general credibility and future of   |  |  |  |  |
|  |  | NES  |   |  |  |  |  |
| Con  | trol:  | Acti | ons:  |  |  |  |  |
| 1  | Standing committees responsible for each governance domain supported by Executive Groups.  | 1    | New refreshed Board and committee Assurance Framework has been developed and discussed with the Board at a development session. This will be further developed before final implementation. |  |  |  |  |
| 2  | Each committee provides an annual report to Audit Committee detailing how it has discharged its remit.                                   | 2    | ET review outstanding Audit actions - quarterly   |  |  |  |  |
| 3  | Comprehensive programme of internal audit  | 3    | Scottish Government sign off of ADP - completed 2023/24   |  |  |  |  |
| 4  | An Assurance framework has been developed in line with the 'Blue Print<br>for Governance' and the Assurance and Audit Committee Handbook | 4    | Board Governance Training at Board Development Events   |  |  |  |  |
|  | Ensure corporate awareness of relevant statutory regulatory oversight,   |      |   |  |  |  |  |

5 Development of Blueprint Action Plan to strengthen governance.



| Risk no:   | SR15  |                            |  |                                    |   |         |          |                          |  |
|--|---|----------------------------|--|------------------------------------|---|---------|----------|--------------------------|--|
| Risk Short Title:                                      | NES is not an evidence based data driven or | rganisation, lack          | king intelligence and insight:             | s from i                           | ts Information Assets.                              |         |          |                          |  |
|  | Date Added to Register: 14/12/2023          |                            |  |                                    |   |         |          |                          |  |
| Risk Owner:  | Christophor Wrooth                          |                            | Review Date:                               |                                    | 11/06/2024  |         |          |                          |  |
| Risk Owner:  | : Christopher Wroath                        |                            | Frequency of Review:                       |                                    | Quarterly   |         |          |                          |  |
|  |   | Committee/Group overseeing |  | Technology & Information Committee |   |         |          |                          |  |
| Risk Category(s)                                       | Governance                                  |                            |  |                                    |   |         |          |                          |  |
| Risk impacts on<br>NES Strategy Key<br>Area of Focus : |   |                            |  |                                    |   |         |          |                          |  |
| Date of Score  | Net Score                                   |                            | nt Net Risk Rating:<br>ority 1, 2, 3 or 4) | Risk I                             | Movement: $(\uparrow, \leftrightarrow, \downarrow)$ | Board A | Appetite | Within Board<br>Appetite |  |
| 14/12/2023   | 6   |                            | Medium                                     |                                    |   | Averse  | 1-5      |                          |  |
| 13/03/2024   | 6   |                            | Medium                                     |                                    | ⇔   |         |          |                          |  |
|  | -   |                            | ·  |                                    |   |         |          |                          |  |
|  | -   |                            |  |                                    |   |         |          |                          |  |
|  | -   |                            |  |                                    |   |         |          |                          |  |

| Gross Impact<br>(1-5) | Gross Likelihood<br>(1-5) |
|-----------------------|---------------------------|
| 3                     | 4                         |
| Gross Total:          | 12                        |

| Net Impact<br>(1-5) | Net Likelihood<br>(1-5) |
|---------------------|-------------------------|
| 2                   | 3                       |
| Net Total:          | 6                       |

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

| 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. |  |  |  |
|        |   | Resu   | ult:  |  |  |  |
|        |   | This could result in a loss of credibility towards the Board, from the Scottish Government and scrutiny bodies, which could pose a threat to the general credibility and future of NES |   |  |  |  |
| Con    | trol:   | Actio  | ons:  |  |  |  |
| 1      | Transformation Programme is now operational. There is a specific focus from the Corporate Improvement Programme on efficiency and effectiveness of data collection, storage and management. | 1  | Development of an overt data plan as part of the Corporate Improvement Plan.                          |  |  |  |
| 2      | Plans for automation and preparation for artificial intelligence will drive new and improved data collection, storage and management.   | 2  |   |  |  |  |
| 3      | Development of the Implementation Plan for the M365 Viva Suite of applications will drive new and improved data collection, storage and management.   | 3  |   |  |  |  |
| 4      | Planned pilot of M365 Copilot Application will drive intelligence and knowledge on required improvements and restructuring of all NES data and information.                                 | 4  |   |  |  |  |
| 5      |   | 5  |   |  |  |  |

### **Summary of Strategic Risks Exposure**

Table 1 - Current Position - May 2024

| Current Risk Exposure |           |       |        |      |       |            |  |  |
|-----------------------|-----------|-------|--------|------|-------|------------|--|--|
| (Total Score)         | Very High | High  | Medium | Low  | Total | % of Total |  |  |
| Strategic             |           | 1     | 1      |      | 2     | 13.3%      |  |  |
| Operational           |           | 2     | 4      |      | 6     | 40.0%      |  |  |
| Finance               |           | 2     |        |      | 2     | 13.3%      |  |  |
| Reputational          |           |       |        |      | 0     | 0.0%       |  |  |
| Governance            |           | 1     | 3      | 1    | 5     | 33.3%      |  |  |
| Technology            |           |       |        |      | 0     | 0.0%       |  |  |
| TOTAL EXPOSURE        |           | 6     | 8      | 1    | 15    | 100.0%     |  |  |
| % of Total            | 0.0%      | 40.0% | 53.3%  | 6.7% |       |            |  |  |

**Table 2 - Last Reported Position - February 2024** 

| Current Risk Exposure |           |       |        |      |       |            |  |  |
|-----------------------|-----------|-------|--------|------|-------|------------|--|--|
| (Total Score)         | Very High | High  | Medium | Low  | Total | % of Total |  |  |
| Strategic             |           |       | 2      |      | 2     | 13.3%      |  |  |
| Operational           |           | 1     | 5      |      | 6     | 40.0%      |  |  |
| Finance               |           | 2     |        |      | 2     | 13.3%      |  |  |
| Reputational          |           |       |        |      | 0     | 0.0%       |  |  |
| Governance            |           | 2     | 2      | 1    | 5     | 33.3%      |  |  |
| Technology            |           |       |        |      | 0     | 0.0%       |  |  |
| TOTAL EXPOSURE        |           | 5     | 9      | 1    | 15    | 100.0%     |  |  |
| % of Total            | 0.0%      | 33.3% | 60.0%  | 6.7% |       |            |  |  |

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) |                       | 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<br>this could occur –<br>likely to occur. Risk<br>will materialise on<br>average once within<br>each year. | This is expected to occur frequently/in most circumstances – more likely to occur than not. Risk will materialise within 6 months. |

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

#### 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), noncompliance 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 noncompliance 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.

| Type of Risk  | Risk Appetite         |                   |                   |  |  |
|---|-----------------------|-------------------|-------------------|--|--|
|   | Concept<br>(Net Risk) |                   |                   |  |  |
| Existing Risk Categories -                            |                       |                   |                   |  |  |
| Strategic/Policy Risks                                | Hungry (20 – 25)      | Hungry (20 – 25)  | Open (12 – 16)    |  |  |
| Finance Risks   | Cautious (6 – 10)     | Cautious (6 – 10) | Averse (1 – 5)    |  |  |
| Governance/Accountability Risks                       | Cautious (6 – 10)     | Cautious (6 – 10) | Averse (1 – 5)    |  |  |
| Reputational/Credibility Risks                        | Open (12 – 16)        | Cautious (6 – 10) | Cautious (6 – 10) |  |  |
| Operational/Service Delivery Risks                    | Hungry (20 – 25)      | Hungry (20 – 25)  | Open (12 – 16)    |  |  |
| Technology Risks                                      | Hungry (20 – 25)      | Hungry (20 – 25)  | Open (12 – 16)    |  |  |
| New Risk Categories -                                 |                       |                   |                   |  |  |
| People/Workforce Risks                                | Hungry (20 – 25)      | Hungry (20 – 25)  | Open (12 – 16)    |  |  |
| Health & Safety Risks                                 | Averse (1 – 5)        | Averse (1 – 5)    | Averse (1 – 5)    |  |  |
| Environmental Sustainability/ Climate<br>Change Risks | Hungry (20 – 25)      | Hungry (20 – 25)  | Open (12 – 16)    |  |  |
| Transformation/Innovation Risks                       | Hungry (20 – 25)      | Hungry (20 – 25)  | Open (12 – 16)    |  |  |

### **NES Board Risk Appetite – Classification with New Risk Scoring**

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

### Risk Appetite Levels Defined by Risk Categories -

|                  | Risk Appetite Level Definition  |  |  |   |  |  |  |  |  |  |  |
|------------------|---|--|--|---|--|--|--|--|--|--|--|
|                  | Averse  | Cautious   | Open   | Hungry  |  |  |  |  |  |  |  |
| Strategic        | Guiding principles or rules in place that limit risk in organisational actions and the pursuit of priorities. Organisational strategy is refreshed at 5+ year intervals.  | Guiding principles or rules in place that allow minimal/considered risk taking in organisational actions and the pursuit of priorities.  Organisational strategy is refreshed at 3-4 year intervals.   | Guiding principles or rules in place that are receptive to considered risk taking in organisational actions and the pursuit of priorities.  Organisational strategy is refreshed at 2-3 year intervals.                            | Guiding principles or rules in place that welcome considered risk taking in organisational actions and the pursuit of priorities.  Organisational strategy is refreshed at 1-2 year intervals.                            |  |  |  |  |  |  |  |
| Finance          | Avoidance of any financial impact or loss, is a key objective.  | Seek safe delivery options with little/limited residual financial loss only if it could yield upside opportunities.  | Prepared to invest for benefit and to minimise the possibility of financial loss by managing the risks to tolerable levels.  | Prepared to invest for best possible benefit and accept possibility of financial loss (controls must be in place).  |  |  |  |  |  |  |  |
| Governance       | Avoid actions with associated risk. No decisions are taken outside of processes and oversight / monitoring arrangements. Organisational controls minimise risk of fraud, with significant levels of resource focused on detection and prevention. | Willing to consider actions where benefits outweigh risks. Processes, and oversight / monitoring arrangements enable cautious/limited risk taking. Controls enable fraud prevention, detection and deterrence by maintaining appropriate controls and sanctions. | Receptive to taking difficult decisions when benefits outweigh risks. Processes, and oversight / monitoring arrangements enable considered risk taking.  Levels of fraud controls are varied to reflect scale of risks with costs. | Ready to take difficult decisions when benefits outweigh risks. Processes, and oversight / monitoring arrangements support informed risk taking. Levels of fraud controls are varied to reflect scale of risk with costs. |  |  |  |  |  |  |  |
| Reputational     | Zero appetite for any decisions with high chance of repercussion for organisations' reputation.   | Appetite for risk taking limited to those events where there is little or no chance of any significant repercussion for the organisation.  | Appetite to take decisions with potential to expose organisation to additional scrutiny, but only where appropriate steps are taken to minimise exposure.  | Appetite to take decisions which are likely to bring additional Governmental / organisational scrutiny only where potential benefits outweigh risks.  |  |  |  |  |  |  |  |
| Operational      | and oversight with limited devolved authority   | Tendency to stick to the status quo, innovations generally avoided unless necessary. Decision making authority generally held by senior management. Management through leading indicators.   | Innovation supported, with clear demonstration of benefit / improvement in management control. Responsibility for non-critical decisions may be devolved.  | Innovation pursued – working practices are optimal to deliver desired outcomes. High levels of devolved authority – management by trust / lagging indicators rather than close control.                                   |  |  |  |  |  |  |  |
| Technology       | General avoidance of systems / technology developments.   | Consideration given to adoption of established / mature systems and technology improvements. Agile principles are considered.  | Systems / technology developments considered to enable improved delivery. Agile principles may be followed.  | New technologies viewed as a key enabler of operational delivery. Agile principles are embraced.  |  |  |  |  |  |  |  |
| People/Workforce | Priority to maintain close management control & oversight. Limited devolved authority. Limited flexibility in relation to working practices. Development investment in standard practices only  | Seek safe and standard people policy. Decision making authority generally held by senior management.   | Prepared to invest in our people to create innovative mix of skills environment. Responsibility for noncritical decisions may be devolved.   | Innovation pursued – working practices are optimal to deliver desired outcomes. High levels of devolved authority – management by trust rather than close control.  |  |  |  |  |  |  |  |

| Health & Safety              | Zero appetite for any decisions with high chance of compromising the Health and Safety of staff, visitors and public and noncompliance with Health & Safety obligations.   | Appetite for risk taking limited to those events where there is little or no chance of any significant compromise of the Health and Safety of staff, visitors and public and noncompliance with Health & Safety obligations. | Appetite to take decisions with potential to expose organisation to additional scrutiny, but only where appropriate steps are taken to minimise exposure.  | Appetite to take decisions which are likely to bring additional Governmental / organisational scrutiny only where potential benefits outweigh risks.   |
|------------------------------|--|--|--|--|
| Environmental/Climate Change | Defensive approach to delivery of sustainability-<br>aim to maintain/protect, rather than create or<br>innovate. Priority for close management controls<br>and oversight with limited devolved authority.  | Tendency to stick to the status quo, innovations generally avoided unless necessary. Decision making authority generally held by senior management. Management through leading indicators.                                   | Innovation supported, with clear demonstration of benefit / improvement in value and sustainability. Responsibility for non-critical decisions may be devolved.  | Innovation pursued – working practices are optimal to deliver desired outcomes. High levels of devolved authority – management by trust / lagging indicators rather than close control.                          |
| Transformation               | Defensive approach to transformational activity - aim to maintain/protect, rather than create or innovate. Priority for close management controls and oversight with limited devolved authority. Benefits led plans fully aligned with strategic priorities, functional standards. | Tendency to stick to the status quo, innovations generally avoided unless necessary. Decision making authority generally held by senior management. Plans aligned with strategic priorities, functional standards.           | Innovation supported, with demonstration of commensurate improvements in management control. Responsibility for noncritical decisions may be devolved.  Plans aligned with functional standards and organisational governance. | Innovation pursued – working practices are optimal to deliver desired outcomes. High levels of devolved authority – management by trust rather than close control. Plans aligned with organisational governance. |



NHS Education for Scotland

NES/24/36

**Public Board Meeting** 

Agenda Item: 9b

Date of meeting: 23 May 2024

#### 1. Title of Paper

1.1. Quarter 4 Strategic Key Performance Indicator (SKPI) Report

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

2.1. Simon Williams, Principal Educator – Planning & Corporate Resources

#### 3. Lead Director(s)

3.1. Christina Bichan, Director of Planning and Performance

#### 4. Situation/Purpose of paper

- 4.1. This fourth quarterly performance report to the Board for 23/24 presents the data available at the end of year one of implementation of the Board's new balanced scorecard approach, which can be found at Appendix 1.
- 4.2. The Board is asked to review and approve this report.

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

- 5.1. This paper represents the fourth time the Board has received a report on performance against the strategic KPIs, which were approved alongside the NES Corporate Strategy in May 2023. Performance Reports will continue to be presented to the Board on a quarterly basis.
- 5.2. Extension of reporting to governance committees has continued, with all Committees having received their performance reports in this first year. Sequencing to ensure consideration prior by Committee prior to Board is being taken forward for 24/25.

5.3. This paper has been reviewed by the Executive Team ahead of presentation to Board.

#### 6. Assessment/Key Issues

- 6.1. Amendments to measures previously reported to the Board
- 6.1.1. There are no amendments to report in this quarter.
- 6.2. Measures due to be first reported at the end of Q4 2023-34
- 6.2.1. At the outset of introducing strategic KPIs as a refreshed approach to performance management within NES, a number of strategic KPIs were scheduled to be first reported to the Board at the end of Quarter 4. In addition, as the year has progressed some KPIs which were due to be first reported in earlier quarters experienced delays and were postponed into the Quarter 4 reporting period.
- 6.2.2. As a result 14 KPIs were timetabled for initial reporting in May 2024. These are presented in Table 1 below along with an update on reporting progress.
- 6.2.3. **Table 1:** SKPIs scheduled for first reporting in Quarter 4 progress update

| SKPI<br>Number | Measure Name  | Progress Update   |
|----------------|---|---|
| SKPI04         | Vacancy Rate  | Reported in Quarter 4   |
| SKPI08         | % of staff who experience NES as an inclusive organisation  | Reporting to commence Quarter 1 of 24/25  |
| SKPI09         | Total number of accesses to NES learning products   | Initial data will be reported in Quarter 2 of 24/25                                 |
| SKPI10         | Number of health and social care staff accessing NES learning products as a % of the health and social care workforce | Reporting timescale to be confirmed – linked to delivery of Turas Refresh Programme |
| SKPI11         | % of learners that tell us their education and training will improve their practice                                   | Partial data will be reported in Quarter 2 of 24/25                                 |
| SKPI12         | % of learners who score their experience as 80% or above  | Partial data will be reported in Quarter 2 of 24/25                                 |
| SKPI16         | Clinical Training Environment   | Development continuing  |
| SKPI18         | Uptake of learning products by sector as % of total reach (SKPI10)  | Reporting timescale to be confirmed – linked to delivery of Turas Refresh Programme |

| SKPI<br>Number | Measure Name  | Progress Update  |
|----------------|---|--|
| SKPI19         | % of learners and trainees from the 20% most deprived data zones in Scotland (SIMD)   | Requires significant changes to the way we collect data on learners and the technology to support this. Timescale to be confirmed. |
| SKPI20         | % of learners and trainees by protected characteristics as compared to population of Scotland   | Requires significant changes to the way we collect data on learners and the technology to support this. Timescale to be confirmed. |
| SKPI21         | % of learning products which includes sustainability and value-based health and social care   | To be built into standardised information collected for new content development. Timescale for reporting to be confirmed.          |
| SKPI23         | Number of education, research and strategic collaborations  | Initial data to be reported in Quarter 2 of 24/25  |
| SKPI26         | % of health and social care workforce who report being confident in using digital ways of working   | Reporting to commence<br>Quarter 2 of 24/25  |
| SKPI27         | Number of NES programmes that can demonstrate active engagement of people with lived or living experience in the development of education resources designed to support interaction with those who use health and social care services. | To be built into standardised information collected for new content development. Timescale for reporting to be confirmed.          |

### 6.3. Overall findings

6.3.1. This 2023/24 Quarter 4 performance report gives data on 36 strategic KPIs. A summary of RAG status is presented in Table 2.

### 6.3.2. **Table 2:** RAG Status Summary – All reported KPIs, Q4 23/24

| Green    | Amber   | Red    | RAG Parameters to be set |
|----------|---------|--------|--------------------------|
| 22 (62%) | 4 (11%) | 3 (8%) | 7 (19%)                  |

6.3.3. Tables 3 and 4 provide an overview of the KPIs reporting a Red or Amber status at Quarter end. Further detail on improvement plans and mitigating actions is provided in the KPI data report.

## 6.3.4. **Table 3:** KPIs reporting as Red status, Q4 23/24

| SKPI    | Description                                  | Comment  |
|---------|--|--|
| SKPI07a | % of disabled staff                          | We believe there is under-reporting on disability in the workforce and have plans to encourage staff to update their details in the coming months, following national changes to equality monitoring categories on eESS and JobTrain. 24% of the working-age population in Scotland have a disability. The NES workforce data is substantially below this at 3.7% and NHS Scotland overall lower still at 1.2%.  |
| SKPI13b | Dental Funded trainee placements - Fill rate | 100 places are available for Pre-registration Dental Nurse Training, annually. Uptake is very much demand led so gauging likely uptake for planning purposes is difficult. There are a number of other providers of pre-registration dental nurse training. Some deliver training in evenings and weekends which may be more attractive to some dental practices. Uptake is also linked to the number of Modern Apprenticeships available, which in this case is 65. These are applied for annually and there is no guarantee of how many NES will be awarded. |
| SKPI22  | Net Promoter Score                           | We are undertaking our wider stakeholder survey in Quarter 1 of 24/25 which will give us a greater understanding of our stakeholder needs and satisfaction with NES.   |

### 6.3.5. **Table 4**: KPIs reporting as Amber status, Q4 23/24

| SKPI    | Description            | Comment   |
|---------|------------------------|---|
| SKPI04  | Vacancy rate           | The focus of this metric is staff wellbeing, and in the reporting period, there were 33 open vacancies. The amber range for this metric is between 30 and 100 vacancies. The assumption is that a higher number of vacancies suggests that all roles are not filled, which may impact staff wellbeing. This is the first time this metric has been reported, and the RAG status ranges were set based on trend data. The SGC will continue to monitor this metric and adjust the RAG status ranges if required. |
| SKPI06c | Ethnicity pay equality | The latest estimates on the ethnicity pay gap in Scotland is 10.3% (2019). NES's ethnicity  |

| SKPI    | Description  | Comment   |
|---------|--|---|
|         |  | pay gap is above this at 11.1% and this is higher in some groups of staff e.g. Agenda for Change and lower in other groups e.g. Doctors and Dentists in Training. This may be due to an increase in staff joining NES on entry-level pay banding. We continue to monitor this.  |
| SKPI14c | Dental Funded trainee placements - Completion rate (Core Training) | There are a number of vacancies in Core Training. Recruitment is undertaken on a UK basis and some posts are not as attractive to applicants. Some reconfiguring of posts to address this has improved the fill rate from previous performance.   |
| SKPI29  | School-based pilot pathway   | The amber rating is based on the number of learners still involved in the pilot, which is currently approximately 30. Learners have withdrawn due to factors beyond NES or Academy team's control: satisfaction with the teaching and learning of the qualification, pressure of work from other subjects and personal reasons. |

### 7. Recommendations

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

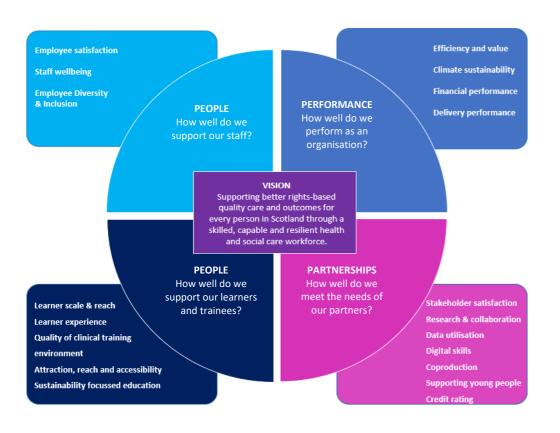
a) Have Educational implications been considered?  $\times$ Yes No **b)** Is there a budget allocated for this work? Yes No c) Alignment with Our Strategy 2023 – 26 People, Partnerships and Performance 1. People Objectives and Outcomes 2. Partnership Objectives and Outcomes  $\times$  $\boxtimes$ 3. Performance Objectives and Outcomes d) Have key strategic risks and mitigation measures been identified? Yes No e) Have Equality, Diversity, Human Rights and health inequality issues been considered as per Fairer Scotland Duty: Guidance for Public Bodies and Corporate Parenting as per the Children and Young People (Scotland) Act 2014?  $\boxtimes$ Yes No f) Has an Equality Impact Assessment (EQIA) been completed or in progress for this piece of work?  $\times$ Yes П No g) Have you considered Emergency Climate Change and Sustainability implications as per DL (2021) 38? |X|Yes No h) Have you considered a staff and external stakeholder engagement plan? Yes X П No Author name: Simon Williams Date: May 2024

Author to complete checklist.

NES

### Appendix 1

### NHS EDUCATION FOR SCOTLAND - BALANCED BUSINESS SCORECARD



|                                   | Quarterly Progress                 |                                  |  |  |  |  |  |  |  |  |
|-----------------------------------|------------------------------------|----------------------------------|--|--|--|--|--|--|--|--|
| Highlights                        | Key challenges                     | Actions for next quarter         |  |  |  |  |  |  |  |  |
| * More KPIs have been reported    | * Some measures originally         | * Continue to develop measures,  |  |  |  |  |  |  |  |  |
| for the first time in Q4.         | scheduled to be reported in        | and data collection and analysis |  |  |  |  |  |  |  |  |
| * A review of the KPI process and | Quarter 4 have not been            | methods, for KPIs which have not |  |  |  |  |  |  |  |  |
| the KPIs themselves has been      | reported. Information is available | yet been reported.               |  |  |  |  |  |  |  |  |
| carried out (see separate report) | in the data narrative for each     | * Following the April Board      |  |  |  |  |  |  |  |  |
| and the results are positive.     | individual KPI.                    | Development session and the      |  |  |  |  |  |  |  |  |
| * A Board development session     |                                    | May Board meeting, make          |  |  |  |  |  |  |  |  |
| took place on 18 April.           |                                    | relevant improvements based on   |  |  |  |  |  |  |  |  |
|                                   |                                    | findings of review.              |  |  |  |  |  |  |  |  |
|                                   |                                    |                                  |  |  |  |  |  |  |  |  |
|                                   |                                    |                                  |  |  |  |  |  |  |  |  |
|                                   |                                    |                                  |  |  |  |  |  |  |  |  |
|                                   |                                    |                                  |  |  |  |  |  |  |  |  |
|                                   |                                    |                                  |  |  |  |  |  |  |  |  |
|                                   |                                    |                                  |  |  |  |  |  |  |  |  |
|                                   |                                    |                                  |  |  |  |  |  |  |  |  |
|                                   |                                    |                                  |  |  |  |  |  |  |  |  |
|                                   |                                    |                                  |  |  |  |  |  |  |  |  |
|                                   |                                    |                                  |  |  |  |  |  |  |  |  |
|                                   |                                    |                                  |  |  |  |  |  |  |  |  |
|                                   |                                    |                                  |  |  |  |  |  |  |  |  |

#### PEOPLE - KEY PERFORMANCE INDICATORS

| Measure | Measure Measure Name Most recent Previous reported Most recent Trend Line Desired Frequency Data Narrative Insights and Action Governance Committee Responsible Director/Lead |             |             |                 |          |                   |            |   |   |                            |  |       |           |      |
|---------|---|-------------|-------------|-----------------|----------|-------------------|------------|---|---|----------------------------|--|-------|-----------|------|
| ID      |   | performance | performance | reported period |          | Direction         |            |   | •   |                            | .,                                     | R     | AG Scores |      |
| SKPI01  | Employee Engagement Index   | 85          | 85          | Qtr 4 - 2022/23 |          | $\leftrightarrow$ | Annually   | The overall iMatter survey Employee Engagement Index in 2023 was 85 (unchanged from 2022)   | The unchanged, year on year, score is in the context of hybrid working arrangements. Support to line managers, in particular, is a key focus in supporting this type of working. NES has the highest employee engagement index in Scotland and the highest compliance with iMatter action planning. NES has a significant amount of transformational change planned over the next 2 yrs. The aim is to maintain the EEI score at a similar level during the change journey.   | Staff Governance Committee | Tracey Ashworth Davies                 | <75%  | 75-81%    | 82%+ |
| SKPI02  | Proportion of staff who report having the time and resources to support their learning and growth   | 83%         | 82%         | Qtr 4 - 2022/23 |          | 1                 | Annually   | The proportion of staff reporting sufficient time and resources for their learning and growth improved in the iMatter 2023 survey to 83% (vs 82% in 2022)   | 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 have the opportunity to apply for funding from the Workforce Development Fund.   | Staff Governance Committee | Tracey Ashworth Davies                 | <70%  | 70-79%    | 80%+ |
| SKPI03  | Staff retention rate (voluntary leavers)  | 93.3%       | 91.7%       | Qtr 4 - 2023/24 |          | $\leftrightarrow$ | Quarterly  | The staff retention rate data shows a positive trend, with the most recent performance at 93.3% (as at Q4 2023/24), higher than the last reported performance of 91.7% (as at Q3 2023/24). This data excludes Fixed Term contracts. | Year to date voluntary leavers exit questionnaires cite main reasons for leaving NES as external new post; retirement; and new post within NHS. The positive trend in staff retention rates for Q4 is encouraging.  | Staff Governance Committee | Tracey Ashworth Davies                 | <80%  | 80-84%    | 85%+ |
| SKPI04  | Vacancy Rate  | 33          | 86          | Qtr 4 - 2023/24 |          | <b>4</b>          | Quarterly  | This metric provides the number of vacancies advertised in the period. In Q4 2023/24, 33 vacancies were advertised compared to 86 during Q3 2023/24.  | The data provided illustrates the number of vacancies advertised each quarter from June 2022 to March 2024. There is a noticeable trend of fluctuations in the number of vacancies over time. From June 2022 to March 2023, there is a general pattern of oscillation with peaks and troughs. In March 2024, where the number of vacancies falls b 61% to 33, indicating a sharp decline. This drop aligns with the funding uncertainties, suggesting a correlation between funding stability and the number of advertised vacancies. | Staff Governance Committee | Tracey Ashworth Davies                 | >100  | 100-30    | <30  |
| SKPI05  | Sickness Absence Rate   | 2.6%        | 3.6%        | Qtr 4 - 2023/24 |          | $\leftrightarrow$ | Quarterly  | The sickness absence rate data indicates a decrease in the sickness absence rate to 2.57% (as at Q4 2023/24) compared to 3.62% (as at Q3 2023/24).  | In Q4, the top three reasons for absences were recorded as anxiety/stress/depression; other known causes; and cold, cough, flu. NHS Scotland comparator boards such as NSS, HIS and PHS have an average sickness absence rate of 3.94%, higher than the NES rate. NES sickness absence will continue to be monitored, with managers encouraged to record absences.  | Staff Governance Committee | Tracey Ashworth Davies                 | >4.0% | 3.1-4.0%  | <=3% |
| SKPI06a | Gender pay equality   | 2.7%        | 5.4%        | Qtr 4 - 2022/23 | $\wedge$ | <b>V</b>          | Annually   | The updated pay gap calculations include all NES staff, including Core Staff and Doctors and Dentists in training, as of March 2023:  - The gender pay gap as was 2.7%, lower than last reported performance of 5.4%.               | The gender pay gap data demonstrates a notable reduction in disparity between   | Staff Governance Committee | Tracey Ashworth Davies/Karen<br>Wilson | >10%  | 5-10%     | <5%  |
| SKPI06b | Disability pay equality   | 9.2%        | 8.3%        | Qtr 4 - 2022/23 |          | <b>V</b>          |            | - The pay gap for disabled staff was 9.2%, higher than the last reported performance of 8.3%.   | male and female employees' earnings when looking at all NES Staff. In November 2023, the Board approved NES's employment equality monitoring report for the period April 2022 to March 2023. This provided further context to the pay gap   | Staff Governance Committee | Tracey Ashworth Davies/Karen<br>Wilson | >16%  | 10-16%    | <10% |
| SKPI06c | Ethnicity pay equality  | 11.1%       | 10.4%       | Qtr 4 - 2022/23 |          | <b>V</b>          |            | - The pay gap for minority ethnic staff was 11.1%, higher than the last reported performance of 10.4%   | data. 2024 data will be presented with Equalities monitoring report by August 2024.   | Staff Governance Committee | Tracey Ashworth Davies/Karen<br>Wilson | >12%  | 10-12%    | <10% |
| SKPI07a | % of disabled staff   | 3.7%        | 3.2%        | Qtr 4 - 2022/23 |          | 1                 | Annually   | The percentage of staff in the NES core workforce with a disability disclosed, who are from a Black and Minority Ethnicity and who are LGB has increased from 2022  | update their equality and diversity information in 2024 but are waiting on the  | Staff Governance Committee | Tracey Ashworth Davies                 | <5%   | 5-10%     | >10% |
| SKPI07b | % of Minority Ethnic staff  | 5.4%        | 4.8%        | Qtr 4 - 2022/23 |          | 1                 |            | data.   | national system being amended to allow individuals to amend their personal details. Jobtrain will be updated in April 2024 with eESS shortly, thereafter, with national communications currently being developed. Data up to end of March   | Staff Governance Committee | Tracey Ashworth Davies                 | <2%   | 2-4%      | >4%  |
| SKPI07c | % of LGBQ staff   | 4.6%        | 3.9%        | Qtr 4 - 2022/23 |          | <->               |            |   | 2024 will be presented with Equalities monitoring report by August 2024.  | Staff Governance Committee | Tracey Ashworth Davies                 | <2%   | 2-3%      | >3%  |
| SKPI08  | % of staff who experience NES as an inclusive organisation  | No Data     | No Data     |                 |          | <b>↑</b>          | Biannually | Given the current fiscal situation and implications on the workforce, we have decided to issue the staff survey on inclusion later in April. Data will be presented to the Board at the end of Quarter 1.                           |   | Staff Governance Committee | Tracey Ashworth Davies                 |       |           |      |

## LEARNERS / TRAINEES - KEY PERFORMANCE INDICATORS

| Measure<br>ID | Measure Name  | Most recent performance | Previous reported performance | Most recent reported period | Trend Line | Desired<br>Direction | Frequency | Data Narrative   | Insights and Action   | Governance<br>Committee          | Responsible<br>Director/Lead |     | RAG Scores |      |
|---------------|---|-------------------------|-------------------------------|-----------------------------|------------|----------------------|-----------|--|---|----------------------------------|------------------------------|-----|------------|------|
| SKPI09        | Total number of accesses to NES learning products   | No Data                 | No Data                       |                             |            | -                    |           | No metric currently available across all NES products.   | It is proposed that initial data collection focuses only on use and completion of eLearning modules, F2F and hybrid programme registration, professional programme/training registration. Initial data will be reported in Q2 24/25 based on currently available metrics. Insights on accesses to other web resources will be provided in data narrative until data quality is understood/improved. | Education & Quality<br>Committee | Kevin Kelman                 |     |            |      |
| SKPI10        | Number of health and social care staff accessing NES learning products as a % of the health and social care workforce | No Data                 | No Data                       |                             |            | ,                    |           | Data on unique learners using products and their employment status/job family/role within H&SC is currently not routinely recorded.  |   | Education & Quality<br>Committee | Kevin Kelman                 |     |            |      |
| SKPI11        | % of learners that tell us their education & training will improve their practice                                     | No Data                 | No Data                       |                             |            | -                    |           | No central Once-for-NES repository of evaluation responses is currently available.   | A consistent approach to evaluation is being planned and will require supporting systems to be developed. An interim approach will be put in place to collect partial data from exisiting sources. Initial (partial) data will be reported in Q2 24/25.   | Education & Quality<br>Committee | Kevin Kelman                 |     |            |      |
| SKPI12        | % of learners who score their learning experience as 80% or above   | No Data                 | No Data                       |                             |            | -                    |           | No central Once-for-NES repository of evaluation responses is currently available.   | A consistent approach to evaluation is being planned and will require supporting systems to be developed. An interim approach will be put in place to collect partial data from exisiting sources. Initial (partial) data will be reported in Q2 24/25.   | Education & Quality<br>Committee | Karen Wilson                 |     |            |      |
| SKPI13a       | Medical Funded trainee placements - Fill rate   | 5%                      | 21%                           | Qtr 4 - 2023/24             |            | <b>\</b>             | Quarterly | Percentage of programmes which have a fill rate of below 85%. The data for this quarter is only for round 1 recruitment which has 21 programmes within it. Round 2 recruitment closes on the 25th of April. Only 1 of round 1 programmes has filled below 85%. This programme is oral and maxillofacial surgery. | We will report the combined round 1 and round 2 fill rates in the next quarter as all recruitment for August 2024 will have closed.   | Education & Quality<br>Committee | Emma Watson                  | >20 | 10 - 20    | < 10 |
| SKPI13b       | Dental Funded trainee placements - Fill rate  | 26%                     | 32%                           | Qtr 4 - 2023/24             | 1          | $\leftrightarrow$    | Quarterly | Pre-registration dental nurses is the only programme filled less than 85%.   | Continue to monitor   | Education & Quality<br>Committee | David Felix                  | >20 | 10 - 20    | < 10 |
| SKPI14a       | Medical Funded trainee placements - Completion rate   | 4.9%                    | No Data                       | Qtr 1 - 2023/24             | ·          | <b>\</b>             | -         | Annual data. First presented Q1 2023-24. Number of developmental outcomes by region and specialty  | Continue to monitor   | Education & Quality<br>Committee | Emma Watson                  | >10 | 5 - 10     | < 5  |
| SKPI14b       | Dental Funded trainee placements - Completion rate (Vocational Training)  | 2.0%                    | No Data                       | Qtr 4 - 2023/24             |            | $\leftrightarrow$    | Annually  | Percentage of developmental outcomes or lack of completion.  | Continue to monitor   | Education & Quality<br>Committee | David Felix                  | >10 | 5 - 10     | < 5  |
| SKPI14c       | Dental Funded trainee placements - Completion rate (Core Training)  | 9.0%                    | 9.0%                          | Qtr 4 - 2023/24             |            | $\leftrightarrow$    | Annually  | Percentage of developmental outcomes or lack of completion.  | Continue to monitor   | Education & Quality<br>Committee | David Felix                  | >10 | 5 - 10     | < 5  |
| SKPI15a       | Employee Engagement Index – Doctors in Training   | 79%                     | No Data                       | Qtr 1 - 2023/24             |            | 1                    | Annually  | Annual data. First presented Q1 2023-24. Overall satisfaction of Doctors in Training as measured by GMC NTS data   | 1   | Education & Quality<br>Committee | Emma Watson                  | <60 | 60 - 70    | > 70 |
| SKPI15b       | Employee Engagement Index - Dentists in Training  | 90%                     | No Data                       | Qtr 3 - 2023/24             |            | $\leftrightarrow$    | Annually  | Reporting on Vocational Training and Core/Speciality Training.   | Investigate possibility of reporting other cohorts.   | Education & Quality<br>Committee | David Felix                  | <60 | 60 - 70    | > 70 |
| SKPI16        | Clinical Training Environment   | No Data                 | No Data                       |                             |            | -                    |           | A fuller understanding of current approaches to monitoring and evaluating practice-learning environments is being developed as part of Practice-Learning Environment workstream with LEQS programme.   | Continue development.   | Education & Quality<br>Committee | Karen Wilson                 |     |            |      |

| SKPI17 | Total accesses of the NHS Scotland Careers Website  | 163306  | 131536  | Qtr 4 - 2023/24 | <b>↑</b> | 1 | In Q4 2023/24 the number of engaged sessions increased to 163306.   | Excluding the website home page, the next top 3 pages visited were "Explore careers", "International recruitment" landing page and the application process blog post.  | Staff Governance<br>Committee    | Tracey Ashworth<br>Davies | <60,000 60 | -80,000 >80,000 |
|--------|---|---------|---------|-----------------|----------|---|---|--|----------------------------------|---------------------------|------------|-----------------|
| SKPI18 | Uptake of learning products by sector as % of total reach (10)?                               | No Data | No Data |                 | -        |   | No metric currently available across all NES products.  | This metric will require changes to the way we collect data on learners and the development of the technology to do the same in a consistent way across NES. The creation of a centralised learner record as part of Turas Refresh Programme will support reporting.   | Education & Quality<br>Committee | Karen Wilson              |            |                 |
| SKPI19 | % of learners and trainees from the 20% most deprived data zones in Scotland (SIMD)           | No Data | No Data |                 | -        |   | Reliant on learner profiles and registration data.  | Need to balance NES's requirement for measuring inclusivity, equality and diversity against privacy, data protection and information governance considerations. This metric will require changes to the way we collect data on learners and the development of the technology to do the same in a consistent way across NES. |                                  | Karen Wilson              |            |                 |
| SKPI20 | % of learners and trainees by protected characteristics as compared to population of Scotland | No Data | No Data |                 | -        |   | Within NES there is currently no standardised approach to collecting or analysing protected characteristics data. Reliable protected characteristics data at a national (Scotland-wide) level is difficult to access. | This metric will require changes to the way we collect data on learners and the development of the technology to do the same in a consistent way across NES.   | Education & Quality<br>Committee | Karen Wilson              |            |                 |
| SKPI21 | % of learning products which includes sustainability and value based health and social care   | No Data | No Data |                 | -        |   | Propose to divide into 2 measures to cover 2 factors separately.  | Complete data will require all curricular content to be reviewed and inclusion of these areas to be recorded systematically. This will become information that is recorded as we standardise business processes for new content development.   | Education & Quality<br>Committee | Karen Wilson              |            |                 |

#### 3\_

# PARTNERSHIPS - KEY PERFORMANCE INDICATORS

| Measure<br>ID | Measure Name   | Most recent performance | Previous reported performance | Most recent reporting period | Trend Line | Desired<br>Direction | Frequency | Data Narrative  | Insights and Action   | Governance<br>Committee                    | Responsible<br>Director/Lead | RA   | G Score | s    |
|---------------|--|-------------------------|-------------------------------|------------------------------|------------|----------------------|-----------|---|---|--|------------------------------|------|---------|------|
| SKPI22        | Net Promoter Score for stakeholders who rate themselves likely to recommend NES to colleagues and associates   | -10                     | 6                             | Qtr 3 - 2023/24              |            | <b>↑</b>             | 6 monthly | The survey received 38 responses. 28 from the NHS, 6 from social care and 6 from 'other'. The majority of those surveyed had experience of working with NMAHP and Psychology.   | The low response rate limits the insights we can gain. However, we will review feedback and explore ways to increase the reach of the next NPS survey.  | Board                                      | Karen Reid                   | <5   | 5 - 7   | >=8  |
| SKPI23        | Number of education, research and strategic collaborations   | No Data                 | No Data                       |                              |            | -                    |           | Proposal to divide into sub measures (education & research)   | Initial data to be reported in Q2 24/25   | Education & Quality<br>Committee           | Karen Wilson                 |      |         |      |
| SKPI24        | Number of innovation initiatives invested in, including in collaboration with other stakeholder organisations  | 11                      | 9                             | Qtr 4 - 2023/24              |            | -                    | Quarterly | Increase represents collaboration on Horizon EU bid 'Assessing and strengthening the complementarity between new technologies and human skills' engagement with West of Scotland Oral Maxillo Facial Surgical services regards enhanced workforce/service capacity  | Cumulative activity increasing understanding of NES function/potential with key partners, growing collaboration and partnership activity; Specific foresighting activity with ambulance service and National Manufacturing Institute Scotland (NMIS); continue development of the NES Innovation Plan | Education & Quality<br>Committee           | Kevin Kelman                 |      |         |      |
| SKPI25        | % of Service Providers who report utilising NES provided workforce data  | 100%                    | 100%                          | Qtr 4 - 2023/24              |            | -                    | Quarterly | Workforce planning tool (SG commission) showcased to all regional workforce planning groups incl. NHS Board workforce planners. Number and retention of International Recruits continues to be monitored for all NHS Boards. Published Official Statistics in Development for the National Treatment Centres. Published 3 GP workforce reports. | Continue to develop workforce planning tool, monitor number of international recruits and other statistics to develop evidence base for health and social care workforce planning in Scotland.  | Staff Governance<br>Committee              | Tracey Ashworth<br>Davies    | <=80 | 81 - 90 | >=91 |
| SKPI26        | % of health and social care workforce who report being confident in using digital ways of working  | No Data                 | No Data                       |                              |            | -                    |           | Data available in 2024-25 Q2  |   | Technology and Information                 | Tracey Ashworth Davies       |      |         |      |
| 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 | No Data                 | No Data                       |                              |            | <b>↑</b>             |           | No metric currently available across all NES products.  | Complete data will require all curricular content to be reviewed and involvement of people and communities to be recorded systematically. This will become information that is recorded as we standardise business processes for new content/product development.                                     | Education & Quality<br>Committee           |                              |      |         |      |
| SKPI28        | % of technology, data and digital developments which are shaped<br>by staff, learner and partners feedback   | 100%                    | No Data                       | Qtr 4 - 2023/24              |            | -                    |           | The deployment of Agile methodology in all aspects of NTS' developments means user and stakeholder co-design is inherent in all deliverables.   | The deployment of Agile methodology in all aspects of NTS' developments means user and stakeholder co-design is inherent in all deliverables.   | Technology and<br>Information<br>Committee | Christopher<br>Wroath        |      |         |      |
| SKPI29        | Number of young people participating on a school-based pilot pathway   | 35                      | 45                            | Qtr 4 - 2023/24              |            | $\leftrightarrow$    |           | Some learners have withdrawn due to pressures of other school work and/or been withdrawn following poor attendance.   | Via huddle groups, continue to help ensure completers have support to progress into work/study. Continuing to support work in Fife - and potentially other areas - to deliver the qualification during 2024-25 school year.   | Education & Quality<br>Committee           | Kevin Kelman                 | <21  | 21-40   | >=41 |
| SKPI30        | Number of NES programmes of education and training which are SCQF credit rated   | 10                      | 10                            | Qtr 3 - 2023/24              |            | <b>↑</b>             | Quarterly | Programmes 3 <sup>rd</sup> party credit rated and 'owned' by NES; not those externally owned and credit rated but delivered by NES.   | Aim to bring back a broader set of measures regarding NES-delivered programmes going forward.   |  | Kevin Kelman                 |      |         |      |

## PERFORMANCE - KEY PERFORMANCE INDICATORS

| Measure<br>ID | Measure Name   | Most recent performance | Previous reported performance | Most recent reporting period | Trend Line  | Desired<br>Direction | Frequency | Data Narrative  | Insights and Action   | Governance Committee                            | Responsible<br>Director/Lead | F     | AG Scores | 5      |
|---------------|--|-------------------------|-------------------------------|------------------------------|-------------|----------------------|-----------|---|---|---|------------------------------|-------|-----------|--------|
| SKPI31        | Achievement of agreed savings % against annual budget  | 194%                    | 145%                          | Qtr 4 - 2023/24              |             | -                    | Quarterly | Target exceeded at year end as vacancy lag £1.1m above op plan target and £2.1m of additional savings made from stopping discretionary spend at request of SG.      | Boards were instructed to stop discretionary spend in final months of financial year to assist with overall NHS Health & Social Care financial position.  | Audit & Risk Committee                          | Jim Boyle                    |       |           |        |
| SKPI32        | % of audit actions which are completed within agreed timescale   | 70%                     | 71%                           | Qtr 4 - 2023/24              |             | -                    | Quarterly | The two overdue internal audit actions are substantially complete and the timescales have been revised to March 24  | Continue to monitor   | Audit & Risk Committee                          | Jim Boyle                    |       |           |        |
| SKPI33        | Benefits realisation/ ROI from corporate change activities   | 75%                     | No Data                       | Qtr 4 - 2023/24              |             | <b>↑</b>             | Quarterly | Three programmes in delivery during reporting period. All programmes reporting as Green for Budget adherence, Schedule Adherence and Benefits management adherence. | Adherence in all criteria gives confidence that programmes are progressing to plan. Further work ongoing to gather data on Stakeholder satisfaction measure.  | Board   | Tracey Ashworth<br>Davies    | <50%  | 51-74%    | >=75%  |
| SKPI34        | CO2 emissions (estates)  | 5.74                    | No Data                       | Qtr 2 - 2023/24              |             | -                    | 6-monthly | Q2 data for Westport office only 5.74 tCO2e   | Work is ongoing to collect data from other sites.   | Audit & Risk Committee                          | Jim Boyle                    |       |           |        |
| SKPI35        | CO2 emissions (staff and business travel)  | 13.04                   | 31.63                         | Qtr 4 - 2023/24              | $\bigvee$   | -                    | Quarterly | Air 6.44 tCO2e; Rail 3.13 tCO2e; Hotel 3.47 tCO2e   | Continue to monitor   | Audit & Risk Committee                          | Jim Boyle                    |       |           |        |
| SKPI36        | Projected variance of budgeting within 0.5% at year end  | 0.05%                   | 0.29%                         | Qtr 4 - 2023/24              | $\bigwedge$ | -                    | Quarterly | Regularly updated in line with SG funding decisions and NES spending commitments  | Engagement with SG to agree final allocation draw down that meets NES year end outturn expectations   | Board   | Jim Boyle                    | >1.0% | 0.6-1.0%  | <=0.5% |
| SKPI37        | Number of complaints or concerns upheld and partially upheld   | 0                       | 1                             | Qtr 4 - 2023/24              |             | $\leftrightarrow$    | Quarterly | Over the last 8 quarters, the number of (partially) upheld Stage 2 complaints has remained stable between 0 and 2   | Performance remains in line with previous quarters. Continue to monitor.  | Education & Quality Committee                   | Christina Bichan             | 3+    | 2         | 0 - 1  |
| SKPI38        | Number of unplanned outages to NES systems (internal and external)   | 0                       | 0                             | Qtr 4 - 2023/24              |             | <b>\</b>             | Quarterly | Minimal outage times, no impact on delivery of service  | In line with previous reporting to IS governance groups   | Technology and Information<br>Committee         | Christopher Wroath           | 3+    | 2         | 0 - 1  |
| SKPI39        | % NIS Audit Compliance Score for Cybersecurity   | 85%                     | 85%                           | Qtr 4 - 2023/24              |             | $\leftrightarrow$    | Quarterly | Target of 60% set by Scottish Government  | NES is performing well in this area. Continue to monitor.   | Technology and Information<br>Committee         | Christopher Wroath           | <60   | 60-69     | >=70   |
| SKPI40        | % RAG status for delivery against Annual Delivery Plan   | 16%                     | 18%                           | Qtr 4 - 2023/24              |             | <b>\</b>             | Quarterly | % of deliverables which are delayed at Quarter end (% Red and Amber).   | NES 2023/24 delivery has concluded at 84% completed / on track (in comparison to 87% delivery achieved at 2022/23 year-end). An overview will be provided via the 2023/24 Annual Report to the Board and the Q4 Delivery Report. Red / Amber deliverables will be reviewed and carried forward into 2024/25 as appropriate. The 2024/25 ADP will be updated accordingly and directorates advised. | Board   | Christina Bichan             | 31+   | 21-30     | <=20   |
| SKPI41        | Adverse events: Number of Category 1 Information Governance events and events requiring reporting under RIDDOR | 0                       | 0                             | Qtr 4 - 2023/24              |             | <b>\</b>             | Quarterly | As defined by SG InfoSecurity impact level descriptors  | As per previous reporting to IS governance groups   | Board / Technology and<br>Information Committee | Tracey Ashworth<br>Davies    | 3+    | 2         | 0 - 1  |

| ID       | Measure Name  | Definitions  | Inclusion/Exclusion                      |
|----------|---|--|--|
| SKPI01   | Employee Engagement Index   | Number of responses for each point on scale (Strongly Agree to Strongly Disagree) multiplied by its number value (6 to 1).         | Staff Only                               |
| CKDIOS   | Describes of deffects assess that is a the time and   | Scores added together and divided by overall number of responses   | All staff or hand and state the state of |
| SKPIU2   | Proportion of staff who report having the time and resources to support their learning and growth | % score of I am given the time and resources to support my learning growth   | All staff who complete iMatter question  |
| SKPI03   | Staff retention rate (voluntary leavers)  | Number of permanent staff at the start of the period / Number of permanent staff at end of the period with 12 months service x 100 | Includes only permanent staff            |
|          |   |  |  |
| SKPI04   | Vacancy Rate  | Total number of vacancies advertised in the quarter  | Includes only NES core vacancies         |
| SKPI05   | Sickness Absence Rate   | Hours Lost / Total contracted hours x 100  |  |
| SKBIUE   | Gender pay equality   | Average Hourly Rate Male - Average Hourly Rate Female /  |  |
| 3KI 1000 | Gender pay equality   | Average Hourly Rate Male x 100   |  |
| SKPI06b  | Disability pay equality   | Average Hourly Rate Not Disabled Staff - Average Hourly Rate Disabled Staff /  |  |
|          |   | Average Hourly Rate Not Disabled Staff x 100   |  |
| SKPI06c  | Ethnicity pay equality  | Average Hourly Rate Non-BAME Staff - Average Hourly Rate BAME Staff) / Average Hourly Rate Non-BAME Staff x 100                    |  |
| SKPI07a  | % of disabled staff   | The percentage of staff in the NES core workforce with a disability disclosed  |  |
| SKPI07b  | % of Minority Ethnic staff  | The percentage of staff in the NES core workforce who are from a Minority Ethnic background  |  |
| SKPI07c  | % of LGBQ staff   | The percentage of staff in the NES core workforce who are LGB  |  |
| SKPI08   | % of staff who experience NES as an inclusive organisation  |  |  |
|          |   |  |  |
| SKPI09   | Total number of accesses to NES learning products   |  |  |
|          |   |  |  |

| SKPI10  | Number of health and social care staff accessing NES learning products as a % of the health and social care workforce |  |  |
|---------|---|--|--|
| 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   |  |  |
| SKPI13a | Medical Funded trainee placements - Fill rate   | Percentage of programmes which have a fill rate of below 85%   |  |
| SKPI13b | Dental Funded trainee placements - Fill rate  | Percentage of programmes which have a fill rate of below 85%   |  |
| SKPI14a | Medical Funded trainee placements - Completion rate   | Number of developmental outcomes by region and specialty   |  |
| SKPI14b | Dental Funded trainee placements - Completion rate (Vocational Training)  | Percentage of developmental outcomes or lack of completion - Vocational Training.  | Vocational Training and Core Training included. Dental nurses excluded.            |
| SKPI14c | Dental Funded trainee placements - Completion rate (Core Training)  | Percentage of developmental outcomes or lack of completion - Core Training.  |  |
| SKPI15a | Employee Engagement Index – Doctors in Training   | Overall satisfaction of Doctors in Training as measured by GMC NTS data  |  |
| SKPI15b | Employee Engagement Index - Dentists in Training  | Vocational Training data from the end of year VT survey, Core/Speciality Training data from the National trainee survey.                       | Vocational Training and Core/Speciality Training included. Other cohorts excluded. |
| SKPI16  | Clinical Training Environment   |  |  |
| SKPI17  | Total accesses of the NHS Scotland Careers Website  | Number of 'engaged sessions' (sessions lasting longer than 10 seconds, or having a conversion event, or having 2 or more page or screen views) |  |
| 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                 |  |                                      |
| SKPI21 | % of learning products which includes sustainability and value based health and social care                   |  |                                      |
| SKPI22 | Net Promoter Score for stakeholders who rate themselves likely to recommend NES to colleagues and associates  | Net Promoter Score from -100 to +100 of people who would recommend NES to a colleague  | Defined list from stakeholder survey |
| SKPI23 | Number of education, research and strategic collaborations  |  |                                      |
| SKPI24 | Number of innovation initiatives invested in, including in collaboration with other stakeholder organisations | Delivery of a baseline report including number of innovation workstream activities developed or in development categorised by  • Innovation partnership activity (eg ANIA/CSO/CEP)   |                                      |
| SKPI25 | % of Service Providers who report utilising NES provided workforce data                                       | "% of Service Providers utilising NES workforce analysis services"  "Service providers" defined as: NHS Boards plus Public Health Scotland plus Scottish Government.  "NES workforce analysis services" defined as:  • the decomposition of turnover in the Official Statistics;  • the workforce planning tool; the dental workforce report and Dental Student Intake Reference Group;  • an assessment of the impact of TERS (Targeted Enhanced Recruitment Scheme);  • the sponding to Fols (Freedom of Information requests), IRS (Information requests) and PQs (Parliamentary Questions);  • the Nursing and Midwifery Student Intake Reference Group; the performance management of pre-registration nursing and midwifery providers;  • the allocation of Allied Health Professional students between NHS Boards;  • the number of International Recruits and their retention in NHS Scotland. |                                      |
| SKPI26 | % of health and social care workforce who report being confident in using digital ways of working             |  |                                      |
| SKPI27 | engagement of people with lived or living experience in the   | Initial, baseline report, on numbers of educational programmes in development or developed, where people with lived experience have supported the design or delivery of programme content. The intention would then be to report cumulativley, building on this number and ultimately to look at more qualitiative measures relating to  |                                      |
| SKPI28 | % of technology, data and digital developments which are shaped by staff, learner and partners feedback       |  |                                      |

| SKPI29 | Number of young people participating on a school-based pilot pathway   | Number of young people participating on a school-based pilot pathway  |  |
|--------|--|---|--|
| SKPI30 | Number of NES programmes of education and training which are SCQF credit rated                                 | Number of programmes which are delivered by NES and are SCQF credit rated   | Excluding: programmes funded by NES but developed and delivered by other organisations   |
| SKPI31 | Achievement of agreed savings % against annual budget  | Value of savings that are generated through agreed schemes  | Excluding: Non realisable procurement savings  |
| SKPI32 | % of audit actions which are completed within agreed timescale   | % of audit actions arising from internal audits which are completed within the timescale agreed with the Audit and Risk Committee   |  |
| SKPI33 | Benefits realisation/ ROI from corporate change activities   | Total amount of savings achieved vs total amount of savings in financial plan   |  |
| SKPI34 | CO2 emissions (estates)  | tons of CO2 produced by NES estates   |  |
| SKPI35 | CO2 emissions (staff and business travel)  | tons of CO2 produced by NES staff during travel by air and rail   | Excluding: trainees, car travel  |
| SKPI36 | Projected variance of budgeting within 0.5% at year end  | Value of year end under/overspend as a percentage of anticipated total core revenue funding   | Only includes core revenue   |
| SKPI37 | Number of complaints or concerns upheld and partially upheld   | Stage 2 complaints - those reported to and investigated by the corporate complaints team.   | Excluding whistleblowing concerns and Stage 1 complaints investigated at the front line. |
| SKPI38 | Number of unplanned outages to NES systems (internal and external)   | Number of unplanned outages as defined in NIS Audit report  | systems not delivered or supported<br>by NES   |
| SKPI39 | % NIS Audit Compliance Score for Cybersecurity   | as defined in NIS Audit report  |  |
| SKPI40 | % RAG status for delivery against Annual Delivery Plan   | Of the total number of deliverables within the NES Annual Delivery Plan for the year of reporting, the % that are delayed, demonstrated by having a red or amber status at the time of reporting. | Excluding: deliverables with a green or blue status.                                     |
| SKPI41 | Adverse events: Number of Category 1 Information Governance events and events requiring reporting under RIDDOR | Number of Category 1 Information Governance events and RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations) events.   | Category 2 etc. IG events  |



**NHS Education for Scotland** 

NES/24/37

**Public Board** 

Agenda Item: 09c

Meeting Date: 23 May 2024

#### 1. Title of Paper

2023/24 Quarter 4 Delivery Report

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

Alison Shiell, Planning & Corporate Governance Manager

#### 3. Lead Director(s)

Christina Bichan, Director of Planning & Performance

#### 4. Situation / Purpose of paper

- 4.1 This report provides the Board with a Quarter 4 update on NES's delivery performance against the deliverables and milestones set out in the 2023/24 NES Annual Delivery Plan (ADP). The report uses (B)RAG exception reporting to evidence progress and completion status.
- 4.2 The report comprises an overall 2023/24 Quarter 4 summary position (Appendix 1) and a full 2023/24 Quarter 1, Quarter 2, Quarter 3 and Quarter 4 update (Appendix 2).
- 4.3 The Board are asked to review and approve this report.

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

5.1 This report has been prepared for the Board's review and approval and has been considered by the NES Executive Team in advance of the 23 May 2024 Board meeting.

5.2 The 2023/24 NES ADP was approved by the NES Board in September 2023 and Scottish Government in October 2023. The 2023/24 NES ADP is published on the <u>Corporate Publications</u> page of the NES website.

#### 6. Assessment / Key Issues

#### <u>2023/24 Quarter 4 – Delivery Performance Overview</u>

6.1 For Quarters 1 and 2, the NES 2023/24 ADP comprised 141 deliverables. At Quarter 3, the overall number of deliverables decreased to 140 as one deliverable was closed for the remainder of 2023/24. During Quarter 4, the number of deliverables has increased back up to 141 as a new deliverable has been added. Further detail is provided within paragraph 6.10.

Delivery performance at the end of 2023/24 Quarter 4 is summarised in Table 1.

Table 1: Summary of deliverable status - 2023/24 Quarter 4

| Deliverable Status      | Number | Percentage |
|-------------------------|--------|------------|
| Blue – complete         | 54     | 38%        |
| Red – significant delay | 3      | 2%         |
| Amber – minor delay     | 18     | 13%        |
| Green – on track        | 66     | 47%        |
| Total                   | 141    |            |

- 6.2 Appendix 1 provides an overview of 2023/24 delivery (B)RAG status. In relation to 2023/24 overall, NES delivery has concluded at **85%** of deliverables either categorised as completed or on track. This is in comparison to 87% delivery achieved at 2022/23 year-end. Between Quarter 3 (Q3) and Quarter 4 (Q4), an additional 50 deliverables have been marked as completed for 2023/24. The total number of deliverables identified as either Blue or Green status at Q4 is 120 out of 141 deliverables.
- 6.3 In relation to 2023/24 Q4 delivery specifically, there has been a small reduction in the number of red and amber deliverables since Q3. The number of red deliverables has reduced from four to three and amber deliverables have reduced from 23 to 18. Two deliverables categorised as Red at Q3 (5407 and 5497 / Psychology) have transitioned to an overall Amber position at Q4.

#### <u>2023/24 Quarter 4 – Red & Amber Deliverables</u>

6.4 Three deliverables have been reported as Red (experiencing significant delay) at Q4. Two of the red deliverables were identified as red at Q3 (Psychology and NMAHP (Nursing, Midwifery & Allied Health Professions)). The new Red deliverable identified at Q4 sits within the NES Technology Service (NTS). Further detail is presented in Table 2.

- 6.5 18 deliverables have been reported as Amber (minor delay) in Q4. The majority of amber deliverables are due to short-term delays, including staff / faculty capacity (sickness or absence), lower than expected numbers participating in educational programmes (as a result of frontline service pressures) and ongoing delays to original project plans and timelines. As reported at Q3 a small number of deliverables continue to be in transition as current and future delivery priorities are agreed with Scottish Government (SG).
- 6.6 As part of the finalisation of the 2024/25 ADP, all 2023/24 Red and Amber deliverables have been reviewed in consultation with directorates and either closed or carried forward into 2024/25 as appropriate. Tables 2 and 3 summarise the Red and Amber deliverables identified at Q4. For each deliverable, information is provided to set out next steps to ensure completion during 2024/25 or whether the deliverable will be closed.

Table 2: 2023/24 Overall position – Red deliverables

| 2023/24 Qua        | rter 4 – Red Deliverables   |
|--------------------|---|
| Deliverable        | Summary of 2023/24 overall position and next steps  |
| 5461<br>Psychology | During 2023/24, delivery of trauma skilled workshops has been severely impacted by unfilled posts and absence issues within the network of Transforming Psychological Trauma Implementation Co-ordinators (TPTICs). This deliverable has been marked Red at Q4 as the planned delivery of training session targets have not been met. Reduced staffing capacity within the Psychology directorate as a result of non-recurrent SG funding has also had an impact on resource and delivery of training.  |
|                    | For the Board's information, this deliverable is now closed for 2023/24. A new set of delivery targets for this area of work is included as a deliverable in the 2024/25 ADP.   |
|                    | This deliverable comprises the development and maintenance of the separate Nursing & Midwifery (N&M) and Allied Health Professions (AHPs) quality management systems and online learning environments.  |
| 5517<br>NMAHP      | The deliverable has been categorised as red at Q4, specifically in relation to the development of a Quality Management System (QMS) for AHPs. Whilst the quality and further enhancement of the N&M learning environment has been maintained via the NES QMPLE (Quality Management of the Practice Learning Environment) system during 2023/24, work on the AHP QMS has not been progressed due to internal systems being unable to support AHP requirements. During Q4, work to review the functionality of external systems has been undertaken and a report will be available by Quarter 1 of 2024/25 setting out progress to date and specific recommendations. |
|                    | For the Board's information, the AHP part of this deliverable will be taken forward into 2024/25 to ensure continued oversight of the development of an AHP QMS. A new deliverable has been added to the 2024/25 ADP.   |

| 2023/24 Quai | 2023/24 Quarter 4 – Red Deliverables   |  |  |  |  |
|--------------|--|--|--|--|--|
| Deliverable  | Summary of 2023/24 overall position and next steps   |  |  |  |  |
|              | This deliverable relates to the provision of user support and maintenance for the TURAS Care Management application (safety huddle tool) which is used by all Older People and Adult Care Homes across Scotland to capture staffing information. The tool provides Health & Social Care Partnerships and SG with data in order to provide support to care homes and inform policy decisions in this area.  |  |  |  |  |
| 5863<br>NTS  | This deliverable has been categorised as Red at the end of 2023/24 as there have been ongoing discussions with SG in relation to the longer term future of this work and there is no dedicated NTS resource for this product. As of 2023/24 Q4, funding is yet to be confirmed. NES has delivered the majority of the work requested as a result of some short-term funding received from SG and assistance from other NTS teams however this is not a sustainable long-term position. |  |  |  |  |
|              | For the Board's information, the Q4 narrative for this deliverable states that NTS have had conversations with SG about additional funding to support future TURAS Care Management application work during 2024/25. If funding and priorities for 2024/25 are agreed then the Board will receive quarterly updates via a deliverable within the NES 2024/25 ADP that covers all aspects of NES's delivery within the SG Health and Social Care domain.                                 |  |  |  |  |

Table 3: 2023/24 Overall position – Amber deliverables

| 2023/24 Quar        | rter 4 – Amber Deliverables  |
|---------------------|--|
| Deliverable         | Summary of 2023/24 Overall position and next steps   |
| 5868<br>5839<br>NTS | Within the NES Technology Service (NTS) there are ongoing delays to digital work including support to the vaccination improvement programme via the maintenance of the TURAS vaccination management tool, development of Individual Care Summary information and digital dermatology referrals. This continues to be as a result of awaiting further clarity from SG regarding the longer-term future direction and funding of these programmes of work. |
|                     | If confirmation of funding is received from SG then these areas of work will be included in the 2024/25 NES ADP. A further update will be provided to the Board in the 2024/25 Quarter 1 delivery report.  |
| 5866                | Rollout of the OpenEyes electronic patient record application to NHS Golden Jubilee (NHS GJ) to support the Cataract pathway has been delayed until June 2024 as there is a need for NHS GJ to upgrade to a new system (Trakcare) as part of the overall OpenEyes integration.   |
| NTS                 | NES and NHS GJ continue to have good engagement in relation to this issue and governance preparation is underway to allow technical work by NES to be delivered once the Trakcare upgrade is complete. A final   |

| 2023/24 Quar                               | 2023/24 Quarter 4 – Amber Deliverables   |  |  |  |  |  |
|--|--|--|--|--|--|--|
| Deliverable                                | Summary of 2023/24 Overall position and next steps   |  |  |  |  |  |
|  | update will be provided to the Board in the 2024/25 Quarter 1 delivery report.   |  |  |  |  |  |
| 5867<br>NTS                                | The impact of delays within the Community Health Index (CHI) digital programme has meant that the integration of the OpenEyes electronic patient record application into the National Digital Platform (NDP) has been delayed by approximately two months. A final update will be provided to the Board in the 2024/25 Quarter 1 delivery report.  |  |  |  |  |  |
| 5857<br>NTS                                | A delay in the receipt of confirmed multi-year funding and associated resourcing and capacity issues have affected NTS's support of the NHS Scotland Digital Prescribing and Dispensing Pathways Programme (DPDP). Outstanding 2023/24 DPDP work will be carried into 2024/25 and monitored via a new deliverable in the 2024/25 NES ADP.  |  |  |  |  |  |
| 5862<br>5870                               | These two deliverables relate to NES's support of the TURAS Family Nurse Partnership (FNP) products in NHS Scotland (5862) and NHS England (5870) respectively. The deliverables have been marked Amber at 2023/24 Q4 as a result of staffing issues. Two of the three-person team resigned during Q4 so recruitment activity is now underway alongside a review of the staffing skillset required for these roles.  |  |  |  |  |  |
| NTS  | Support for the TURAS FNP products will continue throughout 2024/25. The Board will receive quarterly updates via a deliverable within the NES 2024/25 ADP that covers all aspects of NES's delivery within the SG Health and Social Care domain.  |  |  |  |  |  |
| 5713<br>NHSSA, L &<br>I                    | The development of a Technology Enabled Learning (TEL) support plan with NHS Scotland Health Boards in 2023/24 Q4 has been affected by resource constraints. This has impacted the extent of NES's engagement with Health Boards in relation to their TEL support needs e.g. a proposal for a national TEL network has not yet progressed. Further updates on TEL-related work will be provided via the NES Education and Quality Committee.   |  |  |  |  |  |
| 5658<br>NHSSA,<br>Learning &<br>Innovation | The redesigned Knowledge Network launched slightly later than planned during 2024/25 Quarter 1 (rather than 2023/24 Quarter 4). The deliverable has been marked Amber for 2023/24 Q4 as confirmation of funding in relation to future work (including the national tender of subscriptions content) is currently awaited. The ongoing design and development of resources hosted on the Knowledge Network will continue throughout 2024/25 and a deliverable is included in the 2024/25 NES ADP. |  |  |  |  |  |
| 5884<br>NHSSA,<br>Learning &<br>Innovation | Lower than expected number of learners participated in a Healthcare Pathway pilot qualification during 2023/24 as part of the NHSS Youth Academy. Skills Development Scotland funded the 2023/24 pilot and have confirmed that they will not run the programme again during 2024/25 however some schools are keeping recruitment to the pathway  |  |  |  |  |  |

| 2023/24 Quarter 4 – Amber Deliverables |  |  |  |  |
|--|--|--|--|--|
| Deliverable                            | Summary of 2023/24 Overall position and next steps   |  |  |  |
|  | open and may offer their own more intense and immersive delivery during 2024/25.   |  |  |  |
|  | A new NHSS Youth Academy deliverable has been included in the 2024/25 NES ADP. A new Healthcare Pathway pilot will be run subject to receipt of confirmed funding.   |  |  |  |
| 5532<br>NMAHP                          | This deliverable has been marked Amber as delays to the overall development timeline of the pilot Graduate Apprenticeship for Operating Department Practitioners (ODPs) may impact Health Board recruitment to the pilot programme. It is hoped that the pilot will be ready for delivery by September 2024. The launch and delivery of the Graduate Apprenticeships for ODPs is included within a 2024/25 NES ADP deliverable, therefore the Board will receive further quarterly updates via that route.   |  |  |  |
| 5763<br>NMAHP                          | This deliverable relates to NES's role in supporting Boards to develop a high quality, skilled, sustainable and diverse NMAHP and Medical Associate Professions (MAP) workforce. The deliverable has been categorised as Amber at the 2023/24 Q4 as the SG National Workforce Innovation Programme (NWIP), which was due to deliver impact studies for two MAPs roles, has been paused. These studies will be prioritised as soon as revised delivery timescales are known. For the Board's information, oversight of MAPs work will be progressed by the NHSSA, Learning & Innovation directorate going forward. Quarterly updates will be provided by a deliverable in the 2024/25 ADP.  |  |  |  |
| 5510<br>NMAHP                          | This deliverable relates to NES's delivery of Compassionate Communication (CC) training and Care Experience Improvement Model (CEIM) leaders training. Due to staffing issues, three out of four CC training cohorts were delivered. Initial work in relation to a 'train the trainers' model has begun however further exploratory work is required. The CC work is dependent on a single member of staff's expertise which is a risk to this programme going forward. NES continues to liaise with SG policy leads in relation to Alternative Augmentative Communication (AAC) as no funding was received during 2023/24 to support the development of new resources. The CC programme work will continue in 2024/25 via new deliverable in the 2024/25 ADP. |  |  |  |
| 5424<br>Medical                        | Education and training that enhances health and social care workforce preparedness in relation to death, dying and bereavement care has been delivered during 2023/24 however confirmation of funding is awaited in relation to the continuation of individual educator posts supporting this work. This work will continue in 2024/25 subject to the confirmation of future funding from Scottish Government and will be monitored via the 2024/25 ADP if funding is received.  |  |  |  |
| 5439<br>Medical                        | Internal staff capacity issues delayed the rollout of continuing professional development (CPD) courses for postgraduate (PG) medical trainers during 2023/24. Recruitment to business support posts has been  |  |  |  |

| 2023/24 Quar       | ter 4 – Amber Deliverables  |
|--------------------|---|
| Deliverable        | Summary of 2023/24 Overall position and next steps  |
|                    | successfully completed during 2023/24 Q4 and course delivery is now beginning to increase. This deliverable is now closed as there is a new deliverable focusing on CPD for PG medical trainers included in the 2024/25 ADP.  |
| 5407<br>Psychology | Internal and external workforce pressures during 2023/24 (mainly due to competing pressures and staff capacity) has impacted the completion of NES / SG Matrix evidence tables to support the evidence-based psychological therapies and interventions programme of work. Progress has been made during 2023/24 Q4 as this deliverable was rated Red at Q3 however the overall total of published matrix tables is less than originally planned.              |
| 5407               | Workforce availability to attend training (as a result of frontline service pressures) significantly impacted the delivery of programmes to support improved health and wellbeing outcomes for people living with dementia, their families and carers during 2023/24.   |
| 5497<br>Psychology | Capacity issues within NES as a result of staffing changes also affected the delivery of these programmes. This work is funded by SG on a non-recurrent basis and NES continues to engage with SG policy colleagues in relation to funding and capacity issues. The future delivery of this programme is at risk until a confirmation of future funding is received. A further update will be provided to the Board in the 2024/25 Quarter 1 delivery report. |
| 5539<br>Workforce  | The development of the NES Human Resources (HR) proposition model has progressed during 2023/24 however staffing capacity issues and delays to internal delivery timelines and process reviews have meant that the overall delivery plan has been rebaselined. The HR model proposition work will continue throughout 2024/25 and a deliverable is included in the 2024/25 NES ADP.   |

#### Key Achievements during Quarter 4

6.7 There have been a number of significant achievements during Quarter 4 that support the delivery of the NES 2023-26 Strategy and align directly with our strategic themes (People, Partnerships and Performance). Within our education and training remit (People), the NES Board approved NES's new Learning & Education Strategy which sets out how we will deliver education and training across the health and social care workforce and within NES to support our own staff. We have reached almost 19,000 e-Learning completions within Pharmacy which is nearly 9,000 more than the intended 2023/24 target. A total of 34,000 Pharmacy e-Learning completions were achieved across all health professions in support of the NHS Pharmacy First Scotland service, part of which aims to enhance the number of active independent prescribers in all sectors. We have also achieved a 100% success rate in relation to provision of access for up to eight Dental Care Professionals (DCPs) to upskill and be registered as Orthodontic Therapists and support high quality frontline care and delivered a

- wide range of CPD to General Practice staff including over 420 peer support sessions delivered to Practice Managers.
- 6.8 To support the delivery of our Partnerships strategic theme objectives, a new NHS Scotland Workforce Planning tool is now available for use via TURAS Learn to support better workforce planning, identification of priorities and targeted support. We have achieved increased education and training delivery within the National Ultrasound Training Programme (supporting increased ultrasound capacity in NHS Scotland) as part of the NHS Scotland Academy which is a joint partnership with NHS Golden Jubilee. We have also provided support to the Accelerated National Innovation Adoption (ANIA) programme (as part of the Centre for Sustainable Delivery) via the provision of a workforce model for a national diabetes remission team and developed an anti-racism training module into a digital learning resource which will shortly be made available to all health and social care staff via TURAS Learn.
- 6.9 In relation to our Performance strategic theme, we launched a Digital and Data Skills Hub pilot to support the health, social care and housing workforce as part of the Digitally Enabled Workforce programme which is a national programme work focusing on improving the digital capability of the health and social care workforce. We have also completed the roll out of the OpenEyes electronic patient record application in NHS Greater Glasgow & Clyde to support cataract, glaucoma and general ophthalmology pathways in line with Scottish Government priorities.

#### 2023/24 ADP Amendments during Quarter 4

6.10 As per previous 2023/24 Delivery Reports, the Board will wish to note changes and refinements to the 2023/24 ADP as a result of ongoing changes within our operating environment and the fluid nature of certain aspects of our work. The following amendments have been made to the 2023/24 ADP during Quarter 4 and have been reviewed and approved by the NES Executive Team:

| 2023/24 ADP<br>Deliverable | Amendment Detail   |
|----------------------------|--|
| 5907<br>(New)              | Following discussions with Jim Boyle as Executive Lead and the NES Climate Emergency & Sustainability Group, it has been agreed that it would be helpful to have a 2023/24 deliverable and Quarter 4 milestone introducing the development of the NES Climate Emergency and Sustainability Strategy. This is in advance of the strategy being submitted for Board approval during 2024/25 Quarter 1 and then initial implementation during the remainder of 2024/25. |

| 5893 | The Q4 milestone for deliverable 5893 has been amended to reflect the Q3 narrative update which advised that the timescales for the development of a NES Research & Innovation Strategy have changed. On a related note, the Board will wish to note that the Q4 narrative update for this deliverable confirms that the strategy has |
|------|---|
|      | now been reframed as an Innovation Plan that will complement the NES Learning & Education Strategy.   |
|      |   |

#### Risk Management

- 6.11 The three red deliverables reported at 2023/24 Quarter 4 have been reviewed against the NES Corporate Risk Register and do not demonstrate a significant corporate risk at this time. Mitigating actions continue to be in place to address current issues as much as possible.
- 6.12 For the Board's information, whilst an EQIA (Equality Impact Assessment) has not been undertaken for the NES 2023/24 ADP, EQIAs have been completed for individual NES programmes of education and training activity as appropriate.

#### 7. Recommendations

7.1 The Board is asked to approve the Quarter 4 Delivery Report and note the amendments made to the 2023/24 NES ADP.

| -                                     | ave Educational implications been considered?  |
|---------------------------------------|--|
|                                       | ⊠ Yes  |
| [                                     | □ No   |
| · · · · · · · · · · · · · · · · · · · | s there a budget allocated for this work?<br>⊠ Yes<br>□ No   |
| <u>P</u>                              | lignment with Our Strategy 2023 – 26 People, Partnerships and erformance  □ 1. People Objectives and Outcomes □ 2. Partnership Objectives and Outcomes □ 3. Performance Objectives and Outcomes                                    |
| •                                     | ave key strategic risks and mitigation measures been identified?  ☑ Yes ☑ No   |
| bo<br><u>B</u><br>(§                  | ave Equality, Diversity, Human Rights and health inequality issues een considered as per Fairer Scotland Duty: Guidance for Public odies and Corporate Parenting as per the Children and Young People Scotland) Act 2014?  Yes  No |
| p                                     | as an Equality Impact Assessment (EQIA) been completed or in rogress for this piece of work?  Yes No   |
| in                                    | ave you considered Emergency Climate Change and Sustainability nplications as per DL (2021) 38?  ☑ Yes □ No  |
|                                       | ave you considered a staff and external stakeholder engagement plan?<br>⊠ Yes<br>□ No  |
| AS<br>May 202<br>NES                  | 24   |



# Annual Delivery Plan (ADP) Summary Progress Report (Quarter 4, 2023/24)

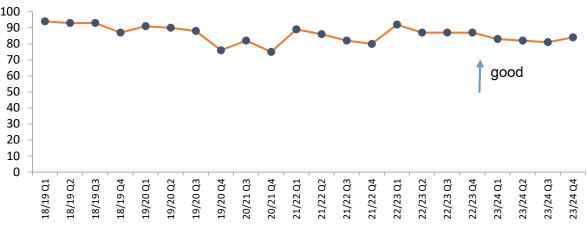
Aim: To provide an overview of progress and highlight key achievements, delays and risks in relation to delivery of the 2023/24 NES ADP.

# **Delivery Status at 31 March 2024 (Quarter 4)**

- NES 2023/24 delivery has concluded at 85% of deliverables completed or on track in line with ADP milestones at the end of Quarter 4 (in comparison to 87% delivery achieved at 2022-23 year-end)
- **3% of deliverables** are experiencing significant delay at 2023/24 yearend. Next steps have been agreed and directorates will continue to report on these deliverables during 2024/25 as appropriate.

|                               | Q1 23/24 | Q2 23/24 | Q3 23/24  | Q4 23/24 |
|-------------------------------|----------|----------|-----------|----------|
| Status:                       | _        |          |           |          |
| Complete                      | 2        | 2        | 4         | 54       |
| On Track                      | 114      | 116      | 109       | 66       |
| Minor Delay                   | 25       | 22       | 23        | 18       |
| Significant Delay             | 0        | 1        | 4         | 3        |
| Closed - no further<br>action | 0        | 0        | 1         | 0        |
| Total Deliverables            | 141      | 141      | 141 (140) | 141      |

#### % of on target / completed deliverables, by Quarter, 2018/19 - 2023/24



#### Key Achievements (Individual ADP milestone references shown in brackets)

- 100% success rate in relation to provision of access for up to 8 Dental Care Professionals (DCPs) to upskill and be registered as Orthodontic Therapists. (Ref 5598)
- Wide range of CPD delivered to General Practice staff including over 420 peer support sessions delivered to Practice Managers. (Refs 5409 / 5414)
- Increased delivery achieved within the National Ultrasound Training Programme during Quarter 4 to support increased ultrasound capacity in NHS Scotland. (Ref 5886)
- Workforce model for national diabetes remission team approved as part of NES's work to support Accelerated National Innovation Adoption (ANIA) programme. (Ref 5859)
- NES Learning & Education Strategy approved. (Ref 5892)
- End of year Pharmacy e-learning completions at almost 19,000 (10,000 above original target) and over 34,000 completions across all healthcare professions. (Ref **5373**)
- NHS Scotland Workforce Planning tool signed off and in use in Health Boards. (Ref 5543)
- NES anti-racism training module developed into digital learning resource and will be made available via TURAS Learn to all health and social care staff in 2024/25 Quarter 1. (Ref 5544)
- Digital and Data Skills Hub pilot launched via TURAS Learn to support the health, social care and housing workforce. (Ref **5550**)
- Delivery of Scottish Multiprofessional Maternity Development Programme courses exceeded during 2023/24 – 151 courses delivered (original target = 100). (Ref 5535)

#### **Delays and associated impact**

Of the 3 red and 18 amber deliverables identified at 2023/24 Q4, consideration has been given to next steps. Deliverables will either be completed during the early part of 2024/25, carried forward into the 2024/25 ADP for ongoing quarterly reporting throughout the year or closed.

#### **Corporate Risks Affecting Delivery**

At the end of Quarter 4 there are 3 deliverables reporting significant delay.

There are no impacts highlighted at present which align to the NES Corporate Risk Register.

| Recovery Driver SG ADP Action Deliverable Reference Reference | Deliverable Summary ate  | Q1 Milestones  | Q2 Milestones  | Q3 Milestones   | Q4 Milestones  | Q1 RAG Statu | s Progress in Q1   | Q2 RAG State | us Progress in Q2  | Q3 RAG Status | Progress in Q3   | Q4 RAG Statu | s Progress in Q4   |
|---|--|--|--|---|--|--------------|--|--------------|--|---------------|--|--------------|--|
| 1. Primary and Community Care 1.1 5409 Medicin                | Delivery of Continuing Professional Development (CPD) Connect educational activities for General Practice to improve patient care in NRS scotland, increasing the surfacy of educational recourses and activities available to wisclude salver maps on the programme and profiting of even will bis based education programme by March 2024 including evaluation of the impact on learner behaviours.  | Pilot of in-situ sim and review of learning. Development and engagement of faculty to support engagement engag | Begin delivery of programme of events.<br>Subject to funding, begin review of<br>inspact of resources for General<br>impact of resources for General<br>elearning resources. Development of<br>elearning resources.  | Development of elearning resources.<br>Delivery of programme of education.  | Deliver CPD Connect educational activities to General Practice and embed new skills based pragrams. Review of impact of based pragrams. Review of impact of based pragrams. Review of impact of the complete subject to funding. | Green        | 3 simulation-based learning sessions held with 15 delegates total. Planning underway for A Day in the Life of a Blary General Practice webhars series to begin underway for A Day in the Life of a Blary General Practice webhars series to begin automa 23, topic stowe been agreed and specials now being sourced. Wider analysis of the Committee of th | Green        | S simulation-based learning sessions held with 24 delegates total (various courtes). A Day in the Life of a Busy General Practice weights review beginning to the Life of a Busy General Practice weights review beginning to the Life of SULT, 11 bigs in the been subsertioned and 300 Forement in Practice burse (EPV).  CPD underway, including a collaborative course on risk with the Practice Managers, and courses on MS (Mounclosketed) (in in Inject 2). Published have 23, with others imminent. 23 at the Verbolish members and 24 new facilitations trained. Predations Authors desarring module development has paused waiting new guidelines in July confirment. GPV condition specific support sessions held for eleaning packages. Confirment. GPV condition specific support sessions held for eleaning packages. 2, 106 semens have accessed GPM resources since 1st April 2023 and 1,800 GPN Facebook members. New GP Facebook page was baunched in May 2023 and has grown to 362 members.   | Green         | Seven simulation-based learning sessions held with 44 delegates total (various courses). A Day in the Life of a Busy General Particles webbrar series bages at the end of Septemble 2023. Fixed out 11 stiges have nown and 17 20°F Denseal Particles Nature (SN) General SN) General SN General S                       | Blue         | A further four simulation-based learning sessions held with 32 delegates total (various course). A Day in the Life of a Busy General Practice websinst series began at end of September 202. Bout of 12 tapes here were run and 1146-07 GMR delegates registered in the County of 12 tapes here were run and 1146-07 GMR delegates registered so for fals some Paramety delegates). Collaborative course for GPs and Practice Managers took place in March 2024 with 32 delegates in attendance. 18 GPs attended a historiaction to Leadership course. 41 GPs attended a pilot series of Predative websites of the Section of 12 tapes of  |
| 1. Primary and Community Care 1.1 5345 Pharma                 | by Obiter Sereks of Experiential serving (ILI) for all sudent pharmacists in the 2 Scottlish should of Pharmacy, to scheme 1 services of the 1904(31) exposure 1 servines to Service (1) retained leaders and approx. 200 commonly pharmacies in Scottland. Concurrently deliver at least 10 Preparation for Experiential Learning (PELI) training events to new Pharmacy Experiential Learning (ELI) Radikations for approved EL sites.   | Final activity of Experiential Learning<br>(EL) from academic year 2022/23. Up to<br>4 Preparation for Experiential Learning<br>(PFEL) sessions scheduled.   | Learning (PFEL) sessions scheduled.  | 2023/24 starts W/C 02/10. Up to 3<br>Preparation for Experiential Learning  | Deliver 9 weeks of Experiential Learning for<br>all student pharmacists and 10 Preparation<br>for EL learning events (up to 56% of<br>planned EL activity scheduled for this<br>quarter).  | Green        | G1 achieved as espected. Catch up E1 for 2022-23 eademic year and 4<br>Preparation for Experential Learning (PFE) sessions completed. National Co-<br>ordination 2023-24 outcomes distributed to E1 providers.   | Green        | Three Preparation for Experiential Learning (EL) sessions completed. Preparations for commencement of EL in October on track.  | Green         | Afurther two Preparation for Experientia Learning (EL) sessions completed. National<br>coordination outcome for all first year sudents communicated to community<br>planmacy EL providers for activity is Elemented 2 (Quarter 4), 44% of planned EL activity<br>completed and in line with expectation.   | Blue         | Find Experiential Learning (EL) activities understaken in February / March 2024 completing thenine weeks of EL required. One additional Preparation for Experiential Learning (FPEL) session completed fulfilling the required 10 sessions.  |
| Primary and     Sac Pharma     Community Care                 | and direct delivery of 1-year Foundation Training Year (FTY) and quality assurance of the programme. Recruiting minimum of 200 Trainees and monitoring and supporting new and existing trainees of approx 200 per annum.   | Including social media campaign, involvement at up to 5 University Careers events, participation in Royal Pharmaceutical Society (RFS) joint webinar for G8 recruitment and delivery of four Scotland FTY Recruitment webinars.  | assessments in conjunction with Health<br>Education Egiand (HEE) and Health<br>Education & Improvement Wales<br>(HEIW) - testing window 21st Sept to<br>5th Oct.   | assessments in conjunction with HEE and HEIW - testing window 21.15 Sept to 5th Oct - via Person Vue. Matching process undertaken via Oriel and a minimum of 200 offers accepted in round 1 matching. | Pharmacists.   | Green        | 2022-23 cohort - 256 trainese currently in training; 200 eligible to sit June GPAC<br>common Registration Assessment. Results sepected during 20,203-34 cohort -<br>205 trainese expected to commence FTV training in this cohort. 2034-25 cohort -<br>Applications for FT received via oriel in June 23 for this cohort was 548 (11%<br>increase on list year applications)   | Green        | 2022-23 cohort - 172 trainees have completed training and passed GRNC Registrations asserted and ner own eligible to register as pharmacists. Ga are eligible to so 14 Autumn GRNC Registration Assessment. Three further trainees remain in training, 2023-24 cohort - 200 trainees have commenced FFV training and a further 25 expected to commence in Quarter 3. 2024-25 cohort - 541 applicants were invited to all the FTV assessment at Pearson Use test centres during September / October 2023 to proceed with application process.   | Green         | 2022-23 cohort - 299 trainers have completed workplace based training and passed the<br>General Pharmaceloid Council (EPIN, Begistration assessment and eligible to register<br>as pharmacists. 24 are eligible to st \$4 cmmer 2024 GPIC Registration Assessment. One<br>further trainer eramins in training. 2023-24 cohort - 256 NIS funded trainers commenced FIY training, 215 remain in<br>training. 2024-25 cohort - 250 applicants have successfully matched to a NIS funded FIY post.<br>This is an 200% fill rate on post numbers set by \$G.  | Blue         | 2022 25 cohort - 209 trainees have completed workplace based training and passed the<br>General Pharmaceutical Council (Pich (Pagistration assessment and eligible to register<br>as pharmacists. 24 are eligible to sif Summer 2024 GPIC Registration Assessment. 1<br>further trainer ermains in training.<br>2023 24 cohort - 215 NES funded trainees commenced FTV training. 214 remain in<br>training. 1 on maternity leave.<br>2024-25 cohort - 220 applicants have successfully matched to a NES funded FTV post. This<br>is an 100% fill rate on post numbers set by Scottish Government (SG).   |
| 1. Primary and 1.1 5364 Pharma Community Care                 | y Provide qualified Pharmacy Technicians for workforce of NiG and Community Pharmacy via the commissioning<br>and support of the SG funded pre- Registration Pharmacy Technician Scheme.   | based assessor support in place.<br>Ongoing discussions regarding  | based assessor support in place.   | work based assessor support in place.<br>Ongoing discussions regarding  | Commission and support the SG funded<br>pre-registration Pharmacy Technician<br>service (maintaining up to 100 Trainees)   | Green        | S8 Traines progressing (4 have left since target update) with full work based<br>assessor support in place. Confirmation of Technical apperticiship funding for<br>received from Skilb Development Scotland (SSS) for 2023/24 with further<br>discussion to occur if this will be taken up via NES or via other routes.  | Green        | 93 Trainees continue to progress (4 have left and one is on maternity leave since<br>target update) with full work based assessor support.   | Green         | SI Trainers continue to progress with fall work based assessor support (since the<br>Quarter 2 update, not territine has let also not a matternity beach, Albit has been<br>submitted to Stills Development Scotland (SDS) in conjunction with NES Dental<br>colleagues for potential Modern and Technical Apprenticeship funding for 2024/25.   | Blue         | 85 Trainers continuing to progress across Cohors 1 and 2, with 1 completed early (1 on<br>materinity leave and 2 passed). This is the new the expected steps for 2023/24 for the 2-<br>year programme, with completions due between April and September 2034 (under<br>2004/25 plans).   |
| 1. Primary and 1.1 5367 Pharma Community Care                 | ensure the skills of the pharmacy workforce are optimised to contribute to improved patient care in all sectors<br>with up to 40 new technicians and 40 ongoing with up to 15 expected completions during 23/24. Evaluation of<br>pilot and review of the National Training Programme for Pharmacy Technicians also to be completed in year.   | technicians and enrolment of up to 40 new practitioners to the programme.  | programme.   | Ongoing delivery to 40 pharmacy technicians and enrollment/delivery to up to 40 new practitioners to the programme. Assessment under way for completing group.  | with up to an additional 40 recruited to the<br>ongoing programme.   | Green        | Delivery of post-registration programme to 88 post registration Pharmacy<br>Technicians, 11 of whom were inducted in Q1. MES induction period due in Q3.   | Green        | Ongoing delivery to 92 registered Pharmacy Technicians and enrollment/delivery of<br>up to an additional 70 Pharmacy Technicians within next cohort (Quarter 4).   | Green         | Ongoing delivery to 91 Post Registration Pharmacy Technicians with an additional 43<br>pending induction in January 2024.  | Blue         | Ongoing delivery to 86 Post Registration Pharmacy Technicians, Reassessment now complete. New online induction programme developed. 40 learners on induction. This completes the 2023/24 stages.   |
| 1. Primary and 1.1 5369 Pharmar Community Care                | y Deliver a programme of independent prescribing (IP) and clinical skills training for pharmacists is sociated by commissioning and monitoring deliver of IP training for the 202 flower IP training or and commissioning a collaborative of experts in clinical skills training to deliver the required clinical skills courses and report on completion.   | Clear scoping of capacity and funding<br>resource to meet<br>demand/requirements to meet<br>prescribing commitments.   | Rolling cycle of IP places filled and all<br>Clinical Skills places identified (tendered<br>contract in place)   | New commissioning commenced to<br>ensure maximum capacity<br>Independent Prescribing and Clinical<br>Skills training for up to 250<br>pharmacists across sectors.                                     | Commission and monitor programmes of<br>independent prescribing (IP) and clinical<br>skills training for up to 250 pharmacists.  | Green        | Development of designated prescribing practitioner resources and planned webhard to encourage pharmacists to take on supervisor relief for trainer IRI. Delay to 5.5 funding caused operational issues but not impacting on overall progression at this point.   | Green        | Confirmed independent Persching (PP) places for 12 to community pharmacists.<br>Health Boards contacted for princilisation. Designated Persching Practitioner (PP)<br>week and delivered in August 2023 with 80 attendess and recordings available on<br>TUMAS Learn. (Splated OPP resources and IP application resources hosted on<br>TUMAS Learn.)   | Green         | Following coping and agreed increase, up to 393 independent Prescribing (P) places<br>commissioned finicitive of an additional 1155 Community Plannany Scotland places.<br>Total number inclusive of legicy P places.<br>Additional clinical skip places provided for those requiring to meet requirements of<br>Additional clinical skip places provided for those requiring to meet requirements of<br>Plannany Frank diviewy. Dursder clinical skills combinative literative granters or<br>contract for clinical skills delivery by Dunder clinical skills collaborative until March 2025.   | Blue         | 383 Independent Prescribing (IP) places commissioned including the additional 115 community pharmacy (Places commissioned on course stating January to March 2004. Or track to fill 383 places as per the expected stages for 2023/24 plans. Contract extention issued to inherently of flunder (endered deliverer IP) Pharmacy Cinical 38(b), Clinical 38(b), |
| 1. Primary and 1.1 5371 Pharma Community Care                 | V Delevery of Education and Training to support Primary Care Pharmacy Workforce across Scottand to meet \$50 evision for Primary Care Trainings through yolderiving apost Primary Green Trainings and Care Trainings and Primary Care Trainings and State Pharmacists and susceing up to 80 Pharmacists working in 6P practices, against the MS 6P classed Pharmacists (GPP) Comprehensy Francework.   |  | Current cohorts progressing as<br>expected. Preparation for new<br>registrations in place/under way.   | Current cohorts progressing as<br>expected. Preparation for new<br>registrations in place/under way#.   | Deliver learning pathways to: up to 1.40<br>pharmacy technicians; 70 Core Advanced<br>Practice Pharmacists; and assessing up to<br>60 pharmacists working in GP practices.   | Green        | 20 GP/C candidates expected for credemissing Jug 2012. Created 3 new GPC<br>advanced the repairic session to 30 GPC and delivered exhibition 500<br>candidates. Collated feedback to review and revise programme for next cohort<br>starting Sept 23.  | Green        | 16 GPCs submitted for credentialing in August 2023 – two at advanced Level 2.<br>Applications for Chorol 12 GPC Pathway to advanced practice strated 25<br>participants. Completion of Cohrol 11 GPC Pathway to advanced practice to 30<br>participants per session. Cohrol 15 General Practice Learning Pathway (GPLP) for<br>Pharmacy Technicians underway delivering to a further 76 Pharmacy Technicians.  | Green         | 22 GPCPs redembated at Advanced Level 1. Provision of three sessions to 25<br>participants on pathways to advanced practice confort 12 GPU February Level<br>Learning Fathway for Pharmacy Technicians) - Carbon S currently progressing. Delivering<br>to 75 Foot Registration Pilarmacy Technicians.   | Blue         | During March 2024, 4 GPCPs redentalled at Advanced level 2 and 21 GPCPs at<br>Advanced level 1, provision of 3 assists to 52 participants on bitmay to advanced<br>practice cohort 12. GPLP Cothort 5 almost complete. Currently delivering module 6 of 6<br>to 140 Pharmacy Technicians.  |
| 1. Primary and 1.1 5433 Medicial Community Care               | es Support the development of a competent and saurued General Practice. Nurse Workforce by delivery of the<br>General Practice. Dure Education Enhancy arous 2 cohorts in 202-24 (bittering Month 23 and Spet 23), using a<br>blended learning approach for a minimum of 80 learners, using reflections and feedback on the first 6 months of<br>the pilot cohort to shape delivery going forward. Linking with the Continuing Prolessional Development of<br>the pilot cohort to shape delivery going forward. Linking with the Continuing Prolessional Development<br>Comment team to conduct further research into the impact on patient care as a result of the General Practice<br>Nurse (CPR) Education Pathway, by using the data from the quality improvement projects submitted and<br>analysing the outcomes.  | Progression of Cohort 1 and full review  |  | Finalising Cohort 1 and Progression of Cohort 2   | Deliver General practice Nurse education pathway to at least 80 learners over 2 cohorts.   | Green        | Cabort 1 delivery is well underway, with settension to this cabort to Nov 23<br>implemented based on initial plate feedback. Cabort 2 deliver 0 or Cabort 23 in<br>order to ensure that full review could be undertaken and implemented.   | Green        | Cohort 1 delivery is well underway and unit 3 has commenced, ending November<br>2023. Cohort 2 does commence and to Ootbee 2023 with faculty and learners<br>being recruited/inducted. Full review of cohort 1 is underway.  | Green         | Cohort 1 delivery completed in November 2023. Cohort 2 commenced in October 2023 with a further 40 learners.   | Blue         | Cohort 2 of the Pathway is now in unit two of three. There are 37 learners currently engaged with cohort 2.  |
| Primary and     Community Care     1.1 5414 Medica            | e Delwey of the Practice Managers Vocational Training Scheme (PMVTS) across 2 colorst in 1023-24, using a behended learning approach for a minimum of 40 new and larging General Practice Managers and virtually across 2 colorst in 2023-24, for a minimum of 40 sparking General Practice Managers. Delivery of a minimum of 40 sparking General Practice Managers. Delivery of a minimum of 8 virtual searning events for Practice Managers, as well as a virtual Practice Managers. Delivery of 35 Sessions per month of peer and educational support to local Practice Managers across all territorial boards in Scribards.   |  | Deliver 305 sessions of peer support for<br>Practice Managers.   | Deliver 105 sessions of peer support for Practice Managers.   | Deliver: Practice Managers Vocational<br>Training Scheme to Bearners, Birvalla<br>learning events to practice managers, 105<br>sessions of pers support for Practice<br>Managers.  | Green        | Practice Managers Conference delivered as part of the SMEC in April 2023. Cohort 1<br>30 of PAVTS is indexney with 20 learness. J Elearnes have subsequently withdrawn from the programme. Local Coordinators have provided in excess of 105<br>seasons of peer supporte/beveen April and June. 4 Virtual learning events held for<br>Practice Managers  | Green        | Supervisory Management in General Practice (SMGP)—Two new coloris of the SMGP count has economised on September 2023 with a bitter untwelve of 50 students under taking this training.  MVMTS Coloris 18 have submitted the Work Based Projects for marring.  MVMTS Coloris 18 have submitted the Work Based Projects for marring.  MVMTS Coloris 18 have submitted the Work Based Projects for marring.  The State of the Practice Manager to 200 GPST3.  There have been too day of GPST3 students given at the Golden Labbee explaining the "Rive Section 19 students" of SMGP 18 students of 19 students of | Sreen         | Delivered 18 worshings / sessions for Practice Managers to date covering a variety of<br>topics. Colon 18 of the Practice Managers consciousil Taining Scheme (PMVS) has<br>completed (20 learners commenced on this programme) with Colon 19 due to<br>completed (20 learners commenced on this programme) with Colon 19 due to<br>commence on Jainus 2020 with 21 sensors. Local Confordistor continue to deliver peer<br>support to Practice Managers across Scotland with over 315 sessions provided.  | Blue         | Delivered 18 workshops/resistions for practice managens to date covering a variety of tapics. Cohort 18 of the PMV73 has conjected (20 Learners commenced on this programme) and Cohort 19 commenced in January with 21 learners. Local Coordinators or continue to Gelevier pere support to Practice Managers across Scotland with over 420 sessions provided.  |
| Primary and     Community Care     S536 NMAN6                 | To deliver the Core Family Nurse Patriceship (RNP) Education Programme for a minimum of 60 Family Nurse and resourceship Professional Devolopment (PQP) Programme for a minimum of 10 Just by March 20%. Year 1 - a minimum of 20 participants in the core education programme and a minimum of 70 participants for PQD. The Professional Diploma in Family Nursing, as approved by the Scottish Qualifications Authority, will be offered twice.  | and 18 supervisors as part of the core<br>and supervisor education programme<br>during quarter 1. The CPD programme  | and 5 supervisors as part of the core<br>and supervisor education programme<br>during quarter 2. The CPD programme   | and 5 supervisors as part of the core<br>and supervisor education programme<br>during quarter 3. The CPD programme<br>will be offered to 25 family nurses and   | programme and a minimum of 70  | Green        | samly Nurse Education Programme: In CI, 88 family nurses, within five cohorts, we rapprecisely investight the ducation programme. Family nurses from Scotland and Northern Ireland are represented in these numbers. Of the 45 eligible to understate the Professional Diploman Family Nursing 12 conditions are understating assessments. SEI a will commence in the next quarter with 18 anticipated participants. Supervisor Securison Programme: In CI there have been 15 FNP uppervisors from Scotland and Northern Ireland, progressing through the ducation and memoring programme. SEI will commence in August 23 and two new supervisors are expected. CPD: In CI we welcomed 45 family nurses and supervisors that CPO programme where there is the opportunity to understake the different CPO sessions.  | Green        | Samily starce education: 16 Quanter 2 85 family nurses across four cohorts are<br>organized through the education programme. Since Quanter 1.8 families have<br>Flourished and 33 new family nurses have started Foundations in Family Nurse<br>Partnership (RPN) paractics. Family nurses from Scottland and Northern Ireland<br>confinise to be represented in the cohort numbers. Currently there are 36<br>candidates undertaking the Professional polipoma in Family Nursing.<br>Supervisor Education: in Quanter 2 there are five Supervisors from Scotland and<br>Northern Ireland progressing through the education and mentioning programme.<br>Scotlish Cochort 3 pail commence, in thich 2004 and Boards are currently scoping<br>their requirement for places on the education programme.<br>Continuing Professional Development (CPO): in Quanter 2 we welcomed 72 family<br>nurses and supervision to CPO. This includes a CPO apportunity exclusively for<br>Supervisors as part of the Supervisor Learning Forum.  | Green         | Family New education: 10 Quarter 3, 87 Earnily nurses across four cohorts are<br>propressing through the education programme. Since Quarter 2, 31 nurses have<br>Flourished (completed). Family nurses from Scotland and Northern Ireland continue to<br>be represented in the Cook numbers. Currently there are 94 candidates understaing<br>the Professional Diploma in Family Nursing.  Supervisor 6 docation: in Quarter 3 there are five Supervisors from Scotland and<br>Northern Ireland organizing through the education and mentoring programme.<br>Scotland Cohort 15 will commence in March 2024 and Boards are currently scoping their<br>responsibility of the Scotland Cohort Cohort Cohort 15 will commence in March 2024 and Boards are currently scoping their<br>responsibility of the Scotland Cohort Cohort Cohort 15 will commence in March 2024 and Boards are currently scoping their<br>responsibility of the Scotland Cohort 15 will cohort 15 will commence in March 2024 and Boards are currently scoping their<br>responsibility of the Scotland Cohort 15 will cohort 15 will commence in March 2024 and Boards are currently scoping their<br>responsibility of the Scotland Cohort 15 will cohor | Green        | The Core Family Nurse Partnership Programme is currently provided to 4 cohorts with<br>\$1 family nurse and 20 supervious, which includes 18 new family nurses with<br>commenced their education in quarter 4. 29 have completed the programme this year.<br>The Professional Diploman is family Nursil's was offered twice as planned and there are<br>currently 42 candidates undershing the award. Continuing Professional Development<br>(FO) sestions were accessed during quarter 4 by 42 family nurses and 11 supervisors,<br>which totals 231 participating in CPD during this year.   |
| Normary and 1.1 5878 Options     Community Care               | thy To deliver Continuing Professional Development (CPD) resources to support the Community Glaucoma Service, specifically: 1. Online CPD events amounting to 5 hours delivery by end of quarter 4. 2. A Stills Workshop by end of quarter 4.  Southern Street Still Sti |  | Have delivered 1 x online CPD events   | Have delivered an additional 2 x online CPD events and planned for delivery of 1 x skills workshop  | Have delivered a total of min S x online CPD events, a skills workshop, and to have submitted to SE a amundatory CPD proposal with cost implications.  | Amber        | Cl has allowed for CGS support planning and steps are underway to achieve Q2 and Q3 milestones. However, long term sick leave in NESGAT defivery has required sharing of workload in this team, reclining capacity. Further, a led stutur has soo had to add additional support to general CPD defivery and more specifically to Mandadray Training, as a result of continued delayed recruitment to tuture post. MSSGAT maternity leave due to start end of July an internal appointment has been made to cover, however this further reduces Professional Development Team, again impacting ability to deliver around Community GLaucoma Service Support. Oelivery is being adjusted to have results delivery appectation. Additionally business support to be lost at end of July.  | Green        | The team successfully delivered two journal club meetings, four peer discussion events, a glaucoma topic webhar, and a specialist drop in session. We also provided Scotish Government with a positive quarterly update.   | Green         | During 2021/24 Quarter 3, the team made the following available to book:  -2 weeliners in specialist area  -2 Peer Discussions -1 Specialist drop-in session -1 Journal Club   | Green        | Quarter 4 delivery focused on an in person glaucoma conference, offering multiple CPD events to the audience of CGS practitioners (attendance 40) across Scotland. Learning and evaluation taken to support 2024/75 planning.  |
| 1. Primary and 1.1 5697 Optoms<br>Community Care              | Deliver mandatory training to minimum 90% of all General Ophthalmic Services (GOS) Optometrists/Ophthalmic<br>Medical Practitioners (OMPs) practising within Scotland.   | Advertise and collate feedback to<br>identify barriers to completion   | Advertise and collate feedback to<br>identify barriers to completion   | Advertise and collate feedback to<br>identify barriers to completion, with<br>additional actions as indicated by<br>current completion numbers.   | Have delivered mandatory training to 90%<br>of all general ophthalmic services<br>practitioners in Scotland by end of January<br>2024.   | Amber        | S60 practitioners have fully completed the training, with a further "100" in<br>progress. Frequent comms with the precision to advertise the training - via<br>Maliching, email to relevant registered practitioners, advertisement via Optometry<br>Scattand and use of social media. Americ due to worldrise schrages to ensure<br>2024 module delivery and loss of business support on NT workstream, with no<br>backfill recruited yet. Also digital harbor has been on significant sick leave in 23/74<br>already impacting on digital capacity.  | Green        | Competion figures for 2023 on track, and the module for 2024 has been positively<br>externally reviewed and now is through digital testing, ready to host on Turas for<br>2024 publication.  | Blue          | We have achieved completion of the 2023 mandatory training exercise by 1335 General<br>Ophthalmic Service (500) Optometrists (700) thairs (helder Settioners) (OMPs).<br>This allows us to sign off as achieved the goal of 30% completion, being nearer to 100%<br>completion.  | N/A          | N/A - Deliverable completed in Q3  |
| Primary and     Community Care     S581 Dental                | Up to 90 Dental Core and up to 40 Specialty post Certificate of Completion of Specialist Training (CCST) traines subhering the learning outcomes of the relevant curricula to the GDC (General Dental Council) standards per annum.  | Judetaka Review of Competence<br>Pergession (RE) for all current Death<br>Pergession (RE) for all current Death<br>Care Trainess (DCTs) and Specially<br>Trainess and sus eapropriate<br>outcomes to trainess for 202/2023<br>training year. Understea restoral and<br>local recruitment for posts commencing<br>in September 2023.  | Monitor progress of all trainess and review and monitor any the outcome of excellent and the control of the con | Trainees will take place. Continue with   | Deliver sp. to 90 central core and up to 40 speciality centificates of completion to dental trainees.  | Green        | Other are arranged for OCR GPS en 27-28 Jaly. Specially KPD, continue with<br>Pecializin Centrally having been undertaken in QL. Traines on the whole are<br>making good progress. All specially training posts for 2023-24 are filled. DCT<br>recruitment is origing with anumber of vacancies currently. Further local<br>recruitment in July 2023 is planned in an attempt to fill these.   | Amber        | SIS of DCTs achieved a sulfidicary outcome at the end of dental core training with<br>the remained feet to being state or howing been in post for insufficient time. 7<br>Dental Specialty Training Programmes were reviewed in Quarter 2 with two trainers<br>completing training in the period with all trainers making salidationary progress. 80<br>DCTs (ST% filled) commenced post in September 2023. One unfilled SIR<br>OCTs (ST% filled) commenced post in September 2023. One unfilled SIR<br>Orthodotrict post a Six remained unfilled and will be progressed at an additional<br>recruitment round nationally. All other SIR posts were filled.  | lmber         | Four Deart S Specially Training Programmes were reviewed in Quarter 3 with not trainer completing training in the presid and other smalling satisfactor progress. Recruitment to one \$15 post is being progressed with other posts currently filled. Current 2002/24 Dearts Core Training CECTy will have mile year reviews in February 2004. Recruitment to DCT posts via National UK wide recruitment for 2004/25 will open in January 2004.  | Green        | 97.5% of Dental Core Traines (DCTs) received a satisfactory outcome at BCCs in Coll and will have final reviews in August 2023. There were 91% for Clrs Achevings a satisfactory outcome in 2002/12 training year. 87% of DCT posts were filled at National recruitment and commenced in September 2023. Almoin recruitment 2002/15 has commenced and commenced in September 2023. Almoin recruitment 2024/25 has commenced with interviews taking place in May 2024 for commenced of posts in September 2024. The specialty training S130 recruitment CST in Clad and one has already commenced in a Senior Clinical Lecture/Nonorary Consultant post in Sociation. This makes a total of S13 completing training in 2023/24. 2016 of 51 posts were filled by January 2024 after a second round of Orthodomic recruitment. National and local recruitment to 57 posts has commenced for September 2024 intakes with 5 speciables being recruited to.  |

Page 1 of 11

| Recovery Driver                   | SG ADP NE<br>Action Do<br>Reference Re | HS Board NES Directorate  | Deliverable Summary  | Q1 Milestones   | Q2 Milestones   | Q3 Milestones   | Q4 Milestones   | Q1 RAG Statu | s Progress in Q1   | (2 RAG Status | Progress in Q2   | Q3 RAG Statu | s Progress in Q3  | Q4 RAG Status | Progress in Q4   |
|-----------------------------------|--|---|--|---|---|---|---|--------------|--|---------------|--|--------------|---|---------------|--|
| Primary and<br>Community Care     | 1.1                                    | 5583 Dental   | Special Smiles sessions for up to 20 learners. Provide a range of development sessions to meet the training needs of Childraine staff in Health Boards including Health board Coordinators to support oral health programmes and reduce health inequalities.   | module update.  | update and 1 development session.   | Deliver 2 cohorts of the 6 module<br>Childranie counte; 2 cohorts of the 2<br>module update; 1 cohort of special<br>module update; 1 cohort of special<br>Smiles Training and 3 development<br>sersions   | Deliver: 8 cohorts of Childsmile 6 module<br>courses, Scohotts of the 2 module<br>supdates, 2 Special bines bearing and 6<br>development sessions.  | Green        | Z cohorts of Childsmile 6 module course delivered with 23 attending (15 Dental Rurses and Dental Health Support Workers). This resulted in **I places not being filled on that braining due to Health Board recruitments susses. 2 Denton for 2 module update course with a total of 23 attending (14 Dental Nurses and 14 Dental Nurses Support workers). 3 cohorts of the Mindrick Variant training have also talken Support workers). 3 cohorts of the Mindrick Variant training have also talken place with a total of 17 Dental Nurses attending.   | reen          | Two cohorts of the 6-module course were delivered with 22 dental nurses and eight dental health support workers attending. Two   | Amber        | During Quarter 3, two cohorts of the 6-module course were delivered with 22 Dental<br>Nurse and 5 Dental Health Support Workers attending. Four Fourde Varinish Sessions<br>took place with 25 Dental Nurse attending. Four 2-day updates took place with 23 Dental Nurse and 15 Dental Nurse and | Green         | Two coharts of Childramile 6 module courses were delivered with 24 Dental Nurses (INI) and 5 Dental Reath Support workers (INFOW) completing in Clif making a total of 8 cohorts and 80 lb and 27 DRISV understaging the training in 2022-34. 27 DNs completed the fluoride Varient's Application practical resision in Clif making the total 88 DNs in 2023-40 completed of the fluoride Varient's Application practical resision in Clif making the total 88 DNs in 2023-40 completed of the completed of the complete of the Clif making and the Clif making and the Clif making and total of 3 sessions with 14 DNs and 21 DNSV attending in 2023-24 and 50 DNS was delivered in Clif making a total of 3 sessions with 14 DNs and 21 DNSV attending in 2023-24 and 50 DNSV attending in 2023-24. The Clif session was externally quality assured by REINS and resulted in excellent feedback and NES continuing to be an accredated centre for delivery of this qualitation. The Clif development sessions makes a total of 5 development sessions being delivered in 2023-24. In addition 31 learners completed op can begin in Clif as part of personal development with a total of 73 completing during 2023-24.   |
| Primary and<br>Community Care     | 1.1                                    | 5590 Dental   | Recruitment to Dental Vocational Training in Scotland to at least match Scotlish Dental School output for 2023.  | Recruited Trainers to more than match<br>the Scottish Dental School output.<br>Visitation and match to posts will take<br>place May- June 2023.   | Invite applications from Dental<br>Students and others for 2024-25<br>training.   | Open trainer applications to recruit<br>sufficient trainers for the 2024-25<br>Scottish Dental School training output   | Recruit to Dental vocational Training in<br>Scotland to match Scotlish Dental school<br>output. Trainer review and recruitment<br>for 2024-25 cohort.   | Green        | All Scottsh students who wished to undertake VT have been able to secure a post. Give heave a small number of posts remaining unfilled and opened these posts to EU (Batch 2 applicants)   | reen          | Applications opened on 13 September 2023 from Dental School students to apply for the 2034-25 training year with these closing on 18 October 2023.   | Green        | Trainer applications opened on 30 Cotaber 2023 with new trainer applications closing on 8 December 2012. Existing trainer applications will close on 9 Panuary 2024.  78 new trainer applications were received by 8 December and as at 31 December 2023 a total of 68 current or returning trainer applications have been received. A further 32 current/returning trainer applications in a frongress. Applications are likely to exceed the target of 174 training places available for 2024/25.   | Green         | Trainer applications exceeded the Scottish Dental School output for 2024. 170 training places will be available to Scottish graduate to reflect the increased output of Scottish Dental Schools this year. 28 trainers were appointable but missed the cut off to enter round 1 appointments. There are also a number of late and susucessful applicants that have been placed in round 2 and will be called on if required to meet the target. For 2023/24 training years 151 training Blaces were available which again matched the Scottish Dental School output.   |
| Primary and<br>Community Care     | 1.1                                    | 5593 Dental   | Deliver ongoing support to primary care dentists, in the form of: NEST (New to Scotland Education Support<br>Training) programme, including mandatory training; support & mentioning to allow dentists to safety return to<br>work after a career forest; and support the portatio sendles ubunisation of Quality Improvement (QI) projects and<br>then review this work using a robust and consistent process.  | Deliver 1 of 4 Mandatory Training (MT) courses  | Deliver 2 of 4 MT courses   | Deliver 3 of 4 MT courses   | Deliver: NEST programme; mandatory training; return to work for dentists; QI ports.   | Green        | MT programme May 2023 42 participants trained and through MT. Registrants Confinuing to be supported by mentors.   | reen          | Mandatory Training (MT) programme August 2023: 38 participants trained and through MT. Registrants continuing to be supported by mentors.  | Green        | Mandatory Training (MT) programme November 2023: participants trained and through MT. Registrants continuing to be supported by mentors.  | Green         | Mandatory Training (MT) programme February 2024 - 56 participants trained and through MT. Registrants continuing to be supported by mentors.   |
| Primary and<br>Community Care     | 1.1                                    | 5699 Optometry  | Support enhanced service delivery by developing an undergraduate training group amme for optimetry, with<br>potential for independent Prescribing status as outcome, in partnership with the Scottish Higher Education<br>institute (HE).  | engagement with national lead<br>organisations/Scottish Government,<br>moving to formal Memorandum of<br>Understanding (MOU) with HEIs when<br>possible. Develop new Foundation<br>Training Year workstream, including<br>onboarding of core team.  | engagement with national lead<br>organisations/Scottish Government,<br>moving to formal MOU with HEIs when<br>possible.   | engagement with national lead<br>organisations/Scottish Government,<br>moving to formal MOU with HEIs<br>when possible.   | By March 2024 and in response to Scottish<br>Government drivers and HEI requirements,<br>respond to requirements within formal<br>MOU, designing and developing a new<br>foundation training year for optometrists<br>in Scotland, maintaining star for<br>communication with stakeholders. |              | Initiation of development of Molt and partnership agreements with<br>MRTs. Recruitment of The Verbitzmen registery regreated by Blazer of recruitment<br>to issue offer of job, and hence new start debyed by a week. Investigating risk of<br>smiller with specified late of the. Ongoing business support within seam of able to<br>pick up capacity to cover deby to new band 6, as they will already be covering the<br>loss of our JPTE band 5 totar.   | reen          | Monumentum of Understanding (MoUI) igned by Sostilla Government (SSL), MSL and Higher Education Insidence (HER), Clean How Service Service this, Fully recruited into Issam. Stateholder engagement started to be reengaged.   | Green        | 100% of the 3023-12 colors secretally passed the Royal College of European (RCSLG)<br>summable assumes in Quarter 3 and the Herefore scheduler the RCSLG Diploma is<br>Orthodosic Therapy (DT). They will now progress to change their registration category<br>with the General Bend Lowcal (DIG) by passice as a Orthodosic Resignal College<br>applications received for the 2034-25 OT programme. 15 candidates shortisted.   | Green         | Memorandum of Understandings in progress with higher Education Institutions (HSL).<br>Organing development with stateholders. Apper's correctly being prepared to go to<br>SG with costings for MSS to be the lead employer of the trainees.   |
| Primary and<br>Community Care     | 1.:<br>th<br>op<br>th                  | 994 (this optometry s under 10, but is isn't an otion on e oppdown t) | Support enhanced service delivery through the delivery of NES glaucoma award training (NESGAT) cohort 3 (34 students identified and funded by SG)  | By end of June 2023 enrol on to course<br>all students identified by SG to<br>commence in cohort 3.   | Maintain students on course, delivering<br>online and face to face outcomes.  | Maintain students on course,<br>delivering online and face to face<br>outcomes; along with assessment<br>points as scheduled.   | Complete final assessments by end quarter<br>4 of those maintain enrolment - target min<br>27 completing  |              | 30 out of 23 students enrolled on SQA. Connect. Awaiting paperwork to be<br>enturned from the 2 outstanding students. Soft have been contexted and have<br>advised they will return completed paperwork once they have watched the<br>induction recording and returned from annual bear. Ambred the to outsforce<br>shortages due to sick leave and maternity cover - which together has resulted in<br>complete change of support at critical size of start of course. Computed by joins<br>of business support with bridge for course delivery and is in change of<br>digital delivery elements. | cen           | Good comms with SG, who are aware of student drop out for extensiting<br>crumstanes: -choice now 22 Hearnes; Color progressing well with a placement<br>deliberies now secured and running. Educational supervisors reporting positive<br>progression in all but two students - these students will be getting a request to mee<br>with course leads.  | Greén        | Paolibre actions continue to be delivered to support students maintaining their studies. We are now support 31 students, and they are really progressed with coursework requirements. Report on those that have deferred or pulled out now sent to SG. Pepsiatosin for successment period in 2023/24 Quarter 4 on track, with adequate external examiners recruited.  | ureen         | Remaining 21 students have all completed NSGAT, through examination hoard, and of the assessment rating all achieved good revergeliers. NFCCO (plational Primary Care Clinician Diatabase) status updated. Completion of 2032/34 target achieved. 22 below the target number but 56 have supported us around management of higher than expected drop out rate - range of reasons out with NES corror and significant number histo fact her inechainsing for otheringing. NSS have effered improvement ideas to SG service lead, for moving forward after evaluation of those beaving.  |
| Primary and     Community Care    | 1.1                                    | 5700 Optometry  | To support a minimum of 50 Optometrists through the Ocular Therapeutics course at Glasgow Caledonian<br>University (GCU) beginning in Q2. Measured by enrolment in September 2023 Module 1 and continuing support<br>to complete Modules 2 and 3 by Q4.  |   |   |   | Support 50 optometrists through Ocular<br>Therapeutics training.  | Green        | No risk to delivery anticipated.   | reen          | 50 Optometrists commenced Module 1 IP training at Glasgow Caledonian University  | Green        | 50 Optometrists continue to progress through training at GCU.   | Green         | SO Optometrists continue to progress through training at GCU.  |
| Primary and<br>Community Care     | 1.3                                    | SS43 Workforce  | inform interventions / target support.   | A draft worlforce planning tool doveloped beyond proof of concept stage to be used in national and local worlforce planning and policy: expanded beyond nursing to other job families. A clear purpose and implementation plan agreed with SG.  | Wordforce planning tool engagement plan underway and implementation plan underway second iteration of the tool.   | facilitate use and adoption.  | Workforce planning tool signed off and adopted.   | Green        | Over Q1, we have continued to develop a workforce planning tool with NSS offs. As<br>group, socializing flow with key stakeholders and we developing, notalboursion<br>with SG, a plan to utilize it across NHSScotland as part of the national wife process<br>(managed by SG).   | mber          | The total is case in the reast final stages of development covering all usb job families to the tried of regional reagrement seasons have been undertaken, with two more in the dairy. Training workshops are being planned and an approach to hingsyrillar between the training training workshops are being planned and an approach to hingsyrillar between the training that the SS 3 year workshop planning process in indicassions. See expectations around the tool and how it can be integrated into the Worlforce Planning (WFP) process they manage need to be carefully managed from a technical, resource and timing perspective.   |              | From Corbon - December 2023, the Centre for Workforcs Spayly (CWS) and the MSS total Group delivered all 31 regional reagreement seasons in collaboration with Sociation Laboration and a significant seasons of the Corbon of the    | Green         | The Workforce Theming tool and associated guidance has now been completed by MSS and is available for MSS Contends stiff to use on TURAS. Some Board's workforce planners are using it in their modelling and have feedback positively on its contribution. It has also been guidanced using the most recent NSS official statistics. The tool is also being used in NES internally to underpin programmes of work with a clear evidence base.   |
| Primary and     Community Care    | 1.3                                    | 5879 Workforce  | Support the identification, development and implementation of workforce initiatives (including International Recruitment (IR)), which tackle workforce challenges.   | Support agreement, implementation<br>and monitoring of 23/24 IR targets and<br>the scope of funding. Data gathering   | Nationally accelerate and coordinate<br>delivery against targets through new<br>data collection app, data quality report,   | plan launched to support pastoral care  | Nursing, Allied Health Professional (AHP)   | Green        | Over Q1 we have successfully delivered our planned support for NIMAHP IR via 3 IR ops leads meetings and associated outputs, including the monthly data collection.  We also launched the IR hub. SG funding has been agreed for 23-24 NIMAHP IR. The  | reen          | Successfully continued support to Boards around IR NMAHP in line with 2023-24 SG<br>target; this includes additional content (e.g. case studies) on the IR hub, resources<br>including the IR experience survey (piloted with three boards prior to roll out next  | Green        | Successfully continued support to Boards around International Recruitment (IR) NMAHP in line with 2023-24 SG target, this includes: successful delivery of the IR experience survey (analysis of results due in Jan), commissioning of the 17 Seconds Ward Managers   | Green         | Medical action plan has been developed through significant scoping work and data<br>analysis include 15 x individual Board insight meetings including data and medical<br>colleagues across NES, SG and Boards. This action plan was incorporated into a wider   |
|                                   |  |   |  | exercise (and associated report) completed with each Health Board to establish their needs, scertaining where there are service and training apps across all grades of doctor, all specialities, and the reasons for these gaps.  | production of best practice guidance and tools incil. Its survey where needed and continuation of operational meetings. Student vias conversion pathway identified and facilitated. Medical ill engagement workshops to understand barriers to current initiatives.   | engagement group; Second iteration of the Hub. Medical R action plan codeveloped outlining the suitable solutions.  |   |              | medical workstream has started with the addition of a new member of the CMS<br>team to lead it. The project plan and wider CMS PID for 23-24 was agreed with SG.   |               | quarter); and the co design of a Patorral Care quality award, Student visa<br>conversion pathway identified and facilitated via resources being bunched in Oct.<br>Successfully launched CVS IS Medical Retwork, learning sessions planned between<br>one and Markon 2015.1 Underhalen), hadronic nourging pages delivered to SG.<br>October 2013. Feeding into revised grant agreement between SG and Bridges<br>programme to Carlify ricks and responsibilities of NES and to support better<br>outcomes. J reporting.   |              | training materials to support with preparedness to receive like (from a cultural Equality,<br>Observity & including Diap respective), launch of the IR MAMPA Pastod (are Quality<br>Award pitch (III) and the March 2004), two case studies now on the IR fluids. Subdent<br>via comercian receiver published. Mici (III) from its viati undertaken by VCM team<br>via comercian receiver published. Mici (III) with a viati undertaken by VCM team<br>for Board to sue. 3 a International medical learning seasons delivered, over flor<br>emembers of Clarife of Vovidrorics supply (VOV) medical network own pilose; 1515's<br>Medical insight meetings with Boards undertaken and report in draft; psychiatry deep<br>dive undertway.   |               | paper demonstrating the findings from these meetings which has now been signed off by NS and SG. Elements of the action plan are underway with the rest forming the Centre for Workforce Supply (VKS) workplan for 2004/25. Nursing, Allied Health Professional (API) and mindlerly international Recruitment regists have almost been made with other results superced to trickle in between now and June (given the time it takes to Internationally recrust).   |
| Primary and<br>Community Care     | 13                                     | 3346 Werkerte   |  | Draft workplan and outputs for this agreed.   | *Apper to \$5 outlining how to develop approach to NiScottomid careers promotion and recruitment. This approach to NiScottomid careers promotion and recruitment with the successive support of the property of |   | See Q2  | Green        | The 23-24 CMS marketing workstream (or workplan) has been discussed and agee G with 56 colleagues over Q1 with possible redeback from 56 or work to date. The work is being aligned with wider plans within MSS to manage and prioritize careers 56. CMS is contributing to the Actions Trades groups delivery through attendance, suggestion of speakers and review of NES wide actions. CMS also supported a successful NeSScottland wide.   | reen          | Coordinated an NRScootland presence at RCII in Leeds to rake awareness and interest in pursuing a care in Scotland. Developed a submitted a paper to Scotland with the Scotland Scotland and Scotland Sco | Ureen        | Pages towards this objective is gaing well, including; publication of student convension resource, conditived this Chandra persone at Rey College of Midwillery (RLM) event in November 2023 generating; 2.5 leads, referred of varying & Midwillery (RLM) event in November 2023 generating; 2.5 leads, referred of varying & Midwillery (RLM) event when well well and the conventional development of the property of the conventional state of the conventional support scoping commenced; plan for NRS Scottand current Square development of the conventional support scoping commenced; plan for NRS Scottand current Square development of the conventional support scoping commenced; plan for NRS Scottand current Square development of the special special scoping commenced; plan for NRS Scottand current Square development of the special scottand current scoping commenced; plan for NRS Scottand current scoping current scoping commenced; plan for NRS Scottand current scoping     | Green         | All intended milestones outlined in 0.2 of this document have been met with the exception of the Nicks map and Board Biggsphe (with: has been deriportined due to fundings). A plan with deliver size of milestones for 2024/25 has been developed and its black to be signed of white 50s, a male larger gifters was recurrent to the Centre for a black to the signed of white 50s, a male larger gifters are secured to the Centre for reinstatement of the NiSS Scotland Currens social media channels, a key vehicle for the delivery of this promotional work.   |
| 2. Urgent and<br>Unscheduled Care | 2.1                                    | 3303 Filathiacy   | Delivery of the Training programme for Newly Qualified Pharmacists for to up to 490 new registrants, across all 3<br>sectors of Pharmacy (hiposta)s, Primary care and Community) by end off Marks 2021. This programme includes<br>completion of an Independent Prescribing qualification and runs for a minimum 2 years.  | while completing those on the legacy<br>(pre-2021) programme.   | (pre-2021) programme, with<br>assessments now active.   | while completing those on the legacy<br>(pre-2021) programme, with ongoing<br>assessments completing. New cohort<br>registration now active   | Newly Qualified Pharmacists for up to 490 registrants, across all 3 sectors of Pharmacy. Concurrent, delivery of the pre-<br>Sep 2021 programme to support ongoing learners with up to 80 expected completions  | diceii       | Currently we are delivering the new programme for 20 Foundation pharmacists. 66<br>Post-2021 programme (includes, Community = 133/sopilar 11), Primary care = 22<br>and cross sector= 15), in the Pre- Sept 21 programme there are 22 foundation<br>pharmacists in training.   | iceii         | The new programme has now registered 134 learners to start training this Autum.  This totals 40 is Intaining (182 Community, 133 loop)(std, 47 plmary cer. 27 cross sector), 69 have commenced an IP course. The Pre-Sept 2021 programme (winding down) has 16 in training.  | diceii       | There are 409 learners in training (179 - community, 181 - hospital, 48 - Primary Care). 40 have finished an Pocure course, Six need to setsi In April 2014. There are 14 who have delayed progression (approx 12 months). Of the 1813 that started in Sept 2012, 178 have enited of which Se were from community plantmaps. Pre-502 (2012 programmer.) Nice left on programme after Oct 2023 assessment. Anticipate last main assessment det April 2024 before closure.  |               | 22 further Foundation Pharmacists (FPI) registered in Reb '24. There are 424 learners in<br>visiting (EBI3 community, EBI looples, 25 Primary care and 27 in cross sector hospital/<br>primary care rotations). In cohort 1 there are still 129 in training II withdraw from the<br>programmer, Four Phare vascimitted for Royal Pharmaceutical Society (RPS)<br>assessment with 6 exited in January 2024.   |
| 2. Urgent and<br>Unscheduled Care | 2.1                                    | 5410 Medicine   | person centred care through continuing to provide standard, relevant clinical skills and simulation training in line with the Scottal's bills and simulation straining in line with the Scottal's bills and simulation straining in line great programmers, surgical skills training for 125 multi-professional training-und support for 30 million emergency care programmers, surgical skills training for 125 multi-professional training counses. The Mobble Skills (MSU) will valid 20 remote and rural floateness and train 1300 multi-professional participants. Two new resources will be developed using innovative online learning method and working closely with the NHS Raddemy we will continue to develop Regional Celaboratives.   | training and support 12 simulation<br>based educational training courses.<br>Visit by MSU to 8 venues training with<br>400 participants   | simulation based educational training<br>courses. Visit by MSU to 6 venues<br>training with 300 participants.<br>Publication and evaluation of a VR<br>resource   | Deliver 18 remote and rural courses;<br>provide 30 spaces for surgical skills<br>training and support 13 simulation<br>based educational training courses.<br>Visit by MSU to 3 venues training with<br>150 participants. Publication of a<br>clinical skills online learning resources |   | Green        | MSU visited 9 venues and trained approx 310 parcipitants. 12 simulation traing Grounes supported. 20 spaces for surgical courses. 15 remote and rural courses  | cen           | 17 88& course; Training event on 8-9 September attended by over 100 faculty, 32 immaines attended 2 signals alike course; 15 simulation course as the Sottish Centre for Simulation and Clinical Numan Factors (SCSDF) were run including faculty development course.  The MSU wisked 7 venues, 55 training sessions delivered (numbers of participants all to be confirmed). We resource training event ran and was evaluated by 65 participants.   | Green        | Delivered 13 Femote and rural course; provided 41 spaces for surgical skills training 15<br>femotocopy spaces and 25 Ea, Nove and Throu (18(17) spaces) and supported 21<br>simulation based educational training courses. Visit by Mobile 3kills Unit (MSI) to five<br>various covering from the hab boxed (18) Nettern itels., Stetland, Dumfres & Gallows<br>and highland plan a Faculty Development course at NIS Forth Valley, and a visit to<br>Forth Valley College supporting Adult Social Care recursioner; Taining by Ministry of<br>Defence medics at Leuchars Station, File. Also supported Supporting Socials Riagley,<br>and in telesth Scaffact, Socials Rians Science and sportsociation with their concussion in<br>sport carriage by the Social Service Science and sportsociation with their concussion in<br>sport carriage by by delivering player welfare training at Murrayfied via the MSU.   | ewat to       | Delivery of 10 remote & runsl courses, 3 online emergency are programmers, surgical statistics or 25 Sements, and 50 simulation based education course. Training on the Mobile Skills Unit to an additional 145 particiants including NNS and emergency services.  |
| 8. World Gree                     | 2.1                                    | 5417 Medicine   | Support expansion of the clinical skills, leadernhip skills and capacity of SAS doctors and dentists by delivering a SCS (Specialist and SAS) celested provided provided the state of the s | Nun first SAS Programme Board meeting to assign Anding for development activity. Persistent approximately 150, of regional Fedition approximately 150, of regional Fedition and Programme |   | Run third SAS Programme Board meeting to assign funding for development activity. Proceedings of the Committee approximate proceedings of the Committee approximate processing and the Committee approximate processing and the Scottish SAS national conference over this period.      | Run fourth and final \$45 Programme Board meeting to assign from deprending for development activity.  Resilize approximately 25% of regional educational development activity.   | Green        | Three local SAS events run in BIGG, GGBC and Lanvarkher (po progressed further for<br>browder, our annual target than planned; per declosation Advice development<br>event held; one national training workshop run; 15 SAS Development Fund appa<br>were submitted, or which IS were approved for funding; 17 John spap forms<br>received and approved; Wellbeing in the Workplace survey report approved and<br>published.   | réen          | 2 local SAS events run in Borders and Laurikalire.  3 national Training wickshops run (Communication Challenges, Active Bystander, Clinical Leadership).  14 SAS Development Fund apps were submitted, of which 13 were approved for funding.  10 short app forms received and approved.   | Green        | Delivered annual SAS (Speculation and Associate Specialist) Scotland National Conference in a hybrid formus & Stendedes in person and 10 urbinal with an average score of 14.43) for learning sessions. 889 for lin-person attendees rated the venue as good of options (pod ", venue descriptions and sealing of the person attendees rated the venue as good of options (pod ", venue delivered private case of their experience of participation was 8.49/10.  Four locs SAS evenue delivered (PMI of Center Glasgow & Cyde / Golden Jubilee, Tayside and two to Dumfries & Calloway), with total of 71 attended and the Control (Control & Control & Con    | Blue          | Overall 2023/24 position:  *Delivery of all set is a fregional educational events and 1 national conference for SAS-gade doctors and dentitists in NeiScotaind, with at least 250 attending in total 11 regional events 31, own furthers, could attending 230 attending in total 13 regional events 41, own furthers, could attending 43, and control of the state of the s |

Page 2 of 11

| Recovery Driver                   | SG ADP NHS     | Board NES   | Deliverable Summary  | Q1 Milestones  | Q2 Milestones   | Q3 Milestones  | Q4 Milestones  | Q1 RAG Status | Progress in Q1   | Q2 RAG Status | Progress in Q2   | Q3 RAG Statu | s Progress in Q3   | Q4 RAG Status | s Progress in Q4   |
|-----------------------------------|----------------|---|--|--|---|--|--|---------------|--|---------------|--|--------------|--|---------------|--|
|                                   | Reference Refe | erable Directorate  |  |  |   |  |  |               |  |               |  |              |  |               |  |
| Urgent and<br>Unscheduled Care    | 2.1            | 5373 Pharmacy   | Delivery of education to support pharmacists to deliver core pharmacutical services in line with the Scottath<br>Government policy in . In relation to NIB Flormany First Scottath service in which pharmacy is the first port of<br>call for all minor illnesses and specific common clinical conditions, and to enhance the number of active<br>independent prescribers in all sectors).   | Up to 2500 Pharmacy e-learning<br>completions. Average webinar<br>attendance = 50 delegates  | Up to 2500 Pharmacy e-learning<br>completions. Average webinar<br>attendance = 50 delegates   | Up to 2500 Pharmacy e-learning completions. Average webinar attendance = 50 delegates  | Anticipated reach of no fewer than 50<br>participants per live webinar, greater than<br>10000 e-learning completions in the year.  | Green         | Q1 Pharmacy e-learning completions are 5397. Pharmacy P0 webinar programme<br>being developed and delivered from September 2023 onwards  | Green         | Quarter 2 Pharmacy e-learning completions are 7,985. Pharmacy PD webinar<br>started with 3 webinars pre-December 2023 with over 50 registered delegates on<br>each webinar.  | Green        | Quarter 3 Pharmacy e-learning completions are 12,150. Pharmacy Professional<br>Development (DP) weblanes started with three webinsars pro-beember 2023. There<br>were over 50 registered delegates on each webinar with 353 delegates overall.   | Blue          | End of Year Pharmacy e-learning completions are 18,921 and 34,009 completion across all Healthcare professions. Pharmacy Professional Development weblanss ran develours with over 50 registered delegates on each webinar with 593 delegates overall.   |
| 2. Urgent and<br>Unscheduled Care | 2.2            | 5880 Workforce  | We will provide leadership to the newly established Centre for Workforce (CWS) supply for social care. With<br>partners this will support and accelerate international recruitment into adult social care roles in Scotland.   | CWS Social Cure Programme Team<br>hired and in post y successful handoord<br>of pilot development to new Head of<br>Programme. Programme Board set up,<br>Providers selected to take part  | International Recruitment (IRI) leads in place / trained, IR commences.   | Ill underway; mid year report delivered.   | Proof of concept delivered along with final regret of learning and recommendations for taking this work forward.   | Green         | Over 12. CWS has successfully upported the hiring of a new CWS Social Cure Team<br>(CWS Social) to not the international recruitment into adult social rep plot as<br>agreed (and funded by) SG. This team started in early June; the project has been<br>lapted to track thanks to CWS and Social Cele Perfectorate colleagues working<br>tagether to manage the project plan delivery and the hiring / induction of the new<br>team. Provides to late part in the pilot have been selected and a paper to agree<br>their funding is being drafted for final sign off.  | Green         | All deliverables set out for Quarter 2 have been achieved.   | Green        | All milestones active-red, including additional milestones of developing and launching a<br>TURA's fatering resource for all those interested in undertaking international<br>recruitment into adult social care.  | Green         | Evaluation report drafted and legacy plan developed. Project continues to support operational leads to prepare for candidates to transition to Scotland.   |
| 2. Urgent and<br>Unscheduled Care | 2.3            | 5866 NES<br>Technology<br>Service                         | By the end of March 2024 rollout the OpenSyes to NNS Golden Jubilee to support the Cataract pathway.   | 4 pathways of v6 to NHS Greater<br>Glasgow & Clyde (NHSGGC), this will act<br>as a pathfinder for national rollout of<br>rounded national Minimum Viable<br>Product.   | the learning from NHSGGC rollout and<br>refining the deployment process to<br>allow for more efficient deployments<br>into other boards.  | integrate OpenEyes outputs with<br>Board cornerstone systems (Clinical<br>Portal and GP/Docman)  | To be determined based on outcomes of Q1/2/3   | Green         | Visitious to all sites in NAGGGC successful; feedback positive. Delivery plan for FY23/24 developed and shared with programme. Funding for FY23/24 confirmed by SG.  | Green         | Preparation for the Cataract pathway is complete: Biometry machines are integrated, cataract pathways are configured, inpatient admission clinic lists have been integrated, list of community optometry contacts has been uploaded. Cataract is ready to pilot in NHS Greater Glasgow & Cryde.  | Amber        | Adlout to NNS Golden Jubilee (NNS Go) has been delayed until June 2024 as there is a<br>dependency on the Board upgrading the Trakture system which is a key integration-<br>ths is NNS Goldeckson, not a NNS one. Engagement has been good and the governance<br>preparation is undersyst a Goldec behalve und to be completed in a timely fashion<br>once Trakture upgrade completed by intersystems.  | Amber         | Adlout to NNS Golden Jubilee has been delayed until June 2024 as there is a dependency on the Board upgrading their Trakcare system which is a key integration for the OpenKyes application. This is an NNS Gold decision rather than a NNS one. Transgement has been good and the governance preparation underway to allow technical work to be completed in a streety fashion once the Trakcare upgrade is completed by Inrefsystems (portione uncompany).   |
| Urgent and     Unscheduled Care   | 2.3            | 5865 NES<br>Technology<br>Service                         | Work with NES Optometry to support the rollout of educational resources and Optometry EPR (O-EPR) to support<br>the NES Glaucoma Award Training (NESGAT) programme for the Clinical Glaucoma Service (CGS)   | Enhance provision of learning materials<br>for NESGAT cohorts on Turas Learn.<br>Develop the CGS pathway in OpenEyes   | Support NHS Lanarkshire in the<br>adoption of O-EPR for CGS rollout.  | Support NHS Western Isles in the<br>adoption of O-EPR for CGS rollout.   | To be determined based on outcomes of Q1/2/3   | Green         | GGC rollout of CGS pathway in OpenSyes successful. Increased engagement<br>between NTS and NES Optometry to enhance the delivery of national learning<br>material.   | Green         | NMS Lamarkshire is ready to start with CGS (training provided, users onboarded, data seeded).  NMS Western isles project commenced.  | Green        | NHS Lanarkshire Clinical Glaucoma Service went live in November 2023.  | Green         | Community Glaucoma Service is live in three boards with go live scheduled for NHS Dumfries and Galloway, Tayside and Western liste in Q1/2 of 2020. Other board rollouts dependent on sufficient numbers of NESGAT qualified staff; close working continues with the SG team to align training and delivery for optimum coverage across Scotland.  |
| 2. Urgent and<br>Unscheduled Care | 2.3            | 5882 NHS Scotland<br>Academy,<br>Learning &<br>Innovation | Perioperative Workforce Programme The three programmes developed in 2022/23 will run with two cohorts each in 2023/24: Foundations in Perioperative Practice Programme: 2 cohorts of 8 -12 learners (sit band 5). Surgical First Assistant Programme: 2 cohorts of 8 -12 learners (sit band 5). Answerted Practitione Programme: 2 cohorts of 8 -12 learners (sit band 5). An eway programme for an Assistant Perioperative Practitioner will be developed and will run with one of possibly two cohorts (plates 3), it one wine to a learn of rivel). A role to co-ordinate decontamination training within local settings will be established in 2023/24.  | Surgical First Assistant Programme: Cahort 1 continues. Anaestheic Practitioner Programme: Cohort 3 continues. Foundations of Peri Operative Practice Programme: Cohort 5 continues, cohor 6 starts. National Assistant Perioperative Practitioner Programme: Cohort 1 starts.   | Surgical First Assistant Programme:<br>Cohort I continues.<br>Anaesthetic Practitioner Programme:<br>Cohorts 3 and 4 continue.<br>Foundations of Peri Operative Practice<br>Programme: Cohort 6 continues.<br>National Assistant Perioperative<br>Practitioner Programme: Cohort one<br>continues.  | Cohort 1 completes and cohort 2 starts Anaesthetic Practitioner Programme: Cohorts 3 and 4 continue. Foundations of Peri Operative Practice Programme: Cohort 6 continues and cohort 7 starts.   | Anaesthetic Practitioner Programme:<br>Cohorts 3 and 4 continue.<br>Foundations of Peri Operative Practice   | Green         | On track with delivery as planned in Q1.   | Green         | Initial conversations with NMS Righland. On track with delivery as planned in Quarter 2.   | Green        | On track with delivery as planned in Quarter 3.  | Green         | On track with delivery as planned in Q4.   |
| Urgent and     Unscheduled Care   | 2.3            | 5864 NES<br>Technology<br>Service                         | By the end of March 2024 rollout OpenSyes Optometry Electronic Patient Record in Acute and Community<br>Lettings in NSG Saurit to support Castract, Glaucoma and Medical Retins and General Ophthalmology pathways<br>in line with Scottch Government priorder.  | Focus for Q1 for OpenEyes is rollout of<br>4 pathways of v6 to NHS Greater<br>Glasgow & Clyde, this will act as a<br>pathfinder for national rollout of<br>rounded national MVP.   | Focus for Q2 will be on consolidating<br>the learning from NHSGGC rollout and<br>refining the deployment process to<br>allow for more efficient deployments<br>into other boards.   |  | To be determined based on outcomes of Q1/2/3   | Green         | V6 rollout to all sites in N6GGC successful; feedback positive. Delivery plan for<br>P723/24 developed and shared with programme. Funding for P723/24 confirmed<br>by SG.  | Green         | Preparation for the Cataract pathway is complete: Biometry machines are<br>integrated, cataract pathways are configured, inpatient admission clinic lists have<br>been integrated, list of community optometry contacts has been uploaded. Cataract<br>is ready to pilot in GGC.   | Green        | Cataract pathway user acceptance testing underway in NHS Greater Glasgow & Clyde, feedback postive.  | Green         | All four Hospital Eye Service pathways and Community Glaucoma Service now live in NVS Greater Glasgow and Clyde  |
| 2. Urgent and<br>Unscheduled Care | 2.4            | 5763 NMAHP  | We will support Bastria in the development of a high quality, skilled, sustainable and diverse RNAMF and Medical<br>Associate Provisionals More Translation and the state of the | Continue high level distalegic comms & engagement with national graphs and engagement with national graphs and engagement with national graphs and engagement of the American Statistics of the American Statistic | qualitative impact studies for identified<br>rolles/jector.  Scope and plan development of a pan-<br>Scotland supervising and assessing<br>network for Anaschela Associate<br>training Trainees. Further develop examples of<br>application resources on Turis to<br>application resources on Turis to<br>application resources on Turis to<br>application and MAP roles in<br>workforce plans.  Progress executive board engagement<br>on regional and national basis -<br>evidence sharing. | qualitative impact studies for identifier foles/sector.<br>Initiate and develop structure figorerance/underprinning of a par-distrative figorerance/underprinning and of a par-distrative supervising and of a par-distrative supervising and associate training/trainees.<br>Further develop examples of application resources on Turns to inform clinical/service teams' consideration of MAP roles in worldorse plans.<br>Ancliquite outcome of Directorate of teath 8. Social Care consultation, incorporating leys actions into | Complete and publish impact studies for 2 MAP roles.  MAP roles.  Develop and deliver communications plan sharing findings from impact studies for workforce planning.  Consolidate engagement regarding diversification of the workforce, informing of MAP roles in Boards.  Develop plan for review and potential adoption of UK distatons wide MAPs career development framework. | Green         | MAIN Report is with Scretch Converments, shealt feedback, Convince to propulate a<br>Manifection error surface for MAIN visit or the a Establishdes common. MSS regions to<br>DNSC consollation on Amendments Associated, Physician Associate Dn4ft Older<br>Regulating PA and Adj. delivered before occlosing et als 626.23 MSS MAIN has<br>extended invitation to meet 1:1 with Exec teams in all 14 Territorial Boards, has met<br>with 9 and several enthe Boards continuing to consider offer to meet. Pan UK task 5.<br>finish group meeting schedule proceeding at pace, NMSE WTE simeline remains on<br>track.   | Green         | MAPs and Advanced Critical Care Practitioners (ACCP) programme plan is in development following response from Scottish Cov received late August. Tacked programme management group initiated Sept to develop workplan (SG sponsor & NES MAPs). As the state of the sponsor & NES MAPs. (See Septiment of the Septiment of Septiment Se | Green        | Quality impact studies - progressing via Medical Associate Professionals (MAPs) in the control of the control o | Amber         | impact Subders to be delivered via the 40 Teleboux Viverforce Involvation regrammes<br>World PS Well? Wellow percenting more an include the Make) impact studies will be<br>oriented at exitiest opportunity. Communication plan will proceed at a point when<br>impact studies findings are available. Next Medical Associate Professions national event<br>delivered on 36 March 2004 almost at strategic leads and focuses on culture change and<br>greater application of MAP role is next-to-Darf of the Carer Development Framework<br>subject to public consultation in January 2004, analysis of responses is ongoing and next<br>stage will follow when this is complete.   |
| 2. Urgent and<br>Unscheduled Care | 2.4            | Academy,<br>Learning &<br>Innovation                      | Research and development of programmes  NIOS Scatter Ackademy (MISSA) responds to requests from SG sponsors and Board partners and is scoping projects to support accelerated training for groups including Biomedical Scientists, the full team supporting high- volume castanct surger, cinical engineers, training from groups or such partners of the program of the progr   | Take scoping papers, SBARs (Situation, Background, Assessment, Recommendation) and business cases through established governance processes when each stage of research is complete.  | Take scoping papers, SBARs and<br>business cases through established<br>governance processes when each stage<br>of research is complete   | Take scoping papers, SBARs and<br>business cases through established<br>governance processes when each<br>stage of research is complete  | Take scoping papers, SBARs and business<br>cases through established governance<br>processes when each stage of research is<br>complete  | Green         | On track with development processes ongoing.   | Green         | On track with development processes ongoing.   | Green        | On track with development processes ongoing. Support for high volume cataract surgery, accelerated support for binedic scientists to complete registration portfilior, and decontamination projects are all in delivery stages. Milestones will be included in the 2024-25 Annual Delivery Plan.   | Green         | On track with development processes ongoing, Support for high volume cataract<br>surgery, accelerate support for bismedia cleristists to complete engistration portifices,<br>and decontamination projects are all in delivery stages and milestones have been<br>included in the 2024-25 ADP.   |
| Urgent and     Unscheduled Care   | 2.4            | Academy,<br>Learning &                                    | NHS Scotland Youth Academy Through Salis Development Scotland (SDS), NHS Scotland Youth Academy will deliver a Healthcare Pathway pilot<br>qualification for semi-phase school students. The qualification focuses on three challenge projects: spaces and<br>places, community and wellbeing, and creativity. The pilot will run in five regions in academic school year 23/74, with 100 students lasting part.   | Recruit to the healthcare pathway pilot<br>20 students in each of 5 pilot areas  | - Complete recruitment to the healthcare<br>pathway pilot - 20 students in each of 5<br>pilot areas. Begin delivery to 100<br>students  | Continue delivery of the healthcare pathway pilot to 100 students  | Continue delivery of the healthcare<br>pathway pilot to 100 students   | Green         | On track with development as planned in Q1, with 77 young people confirmed on<br>the pathway before the school summer holidays (Note - the milestone for this has<br>been revised from 100 to 70 recruited).   | Amber         | All on track for planned delivery except the numbers - we aimed to recruit 100<br>learners but the programme is underway with only 42 learners, despite 77 signing<br>up.  | Amber        | All on track for planned delivery except the numbers -we aimed to recruit 100 learners<br>however at Quarter 3 the programme is underway with around 35 learners by<br>December 2023, despite 77 signing up.   | Amber         | On track for planned delivery except we almed to recruit 100 learners and we only have participation of around 30 learners.  |
| 3. Mental Health                  | 3.1            | 5743 NMAHP  | We will work jointly with the Mental Health Welfare Commission to enable the development and delivery of a<br>range of education and training opportunities to support workforce understanding of legislation aimed at<br>protecting rights and application of the Audits with incapacity (Southed) Act (2000) in Annia, cocial care and social<br>work practice across Sortland through the development and delivery of educational restources.   | First meeting undertaken. Scoping  | data from learning needs analysis. Ongoing preparation for Masterclass series. Commencement of development of AWI education and workforce resources/learning byte/population of AWI: Once for   | of learning needs analysis to further<br>inform the development of education<br>and workforce resources. Ongoing<br>engagement with Stakeholder group.<br>Preparing to conclude ANIP<br>programme. Project management and<br>explore support for (ANIP/AWI)  | workforce recourse. Commence<br>preparation of final outputs from project<br>and prepare final project report. Establish<br>paths to support AWI programme<br>(ANP/AWI Educational Resources) within   | Green         | Stakeholder group commenced and first meeting undertaken in Q1. Scoping<br>exercise/braining need analysis in progress and will conclude early in Q2. Once for<br>Scotland Multi-Circipant yAVII trust scattering page launched. In collaboration with<br>Scotland Multi-Circipant yAVII trust scattering page launched. In collaboration with<br>May 2013 - 60 participants. Educational resource in development. Scotland<br>matericlass being planned for Q2 - over 800 registrations currently, Mol-way<br>meeting with MWL/SGNO AWI Policy Lead planned for progress report/planning.   | Green         | Learning needs analysis completed - 520 responses from across the health, social<br>work, social care workforce. Second masterclass delivered. In total over 5000<br>registrations to date for the masterclass rise. Mathericals a planned for Quarter 3.<br>Onepting engagement with stakeholder group - east meeting October 2003. AND<br>programmer commenced and 66 learners currently on cohort - due to conclude<br>November 2023. Learning resources in development due to complete for testing in<br>Q.3.  | Green        | Third matterclass delivered November 2023, significant engagement across masterclass series with over 7500 registrations totals. Webnar open to all with a focus on Power of Attorneys and Considerable platened Fertheray 2021, Learning meets data analysis of Attorneys and Considerable platened Fertheray 2021, Learning meets data analysis attroductory elevating models build complete, testing underway for 150 lare. To Quarter 4, Project completion dest Perhary 2020, and emission on sarge to meet project objectives. Administration support secured. Following submission of Interim report to sponnor departments business case if proposals we requested and submitted early December 2023 to consider additional funding of the workstream for up to a two-year period.   | Blue          | The final webinar delivered in February 2024 with a focus on Power of Attorney and Goardinahlp, with 182 registrations received. The E-learning module testing was completed and launched successfully and referency 2021. He final stakeholder group and the state of the th |
| 3. Mental Health                  | 3.1            | 5446 Psychology   | Work with key stateholders and feast for Psychological Therapy services to define the SQA (Scotta).<br>Qualifications Authority accretifed Theraped Psychological Practice (PSP) programme by commissioning and<br>recruiting up to 100 trainees across child and adult mental health services which will equip staff with the<br>competencies to provide brief enhanced psychological interventions.  | Launch recruitment campaign for up to<br>25 EPP learners to commence in<br>November 2023 - shortlisting to be<br>complete by 30th June.  | and offers sent to preferred<br>candidates. Onboarding to NHS   | local services within Assistant  | EPP learners continue to progress on<br>programme, with a view to completing in<br>April 2024 (at which point a new intake will<br>commence).  | Green         | Recruitment campaign for up to 25 EPP learners to commence in November 2023<br>bunched - shortfasting complete.  | Green         | Interviews for November 2023 complete. Offers issued to 22 candidates and pre-<br>employment checks and onboarding commenced in Health Boards in September<br>2023.  | Green        | 2) learners commenced in post 6 November 2023, [1 deferred from April 2022 intake).<br>All learners are progressing on the education programme with aims to complete April 2024.   | Blue          | 23 EPP Barners who started in November 2023 continue to progress on the programme.<br>Recruitment for the April 2024 intake in find stages with minimum of 37 places on<br>offer. Successful candidates will commence 22nd April 2024.   |
| 3. Mental Health                  | 3.1            | S441 Psychology   | In response to NMS Scotland workforce needs, and guided by workforce planning; commission, recruit and support. 80 clinical psychology frames to compiler registration training by the end of March 2024, 49 MSC trainines for psychological threapies in primary care, as JMSC traines are psychology for children and young people, and 4 trainee health psychologists to complete training by end of March 204.   |  | registration training by the end of   | APCYP trainees to complete pre<br>registration training by the end of  | 80 pre-registration clinical psychology trainers; 48 MSc trainers for psychological therapies in primary care; 36 MSc in applied psychology for children and young people, and 4 trainer health psychologists. New cohorts of up to 40 APCVP, 50 PTPC and 4 trainer health psychologists to commence training.   | Green         | 15 clinical psychology trainess completed the programme. 1 PTPC and 1 APCYP<br>trainess completed their respective programmes. 18 DictiPsych trainess recruited<br>during the intervers space. Trainess will undergo HB pre employment checks in<br>Q2 and commence training in Q3.  | Amber         | 64 clinical psychology trainees, 2 MSc Applied Psychology for Children and Young<br>People trainers and 2 Psychological Therapies in Primary Care trainee completed<br>per registration Training by the end of September 2023. 2 12 click psychology<br>trainers extended but due to complete in Quarter 3. The lath Psychology trainer<br>completed in June 222. New cohort of clinical psychology trainers commerced<br>training at the end of September. Recruitment is underway for the new cohorts of<br>MSc APCPP, PITC and Health Psychology trainers.  | Green        | 73 clinical psychology trainees, 1 MSc PTPC (Psychological Therapy in Primary Care) and 2 MSc ARCY (Applied Psychology for Children & Young People) trainees completed pre-registration training by the end of December 2023. Recruitment storb place in Quarter 3 for new clothest of MSc APCP and MSC PTPC trainees. Obscarding is progressing and trainees are due to commercia the Quarter 4. Applications for Trainee Health Psychologist posts opened in December 2023.  | Blue          | 71 clinical psychology trainees, 46 MSc PTPC (Psychological Therapy in Primary Care) and 36 MSc APCP (pepted Psychology for Children & Young People) trainees completed pre-registration training by the end of Marc JACA. 37 MSc APCP and 30 MSc PTPC trainees commenced in Cit. Orbicarding is underway for 4 trainee Health Psychologists, due to commence in Spring 2022.  |
| 3. Mental Health                  | 3.1            |   | Coordinate and quality assure 598 applied psychology placements, complete 779 placement viols and complete<br>605 end of placement reviews liaining with local stors (regamiers of placements) in each health board area to<br>ensure training surposs regulatory stands (rMCC- Health & Care Professions Council) and professional<br>accreditation standards (British Psychological Society).  | Complete 97 placement visits and complete 203 end of placement reviews lisating with local tutors (organisers of placements) in each health board area to ensure training surpasses regulatory standards (INCPC) and professional accreditation standards (BPS).   | and professional accreditation<br>standards (BPS).  | complete 456 end of placement<br>reviews flasting with local tutors<br>(organisers of placements) in each<br>health board area to ensure training<br>surpasses regulatory standards (MCPC)<br>and professional accreditation<br>standards (BPS).   | Coordinate and quality assure: 598 applied<br>psychology placements and complete 605<br>end of placement reviews.  |               | Placement viols: n= 145 End of Placement: n=187  | Green         | Placement viols: n= 438 End of Placement: n=272  | Green        | Placement Viols: n= 138 (total = 576) End of Placement: n=177 (total = 449)  | Blue          | At the end of Q4, 614 placement visits and 830 end of placement reviews had been<br>carried out across the financial year, therefore meeting the deliverable.  |
| 3. Mental Health                  | 3.1            |   | Enture provision of qualified applied psychologists fit for employment in NIS Sotation by continuing to improve qualified complex environments and training of appropriately qualified supervisors to regulatory standards (HCC- Health & Care Professions Council) & professional accredition standards (Rinki-Mythologist) Society) and delivery of irratorical variating to 75 new supervisors, supervisors and CPD (Continuing Professional Development) training to 90 experienced supervisors; CEI (Cognitive Behaviourd Therapy) supervisors salt braining to 15 confidence sources are supervisors and CPD (Continuing Professional Subtraining to 15 circled applychologists competence awareness sessions to 4 Health psychology supervisors and development of online Health Psychology supervisor training module by March 2024.   |  | new supervisors; supervision and CPD training to 45 experienced supervisors.  | new supervisors; supervision and CPD<br>training to 45 experienced supervisors.  | Deliver introductory training to 75 new<br>psychology supervisors; supervision & CPD<br>training to 90 experienced supervisors;<br>CBT supervision skills to 15 clinical<br>psychologists; competence swareness to 4<br>health psychology supervisors; and an<br>online training module.   |               | Supervision CPD delivered to 21 experienced supervisors. CBT supervision skills<br>training delivered to 13 Clinical Psychologists   | Green         | Introductory training to 47 new psychology supervisors in Quarter 2; upervision &<br>OPO training to 10 pervienced supervisions in Quarter 2 (number total 39); CBT<br>supervision skills to 8 clinical psychologistsin Quarter 2 (running total 23).  | Green        | Introductory training delivered to 25 new psychology supervisors in Quarted 3 (numing total 172; supervisions in Quarted 3 (numing total 172; supervisions in Quarted 3 (numing total 42); CBT supervision salls to 0 clinical psychologists in Quarted 3 (numing total 42). Short Ut Working Group (SWIG) for supervisor training review has continued to meet, now moving in to phase 2: Content Development.  | Blue          | Delivered Introductory training to 14 new psychology supervisors in Q4; supervision is Q6.<br>OPD training to 3 seperineed supervision in Q4. GET supervision sliks to 0 clinical<br>psychologists in Q4. SWLG for supervisor training review has continued to meet-<br>moving into phase 2, content development.  |
| 3. Mental Health                  | 3.1            | 5453 Psychology   | Support Nis Boards and Pattnership areas to maintain adequate supervision/ quadry for psychological interventions and thereigned through congenity upon for the defense's persivation Competences (IGSC) for Psychological Therapies and Interventions tall mining course (ISSC) and specialist Cognitive Behavioural Therapies supervision competences in their darf femether enabling this Beach to tain 3's operations in the SCC therapies supervision competences are considered to the supervision femether enabling the supervision femether enabling the supervision femether supervision femether enabling the supervision femether enabling course by March 2024. Consider new models of supervision training and expire the feasibility of a train the trainer model in Boards for some of our specialist advanced practice supervision workshops.  |  | GSC delivery for up to 25 supervisors, and 20 non clinical supervisors.<br>Delivery of CTSR (Cognitive Therapy Scale Revised) training.   | supervisors, and 20 non clinical   | Dollver Generic Supervision competences for Psychological Despire Sampley 0.75 supervisions and 20 non-clinical supervisions.  | Green         | On target in this Quarter 1 to achieve our annual and 3 yearly targets, due to 15 staff trained in GSC, 11 for Oncilical Psychology staff sizarde in the CS, 12 Gopervision (Adult Based Services) course, and 27 staff trained in the Restorative Supervision (curse over 2 NMS about using a fairly next 17 model. We have also materialized supervision course over 2 NMS about using a fairly next 17 model. We have been materialized supervision stills on the EFP course to EFP learners. We have been succession planning for the Group Supervision verdices, as well as considering the option of running this course as a Train the Trainer for 2 pilot NMS Boards later in the year. We also have scheduled in further Restorative Supervision strain, and there has been more demand for this to be rolled out within the TTT model. | Green         | GCK has been running as planned, feedback has continued to be positive. 60 staff were trained in the Sci fluouter 2. Five Wedt workforce (the sculduse Clinical Psychologists who are reported elsewhere) were trained in CBT Supervision (Adult Services) in Quarter 2.   | Green        | 40 legens staff trained in the GSC (Generic Supervision Competences) in Quarter 3. GST MESTS (Cappits Behaviour) Energy ISS Specialist Supervision Training): 1.2 Mon Clinical Psychology staff trained.  Rectartates Supervision Matter Guss. 1965 Taylote Trained. 14: staff (sentrenes) electrostates Supervision Matter Guss. 1965 Taylote Trained 14: staff (sentrenes) in Westerland 1962 Taylote Trained 14: staff (sentrenes) in Westerland 1962 Taylote Trained 14: staff (sentrenes) in Westerland 1962 Taylote Trained 1962 Taylote 1962 Taylote Trained 1962 Taylote 1962 Taylo | Blue          | Generic Supervision Competences (SGC) - 9 totalf trained, however 4 staff were trained in the GGC Train for Trainer (TTT) model. Saff trained (n.2 Cg.) in the GGC-140. CTD NESS (Cognitive Behaviour III Planzay NES Specialist Supervision Training) - 26 staff were trained in total in GEL (comprising of 12 clinical sylvologists) and 22 into Clinical Psychologists and 250 Non-Clinical Psychologists).  Restorative Supervision Masterclass: 11 staffed trained in Q4 from NMS Ayrshire and Arran. Total Q1-Q4 staff trained: 107   |

Page 3 of 11

| Recovery Driver                                   | SG ADP NHS Board<br>Action Deliverable<br>Reference Reference | NES<br>Directorate               | Deliverable Summary   | Q1 Milestones  | Q2 Milestones  | Q3 Milestones   | Q4 Milestones   | Q1 RAG Statu   | s Progress in Q1   | Q2 RAG Statu | s Progress in Q2   | Q3 RAG Status | Progress in Q3   | Q4 RAG Statu | Progress in Q4   |
|---|---|----------------------------------|---|--|--|---|---|----------------|--|--------------|--|---------------|--|--------------|--|
| 3. Mental Health                                  | 31 5462   | 2 Psychology                     | improve social, emotional, and behavioural outcomes for adults with mental health problems by increasing<br>existing multidisciplinary work capacity to deliver evidence-based bird psychological interventions within a<br>liggregal care service model. This will be a problem though the provincial displanment paper to<br>provide the problems of the problems of the problems of the problems of the problems of<br>problems and delivery of recourses and<br>training, and overseeing and contributing to key stakeholder networks.  | and deliver training and resources to  | Provide implementation support to<br>stakeholders; provide data & reports;<br>and deliver training and resources to<br>deliver simple and resources to<br>delivery of psychological therapies.   | and deliver training and resources to   | deliver training and resources to increase  | Green          | On track to deliver a national training programme for multidisciplinary staff and the EPP programme (80 trainines) simultaneously. 217 training places (EGT-A, ET BA. EPP programme (80 trainines) simultaneously. 217 training places (EGT-A, ET BA. EXP programme (80 trainines) simultaneously staff in the national training programme. For Significant for multidisciplinary staff in the national training programme. For suckey prevention (EGT-A) PFS10 FS) six enhanced paractice level for multidisciplinary staff is obtained misuse at Emma Tursa Learn Six endering programme for suckey prevention (EGT-SP) PFS10 FS) six enhanced paractice level for multidisciplinary staff substance misuse & Emma Tursa Learn Six enderinged to support the implementation of MA1 standards: the national scoping exercise is understare with the beat board PTICs to identify sommitted staff to be supported to understake the PG Certificate / Diploma to EGT. Meetings with national exhausts for his Am ACET laver the lange and d siming plant agree of to 32 Months and the programme, the PFIAMH team is currently supporting 38 lemmers across 3 solverts.   | Green        | The Psychological Therapies and Intervention Team for Adult Mental Health (PTIAMH) Team to not track to deliver a national training programme for (PTIAMH) Team to not track to deliver a national training programme for (PTIAMH) Team to not track to deliver a national training programme. To first or noting with subinance misuse, CRI for Low Self-Esteen, CRI first Sys Plave been provided for multidiociplamy atin the netional training programme. To first clinitating learning side in prevised to fit with NST EL Adult Learning resources. Work continues with NAMAPP, to develope evidence based training programme for side deprevention (CRI 59 PS) for 591 at enhanced practice level for multidiociplamy staff. Substance focusion. Extraom Trust Learn size redesigned to support the implementation of AMT standards. the national scopping exercise is underway with the bird board of MAT standards. The national scopping exercise is underway with the bird board of MAT standards. The national scopping exercise is underway with the bird board of MAT standards. The national scopping exercise is underway with the bird board of MAT standards. The national scopping exercise is underway with the bird board of MAT standards. The national scopping exercise is underway with the bird board of MAT standards. The national scopping exercise is underway with the bird board of MAT standards. The national scopping exercise is underway with the bird board of MAT standards. The national scopping exercise is underway with the bird board of MAT standards. The national scopping exercise is underway with the bird board of MAT standards. The national scopping exercise is underway with the bird board of MAT standards. The national scopping exercise is underway with the bird board of MAT standards. The national scopping exercise is underway with the bird board of MAT standards. The national scopping exercise is not standards. The national scopping exercise is not standards.  On the standards of the national scopping exercise is not standards.  On the stand | Green         | Between September - December 2013, the PTIAMN [Psychological Therapies and intervention Team for Adult Meteral Health) Team has delivered the national training motion of the Control of t | Blue         | Overall, the PITAMH (Psychological Therapies and Intervention Team for Adult Mental Health) learn has delivered the national training programme for multicologicings staff (Psychological Staff  |
| 3. Mental Health                                  | 3.2 5735  | IS Psychology                    | Over the next three years, increase service capacity in adult mental health by continuing to improve supervision,<br>training and coaching provision at a local HMS Scotland Health board level. This will in turn support the improved<br>performance of NMS Boards on Psychological Therapies waiting times access standard. MSc graduate posts will<br>deliver Ps within Primary Care services and the Clinical Psychologists will grow capacity within a tiered care model<br>for delivering 1st to pupulation of Other Neybe.  | by Health Board (HB) partners for posts<br>to supervision, training and coaching   | by HB partners for posts to supervision,   | Continue to monitor funding utilisation by HB partners for posts to supervision, training and coaching provision  | Continue to monitor funding utilisation by<br>HB partners for posts to supervision,<br>training and coaching provision. Report to<br>SG on utilisation of funding.  | Green          | Continued to monitor funding utilisation by HB partners for posts to supervision,<br>training and coaching provision   | Green        | Continued to monitor funding utilization by Health Board partners for posts to<br>supervision, training and coaching provision.  | Green         | Continued to monitor funding utilisation by Health Board partners for posts to<br>supervision, training and coaching provision.  | Blue         | Continued to monitor funding utilisation by Health Board partners for posts to<br>supervision, training and coaching provision.  |
| 3. Mental Health                                  | 3.2 5736  | 16 Psychology                    | In response to NHS Scotland workforce needs and guided by workforce planning; commission, recruit and<br>support appropriate numbers of child and adolescent psychotherapy trainees, between 2023 and 2026, to ensure<br>the NHS is provided with suitably trained professionals fit for purpose.   |  | Support the current cohort of 5 trainee CAPTs  | Support the current cohort of 5 trainee CAPTs   | Support the current cohort of S trainee<br>CAPTs. Liaison with educational provider<br>HDS (Human Development Scotland) -<br>meeting to discuss trainee progress.   | Green          | Current cohort progressing through training as expected.   | Green        | Current cohort progressing through training as expected.   | Green         | Current cohort progressing through training as expected.   | Blue         | Current cohort progressing through training as expected.   |
| 3. Mental Health                                  | 3.2 5407  |                                  | To support the ambition of increased access to evidence based psychological therapies and interventions, the NSX/SC Matria provides accessible guidance to service planners, clinicians and members of the public on what is NSX/SC Matria provides accessible guidance to service planners, clinicians and members of the public on what is likely to be the most effective treatment and how this can be safely and efficiently delivered. During 23/24 initial delivery of 25 evidence tables and 45 intervention templates with rejevant implementation guidance will be available in a searchable, accessible website and used by 1000 unique users.   | intervention tables. Resource to be  | Delivery of 16 evidence tables and 20 intervention tables. Resource accessed by 200 unique users.  |   | Delivery of 25 evidence tables, 45 intervention tables, accessed by 1000 unique users.  | Amber          | To date five evidence tables have been published with a further give nearing completion. Nie his extensions have been published. The resource has been soft tounched for feedback.   | Amber        | Site Busiched via the Scottish Covernment National Specification publication on 29<br>September. Formal Ministerial Busich planned for 1 November 2023. Devidence<br>reviews have been completed and upbased or bring prepared for upbaseling. Four<br>further are nearly complete and a further for are in progress. 12 Entervention<br>templates have been published to date. In Quarter 2 there has been 1792 new<br>users to the website.  | ed            | Is table have been completed and upbaseder or being prepared for upbaseling. Four further tables are engine groupsteron and further four are being worked on. There is a workplan for the remaining tables. To date 17 intervention templates have been uploaded with a further five nearing completion.   | Amber        | 38 topic areas tables have been completed and uploaded in but these include 12 dailsed for founded on hidden and young people, 14 dails and 54 dailden gladence. In 2023/2/4 20 full intervention templates have been uploaded although these include 23 reviews specific to adult populations and 15 specific to obtifiers and young people, meaning a subtotal of 39 within the 20 published. There has been 2329 unique users across 2023/2/4.  8 has been increasingly difficult to get time from Health Boards and Universities to support the review process, and alongside internal resourcing pressure this has resulted in some delays with achieving the numbers anticipated for 2023/24.  |
| 3. Mental Health                                  | 3.2 5461  | 51 Psychology                    | Cordinate to increase engagement across the Scribble workforce with the work and aims of the National Trauma<br>Training Programme and Trauma Informed Change, including delayer or use of Trauma Informed and Trauma<br>shilled training resources to at least 15,000 users. This includes: 1.500 downloads of the of the PIP infroduction<br>to the NTP resources? 2.100,000 views of the trauma informed parties, aimstations? Opening Boors* and "Somity<br>Seeds", 3.150 users of the "Opening Boors and Sowing Seeds" Taking a Trauma Informed Lens" workshops 4.<br>1000 completions of developing your trauma skilled particle en coloridor. Solghet to 50 funding, delivery of<br>trauma skilled workshops by a network of travent to at least 100 participants.   | training to at least 15 practitioners.   | at least 200 practitioners and specialist  |   | Delivery of enhanced trauma training to at<br>least 500 practitioners and specialist<br>training to at least 60 practitioners.  | Amber          | at reported participants in enhanced training and 0 participants in specialism<br>variants, Delivery of two enhanced training for trainers session, creating seven ex-<br>survive and Thrive trainers and 31 new Safety and Stabilisation trainers. Delivery of<br>awareness raining evaluants 1000 participants. Low rumbers due to lack of<br>reporting by local networks - anticipate this will rise as local networks enter their<br>data.   | Green        | Delivered 288 Enhanced places and 33 Specialist places to date.  | and .         | In Quarter 3 - Delivered 12 Enhanced places and 0 Specialist places.  Total across Quarter 1, 2 and 3 - delivery of 300 enhanced places and 33 specialist places   | Red          | in G4 there has been delivery of enhanced training to 10 perforpants and specialist<br>varianting to 0 participants: This leads to a cumulative annual total of 451 at enhanced and<br>33 specialist.<br>Team vacancy has resulted in reduced resource - non recurring 56 funding has<br>presented challenges in terms of recruitment meaning capacity to deliver training has<br>resolved.  |
| 3. Mental Health                                  | 3.2 5463  | 33 Psychology                    | Support leaders, experts by experience of trauma, and experts by profession and training in trauma across the<br>nation to work together to identify and create the trauma informed systems, organisations and structures that<br>can arrecognise and address barriers and inequalities and improve life chances for people affected by trauma<br>Continue to support the wider network champions and implementation coordinators across health, policing,<br>educationa notice authorities to create and markinat trauma informed change within and carsos organisations<br>and services through delivery of 400 direct and indirect training and consultation places in trauma informed<br>leadership by March 2024.  | Deliver 100 direct and indirect training places in trauma informed leadership.   | Deliver 200 direct and indirect training places in trauma informed leadership.   | Deliver 300 direct and indirect training places in trauma informed leadership.  | Deliver 400 direct and indirect training places in trauma informed leadership.  | Green          | Anticipated 142 places in training and consultation to support trauma informed<br>organisational change. Anticipate (June 28th) delivery of trauma informe leaders<br>training to 200 leaders. Low consultation numbers due to but of reporting by local<br>network. Anticipate this will rise as local networks enter their data.   | Green        | 834 places on leadership training and consultation delivered by Transforming<br>Psychological Trauma Implementation Coordinators (IPTIC) setwork, and 225<br>places on trauma informed leaders webinar provided by central team.   | ireen         | In Quarter 3 there were 288 places on leadership training and consultation delivered by<br>19THC (Transforming Psychological Trauma implementation Co-ordinators) network,<br>Including 2019 places to strauma formed leaders web  | Blue         | In Q4 there have been 251 training and consultation places in trauma informed leadership delivered by the National Trauma Training Programme (NTTP) network. The annual total for 2023/24 is 1,516 training and consultation places  |
| Mental Health     Mental Health     Mental Health | 3.2 5472<br>3.2 5457  | Psychology Psychology Psychology | Delivery of a programme of education and training to improve environes and effection of Fernitad and Marti-<br>Mental Nealth problems in Socialist with completion of the first start the trainer cohort of Perinad Champions<br>which will bring the total to 226 across Socialist by Marti-2024. Perinatel Champions will be supported to deliver<br>training to a further ±10 local health visition, midwifery and MOT colleagues by end of March 2024.<br>To propore health, care and partner organization staffs innovinging skills and confidence in supporting the adults<br>there price is because the staff of the s | to 32 learners.  150 people complete E-learning module, 1 CORE Workshop delivered, 1 T4T sessions delivered in Herwork   | to 64 learners.  150 people complete E-learning  | to 96 learners. Deliver training to final<br>cohort of 20 Perinatal Champions  150 people complete E-learning<br>module, 1 CORE Workshop delivered,   | Support champions to deliver training to<br>130 learners. Deliver training to final<br>cohort of 20 Perinatal Champions<br>150 people complete E-learning module, 1<br>CORE Workshop Delivered, 1 healthy<br>beginnings MAP workshop, 1 T41 sessions<br>delivered, 1 CORE Coaching Workshops, 1<br>MAP Trainer Coaching Support   | Green<br>Green | Osempions delivered 7 cascade training events with a total of 37 attendees.  E-learning module completers: 243; CORE Workshop delivered: 4 (50 participants); 16f delivered: 3 (21 participants); Network events delivered: 1 (11 participants); NewNetters produced: 1  | Green        | Champions delivered 30 cacade training events with a total of 65 attendees.  E-learning module completers: 514. CDBE Workshop delivered: 4 (27 participants);  107 delivered: 0 , Network events delivered: 0, Newsletters produced: 0   | mber          | Champions delivered 10 caccade training events with a total of 77 attenders.  e-learning module completers: 422 ; CORE Workshop delivered: 6 (58 participants); 188.MAP (health) degroining: MAP of Health behaviour Change Learning Programme) workshop delivered: 1 (5 participants); Newsletters produced: 1  | Blue         | Champions delivered 6 cascade events to 59 attenders. Total 238 during 2022/24.  e-Learning module completers = 530; CDRE Workshops delivered = 9 (75 participants); 188.MAP Workshops delivered = 2 (22 participants); 187. delivered = 2 (12 participants); 188. MAP Workshops delivered = 2 (12 participants); 188. MAP Workshops delivered = 2 (12 participants); 188. MAP Workshops delivered = 1 (12 participants); 198. delivered = 1 (13 participants); 198. delivered = 1 (14 participants); 198. delivered = 1 (15 participants); 19 |
|   |   |                                  |   |  | Newsletter   |   | Workshops, 1 Newsletter   |                |  |              |  |               |  |              |  |
| 3. Mental Health                                  | 3.2 5476  | 76 Psychology                    | improve care for children and young people with long-term physical health conditions by building psychological capacity, capability and confidence for all peedstain health care, social care and other agency stiff working with children and young people with physical health conditions, through a programmer of training either amend and stilled practice levels including eithering minimum of 15 straining events across all of our training effects shoulding obtain the children and stilled practice levels including eithering minimum of 15 straining events across all of our training effects shoulding obtain the children of                 |  | children and young people with long-   | Deliver a minimum for 11 training<br>events, either 125 or online, relating it<br>children and young expelle with long-<br>turn physical health conditions.   | Deliver a minimum of 15 training events<br>relating to children and young people with<br>king term physical health conditions.  | Green          | 7 Training events in total were delivered in Q1, including 4 bitesize modules, 2 core modules and 1 advanced module. All events were local events (# in GGC, 2 in V and 1 in Grangula, with the 3 from Villey events being supported by MSS. Supported | Green        | 6 Training events in total were delivered in Quarter 2, including one bitesize module, how core modules and three advanced modules (three in Niko (GCC, one in Grampion, cere in Inchina and one in File, Communication with our trainer exhaust has continued and our programme has been promoted through agreeing to offer a session at the NIS Benevierent Conference.  | iren          | Four training events in total were delivered in Quarter 3, including three bitesize<br>modules and one advanced module. All events were local events (one in NMS Ayribre 8,<br>Area and three in NMS (Fel); in total, 2 charing events have been offered by the end<br>Area and three in NMS (Fel); in total, 2 charing events have been offered by the end<br>taken relatively continued with two Train the Trainer events, including one for new<br>taken relatively continued with two Train the Trainer events, including one for new<br>takens who are now able to roll out our training. Assessing promoting the TISS PH<br>(Training in Psychological Skills - Psedistric it evalibracies) programme was presented at the<br>NMS Sereevement conference and cross worksteam and cross discretate work<br>continued with regular joint meetings between Psedistrics, Physical Health and leabth<br>largorevement and through the event of both the Long-Covid Steering group and the<br>health and education training network.   | Blue         | 6 bitesize training events were delivered in Q4. All events were local events [1 in Glagow. 1 in Borders; 2 in Inbhan and 2 in File). 1 event was cancelled in File (Day 2 of Promoting Engagement in Healthcare for Collider and Young People) and has been removed to the Collider and Young People and has been event of the Collider and Young People and has been event of the Collider and Young People and has been event of the Collider and Young People and has been event of the Collider and All People and Pe |
| 3. Mental Health                                  | 32 5497   |                                  | Spite en of March 2024, Improve health and wellbeing outcomes for regular living with demonstra, their families, and correst through the provision educational intellibres and DMRINTS SUELID reviews of EPH bail ricrosses workforce and family based caregiver capacity to utilitie evidence informed psychological approaches and interventions to support adjunctive to dispositive, maintaine capathly entrotion, independence, and quality of the prevent and respond to distressed behaviour; and support wellbeing and quality of life for cares. This work will include delivery of incurs to be insight greatments, but of which first a "Taining for Training" evidence workhological device and control of the support for implementation in locally areas of Sociated. It will also include delivery of materials in successive and the control of the support for implementation in locally areas of Sociated. It will also include delivery of materials in the locally areas of Sociated. It will also include delivery of materials in the locally areas of Sociated. It will also include delivery of materials in the locality areas of Sociated. It will also include delivery of materials in the locality areas of Sociated. It will also include delivery of materials in the locality areas of Sociated and the locality and the locality and the locality of the locality and the locality of the locality and locality anew locality and locality and locality and locality and locality a                | support delivery of this year's<br>educational programme. Planning and<br>advertising training events. Content for<br>Essentials in Psychological Care -<br>Dementia updated to support ongoing<br>delivery and content development for<br>Essentials in Skilled Practice in<br>Dementia Care Programme. Filming and | E Learning Module for staff working in Acute Care. Cristion of a "Behaviour Monitoring in Dementia Care digital learning resource. Essentials in Psychological Care - Dementia TFT Delivery to up to 20 staff from across H&SC. Psychological Interventions in Dementia TFT Delivery to up to 20 staff from across K&SC. Degitals of the Company | to up to 25 staff from across H&SC-<br>PULS follow up implementation<br>coaching session. Cognitive<br>Rehabilitation in Dementia Delivery to<br>up to 20 staff from across H&SC-PULS<br>follow up implementation coaching<br>session. Essentia | Essendia in Psychological Care. Chemestra<br>TIT Delivery for up to 20 staff from across<br>HSG.C. Psychological interventions in<br>Response to Stress and Oistress in<br>Dementia Delivery for up to 20 staff from<br>across HSG.C. Cappinive Rehabilitation in<br>staff from across NBG.C. Cappinive Rehabilitation in<br>staff from across NBG.C. PLIS follow up<br>implementation caching session.<br>Cappinive Stimulation Therapy (2 eleveris)<br>to up to 50 staff from across HSG.C. PLIS<br>follow up implementation caching. Execu-<br>tion of the Cappinish of the Cappinish of the<br>spin to 30 staff from across HSG.C. PLIS 2<br>follow up implementation caching.<br>Leaders from across HSG.C. Seculally in<br>Dementia Care Maissecher (Belley<br>Dementia Care Maissecher (Belley<br>Terrontotemporal demetial materials<br>delivery for up to 200 staff across HBSC.   | Green          | titles for all core training programmes agreed, flyers duributed through a single of<br>reductive to promote training across the workfore. Redesign of applications forms,<br>supporting documentation, and application screening process to simplify and<br>improve effectiveness of viaming application processes. Remitted and update of<br>Stress and Olistress Acute digital learning resource 90% complete. All filming and<br>content delivery for behaviour Methodronia in Dementral Digital Vistrichips complete<br>content delivery for behaviour Methodronia in Dementral Digital Vistrichips complete<br>as Psychological Care - Dementral syrap anne content complete and consultation<br>feedback received. The workstream has supported delivery of Psy fraining referring<br>to older people and adapting syrchological interventions, including for cognitive<br>impairments as well as supporting the pagication screening process for new<br>cohorts. Work is underway to update the Dementral Matrix stalles.  | Amber        | Lighted of Acute Care module is complete and will be relaurabled. Behaviour smonthering Digital learning Resource in Nacia dari Is now in the Build place. Essentials in Psychological Care T-If delivery 1 complete. COg rehab delivery 1 complete. To delivery 1 complete to delivery 1 complete. To delivery 1 complete to delivery 1 complete. To delivery 1 complete to delive | ied           | Si workers completed CTT (Capithus Stimulation Therapy) Level 1 practitioner programme. 18 workers standends CTT beauth Implementation Cabuchige programmes. 20 workers completed for standards CTT beauth and Managers programme. 30 workers completed presentation Transportation. 20 workers completed processinal TTP programme. 20 workers completed possible Rehability practitioner programme. Trauma in Dementia educational event and sluunch of new learning products standended your 920 workers from arross healthy, social scene, and third sector organizations. Physiological streetions TTP delivery merged with planned delivery in Quarter 4 due to capacity issues. Sexuality in dementia masterclass did not go ahead due to capacity stouch.  | Amber        | 13 completed Suestials TT and 11 completed the associated caching programme; 0 completed Psychological intervention TT [Fine VE]; 12 completed Cophibie Report Cophibie Report (Fine VE); 12 completed Cophibie Report (Fine VE); 12 completed CST grantationer training (Fine VE); 13 completed CST grantationer training (Fine VE); 13 completed ST Completed CST Enhanced Practice training (Level 2) and 11 completed the associated coaching programme; and 12 completed the associated coaching programme; and 12 completed training confidence (Fine VE); 14 completed ST Complete ST Comple |
| 3. Mental Health                                  | 3.2 5899  |                                  | Improve social, emotional, and behavioural outcomes for children and young apople by increasing worldorce capacity to deliver evidence based parent-child relationship focused interventions and approaches amed at compleme and employment grainflam, and promoting matrixing and reprosines parentally. This will be achieved through the provision of implementation support to stakeholders, including consultation, provision of data and reprosts, development and delivery of resources and training, and overseing and contributing to key stakeholder networks, and is in keeping with the requirements of the Mental Health Strategy.   | CwPM (Connecting with Parents  | Deliver 8 training events in various subjects such as 1º Preschool, Teen Accrediation, Esperis in Action, and CwPM train the trainers.   |   | Ouring 2013/D4, deficies 14 core trainings and 3 practice support sessions in evidence based, attachment focused perse-for development of the contract of the | Green          | On track. Delivered 1 core trainings in evidence based parent-child relationship interventions to 25 practitioners in total, and 63 practitioners in total attended 3 practice support resiston. Over QL 6-6/bill Approach Foundation Level Training was delivered to 35 practices. 1 Solibul Approach Foundation Level Training was delivered to 35 practitioners in total confinence support Trainings have been delivered to 135 practitioners in total confinence to support Training based been accessed by 137 families in total and 22 families since April 2023 and 5 solibul Approach online which has 17.242 registered learners overalt, 536 since 1st April.   | Green        | On track. Sommer months to less training. It practitioners in total attended three practice support essions. Owe Quarter, Six Solbuil Approach Foundation Level Training was delivered to 79 practitioners, Trailer Postine which has been accessed by 219 femilies in total and 18 femilies since July 2023 and Solbuil Approach online which has 1796 registered learners overalt, 452 since 1st July, 2 CwPM training delivered to 51 participants.   | Green         | Eight training, and for practice support sessions have been delivered to 140 practiciones in total of Quarter Jipochding from Tropie Plinishes Perveiting Programme), and incredible Years practice support sessions delivered to 99 particiones, 12 Solibuli Approach Foundation level training delivered to 114 particiones, 13 Solibuli Approach TII (Train the Traines) training have been deviced to 124 particiones in total and five Connecting with Parents' Motivations training delivered to 139 particiones; to that and five Connecting with Parents' Motivations training delivered to 139 particiones; Continue to support the implementation of the Tropie P Chile intervention (which has been edificred to a total of 232 families; 2 new Jimmiles in Quarter 2) and Solibuli approach to the Child of the Ch | Blue         | Onlinered 4 core training to 216 practitioners (20 practitioners for Lagrany 4 Triple P<br>training, 72 practitioners for 7.5 offshull Approach Foundation Level Variety and 15<br>practitioners for 15.5 offshull Approach Foundation Level Variety and 15<br>practitioners for 15.5 offshull Approach Foundation In 15 practitioners (IV-AS&LD) and 6<br>practice support sensions for 95 practitioners in total In Q4.<br>Consistue to support the implementation of the Triple P Online intervention (which has<br>been delivered to a total of 335 families, 4 new families in Q3) and 5othull Approach<br>Online (which has been accessed by 15.159 learners in total). 388 learners in Q3).   |

Page 4 of 11

| Recovery Driver                                   | SG ADP NHS Board Deliverable Reference Reference | NES<br>Directorate                                     | Deliverable Summary  | Q1 Milestones  | Q2 Milestones  | Q3 Milestones   | Q4 Milestones  | Q1 RAG State | tus Progress in Q1   | Q2 RAG State | us Progress in Q2  | Q3 RAG Stat | s Progress in Q3   | Q4 RAG Status | Progress in Q4   |
|---|--|--|--|--|--|---|--|--------------|--|--------------|--|-------------|--|---------------|--|
| Mental Health     Mental Health     Mental Health | 3.2 5900   | O Psychology   | improve infant mental health outcomes for very young children by increasing workforce knowledge and skills<br>around infant Mental Health (Mid) and increasing workforce capacity to deliver evidence-based infant aperet.<br>For the control of the Mental Health Strategy.  In order to help meet the camba access and psychological therapies access standards, have increased the number<br>in order to help meet the camba access and psychological therapies access standards, have increased the number   | meeting. Support the ongoing training  | Contribute to one FNP teaching session<br>Deliver training in an IMM intervention<br>to 5 practitioners by Sept 2023.  | practitioners by December 2023.<br>Provide training and/or supervision<br>for an additional 20 practitioners in an  | Provide infant Mental Health online<br>training to 40 practitioners by March 2014,<br>training to 40 practitioners by March 2014,<br>additional 20 practitioners in an evidence<br>based infant Mental Health intervention by<br>December 2013 and support the ongoing<br>training of up to 8 infant mental health<br>practitioners understaining the MSC in<br>Psychonalytic observation and reflective<br>practice by September 2012. Continuous<br>support for FNP through contribution to<br>FNP teaching sections and coordinating the<br>FNP Psychologist network.   | Green        | 16 assessors have been recruited from across health and social care. All have attended training and are awaiting learning tasks to assess.  Cohort 7 of 3YDP has commenced with 35 learners.   | Green        | 28 learners enrolled in the Infant Mental Neath online training during this quarter (September 2023).  Trained an additional 11 practitioners in an evidence based IMH intervention (VIG) totalling 20 trained this year to date) and 7 in NBO during Quarter 2 (totalling 15 since April 2023).  If further training in CWPM-IMH delivered to 4 participants.  FRV teaching and 1 x network meeting took place within Q2.  7 practitioners completed their Psychoanalytic Observation and Reflective Practice staining at MSc level, 2 at FGDs and 1 at FGCert totalling 10 completing learners on this training commenter.   | Green       | The second of the intended cohorts of Infant Mental Health (IMM) online training is scheduled to commence in Quarter 4.  An additional 2 percitioners were channed in an evidence based IMM intervention in Quarter 2 (Eight trained in Video Interaction Guidance and 16 in Circle of Security Parenting).  Five practitioners commenced their Postgraduate Diploma in Psychoanalytic Observation and Reflective Practice training.  Commencement of Cohort 8 of 1 year development plan as scheduled (SS Clinicians).  | Blue          | Provided Infant Mental Health online training to 56 practitioners enrolled by March 2024,<br>Provided Infant Mental Health online training to 16 practitioners in an evidence based Infant Mental<br>Mewborn Behaviour Othervation and 16 in Crite of Security Pherent training, 5 in Child<br>Parent Paychotherapy, Supervision in an evidence based Infant Mental Health<br>Intervention was provided to 56 practitioners by March 2022.<br>Supported the completion of training of up to 10 infant mental health practitioners<br>undertaking the MS in Psychonarylis Colesvation and Reficiely practice by<br>September 2023 (7 were awarded the qualification at MSc level, 2 at RC Diploma level<br>and at a RG certificate level, 5 further practices was very proported to commence<br>their Postgraduste Diploma in Psychonarylis Colesvation and reflective Practice in<br>Automan 2023 (7 or completion by August 2015).<br>PM was supported through contribution to 19th teaching sessions and coordinating the<br>Postgraduste Diploma in Psychonarylis Colesvation and reflective Practice in<br>Automan 2023 (7 or completion by August 2015).<br>PM was supported through contribution to 19th teaching sessions and coordinating the<br>Psychological revenue, Fluctualing conveniency one actional reference freeding by<br>December 2023.   |
|   |  | .,,  | of CAMING (Children & Adolescent Mental Health Services) clinicians qualified to deliver evidence based<br>psychological theraps and to have increased the numbers of supervisors who can support implementation of<br>the therapies, via one year course. In CEI (Cognitive Behavioural Therapy), EV (Interpersonal Therapy), EV EX<br>paramy Issaed Treatment on the pusuals and<br>provide the properties of the provided the provided the provided the provided the provided the<br>paramy Issaed Treatment for additional specific training in child mental health topic in order that they have the<br>necessary knowledge and skills for work in this field. Provide short course at the enhanced to specifials tending<br>contributions and the provided training to the provided training in the trainer courses and specialist both on<br>trainings.   | Year Development Plan (IYDP) (an<br>expanded cohort of 35 to meet needs).<br>nomination/backfill arrangements set  | nomination of Cohort 8 .<br>Nominations/backfill arrangements set  | Commencement of long courses and  |  |              | Nominations process for long courses to start in Sept/October 23 to<br>August 24 has been completed. Meetings with individual CIC completed in April 23 and retaining return forms completed by all boards by June 23 for cht, lyt and family therapy straine, A list of nominated clinicians and reserve clinicians has been created for each board.  |              | commencement in Quarter 3. September 2022 cohort of new Cognitive dehavioural Therep(to(t))=2.3, inchessonal Therapy (IPI-Gland Family therapy (N-8) trainness successfully recruited to and started courses.  |             | Long therapy courses commenced in September 2023 (Quarter 2 - further details in cels<br>99 and in (2), 1 completer of family Based Treatment for Eating Disorders (FBT) this<br>quarter.  |               | underway. Continuation of dinicians doing long therapy courses (CBT,IPT, ET, FBT) N= 57 ongoing  |
| 3. Montal Health                                  | 3.2 5902   |  | improve mental health and wellbeing outcomes for children and young people by increasing workforce capacity to do other early, velocities—based interventions and approaches to address mental health facilities that would not immed reflective for the control of the properties of the properties of the control of the control of the properties of the control of the con | Anxiety Management Training – June 121 2023; Brief Behavioural Action (BA) Training for Trainers (161) – June 14th 2023 to 12 MS-training for Trainers (161) – June 14th 2023 to 12 MS-training for Trainers (161) – June 14th 2023 to 12 MS-training fraining materials (161) – MS-training and support sessions to 6 MS-funded psychological Staff – 7th June 2023; National Meeting of 17th-Bit (Training and support sessions to 17th-Bit (Training in Psychological Staff – 12th June 2023). National Meeting of 17th-Bit (Training in Psychological Staff – 12th June 2023; National MS-training of 17th-Bit (Training MS-training and coaching as required to multi-agency staff in Training MS-training and coaching as required to multi-agency staff in Training MS-training MS-   | agency staff to deliver LUAM/ Junef BA interventions; Qualify source and may 20 training packages to the DLM, Adapt LUAM materials for No (neurodiversel). LUAM materials for neurodiversel materials and support JUD (ploint personnel may support p | agency staff to deliver LIAM / brief Bal<br>interventions, Rational Maleeting of<br>1195-EL NES-funded staff; Casality<br>assure and map JD training packages<br>to the DLM, Complete and deliver One<br>Confinise to promote and support of<br>essources; Provide mentoring and<br>coaching as required to multi-agency<br>staff / InS-funded psychology staff in<br>Nas 124 Psychology staff in<br>17 ans 126 multi-agency<br>staff in Yasan School and School and School<br>staff in Yasan School and School and School<br>staff in Yasan School and School and School<br>school and School and School and School and School<br>school and School and School and School<br>school and School and School and School and School and School<br>school and School and School and School and School and School<br>school and School and School and School and School and School<br>school and School and School and School and School and School<br>school and School and School and School and School and School<br>school and School and School and School and School and School<br>school and School and School<br>school and School and S | taaff to deliver LIAM / brief a An interventions. National Meeting of TIPS-EIC NES-funded staff. Quality assure and map to training packages to the DUA; Continue to promote and support. ISI Bresources, to the continue to promote and support. ISI Bresources, required to multi-gaency staff in NES-funded psychology staff in NES. Train 100 multi-agency staff in Trauma Modules   | Green        | Ongoing engagement with key data rehavors a cross NSS Boards and within the Scottish Governmer. Maintenance SLA is now in place with SSS/PIGs to to ensure ongoing access and updates to NSS databases housed within NSS/PIGs are made as required. We office of SCOTT S | Green        | 2023 TIPS-EC National Meeting August 23 = 20 staff attended plus further SilverCool implementation meeting have asked by 10 Staff. Solvered new receives training and support session to 10 NES-funded psychology staff – A August 2022. Provided mentoring and coachings to multi-agency staff NES-funded Coaching Staff of Staff S | Green       | 155 mills genory staff trained in bild (livid Behavioura Action). LIMA (Let's introduce Analyth Management, Taman, One Good, adult implementation Way first draft completed with Design. TIPS-6E (Craining in psychologica 48th – early intervention for follower) face to face (and resemble project) meeting on 20 December 2023 with around 2024 (livid complete) and the complete of the complete th | Blue          | Trained and coached 135 additional multi-agency staff to deliver LIAM / Intel BA interventions, National Meeting of ITIP-5c. NET-funded staff feld in person in December with 25 psychology staff attending, Quality assured and mapped 20 raining packages to the DLA, Continued to promote and support 150 resources, Provide in 18th; Trained 321 multi-agency staff in Trauma Modules plus 52 in Psychological Skills modules.   |
| 4. Planned Care                                   | 42 5885  | Academy,<br>Learning &<br>Innovation                   | Deliver the National Endoscopy Training Programme (NETP)  "Unter develop elements of the NAIG (Joint Advisory Group) accordingle training programme for medical endoscopists, non-medical endoscopists and health care support workers.  Applications of the National State of the National State of the NATP programme, particularly for Colonocopy and Lipport Calmoniental (Glouce).  The programme includes uspikiling courses, Train the Trainer courses, Endoscopy Non Technical Stills (ENTS) Training, Balas kills courses, and an accredible Assistant Endoscopy. Proceedings of the National State of the Programme, along with the provision of Immersive skills training, Courses are scheduled to not all locations throughout Scotland over the year. More courses are being added as faculty become available.  | Expand the National Faculty - all Boards.<br>Nave completed Service Level<br>Agreements (SLA) for round one and<br>have completed Service Level<br>Agreements (SLA) for round one and<br>the Service Claude of the Service<br>Service Service<br>Service Service<br>Service Service<br>Service Service<br>Service Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Service<br>Servi | Complete expansion of the National Faculty - and this will enable the scheduling of additional courses excluding basic allow courses. The course of the cour | Deliver upskilling for cobinoscopy courses, basic skills courses, upskilling in upper Grozurses and Train the courses, basic skills courses, upskilling in upper Grozurses and Train the Committee of the National Assistant Practitioner Programme (Endoscopy).   | Deliver upskilling for colonocopy course!<br>basis ckills course, upskilling in upcared in<br>subsis ckills course, upskilling in upcared in<br>course and Train the closcopy Trainer<br>and Training the Check Course<br>the Check Course<br>(The Check Che | Green        | All but two Consultanis pining the faculty now have S.As with their employing<br>locuris in place, typically course and memicinal training and IOTS courses have<br>been delivered as planned. The muring team forum is progressing well, as is the<br>Assistant Practitioner Programme.   | Amber        | Upsilling courses and immersion training and SINS (Endoscopy Non Technical SMR) course have been delivered a splanned. The nutrille (set learn forum is progressing well, as is the Assistant Practitioner Programme.  | Green       | On track with delivery as planned in Quarter 3.  Upskilling courses for colonoscopy, upper Gi, immension training and ENTS courses have<br>been delivered as planned.  The nursing team forum is progressing well, as is the Assistant Practitioner programme.  The Phase 2 build, incorporating the endoscopy rooms is currently still on track to be<br>delivered at the end of Quarter 4.   | Green         | Most delivery as planned for CPL but some changes to meet needs identified in Q3<br>regarding recognished of upuper Glieison; training sessions have been run, with this<br>activity replacing activity that can the delivered until the new training room in<br>commissioned as part of the phase 2 boils.<br>Upukilling courses for colonoscopy, upper GI, immersion training and ENTS courses have<br>been delivered as planned.  The nursing team forum is progressing well, as is the Assistant Practitioner Programme<br>which has also been joined by #Ns.  |
| 5. Cancer Care                                    | 5.1 5886   | 6 NHS Scotland<br>Academy,<br>Learning &<br>Innovation | National Ultrasound Training Programme (NUTP) Increase Ultrasound Training Programme (NUTP) Increase Ultrasound Training Programme (NUTP) Increase Ultrasound reacy in NIOS Scottory by supporting Boards to train ultrasonographers through a hub and spote approach and use of declinated practice education, in partnership with Glasgow Caledonian Ultriership's Increase Training Programme ultraining Programme United Pro | 200 procedures a week. Move into new<br>purpose-built training rooms at the end  | Continue immersion training to cohort<br>1, reduce waiting lists by delivering 120   | cohort 2, reduce waiting lists by<br>delivering 120-200 procedures a week   | t. 120-200 procedures a week. Continue to  | Green        | On track with delivery as planned in Q1 - the new rooms will be slightly later than planned, but this has not affected delivery of the programme.  | Green        | On task with delivery as planned in Q2 - the new rooms were completed later than<br>planned, but they are now in use and this has not effected delivery of the<br>programme.   | Green       | On track with delivery as planned in Quarter 3.  | Green         | On track with delivery as planned in QL Additional delivery has been possible with<br>training delivered to people in STL is in number of training programmes. Further plans<br>were developed (and funded by CESD) in QL to assist with Nead and Neck ancer waiting<br>times in QL by delivering training lists for ENT ultrasound with biopsy and this has been<br>delivered.  |
| 5. Cancer Care                                    | 5.1 5887   | 7 NHS Scotland<br>Academy,<br>Learning &<br>Innovation | National Bronchoscopy Training Programme (NITP) On Emprove Ing. Camero contones, NISSA will develop curricula, and deliver training in basic bronchoscopy, and in endobronchial ultrasound (BILD) and transbronchial needle appriation (TBNA) of mediatinal lymph nodes over a basic experience (SIZA) and 2024/21, and 2024/ | Appoint leads and faculty  | Faculty attend Train the Trainer day, develop online education resources   |   | Owelog EIUS. Trans Branchial Needle<br>Appration (TRAM) dimutation modules<br>(eight hours of supervised practice in two<br>four-hour sessions ideally separated by<br>three months, Ban first training day-<br>revision of online content, EBUS<br>equipment revised and procedures<br>performed under supervision on the<br>simulator and on caldwers. First othert<br>perform procedures in supervised<br>environment.  | Amber        | The faculty have been through the appointment process and have started work, but the SLAs are not in place.  | Red          | The SLAs with Nets GGC are still not in place, and communications are not receiving responses.   |             | The Service Level Agreement (SLA) with NIS Greater (Cliagou & Clyde is now in piliter, with the full faculty across all Boarts having hat their pilo plan suitions.) When the surge state of the pilot plan suition. When it is progressed on developing course content. The project will now be delivered over a langer timeframe due to the delayed start (24 months from now).  | Green         | Work has progressed on developing course content and the first EBUS course has been delivered.   |
| 6. Health Inequalities                            | 0.1 3432   |  | Design and delivery of a range of education and training programmes that improve access to high quality<br>deducation and training for the health and social care workforce providing service in remote , rural and stand<br>settings across Scotand   |  |  |   | Identify and award remote & rural<br>credential, implement new Rural<br>Practitioner Msc. at advanced level for 12<br>staff, establish Remote & Rural (RAR)<br>supervisory hub and network, deliver of<br>rural learn education programmers, design<br>and deliver new learning resources.   | Green        | Rural Credential progressing ARP programme aplications open and funding<br>requested from Nick's outport 12 (bases on cohort 1 and establish RAP<br>supervisory hub. New rural MOT team education programmes in design phase.  | Green        | Bural Cedential progressing to development of resources programme of work. ABP programme underway and 55 places funded form MES to support on cohort. ABA supervision you have a ready to be tested. New rural MDT team devusions programmes in design phase. New National Centre Remote & Rural Health & Social Care funded and operational.  |             | National Centre for Remote & Rural Health and Social Care (National Centre) 0-6 month and 24 month tragger setablished and work implementing each intilated. International Remote & Rural Healthcare Symposium hosted and led by National Centre team for some 300 colleague. Recruitment for National Centre stamp lenger gregeresed. RibitGLI, premote and rural healthcare educational alliance) dis-established and NES team varial formed into National Centre staffing.  | ыце           | All D-6 months targets achieved and delivered across 4 pillars of national centre for<br>remote and rural recruitment & retention, Leaderships and Good Practice, Bereach and<br>Evaluation, Education and Training First cohort of 15 rural practitioners funded for new<br>Mox Bural Practice, Mar Supervisory but and network testibilitied. 12 Remote and<br>Rural series of learning events delivered for 75 practitioners.   |
| 6. Health Inequalities                            | 6.1 5894   |  |  | risk, COVID-19 vaccination programme.  | Autumn programme.  | vaccination including broadening focus of current Pregnancy, breastfeeding and reproductive health resources to include further vaccines.   | programme<br>h   | Green        | Sa month to four year, children at risk, COVID-19 vaccination programme. National<br>webhar delivered to attachedisers with energy rander supporting a question and<br>answer session- Over 300 attendese. Vaccine specific resources delivered and<br>published including side sets, posters and updated proficiency resource.  | Green        | Educational Resources winter programme for flu and covid are all delivered and available on Turs Learn. Welhim all hold attended by 30 people and available on Turs Learn over 1000 views of webinar recording to date.  | Green       | Work continues to engage with the maternity workforce and with the Health Violting workforce in relation to their vaccination learning needs.  | Green         | The MSSW vaccinator education programme was reviewed, the website pages and<br>guidance documents were updated or the feet current practice and to enhance the<br>experience of users. Promoting Effective Immunisation Practice [PEP] for both MSSW<br>and registerier healthcare practitioners have all content review and update using<br>normal governance processes. Simultaneously the content has been transferred to a<br>more internative and accessible digital platform with the support of MSS Technology<br>Service colleagues.   |
| 6. Health Inequalities                            | 6.1 5761   | 1 NMAHP  | Develop a Trangender Care Knowledge and Sills Framework which will be accessible for the Health and Social<br>Care workforce in Sociation with relevant learning resources to support best care of trans people accessing<br>services in the NHS.  | Reference Group. Arrange a Development Dy for all stakeholders. Undertake a literature review.   | training.  | Knowledge and Skills Framework with<br>wide stakeholder involvement. May<br>existing education and training to<br>framework and undertake an<br>education needs analysis to identify<br>needs of staff and gaps in provision.   | Finalise content and work with NSS Digital to design and publish the Framework on Turas. Make recommendations for the development of Jearning resources.  Develop an implementation plan.  | Green        | First development group meeting 22nd June 2023. Reference Group is in<br>place and development day arranged for 20th July. Literature review<br>completed.   | Green        | Stakeholder meeting: 28 August, 75 September 2022. Draft content for ISF has been created and in process of internal review in totalls; 1-to specific sections ([suential and Skilled] scheduled for external stakeholder approval during Quarter 2 (suential and Skilled) scheduled for external stakeholder approval during Quarter 2 (suential and Skilled) scheduled for external stakeholder approval during Quarter 2 (suential and Skilled) scheduled for external stakeholder approval during Quarter 2 (suential and Skilled) scheduled for external stakeholder approval during Quarter 2 (suential and Skilled) scheduled for external stakeholder approval during Quarter 2 (suential and Skilled) scheduled for external stakeholder approval during Quarter 2 (suential and Skilled) scheduled for external stakeholder approval during Quarter 2 (suential and Skilled) scheduled for external stakeholder approval during Quarter 2 (suential and Skilled) scheduled for external stakeholder approval during Quarter 2 (suential and Skilled) scheduled for external stakeholder approval during Quarter 2 (suential and Skilled) scheduled for external stakeholder approval during Quarter 2 (suential and Skilled) scheduled for external stakeholder approval during Quarter 2 (suential and Skilled) scheduled for external stakeholder approval during Quarter 2 (suential and Skilled) scheduled for external stakeholder approval during Quarter 2 (suential and Skilled) scheduled for external stakeholder approval during Quarter 2 (suential and Skilled) scheduled for external stakeholder approval during Quarter 2 (suential and Skilled) scheduled for external stakeholder approval during Quarter 2 (suential and Skilled) scheduled for external stakeholder approval during Quarter 2 (suential and Skilled) scheduled for external stakeholder approval during scheduled for external stakeholder approval during scheduled for external stakeholder approval during scheduled for external stakeholder approval scheduled for external stakeholder approval scheduled for external sta | Amber       | Oralt transgender Care KSF (Flowwidege & Dills) framework finalised and distributed to<br>over 100 cappinalisms or individuals for review and comment. To date, over 385<br>separate comments have been received, logged and reviewed by talkeholder group.<br>Consultation period extended to February 2020 based on Societin Government<br>requirement. Impact on deadline for design work in Quarter 4 being considered.<br>Mapping of existing educational and training to framework in planning for Quarter 4.  | Green         | Wide range of feedback received from stakeholders abhough much later than originally expected. Key feedback from one origination received at start of March 2024. Regular project team meetings have enabled processing of all comments and finalised copy of framework restyl for digital.  Decision taken to move final product from a PDF to Umbraco web resource on the basis that it will meet to be possible to apply future updates.  Scoping questionnaire for educational resources created and distributed to be returned during April 2024.  Planning for children and young people's annex to framework. Will attempt to engage with Cass (Independent Review of Gender Identity Services for Children and Young People) enview team and this will need to be brought into risk planning for next year.  |
| 6. Health Inequalities                            | 6.1 5424   | 4 Medicine   | Inhance health and social care professionals' preparedness for effective communication and practice aligned to<br>details, dying and beneviewment care through development and delivery of a tonkill of educational resources<br>including e-modules, animations, the Support around Death website and Turas learn pages, hosting learning<br>events and an annual conference. Ensure accuracy of existing resources by reviewing annually   | Aim to deliver resources to support the<br>health and social care workforce<br>around body donation and<br>bereavement in the workplace  | Development of an elearning resource and programme of education  | Primary Care: scoping requirements to<br>help support this cohort of staff  | Deliver a toolkit of educational resources to support dying and bereavement, host learning events (sia e.g., networks, podcasts, weekinars) and deliver an annual conference.  | Amber        | Developing a new e-learning module. Training team member to use Articulate.<br>Scoping another is elearning module. Training annual conference. Working with<br>the Death Certification Review's Service to create new learning resources. Completed<br>body doxasion animation and developing supplementary resources. Notated<br>Bereavement Leadh Network event. Finalising the editing of the NES Stata accident<br>inquiry resource. Continuing with podcast and webinar programme.   | Amber        | Trained team member to use Articulate and using this sequired skill to enhance e-<br>learning package development. Programme finalised for annual bereavement<br>conference. Registration approaching 500. Webinar hosted to Isuanch new Body<br>Donation education rescurers. Supplementary resource to sit languisfer exertly<br>developed film on the death of a colleague. Filming underway for eight case study<br>based films to upport Health and Social care worlforce around dealing with the<br>death of a colleague. The team have been accepted to deliver a worlschop at<br>DEMEC (Developing Excellence in Medical Education Conference) in December.  | Amber       | Delivered annual conference. Over 12,000 delegates registered. Post conference sustainfaction rating from delegates scored. To out of 5 (equivalent to over 84%), Over 60 delegates stended the DEMEC (Developing Excellence in Medical Education) workshop. COPMed) (Conference OF Postgadaute Medical Deans) sudden death of a doctor or dentist in training scheduled for launch in December.   | Amber         | Welbeine webnish hosted. Death certification webnish in planning for Spring with the Death Certification webnish rail planning for Spring with the Death Certification Service Service (see Service Service) and the Service S |

Page 5 of 11

| Recovery Driver S         | G ADP NH<br>Action De<br>teference Re | IS Board NES Directorate ference                   | Deliverable Summary  | Q1 Milestones   | Q2 Milestones  | Q3 Milestones  | Q4 Milestones  | Q1 RAG Statu | s Progress in Q1   | Q2 RAG Statu | ss Progress in Q2 Q3   | B RAG Statu | s Progress in Q3 Q4 RJ   | AG Status Progress in Q4   |
|---------------------------|---------------------------------------|--|--|---|--|--|--|--------------|--|--------------|--|-------------|--|--|
| 6. Health Inequalities    | 6.1                                   | 5492 Psychology                                    | Provision of education, training and coaching to improve equily of access across the lifespan to assessment and diagnosis consistent with a neurodevelopmental (NOI approach which enables practitioners to identify a range of neurodevelopmental conditions. Minimis we sailing times for assessment, formulation and algoosis across Scotland and deliver on the appriations of the NO Service Specification. Improve access to psychological interventions for people with NO conditions with the gator in province mental health and wellbeing, as part of cross agency supports and interventions. Engagement with key stakeholder groups, including those with lived experience, to ensure the training offer is a good lif for the workforce.  | across adult and child settings in ADOS<br>2, and up to 25 clinicians in ADHD   | practitioner relating to ADHD.  Develop and deliver webinars of interest to practitiners across the fifespant, to over topics such as ND affirming practice, comorbidity and ADHD recognition.   | up to 15 pracitioners across child and adult.  Develop and deliver webinars of interest to practitiners across the lifespan, to cover topics such as NO affirming practice, comorbidity and ADHD recognition.  Deliver training for up to 40 child and                         | r Deliver cohort 2 of ADDS-2 training.  Develop and deliver webinars of interest to practitiones across the lifespan, to cover topics such as NO diffirming practice, comorbidity and ADHD recognition.  | Green        | Procurement for ADOS-2 training is progressing with NES procurement colleagues.<br>Process is progressing to identify provider of large scale training across Scotland for<br>aith diagnostic assessment   | Green        | A005-2 training procurement almost finalised, on track to provide two cohorts of<br>21 staff by end of Quarter 4. ANDIO medication webinar at scoping phase.<br>Neurodisensity Affirming Practice Webin in development: working closely with<br>Neath Visitor staff to clarify training needs using this webhar as a starting pont<br>followed by six effective practice propus ranged for Quarter 3. Good Practice<br>Guide for MATRX drafted and out for review. Adapted LIMM training materials in<br>preparation. Adapted CET for CPP for 50 staff to delivery in Quarters 3 and 4 in<br>procurement. All training offers on the TURAS page submitted for mapping to the<br>Digital Learning Map - this will help us raise awareness and access for staff to these<br>offers.  | een         | ADOS - 2 (Autism Diagnostic Observation Schedule) procurement complete and dates for two cohorts have been finished. 24 places will be available—this is fewer than previously hoped for be procurement processes. ADIAD (Matterion deficit hyperactive) disorder) diagnostic assessment training will be delivered in January 3024 to 50 procurement of the procurement processes. ADIAD (Matterion deficit hyperactive) disorder) diagnostic assessment training will be delivered in January 3024 to 50 processions of the second process of  | ADOS - 2: 24 places offered during Q4, this is fewer than previously hoped due to procurement processes. ADHD diagnostic assessment training for adults was in January 2021 to 65 practitioners. Welstier series was delivered over Q4 with five welstians on a range of topics, generally across the liferpan. At least 300 in attendance for four welstians, one was capped to 100, Austina R M10 Good Particle Guide for MRTRIX in final stage of consultation and will be published assp. We continue to sope and support placts of green adpost diagnosis apport / psycheductional gloups in CAMHS (ACT based group for young people in CAMHS & Enthracing Difference group for parents of children and young people at the pre-diagnosist stage). We have delivered reflective practice groups to 40 Health Visitor staff in Nts Greater Giaggow and Clyde (GG&C) to cope learning needs and committed to work with GGS and Taylatice creates a two  |
| 6. Health Inequalities    | 6.1                                   | 5493 Psychology                                    | Develop a national programme of education and training to staff working with shufst with learning disabilities across health and social care settings with the goal to improve health inequalities and social, encotional and behavioural outcomes including supporting implementation of the Coming Brone Implementation report. This work will include development and politing of accased training recoursed to 57.98 Spracticenes to support practice leadership across teams and organisations in health and social care in collaboration with partners such as PBS (Positive Behavioural Support) Community of Practice (CoP).   | adult practitioners related to<br>psychological interventions for<br>comirbin mental health conditions.<br>Develop 25 librisize modules around 5<br>topics, to form core "Essentials of LD"<br>learning pathway resource.<br>Develop Understanding PBS assessors<br>programme; train up to 16 practitioner<br>from across H&SC.   | learning pathway resource. Plan for<br>additional module development to<br>cover sensory needs and physical<br>rs activity  Deliver system level event in PBS for up   | psychological interventions for comirbin mental health conditions.  Complete core "Essentials of LD" learning pathway resource. Pilot module development to cover sensor needs and physical activity  Deliver further system level event in 186 for up to 20 CEOs and senior   | Add sensory needs and physical activity content to Essentials of LD learning y pathway resource. Access for all test 50 practitioners across boards for all test 50 practitioners across boards for the provide 1 cohort of up to 40 practioners for trauma skilled face to face learning resource, plan 147 resources for piloting in | Green        | 35 statestors have been recruited from across health and social care. All have altended training and are awaiting learning tasks to assess.  | Green        | All ZS blassise modules underway around five topic, to form core "Essentials of LD" Go bearing pathway resource. At wishous stages of development—initial modules sent to digital to construct e-learning, some out for external review, some finalising enternal review. Additional modules over semony needs and physical activity have been developed and underin internal review. Some finalising system level event in PSS Practice Leadership was delivered in partnership with the PSS Community of Practice for 18 CGC Jan de serior leaders.  | een         | All 25 bitesize modules underway around five topic, to form core "Essentials of LD Blue"<br>(Jeanning (Disabilities)" fearing pathway resource. At various stages of development<br>eight modules have been created by NES Technology Service (NTS) colleagues and are in<br>final stages, eight rether modules are being reviewed by critical readers. Remaining will<br>be created, reviewed and built for Quarter 4.  One cohort of LD S&S was delivered for 18 participants. One additional cohort was<br>cancelled due to ciscinese. This will be reschedules in Quarter 1, 2024-25.  | day basic training package for NV staff and ploted this across 4 feelah Visitor teams in<br>GGEC and signopated to parent webbles in NMT Spage and highland. Webbrar series<br>delivered to 1592 attendees across 7 webinars. All Resources on TURAS site mapped and<br>upsaded to the Digital Learning leading of the Spage 10 feel and to bit by digital colleague, including<br>3.8 between models are non-complete and and bit by digital colleague, including<br>these relating to enouncy processing and physical activity. These are due to be traumbed<br>during learning Deablities week in May, CLI 2004-25. Traums skilled e-modules still<br>under development, this has been delayed due to still abence issues. On echotr of<br>CAAP colleagues and one cohort of EPPs have recieved training relating to adapting<br>the rapies for people with intellectual disabilities in this quarter.  |
|                           |                                       |  |  | Plan system level events in PSS for up to 20 CEOs and service leaders for delivery in Q2  Deliver 10 SSS 74T event for up to 12 practitioners across boards.  Develop traums skilled e-module and face to face learning resource, ready to be piloted across Q2 and Q3  Plan for continued delivery of training to 30 CAAP and 30 EPP colleagues to increase across to psychological therapies for proceed until 10.  Develop learning programme and caaching approach for at least 15 skill across socialand to access to support implementation of Best It. | Deliver 2 cohorts of LD S&S for up to 4 practitioners across boards, one event in Q and one in CQ an | Pilot trauma skilled e-module and face<br>to face learning resource in Q2 and<br>Q3.<br>Plan for continued delivery of training  | 30 CAAP and 30 EPP colleagues to increase<br>access to psychological therapies for   |              |  |              | Planning and applications have been received for 2 cohorts of LD 585 for up to 40<br>practitioners across boxerb, both scheduled to take piace in Quarter 3.  Trauma killed e-module and face to face learning resource – still under<br>development.  18 EPP colleagues received training to increase access to psychological therapies for<br>people with LD. Planning for continued delivery of this training to 30 CAAP<br>colleagues scheduled to take place in Quarter 3.  Caaching and implementation event in Beat It was planned and offered for up to 20<br>staff across Scotland, but was cancelled due to low uptake (4 applicants).   |             | Trauma skilled e-module and face to face learning resource - still under development 30 CAAPICInical Associate in Applied Psychology) colleagues recieved training in adapting psychological interventions.  |  |
| 7. Innovation<br>Adoption | 7.1                                   | Academy,<br>Learning &<br>Innovation               | Support for Nursing & Médwifer Caused (NMC) OSCE (Dispetcher Structured Clinical Exam) Preparation NMCSA supports Soards who have recruited nurse from outside the U.S. he being the new nurses and their supervisors with preparation for NMC OSCE. This helps the nurses to gain registration so they can practice independently as quickly a possible. Digital pupport for learning is provided for each of the ID stations in the OSCE. Recourses in Adult Nursing were released in Q2 2002/23 and for MH Nurses and Midwies in Q2 2002/23. A further respects for cultural humility resources is being met, with resources being developed to be bunched in Q3 2023/24.   | and the educators supporting them, fo<br>nurses new to the UK in areas of adult<br>nursing (expected 750 in year), MH<br>nursing (expected 15-20 in year) and<br>Midwifery (expected 15-20 in year).<br>Resources to be updated each time the<br>NMC make changes to the stations.  | nurses new to the UK in areas of adult<br>nursing (expected 750 in year), MH<br>(mental health) nursing (expected 15-2<br>in year) and Midwifery (expected 15-2<br>in year). Resources to be updated each<br>time the NMC make changes to the<br>stations.   | r nurses and the educators supporting<br>them, for nurses new to the UK in<br>areas of adult nursing (expected 750 in<br>10 year), MM nursing (expected 15-20 in<br>year) and Midwifery (expected 15-20 in<br>in year). Launch of Cultural Humility<br>resources this quarter. | Resources to be actively used by nurses<br>and the educators supporting them, for<br>nurses new to the UK in areas of adult<br>nursing (expected 750 in year), MH nursin<br>(expected 15-20 in year) and Midwilery<br>(expected 15-20 in year). Resources to be<br>updated each time the NMC make changes<br>to the stations.          | Green        | On track with delivery as planned in QI.   | Green        | On track with delivery as planned in Quarter 2.  | een         | On track with definery as planned in Quarter 3. The Cultural Humility resource has been<br>Green warmly received, with over 400 users in the first month since publication.  | received, with over 740 users since publication in Q3.   |
| 7. Innovation<br>Adoption | /1                                    | Academy,<br>Learning &<br>Innovation               | Preparation for work in health and social care in Scotland  NISSA has supported Boards and Social care providers nince where 2011, by providing a digital resource that enables people new to roles in health and social care to be well-prepared. The resource is suitable to be used after interview but before starting work, which the processes are renderway, and it is a subgape resource whilst the national commission on induction for Healthcare support workers (PSCN) is ongoing. This digital learning programmer remains in use with possible rededuck and an average 202 one we learness such most figal over 1,800 in total, An annual education review has been completed and requested developments will be delivered in 2023/24.   | Add additional guzzes for learners to<br>check progress (requested by learners'<br>feedback). 200 new learners to use<br>resource.  | 200 new learners to use resource.  | Develop and publish additional<br>modules. 200 new learners to use<br>resource.  | 200 new learners to use resource.  | Green        | On track with delivery as planned in Q1.   | Green        | On track with delivery as planned in Quarter 2.  | een         | On track with delivery as planned in Quarter 3. Additional delivery has been possible with training delivered to people in ST1-6 in a number of training programmes.  Further plans have been developed fand funded by the Centre for Sustainable Delivery) to assist with Head and Nect cancer waiting times in Quarter 4 by delivering training lists for ENT (Ear, Nose and Throat) ultrasound with biopsy.   | On track with delivery as planned in Q4.   |
| 7. Innovation<br>Adoption |                                       | Academy,<br>Learning &<br>Innovation               | NES will successfully obtain SCOE (Scottah Credit Qualifications Framework) credit rating status by summer 2024 and will credit rate in fist own brand awards. In year 1, we will obtain credit-rating both status and will use these powers to credit-rate (NES programmes; in year 2 we will further develop our credit-rating capacity, processes and practice, successfully meeting the SCOE Patriesspils comploring registered programmes, and complete a progress review. We will also make a strategic decision on NES becoming a third-party credit-rating body.   |   |  |  | Preparation work will continue throughut 23/74 to support application submission by end of 2024.   |              | Alignment and sequencing in relation to Corporate Improvement Projects has been<br>agreed and timefore established. Application will be made at the end of 2024 with<br>decision 6-9 months thereafter.  | Green        | Relevant Corporate Improvement Projects are underway and currently on track. No.   | А           | his deliverable (56.5) has been closed for the remainder of 2023/24 as there is no direct progress subtopated in Quarter 4 MES This does not be relevable 5060 (Development of a new approach to educational quality assurance and quality management) being a percequiable to achieving 50516 p. MES volumiting an application fees CSCP credit-rating status). Deliverable 5090 is exterly progressing during 2023/24 and progress is reported via the corporate quarterly reporting process and the MES Programme Management Office as it. The MES Securities Than has agreed that devirable 5055 is closed for the remainder of 2023/24 and a refreshed / revised version is included within the 2024/25 MES operational plan.   | This deliverable was closed during 2023/34 Gyunter 3. Please see the Guarter 3 narrative update (column Y) for further detail.   |
| 7. Innovation<br>Adoption | 7.2                                   | Academy,<br>Learning &<br>Innovation               | Delivery of support to the Accelerated National Innovation Adoption (ANA) programme.   | To recruit to full capacity within roles<br>specific to ANN workstream. To<br>assimilate activity within establishing<br>new directorate structure. To<br>contribute to developing collaborative<br>process across ANNA partners.   | To host and deliver a workforce and education workshop for AMIp anterier project and programmes teams. To pla and deliver an AMIP partners collaborative event, with a focus on forward planning and next steps.   |  | Technology will support the Accelerated<br>National Innovation Adoption (ANIA)<br>programme.   | Green        | Digital product manager and ANIA senior officer now in place. Structures evolving<br>pertirent to ANIA in new directorias. Not component of ANIA collaborative<br>priming workforce and education specific workshop to ANIA project and<br>expressioning workforce and education specific workshop to ANIA project and<br>representing workforce and education seeds.  | Green        | Workforce workshop delivered with positive feedback and outputs to be integrated for<br>sits away of working Planning commercial or ANAIA partner revert in November.<br>Confinued input to workforce components of value can sed implementation<br>ground input to a workforce components of value can sed implementation<br>programmer.<br>For any other confinement of the programmer of the programmer.<br>Funding commitment now confirmed from Scotish Government. Regolation<br>commencing regarding ongoing NLS requirements now starting.   | een         | NSS continue to inform workforce considerations with increased structure to preparetary planning. AND Registed premisings in some way inject enangers in pice. NSI successfully led the Cautre 3 AND apartners meeting with a focus or pice. ASI successfully led the Cautre 3 AND apartners meeting with a focus or pice. ASI successfully led the Cautre 3 AND apartners meeting have with the pice during Cautre 4 Agreement in principle has been shared by scottath Covernment (ISC) regarding continuance funding into the next AND partners series, Six have shared that formal confirmation will not be available until January 2004.  | Workforce and education checkist capturing baseline kills, skills gaps and education needs now embedded for consistent application in Alky programmes.  Workforce model for national diabetes remission team approved as part of value case, including components of othersification of roles and skill development. This work is becoming part of a where diabetes prevention programmes. Alk Psychology sighted on this.  In this control of the programmes continue to work towards value are submission. Alk Singht programmes continue to work towards value are submission. Alk Singht provider model and retired duration needs. Considerations for Point of Lore Testing (POCT) now underway at pace.  Working codewy with project manages, clinical leads and KSTMS digital collegues, contributing to momentum of implementation of Digital Dermatology and Diabetes Type 1 Closed long systems.  Whilst ANIA partners base line funding is now confirmed, as a development in process each AMA potential programme will be individually sesses and evaluated via IDA.   |
| 7. Innovation<br>Adoption | nu                                    | Workforce<br>8, no<br>mber in<br>pp down<br>9,5620 | Build Quality improvement (QI) capacity and capability across public sector services by: delivery of Scottish<br>Improvement Leadenship Programme (SCLI), Scottish Couching & Leading for improvement Programme (SCLIP) and<br>testing of a QI & Sectorship programme for persistonal managers, delivery of the Access QI programme; and<br>delivery of the Scottish Quality & Safety Fellowship (SQSP).   | commencement of SCLIP cohorts 33 and 34 and 56.Ll cohort 45, recruitment to 2 SCLIP cohorts   | Development of Operational Manager<br>test programme, Recruitment to two<br>Scil. cohorts  | i completion of Scottish Quality &<br>Safety Fellowship (SQSP) cohert 14<br>complete, commence SQSF Chord 15: commence SQSF Chord 15: commence test of operational<br>managers group; Commence SQLIP<br>cohorts 35 and 36 and Scil. cohort 46                                  |  | Green        | Two of the four commissioned cohorts of SCLIP have commenced as planned. Final two cohorts have been recruised to. Scit. cohort 6.5 has commenced as planned. Access [Completed as planned, excess [Completed as planned, excess [Line has been planned to the 15th cohort of SQSF on track. The 14th cohort of SQSF continues and is on track.  | Green        | Two of the four commissioned cohorts of SCLIP continue to be delivered as planned. First two cohorts have been recruited to and will commence in Quarter 3.  | een         | Two of the four commissioned cohorts of SCLIP (scottish Coaching and Leading for Improvement programme) complete, and final two cohorts have commenced as planned.  SELE SCRIBBLISH propresented Leader programmely cohort 65 continues to be definered as planned. Recruitment to final two   | Three out of the four SCLIP cohorts now complete, and the 4th is still on track. Recruitment to cohort planned in 2024/25 complete. SCIL charts 45, 46 and 47 continue to be delivered as planned.  15th cohort of 505F being delivered as planned and recruitment closing this quarter for the 16th cohort planned for 2024/26.  Test cohort of Operational Managers programme continues as planned and recruitment complete in this quarter for two choolsts planned for 2024/25.  |
| 8. Workforce              | 8.1                                   | 5752 NMAHP   | We will utilise reporting dashboards to colliste data and report on performance management of NMAHP commissioned education programmes to fallitate a sustainable NMAHP workforce where evidence-based education and training is aligned to workforce requirements.   | Test dashboards available for all<br>universities and ure access tested to<br>ensure data governance in place.<br>Development of stakeholder feedback<br>process  | expereince   | er updates integrated and functionality<br>for individual university comparsion to<br>national datasets developed  | data. Enagement sessions with 12 universites to prepare for 2004<br>performance manangement process  | Green        | The test performance management danhboard is a walufale internally and has been<br>utilized to support data presentations for numing and midwelley performance<br>management reviews in relation to first and second destination data. Work is<br>organize to develop perfic university secses. Appropriate paramedis cience<br>performance enhancement process remains a work in progress.  | Green        | Test dashboard used to enhance data reporting as part of performance<br>management processes to provide field specific data. Work roaping to develop<br>university access role. Paramedic programmes included in 2023 process and will be<br>evaluated.  | een         | As per Custer 2, test Performance Management (PM) dishiboard is in development -<br>test dishiboard used to report new student intake numbers for Naving's McMulvery<br>(N&M) programmes in September 2022. Indexing scrivly is now live and the team are<br>now adapting to new way of vorking to accuminate the new system.<br>Meeting being planned for January 2024 to consider how other AMP learners could be<br>added to the system. Work ongoing to develop university individual access.  | New indexing dashboard is now available internally. Work is ongoing to develop reporting function. The Performance Management (Pull Jashboard is abia available internally and development work is ongoing to offer access and create user roles for Higher Education institutions (HEIs). This work will continue in 2024-25.   |
| 8. Workforce              | 8.1                                   | 22TD MANUSER.                                      | We will deliver 4 cohorts of compassionate communication training, 2 cohorts of Care Experience Improvement Model (EXIM) beginned training and 2 coline behaviors. We will expend the impact of training and explore a stand the trainers approach for future delivery of compassionate communications. We will commission education for Alternative Augmentative Communication (AAC) as recommended by the National AAC Advisory Group.   | communication training  | communication training and commenc<br>planning for train trainer model and<br>CEIM leaders training host webinar   | e education resources, refresh existing<br>person centred are online resources<br>and host listening events with service<br>users regarding person centred care  | To develop train the trainers<br>compassionate communication training,<br>host CEIM leaders training and publish<br>refreshed person centred care resources  | Amber        | 5th cohort successfully recruited but postponed due to staff sickness.   | Amber        | Compassionate Communications work remains postponed due to staff sickness. The Gard cacher of Care Experience improvement Model fealers in social care went shead with the callaboration of Healthcare Improvement Scatimat, Care resources and social services and Care Care and | een         | No funding received for Abernative Augmentative Communication (AAC) resources so alternatively use reviewing instigns recovers to ensure they excontemporary, in terms of person-centred care resources we have commissioned screened of only of Candour and refeaths and complisted scleenschard resources. We have also ensure that the content of the conten | The paused cohort of Compassionate Communistance staining was delivered along with<br>an additional cohorts one sechered as off the 4 chorts intermedia. An early start to<br>exploring the train the trainer model has been made but further exploratory work is<br>required. When we also contributed to the Scottal forecomment led deep the review of<br>JAC, education needs across Scotland education, social care and health staff.   |
| 8. Workforce              | 8.1                                   | SS12 NMAHP   | We will deliver 4 events and 3 Personal Outcomes Network (POR) workshops. We will co-produce 3 educational<br>resources, commission a decutational eventperients as well as identifying needs specific to the health and social<br>care workforce to enable them to support unpaid careers.  | outcomes network events   | Practice session for Carers Centre Staff<br>and explore the potential for Carer<br>Centre Training Officers to become<br>facilitators of Values Based Reflective<br>Practice sessions  | above celebrations of carers in<br>collaboration with carer<br>organisations, third sector<br>organisations and unpaid carers.   | Increase health and social care workforce<br>knowledge – develop an educational<br>resource showcasing the variety and<br>possibilities of short breaks for unpaid<br>carers   | Green        | Personal Outcomes Network online workshop was held in June.  | Green        | Personal Outcomes Network event held in Perth with floous on reporting impact of Grussing personal outcomes approach in unpaid cares settings. Approx 45 participants in RON event. VBBP pilot for carer centre staff - Q&A and taster sessions have been held and a face to face pilot session is scheduled for Quarter 3.  | een         | Following feetback the three modules were revised and there will now be four deviewed. These recurrently height getter four to bunch at a behavior on 2.3 annuary 2024. Due to staff scheness the 2nd webhar input we cancelled and their intended presentation converted to a learning resource for wider distribution.   | Short breaks conference event hosted by NS with successful engagement from care<br>organisations, cares and multiple stakeholders. Noted final Personal Outcomes<br>Networks (PON) event with full attendance and successfully transferred the<br>coordination role to the Allance.  |
| 8. Workforce              | 8.1                                   | 332J (MAAN)  | Year 1-Solpect to funding, the quality of the NAMAPP (Nursing, Midwifery & Alled Health Professionals) practice<br>learning environment with 6 developed and maniferancel by the PEP (Practice Education Statisticans)/CHET (Earled<br>Home Education Facilitations)/PEP (Practice Education Leash)/PE (Practice Education) infrastructure. Evidence<br>Home Education Facilitations)/PEP (practice Education Leash)/PE (Practice Education) infrastructure. Evidence<br>Home Personal | improvements are agreed and sprint<br>work is planned.<br>An action plan has been developed to<br>increase student feedback via the   | and the infrastructure in place to  youpport it. To produce a report with  any recommendations based on  findings. To see an increase in student feedback  rate via the DMPE system from 34%  to at least 50%.   | of work in Q2. Dependent on<br>outcomes of Q1 and 2 work   | To have maintained and further enhanced the quality of the learning environment.   | wren '       | The Practice Education Landscape review is underway. A scoping review of the NM<br>barring environment is complete and dear analysis is no progress with a further<br>review now in progress. The NM senior education team are implementing the<br>working with Plearner providers. A NM interactivation is being markstander and<br>continues to be supported via robust support mechanisms. Initiatives underway<br>include. ANY constitution underway registing how AMPs will manningful contribute<br>to the practice starning environment review. 36 agreed funding to support the<br>bear submitted join to understate the CRI, audit this viayer requirement of<br>development of audit tool for section 3 and 4. AMP PMS. Stateholder Group<br>working to agree process that sees equalised sictifiation of placement week<br>requirements for all professions across NMS scotland's health board with NMS<br>playing a lay price in determining apportunement of placement week. Work under<br>Scotland health boards and HEIs delivering AMP programmes in Scotland. | uren         | The Practice Education landscape review for NM is now complete and the report is in draft.  Student Receiback rates via CIMPLE are now 36.8% which is an increase of 2.8% since Quarter 1. As per Column M work continues to improve student Rechark rates in collaboration with placement providers. And work propriesing suppervision and insist with forthcoming PCX prespectation guidance, such underly to develop miss with forthcoming PCX prespectation guidance, such underly to develop and the such control of the providers of the provid |             | The Practice Education landscape review is now complete and the report has been approved by the National Strategic Group for Practice Learning perioding a couple of more amendments (Idolaning technical from the Scottich deverment). Chef flavining experience of the Strategies of the Conference of the Conference of the Strategies of the | For nursing & midwlery, the quality and further enhancement of the learning environment has been maintained through the CMIRE yestern maintenance and development. This work will continue into 2021, ther engageness with the CMIRE updates.  Subsett Republication of the PREFECTION of the PREFECTION of the previous quarter updates.  Subsett Republic will be the previous properties of the previous properties. Subsett Republic will be the previous properties of the previous properties of the previous properties of the previous properties of the properties of previous properties of the properties of previous properties of the properties of t |

Page 6 of 11

|                 |                               |                                       |  | •  |  |  |  |  |              |  |              |  |              |  |               |  |
|-----------------|-------------------------------|---------------------------------------|--|--|--|--|--|--|--------------|--|--------------|--|--------------|--|---------------|--|
| Recovery Driver | SG ADP<br>Action<br>Reference | NHS Board<br>Deliverable<br>Reference | NES<br>Directorate                                   | Deliverable Summary  | Q1 Milestones  | Q2 Milestones  | Q3 Milestones  | Q4 Milestones  | Q1 RAG Statu | Progress in Q1   | Q2 RAG State | us Progress in Q2  | Q3 RAG State | us Progress in Q3  | Q4 RAG Status | Progress in Q4   |
| 8. Workforce    | 8.1                           | 5531                                  | NMAHP  | We will continue to progress the recommendations from the Scottain Government Healthcare Support Worker<br>(HCSW) commission in respect of career pathways, ericulation routes and education preparation for Healthcare<br>Support Worker relate and deliver Support Workforce Virtual Learning Week, in conjunction with colleagues in the<br>NES workforce directorate.  |  | Continuing to implement HCSW<br>Development and Education<br>Framework and introduce and support<br>Boards to use the Medicines<br>Administration Framework.   | Oelver HCSW Virtual Learning Week<br>(2-6 October 2023) and continue to<br>progress recommendations from<br>Scottish Government regarding career<br>pathways and education routes.   | Delivering achievable outcomes from the MCSW Commission to report to Scottish Government.  | Green        | HCSW commission workplan has been confirmed with Scottish Government and will include the development of a knowledge and skills Transwork for healthcare scientists at caree these Jet. 2 The HCSW Medicine Administration Transwork was published on 21st, June and supporting education resources are under development.   | Green        | Medicines administration framework online launch event held on 23 August 2023.<br>Educational modules and support materials developed and will be available late<br>autumn. held factosions have taken place re how to take forward phase three of<br>the HCVD commission focusing on healthcare science level 2-4 roles. Three new<br>specialist teads (one fall time and 2 part time) now in post on secondment till end of<br>March 2024, funded by 5G to progress commission activities.   | Green        | Support Workforce Online Learning Week delivered 2 - 6 October 2023. All session recordings and career stories available on NES You Tube. Education programme to support the Medicine Administration Framework is available on Turas Learn and was officially launched at an ordine event on 14 December 2023. Review of estant policy documents including healthurse support Worker (PICSVI) Code of Conduct, Code of Practice and Induction Standards is progressing via working groups. Reference Group established and most to take forward work in respect of the Development and Education Framework for healthcare science level 2-4 roles. Scoping work continues around career pathway and education routes with options paper being produced for Scottish Government.  | Green         | The Development and Education Framework for Healthcare Science level 2.4 Support<br>Workers has been published following period of consultation with stakeholders.<br>An options appriad at career pathways and education to support the assistant<br>practitioner role (mursing) and articulation into the nursing undergraduate degree<br>programmeh has been completed and the pager submitted to Scientific Advanced<br>reconsideration.<br>Review of existant policy documents including HCSW Code of Conduct, Code of Practice<br>and Induction Standards has been completed and report with recommendations<br>submitted to Scotish Government.   |
| 8. Workforce    | 8.1                           | 5532                                  | NMAHP  | Develop and float career and development resources targeting persignative, duals and traums career publishings to promote such pathways, workforce pipelines for recruitment and retention, responding to national acuse arrows and workforce receiver receiver and workforce industrion places of earlier and offer 2 arrows and workforce receiver receiver and earlier and earlier and offer 2 anational declarational events, publish a revised perioperative educational and development framework; collaborate and develop a graduate apprenticeship Operating Department Practitioner programme; evaluation of major trasuma educational framework.   | endoscopy - Confirm and award GI endoscopy on - medical places. Commence evaluation of GI endoscop groupmane. Commence evaluation of GI endoscop development framework.  Longitude of GI endoscop endoscopy - To receive confirmation of Hunding for non. To agree extension of existing contract for eclivery of academic and skills programme. To open recruitment for identification of learners.  Perioperative - To commence planning and stakeholder engagement for review and update, perioperative career and development framework.  General Assesthatic (GAI) Operating Department Practicoper (GAI) operating positive priority need for GAI. ODP routes, informing the current review of | and awar Gl endoscopy non-medical places.  Commence evaluation of Gl endoscopy programme. Commence update of Non-medical endoscopy career development Teamwearts.  Non-medical cystoscopy - To award Non-medical cystoscopy - To award Non-medical cystoscopy places, based on national walfills times and service needs. To ensure skills and simulation elements of control can be provided by external provider. To continue data progression capture/learner | stakeholder engagement for update on<br>on-medical redoccopy career<br>development framework and move to<br>retitle for final publication.  To plan, promote and deliver a<br>national audience for Giendoscopy<br>non-medical event.  To liaise with hourds supporting<br>current learners and evaluate progress<br>of a for diverse is enter entry.  Perioperative - To deliver a national<br>Makaif perioperative event.  GA ODP - To have completed tender<br>requirements and awarded contract<br>for delivery, to have consolidated on<br>the consolidation of the contract<br>for delivery, to have consolidated<br>to delivery, to have consolidated | endoscopy programme review. Abbish<br>updated endoscopy career pathway<br>(flormerly framework). Complete reporting<br>on progression fadil, of endoscopy<br>learness to programme board, alignment<br>(2021). To summarise and report on<br>flordings.<br>(2021). To summarise and report on<br>flordings.<br>Annual confirm facility of the<br>learness of the confirmation of ongoing service<br>needs for entry part entere color.<br>Perceperative - To confirm final version of<br>reviewed perceptrates framework, for<br>publication. To mobilitie accepting a<br>communication play, using with Marky<br>work the enter and NOS Socialised accepting a<br>service of programme and the Socialised accepting as<br>workforce and service supposition of<br>GA ODP - To have external provider agreed<br>GA ODP - To have external provider agreed<br>GA ODP - To have external provider agreed<br>GA ODP - To have external provider agreed<br>CA ODP - To have agreed<br>CA ODP - To have a<br>CA ODP - To |              | increased demand for non-medical endoscopy course in 2023 with 9 places searched. Austing funding confirmation for a potential 5 subditional places to support service needs. Evaluation of electropy programms in underway. Questionnaires developed and distributed. Stakeholder interviews scheduled for QL. Explostratory work into career development pathway revisions has begun. Funding hay yet to be agreed for an additional cystoscopy cubnot impacting exercitions. All set finding offers has been made via CSD, however discussion required with MSS finance. Provisional agreement with NEI to deliver, if lyther finding agreed. The refringer little all settlements are sufficiently and the companies of the control of the companies of the c | Amber        | Non-medical Cl endoscopy - The additional funding agreement has been confirmed for Gl non-medical endoscopy. Final recruitment Cored with a total of 3 pinces. All teachers are stated to the COU models and have commenced study. Evaluation of the endoscopy programme is ongoing. Good response rates and engagement noted from questionaire results and state-holder interviews. All exquired data gathered, transcribed, coded, and currently undergoing thematic analysis.  Carer development pathway previous work has began, but Tell Working Group without the contraction of the properties of the programment o | Amber        | Non-medical Gl endescopy: Framework: Sakeholder group established: Includes key representatives from service, Glinical and education. First of there metings held. Draft revisions in progress. Event - "Save the dark" flyer distributed to malling list. Provisional programme developed. Agreement securet from celerant jospaker. Evaluation: No non-mure applicants to non-medical endoscopy current cohort. Draft of wider non-medical endoscopy theory programme evaluation compilet. Perioperature of a security of the security of th |               | Evaluation of the non-medical endicatopy education programme is complete. This was used in QUD to Inform the extendering of the educational contract said as a foundation for the career development framework revision. The updated endocyon practice development framework revision. The updated endocyon practice development framework revision. The updated endocyon practice medicatopy education in reversible, announced at the annual endocyon pericular over 17/12/12 and distributed via internal and external commission networks. The endocxopy data monitoring and progression reporting process in now well established, up of each end continues to inform strategic decisions/stakeholder needs ongoing.  Learner progression aummaries for non-medical cystoscopy are now complete. Initial pilled of the cystoscopy programme has concluded for intheir funding currently agreed for a future cohor, of section-anial establishment to key regional network/Service managers and training leads to map service/workforce needs for any future cohorts. Publications of the revised Perioparative Framework.  Publications of the revised Perioparative Framework with be delayed into Q to 472/55 to estable alignment with the publication of the overarching NMAMP Development Framework.  Publications of the revised Perioparative Framework with publication of the overarching NMAMP Development Scriffund (SOs) is dusting development group industive of MSs and service representatives—justification design/generative translation groups, aim for delayer, readiness September 24. MS facilitating/supporting SOS / Scritish Funding Council who commission this pilot. Potential risk for Boards recruiting candidates to required timeline.  |
| 8. Workforce    | 8.1                           | 5535                                  | 5 NMAHP  | Deliver a minimum of 300 Scottsh Multiprofessional Maternity Development Programme (SMMDP) courses for<br>approximately 3000 maternity and relevant pre-hospital health and care staff by Mauch 2005: Year 1; a minimum of 100 Courses for postmantally 2005 staff, with 40% of course provision prioritised for reconstal resuscitation and obstetric emergencies (core mandatory training).  | apprenticeship requests.  Deliver a minimum of 25 courses for approximately 300 staff, with 40% of course provision prioritized for meonatal reasons. Edition and obstetric emergencies (core mandatory training   | engagement informing plan for a GA<br>ODP route including collaboration with<br>Deliver a minimum of 50 courses for<br>approximately 600 staff, with 40% of<br>course provision prioritised for<br>neonatal resuscitation and obstetric  | Deliver a minimum of 75 courses for approximately 900 staff, with 40% of course provision prioritised for neonatal resuscitation and obstetric emergencies (core mandatory training).  | with developed programme ready for go<br>ble and recruitment of a 2002 cohent. To<br>have resources and systems in pace to<br>Deliver a minimum of 100 courses for<br>approximately 1200 staff, with 40% of<br>course provision prioritises for neonatal<br>resuscitation and obsteric emergencies<br>(core mandatory training).   | Green        | Q1 delivered 46 Scottish Multiprofessional Maternity Development Programme SIAMOPJ courses for 475 maternity and relevant pre-hospital are staff, with 82% course provision prioritises for neonstall resocitation and obstetric emergencies (core mandatory)  | Green        | Counter 2 delivered 31 (total to far is 71) Scottish Multiprofessional Maternity  Quarter 2 delivered 31 (total to far is 77) Scottish Multiprofessional Maternity  Development Programme (SAMDP) course for 381 (total to far is 783) anternity  and relevant per loopstal face stat, all with 77% course provision profitted for  reconstal resuscitation and obstetric emergencies (core mandatory).  | Green        | Support on Jene teeling and informations and gaineding or terrelated for investion studies and section of the Meesand's Indiagn distributions and section of the Per reviews of other regions begins February, and the foreign in the property of the Personal Control of the  |               | Q4 delivered 39 (total for this year is 151 exceeding the target of 100) Scottish Multiprolessional Maternity Development Programme (SMMDP) courses for 27 (total for this year is 15% exceeding the target 1020 on learning and elevant per-knoptial care staff, with 77% course provision prioritised for recental resudcitation and obstetric emergencies (fore mandatory).   |
| 8. Workforce    | 8.1                           | 5537                                  | NMAHP  | the health and care workforce who work with children and young people in Scotland. This provision will<br>recognize, respect and promote children's rights. Year 1 - a minimum of 8 activities, sessions or resources will be<br>provided.   | resources for the children and young people's workforce by quarter 1.  | Have provided 4 activities, sessions or resources for the children and young people's workforce by quarter 2.  | Nave provided 6 activities, sessions or resources for the children and young people's world force by quarter 3.  | Provide educational activities, training and/or resources to support the conflicting professional development of the health and care workforce who work with children and young people in Scotland. This provision will recognise, respect and promote children's rights. By quarter 4, a minimum of 8 activities, assigns or resources will have been provided.   | Green        | During quarter 1, their webiners were delivered "Perinatal and Infant Mental Health - Suicide (150 attenderes) and Standing Before Birth (121 attenderes). A third  webbar "treast Feering and Medication (150 Appeightered) is kindledded for  Webnesday 28th June. Webhar feetback is positive and is informing plans for  Webnesday 28th June. Webhar feetback is positive and is informing plans for  declarational activities during quarter 1. In addition, planning in progress to deliver  four regional learning events for the health visiting and school nursing workforce.   |              | During Quarter 2, two webrass were provided (the total so far is fire webrass) for<br>the maternal, children 8 young recope's workforce, one focused on trauma<br>informed practice when working with orbiter and young people (800 statendes)<br>and the second on paediatric pallistive care, berewement and loss (259 attendees)<br>feedback from attendees remain positive with evaluations continuing to inform<br>future plans.  | Green        | Four online regional learning events were designed and delivered during Quarter 2 for health visitors and school nurses across Scotland. There were £1.6 participants in total and feedback will be used to Inform new years harming activities. The webbins reprice, designed for those working with women, children, young people and families, continues to receive high levels interest. During Quarter 2, four websins were provided to 1,5 totals attendees. There have been nine webinars so far this year with attendee numbers totaling 3.744, which exceeds our target. We receive an average of 21% evaluation returns.   |               | A range of activities and resources have been completed this year to support the continuing professional development of the health and care workforce who work with children and young people in Scotland. The webtiars series was wedly communicated with high level interest across professions and sectors throughout the year, most actively during the first there quarters. A total of 3764 colleagues engaged through 5 webtiars which evaluated positively, 4 contine regional learning events for health visitors and school nurse ware delivered during quarter 3 on 545 participants; in addition, a community of practice for alleed health professions has been active this year and now has 500 members. Specific Cultifer's right soweress sessions and websiars were led with professions has been active this year and now has 500 members. Specific Cultifer's right soweress sessions and websiars were led with the community of the com         |
| 8. Workforce    | 8.1                           | 5503                                  | NMAHP  | Year I Subject to funding, we will reflesh the Mental Newblit Improvement & Suickée Prevention (SP) Koowledge<br>and Sills Framework, review at least 1 of uniformed/skilled new resources Based on the recommendation of<br>the review conducted in 2022/23). We will also ensure the resources support inclusion of the 'lat risk' population.<br>We will also ensure the resources support inclusion of the 'lat risk' population. We will develop and provide a<br>maximum of 4 masterclasses to the mental health, social care and wider public sector workforce.   | Review recommendation from the<br>evaluation of the knowledge and skills   | Plan masterclasses for delivery in Q3/4<br>Progress against agreed actions<br>Engage with stakeholders relevant to 'a<br>risk' groups to initiate work to refresh<br>the informed/skilled level learning byte  | Progress against agreed actions<br>t Continue work to refresh  | Deliver masterclass 4 Deliver refreshed/revised learning resource focused on needs of at risk group  | Green        | 2st Masterclass delivered as planned in Q1.  | Green        | Matterclases planning progressing is per plan. Refresh of the KSF framework commenced. Review of health inequalities learning resource to commenced with a flour supon/inclusion at risk' populations.   | Green        | Second Matterclas delivered. Third Matterclass planned in Quarter 3 for delivery in<br>Quarter 4 Work ongoing and progressing in relation to the Knowledge and Skills<br>Framework refresh. Health Inequalities review and development of learning resources<br>supported by a co-production approach progressing well.  |               | Final masteriates has been delivered which focused on public health/finequalities. A<br>series of about recourse have been developed which aim to support people to use the<br>knowledge and skills framework through sharing examples/stories of how it has been<br>used in different situations. A co-production approach has been used to develop<br>materials focused on social determinants and inequalities. These will be embedded into<br>new, or existing, education resources in 2024/2025.  |
| 8. Workforce    | 8.1                           | 5507                                  | NMAHP  | Undertake an impact evaluation of the Dementia Specialist improvement Lead (DSIL) and Dementia Champion programme upon the health and social care workforce.   | Pausing of the DSIL and Dementia<br>Champion programmes will occur to<br>support an impact evaluation. Prepare<br>for impact evaluation.   | evaluation and wider dementia<br>education workforce resources. Wider  | impact evaluation results. Wider   | Prepare final impact evaluation report out<br>Ongoing delivery of workforce education<br>from DSIL programme depending upon<br>workforce need/availability will be<br>supported.   | Green        | DOL programme paused. Dementia Champion programme contract not extended.<br>Programme paused. Impact Evaluation development in progress. Education<br>sessions planned to support workforce need in Q2.  | Green        | External evaluation has been commissioned. Anticipated that this starts week commencing 2 October. Initial discussions and refining of survey questions underway.  | Green        | Initial survey phase of evaluation complete and interim report produced. Interviews and B flocus groups commenced. Meeting arranged for end of January 2024 with NES taskeholders for feedback of final results, findings ahead of final report and recommendations.   | llue          | Final draft of the evaluation report has been received from the supplier along with two<br>short summaries (since for the Dementia Champions programme and one for the<br>Dementia Special timprovement Leads programme). The report highlights the main<br>findings as indicated by the participants and it outliers be conditions receively for the<br>programme and programme of the programme of |
| 8. Workforce    | 8.1                           | 5508                                  | S NIMAHP   | We will design, develop, and einher a kerning resource for in-genom or digital for-to-for-facilitation to further extend engagement bill, and reach of, education and training to support health and social services workforce development at the Stilled Level of the Promoting Excitence Framework. Year one—develop a facilitated skilled level of the Promoting Excitence Framework. We not one—develop a facilitated skilled level of the Promoting Excitence Framework. Year one—develop a facilitated skilled level resource which combines improving Practices Skilled Level and Scensible of Psychological face to respond to workforce service and learning needs, and to any educational gaps and priorities arising from the upcoming Dementia Strategy and Dementia SGN (Scottah Intercollegiste Guidelines Network) guidance | questionnaire currently distributed to<br>advise on design/development phase   | Orgoing design and development of resource.  | Ongoing design and development of<br>skilled level resource, engagement<br>with stakeholder and approaching<br>some beta testing.  | Design and development phase complete with potential to approach year 2 for testing.   | Green        | Poolite return to skilled level wordforce overlicenseur. Dementis Stortegy now<br>bounded 31st May 2022 Progress continuing a planned annual five design and<br>development of the skilled level resource. No further update received around<br>additional funding proposal at this time.  | Green        | Feedback from workforer has been sought via survey and focus groups (370-<br>people) to help inform resource devolopment and associated implementation<br>report. Themes from feedback have been analysed and will inform content, which<br>will be developed by mid November 2023.  | Green        | Content finalised for training package and 3 pilot sites identified via DDII, (Dementa Gopcalath Improvement cash) network - testing will commence in January 2024 and be evaluated by March 2024.   | Green         | The first terration of the Year to Skilled demensive education programme has been developed and has been tested in a small number of test tales. This has generated very helpful feedback and data about both the content and method of delivery. This data will be used to inform a social section of the materials in 2024/2025 and to continue to gain a better understanding of what support, infrastructures and/or conditions are required to support the delivery of the materials and to achieve intended outcomes.  |
| 8. Workforce    | 8.1                           | 5509                                  | NMAHP  | Develop a minimum of one education resource on neurodiversity at the informed level of practice for the wider<br>ANP workforce and undertake 1 x scope of fearing needs of the specialist neurodevelopment (ND) AHP<br>workforce.  | Engage with stakeholders to initiate scoping work. Review existing relevant, education resources   | First dark of Informed level resource produced<br>Scoping ANP ND workforce   | Report on learning needs of specialist.  NO AHP worforce   | Deliver informed level ND education resource for ANPs  | Green        | In Q.1 the Psychology Directions has done a learning needs analysis across the window workforce freefers the APP specific data is being estanted from that on the distribution workforce freefers the APP specific data is being estanted from that or the distribution of the APP specific and the specific across the APP specific and the support tearning.   |              | Feedback has been received from key AVP partners regarding learning resource(s).<br>This is in the process of being incorporated as flow resources to be brought to completion.<br>Evaluation of the sarring event in Quarter 1 has allowed the planning of a<br>proposed webinar planned for October 2023.  This quarter there has been continued work with stakeholders to continue to<br>establish the network of specialize AVP workforce involved in neurodevelopmental<br>work and a development plan for a community of practice has been produced<br>who provides the produced of the process of the produced<br>with Psychology learn.  | Green        | National webmar delivered and updated on TURAS Learn. National Neurodiversity leads of<br>group in progress with plans to meet early in Quarter 4. Final draft of informed learning<br>resources complete.   |               | Final checks to resources being made before uploading to Turas. Further webhars also in the process of being uploaded for public viewing on Turas (planned in conjunction with NES Psychology categories).   |
| 8. Workforce    | 8.1                           | 5598                                  | 3 Dental   | Provide access for up to 8 dental care professionals (DCPs) to upskill and be registered as an Orthodontic<br>Therapoist and support high quality frontine care.   | Commence recrutiment process for<br>next programme   | Undertake practice inspection visits and interview process   | Recruit trainees to the programme<br>and agree programme   | Registered DCPs meet requirements of<br>the GDC, towards eligibility to register with<br>GDC in a new professional category as an<br>Orthodomic Therapist.   | Green        | 8 trainess currently understailing programme and progressing well towards<br>preparing for RCSEd summative assument in Q3.   | Green        | B trainers currently undertaking programme, progressing well. Passed gateway<br>examination for RCSEd summative assessment in Quarter 3.   | Green        | 100% of the 2022-32 cohort successfully passed the Royal College of Surgions (RCSEd)<br>commandle assument in Quarter 3 and have therefore achieve the RCSEd Diploma is<br>(Dribodonic Therapy (DT). They will now progress to change their registration category<br>with the General Destrit Council (BOD Col) practice as a Orthodonic Therapist. 37<br>applications received for the 2024-25 OT programme. 15 candidates shortfolded.   | öreen         | 100% success rate with 2022-23 cohort and from the 15 shortised 11 participaints will commence on the next programme due to start in May 2024.   |
| 8. Workforce    | 8.1                           | 5890                                  | NHS Scotland<br>Academy,<br>Learning &<br>Innovation | Further develop the NMSSA learning environment to meet the needs of mixed model educational delivery for inclusive technology enabled learning (TEL) both in situ and at distance. Includes an environment supporting simulation based education for mixed discipline staff with varied levels of development exect. The physical environment within G1 includes the creation of a staff and simulation certire, ultrasound training comm and an endoscopy training room. The digital environment within NSI includes the use adjustment of the staff and appears that support user centered design and integrate with other parts of the staffs and education system in Socialists.   | skills and simulation centre to be<br>appointed and start work in Q1.<br>Continued development and use of<br>digital systems to support user centrer   | Activity delivered from the ultrasound<br>rooms and skills and simulation centre<br>by the end of this quarter.  Continued development and use of<br>degligal systems to support user centred<br>degligal systems to support user centred<br>to support Assistent Practitioners in<br>periopertive practice launched.  | training room will be this quarter.  Continued development and use of digital systems to support user  | Troubleshooting/inagging of new spaces will be complete.  Continued development and use of digital systems, to support user centred design within NES.   | Amber        | Work began on skills and simulation centre. The Ultrasound rooms are progressing well and should be in use by the end of July 2023.  | Amber        | Activity is being delivered from the ultrasound rooms by the end of this quarter as<br>planned, but delivery of the skills and simulation centre is delived into Quarter 3.<br>Continued development and use of digital systems are supporting user centred<br>design within MES. Eportfolio to support Assistant Practitioners in perioperative<br>yractice is in use.  | Green        | The milestone to complete the skills and simulation centre has been met.  The work on the endoscopy rooms is scheduled, with the revised entry date to the Training Room the end of March 2024.  Digital learning solutions within NES continue to be used by learners and educations, and we remain engaged in improvement work on user centred design.   |               | The skills and simulation centre is now in use.  The work on the endoscopy rooms is scheduled, with the revised entry date to the<br>Training Room now likely to be lay 2024.  Digital learning solutions within NES continue to be used by learners and educations, and<br>we remain engaged in improvement work on user centred design.  |
| 8. Workforce    | 8.1                           | 5891                                  | NHS Scotland<br>Academy,<br>Learning &<br>Innovation | Deliver much of the National Clinical Skills Programme for Pharmacists (independent Prescribing for Community<br>Pharmacists).  At a delivery partner of Dundee Institute for Healthcare Simulation to ensure adequate numbers of places are<br>provided in Sociated.  Ensure course materials and resources for National Clinical Skills Programme for Pharmacists are available and<br>reseast.  An dependent faculty to deliver programme within NHS Sociatinal Academy at NHS Golden Jubilee site to<br>share the ourchical of delivery.  Deliver around four days of clinical skills training days for 11 months, with 12-15 learners a day, creating 528 –660<br>learner places.   | each quarter, over 4 days most month:  | Deliver around 132-165 learner-places each quarter, over 4 days most months with 12-15 places each day.  |  | each quarter, over 4 days most months  | Green        | On track with delivery as planned in Q1.   | Green        | On track with delivery as planned in Quarter 2.  | Green        | On track with delivery as planned in Quarter 3.  | Green         | On track with delivery as planned in Q4.   |
| 8. Workforce    | 8.1                           | 5666                                  | Technology   | analysis and reporting of data. This includes quarterly publication of Official Statistics for the NHS Scotland<br>Workforce   |  |  |  | e Publish quarterly statistics in Q4 for the NHS Scotland Workforce.   | Green        | Published NTC employment data as MI  | Green        | Announced publication of National Treatment Centre (NTC) employment data as experimental statistics.   | Green        | Three GP publications published. G   | Green         | Publication of Official Statistics   |
| 8. Workforce    | 8.1                           | 5404                                  | Medicine   | Desirbution of agreed Additional Costs of Teaching (ACT) funding (circ a Zifer p. 3, b) to 3 NHS Boards across Costand performance manage Board in his rus of Medical ACT funding to secure efficient and effective use of funds for crinical training of medical Undergraduates (approx 5500 over 7 Medical Programmes) within health cure setting, in Scotland.  | Health Boards outlining their recurrent  | First round of Medical ACT proposals to<br>hould be received by Boards. Not<br>to attend Regional ACT Working Groups<br>(RAWGs) to review bids and provide<br>approval if appropriate.   |  | Distribute Medical ACT to 19 Boards across Scotland.   | Green        | The Additional Allocation letters were issued to Boards in April, earlier than in<br>previous years.   | Green        | NES Medical ACT representatives attended RAWIGS (Regional ACT Working Groups)<br>for all regions and SociGGEA. Bids were submitted by most bloods and reviewed and<br>responded to by the Medical ACT team. All PIGIs have been issued in a timely<br>manner to provide agreed funding to Boards.  |              | NES Medical ACT (Additional Costs of Teaching) representatives attended RAWGs<br>(Regional ACT Working Grough) for all regions and scottled Ricotthis Graduate Entry<br>Medicine). Additional regional bids were submitted by Boards. Bids for national sipages<br>have been received by some Boards. All bids were reviewed and responded to by the<br>Medical ACT team. All POBs have been issued in a timely manner to provide agreed<br>funding to Boards.   | inie          | As per request from Scottish Government remaining Medical ACT funding as al. Alan was<br>returned to SG due the current financial cinates. Stakeholters were informed. Alb look<br>received from Health Boards reviewed and money sent to Boards as appropriate. This<br>closes the cycle for 23/24 Medical ACT funding.   |

Page 7 of 11

|               | NES 2                         | 2023/                             | 24 Aı                          | nnual Delivery Plan - Quarter 1, Quarter 2, Qu  | uarter 3 and Qua   | ter 4 Update Po   | sition  |   |              |  |             |  |              |  |              |  |
|---------------|-------------------------------|-----------------------------------|--------------------------------|---|--|---|---|---|--------------|--|-------------|--|--------------|--|--------------|--|
| Recovery Driv | r SG ADP<br>Action<br>Referen | NHS Bo<br>Deliver-<br>nce Referen | ard NES<br>able Direct         | Deliverable Summary   | Q1 Milestones  | Q2 Milestones   | Q3 Milestones   | Q4 Milestones   | Q1 RAG State | us Progress in Q1  | Q2 RAG Stat | us Progress in Q2  | Q3 RAG Statu | s Progress in Q3   | Q4 RAG Statu | s Progress in Q4   |
| 8. Workforce  |                               | 8.1                               | 5576 Dental                    | Dental Additional Costs of Teaching (ACT) funding provided to 3 Health Boards: NHS GGBC, NHS Grampian, N<br>Tayside. Undergraduate dental training provision also funded for Aberdeen Dental School.  | HS Periodic Performance Reporting to<br>ensure delivery of requirements and<br>within budget   | Periodic Performance Reporting to<br>ensure delivery of requirements and<br>within budget   | Periodic Performance Reporting to<br>ensure delivery of requirements and<br>within budget   | Distribute Dental ACT to 3 health boards.   | Green        | Revised ACT Reporting proforms templates being developed   | Green       | New proposed reporting templates developed and cascaded, meetings held with<br>regional NNS Board and Dental School staff.   | Amber        | Awalting receipt of internal audit report on NES's ACT and Outreach funding process-<br>initial verbal feedback suggests that current processes are deemed to be in need of<br>revision and improvement which may take time to implement.  | Green        | Auditor report formally received by NES and being evaluated for required actions. Early<br>assessment indicates that although progress has been made with reporting processes<br>these require further work. This work will continue in 2024-25.   |
| 8. Workforce  |                               | 8.1                               | 5539 Workf                     | Deliver HR Proposition and Model; employment status project; recruitment, and new ways of working (NWo programme to ensure HR delivery is efficiently, accurate, reliable and customer focused.   | Delivery of first Phase HR Proposition     Scholer of First Phase HR Proposition     Scholer of Proposition     Scholer of Proposition     Recruitment - transfer of in-scope     work to Earl Region Recruitment     Service (ERISC)     - NWOW - data gathering approach     Identified and linked to property     requirements  | Plan next phase of HR proposition<br>Contingent worker - dentify and agre<br>NWOW - deliver of any relevant RR<br>activities for line managers and<br>wellbeing   | implement next phase activities e<br>Contingent worker - implement new<br>town and the contingent worker to PID<br>WWW - refer to PID   | Plan ned phase of activities<br>Confingent worker- embed new<br>leaves of the PIO<br>WWW-refer to PIO   | Amber        | Recruitment and NWOW are green. HR Proposition amber. Proposal communicate in HR and progressing through consultation which has been extended. Seeing Communication which has been extended. Seeing Communication which has been channel data. Data Governance structures and data synthesis and proposed in a communication of the seeing communication of the complexity of the data.  |             | NR Proposition amber. Eay deliverables on process and workload roviews completed and will feed structure review. Until that is complete the timeline for delivering the complete the timeline for the process of the complete the timeline for the process of the complete the timeline for the process of the complete the process of the proposition of the implemented before focus can move to Phase 18 of the HR Proposition.   | Amber        | Progession with OD proposals and Regile Impact Assessment continues. Until that is complied the timeline for delivery of the changes cannot be confirmed, 8900W Green-consideration and approved. Property 2014 Economistion process commenced 11/1/2/3 to run until 22/1/24. Communications schriften implemented in December 23 and feedback mechanisms for staff and read eulous/professional organisations established, Contingent Worker Green - data gathered and report prepared for Feb 24 Board approval readermeding a way forward for management of contingent workers commencing April 24  | Amber        | HR Proposition: Following rebaseline of delivery plan Phase 1 actions are underway to populate interim structure at serior leadership team level to include 5 serior Specialist experiments of the proposition of the proposit |
| 8. Workforce  |                               | 8.1                               | 5544 Workf                     | Produce education and fraining resources, working with partners, for health and decidi care staff on equality deciding the production and human rights, whilst internally enabling NES to embed equality and human rights cert  | Learning Needs priorities agreed and being progressed  | Resource in development, training being delivered, Turas Site improved, Employment E&D monitoring actions progress: Review of NES Equality Outcomes to align with strategy  | Cultural humility resource launched.  | Launch of new essential learning module;<br>Statutory requirements met and<br>progressed.   | Green        | SIMG a place for exsential barning modula and darf learning outcomes develope<br>in inform content development in 2.5 exaction offered may and lune to support<br>staff consider learning activities to meet corporate objective. Speaker<br>commissioned to deliver a session on earl-scaline for KIS and Development<br>Session in June. Session for LM Network in June on anti-raction. Two sessions<br>delivered for OF Trainers on inequalities in medical education and one session for<br>NES Lay Advisors.   |             | First dark of ESD Essential Module croulated to working group for comment.<br>Bereiver of TURNS content planned. Size Squality outcome reviewed with Beds and<br>plans for any revisions in place via Committees. RBD Employment monitoring being<br>lasten to Staff Governance Committees to Neverbere 2023. Plass underway for ani-<br>racions training for line managest. Content contributed to Cultural Humility digital<br>resource and direction provided via working group (Chaired by Azademy). Working<br>with NHS GGBC on joint work for a learning resource on LGBT Qx-                            | Green        | Cubural humility module banched by the NGS Scottined Academy and a new Yote for Scottand Introduction to Equality, Densive and human Right module baunched. Achievation training has been delivered to over 100 line managers in November and Occember and will continue into QL Mid Ver report approved by Committees and the Board in November, including our annual workforce equality statistics which are now published on one websit. New content on equality and reclusion published on NSV subsibilities on one without the content of the Scott and published on NSV subsibilities of the NSV subsibilities | Green        | nelst action training some provided to approx 200 line managers in NES and this training,<br>has been developed for a sigilal bearing source that will be available to all health and<br>social care suff on Turus Learn by QL in new financial year. Sexual stressment for line<br>managers converted for Turus Learn by QL in new financial year. Sexual stressment for line<br>April 2024. A new network on EBD for trainers has been established, facilitated by the<br>team to share practice, world duplication and collaboration any principles for learning. Self-<br>sishing on inclusion has been developed and DPNL underway. This will be cisused in April<br>2024. Equality and themself globs Serving (once) had from amenting for current financial<br>year and work underway for end of year reports to Committee and the Board. Into of<br>Var Report to the Patriceship Forum discouscie in March 2024 and agreed to propose<br>to retain the all staff corporate objective on anti-raction, equality, diversity and inclusion.  |
| 8. Workforce  |                               | 8.1                               | 5551 Workf                     | Deliver the NES workforce plan focussing on workforce capability, training, wellbeing and development for to<br>NES workforce.  | workforce per Directorate; Secure<br>approval of Succession Planning<br>approach and commence roll out of<br>process   | Launch Succession Planning process;<br>Develop guidance to support PR&P<br>process  | Launch PR&P guidance to capture<br>skills gaps to inform workforce<br>development plan and fund   | Develop draft succession plan; Develop<br>initial themes to inform workforce<br>development fund and plan   | Amber        | IT commenced a succession planning energial destinging role in scope. This action is underway and SOX complete. Out. It was already instituted and are working with a clear group of staff in scope for succession planning. A draft succession plan will be available at end of July with a final version ready early August.   | h           | PREP Coulsance has been released to the organisation and a Workforce<br>Development Fund with a total staff spend £145k concluded.   | Green        | Launch of PREP Guidance mischone dentified for O.D. Antivend by QL. Jeny returned funds from the Workforce Development and are being redictivated among the applicants who did not receive funding in the first round, Succession Planning continue to progress with windsperprovided be IT on 17/12/20 an current statu relating to succession planning for Executive Team roles (plan a small number of other sentor leader role identified together as the 'Executive Plans' could not a small number of other sentor leader role identified together as the 'Executive Plans' country and a proposed list of additional business critical roles to form part of a second cohort for succession planning.   | Green        | aunch of RRE Guidance mistore dentified for Quistra 3 activened by Quarter 2. Any<br>returned funds from the Worlderce Development fund are being individuated among<br>the applicants who did not receive funding in the first round; Succession Planning<br>continues to pragress with update provided to the MES Securities Feem ([19] on 71/23)<br>on current status relating to succession planning for ET roles (plans a small number of<br>other senior leader roles identified together as the "Executive Plan" cohort) and a<br>proposed list of additional business critical roles to form part of a second cohort for<br>succession planning.   |
| 8. Workforce  |                               | 8.1                               | 5616 Workf                     | rice Devéb & implement a governance structure for all prioritised Programme Management Office (PMO) proje<br>programmes and the Corporate improvement Blary, debrar and report progress on Corporate improvement (CIO) and prioritised PMO projects and Programmes; increase engagement within the Quality improvement.<br>Network with staff; cellency of a monutal showcase event with a quality and improvement focus; establish bi<br>monthly meeting of a Project Manager Community of Practice.   | Plan pojects in place and operational;<br>Reporting on I/O en monthly basis in<br>place: development work on GI hub,<br>plan structure of annual show the<br>plan structure of annual show the<br>resources and engage with directors<br>on Project Management (PM) practic  | Network through QI Hub and other comms, design content of showcase event with QI network; understanging of organizational need for PM resources; promote PMO through tes other networks and gauge interest in e. PM community of practice   | staunching  | Delivery of annual coline showcase even<br>highlighting areas of work through the QI<br>and community of practice networks<br>across the organisation     | Green        | Governance in place and operational; Monthly reporting on CPP to Transformation<br>Group in place; CPI lab development with caping; planning for annual showas<br>event commenced: linked with OULL colleagues on this; development of PMO<br>resources commenced, basis set of documentation templates developed, project<br>roles and responsibilities descriptor developed; engagement commenced with<br>directorates or PM practice (PMAMPP, Medical, Dental, Worldorce, Finance and<br>Psychology completed so far).  |             | Promoted the Quality Improvement Network brough Q1 livb and other comms,<br>designed outline content of shouscae even with Q1 network. New linked with<br>directorates and group of newly qualified PMs to gain understanging of<br>organisational need for PM resource, Gamand exists; Used decreated meetings to<br>promote PMO and gauged interest in PM community of practice - demand exists.   | Green        | Promoted the Quality Improvement Network through QI libb and other comm; agreed couline content of Phousace event for QI and PM which will list picke during Learning at Work Week 2024 (May); Commenced gathering information on staff with PM kills and qualifications; Used directorate meetings to promote PMO and pauged interest in PMC community of practice - demand exists; collating information on range of PM resources and tools across organisation  |              | Governance structure for PMD and CPP in place and working robustly.  Showcase event to conicide with Learning at Work Week in May 2024. Project Management (PM) suite of resources will be launched allonguist or PMC community of practice - this will complete activity and allow closure of deliverable.  |
| 8. Workforce  |                               | 8.1                               | 5615 Workf                     | proport the healthcare workforce to practice Realistic Medicine (RM) and deliver Value Based Health & Care<br>(VBIBAC). Though the coordination of a RMI programme manager network and the development and<br>dissemination of educational resources.   | Script development for VBH&C mode<br>1 eLearning module  | lle Development of VBH&C train the<br>trainer pack; Completion of VBH&C<br>Module 1; script for VBH&C module 2  | Review and update of Shared Decision<br>Making (SDM) elearning module;<br>completion VBH&C module2; Script<br>writing for VBH&C module 3;<br>development of VBH&C<br>implementation toolkit   | n Completion of VBH&C module 3  | Green        | Script for VBHBC clearning, Module 1 drafted and with TEL for comment. Learning outcomes identified for Modules 2 & 3. Learner profiles developed  | 6 Green     | VBHAC module 1 in build stage. Additional Learning resources being developed using Microsoft Sway.   | Green        | Introduction to Value Based etearning module bunched. Supporting Sways in final draft and ready for testing (replacing the need for eLearning modules 2 & 3)   | Blue         | Launch of Sway educational resources: Introduction to Shared decision making, What is<br>unwarranted variation, WalkEc and Social care, How to measure Shared decision making,<br>Outcomes that matter to people.  |
| 8. Workforce  |                               | 8.1                               | 5402 Medic                     | Delivery of the NSS (Scotland Deanery) Quality Management Quality improvement Framework to manage are<br>improve postgraduate medical education in Scotland to ensure all training posts meet GMC's standards.  | d first quarterly update for Annual<br>Deanery Report (ADR) to GMC. Visit<br>schedule for GMC Priority visits finali   | second quarterly ADR update, visits are<br>reports according to plan; data plan for<br>sed medicine to Medical Directorate Senion<br>Team (MDST)  | annual report to Educational<br>or Governance Group, Third ADR update   | Delivery of NES Scotland Deanery quality<br>e; management framework to GMC<br>standards.  | Green        | first quarterly update delivered   | Green       | Second quarterly update delivered. Data plan for medicine underway with a project<br>plan in place, actions assigned and meetings scheduled for the coming months  | Green        | Third quarterly update delivered. Data plan for medicine underway with a project plan in place, actions assigned and meetings scheduled for the coming months. New models of quality visit reviewed at calibration day for consultation  | Green        | Fourth quarterly update delivered. Data plan for medicine underway with a project plan in place, actions assigned and meetings scheduled for the coming months. New structure for quality workstream approved and actions taken to have struture in place for August 2024. Proposed new models of review for agreed quality engagement activities in discussion with relevant sathendiders.  |
| 8. Workforce  |                               | 8.1                               | SS49 Workf                     | Committee. The 'Once for Scatland' Workforce Policies Programme began 2018/19 and an integral compone the Cabinet Secretary's single system employment programme. The Programme was passed in March 2020 efforts focused on the response to the connavirus (COVID-19) pandemic. A focused piece of work started in on the Homeworking Policy: however, the programme fill off for formally restart usilizes 2022. The part of work centimes into 2023/24 with the remaining component expected to the delivered in 2024/25. It is negles as no extradingle example of partnership worklarg.  Once for Scotland Policies Programme Board commission - to design and deliver the digital infrastructure, co and use respectivent to support the policies delivering a publicy accessible national digital platform to deliver vision for the 'Once for Scotland' Worldforce Policies Programme. | tof  esperience for the programme  #Review of all policies and support  and the programme  programm | development and join the policy<br>development group cap<br>(a development group cap<br>(a development group cap<br>(a development group cap<br>development of the fightform, contain<br>development or lading with the stage<br>of release of policies in Phase 2, includin<br>test site for you'd baund's with NES<br>Boards and Staffside;<br>development system;<br>and stage of the stage of the stage<br>(a linguist content into the content<br>management system;<br>and stage of the stage<br>and stage of the stage<br>and stage of the stage<br>and the report on performance and<br>make refinements to the platform;<br>"Repare/fulme responses to user<br>a content feedback;<br>data to report or performance and<br>to consider with the stage practices, and the<br>style guide and continues to meet the<br>Stage and amended draft policies and<br>guides to Contral Legal Office (DLO) for<br>review. | Information Network (PNI) policies (to be turned into 2") workforce policies, and 6 supporting documents per jodicy which results in crace 130 policy with the results in crace 130 policy with the results in crace 130 house of the policy of the results of the policy with the results of the policy of the policy of the policy of the supporting work of the policy of the supporting Work full Balance suite of policies. Initially the will focus on a cliciculators—amount larve entitlement, maternity beave entitlement and change in hour rec |   | Green        | Menage Guides a strike for 9 d. 10 policies tegether with succident agellutation forms; First defind process? Brow-their content, Fanual time cellulation Julius tested and demonstrated to payrol and PIOs representatives. New complete, awaiting internal setting for keep ver accuracy. Maternity leves acticulator prototype demonstrated to payrol and PIOs representatives, who gave feedback. Minor design amendments made and the calculator in one complete. Usability testing will be carried out in the next few weeks; Changing bours calculative testing will be carried out in the next few weeks; Changing bours acticulated veeloped and demonstrated to payrol and PIOs representatives. Move to testing Design changes based on leadback from current site interviews SIOs complete. Design changes based on submitting study of phase 2 prototypes completer. First draf of a policy floward #704s completed.  | _           | Test cohort of Operational Managers programme commenced in September 2023, on schedule.  | Green        | Communication based to MR Discusses and Employee Directors detailing emendments and early of the forth basel's release. This was followed up with an individual response to NRS Roard on the specific queries raised. Agreement of the Roard on the specific queries raised. Agreement of the Roard on the specific queries raised. Suggested amendment made to the NRS-Sociation Workforce Policies website Suggesting work life balance policies effective from 1 November 2023 SMB Spolicy drafts in Phase 2.2 in progress.   | Green        | have 2 claired - 10 Person of the Control (PRI) prizes to be tuned into 2" workforce solicies, and 6 are popuring sourcest par pole; with results in cit. or 152 documents to pole; which results in cit. or 152 documents to be developed and hoteld on the platform, as per base assumption. New calculator functionally with 6 eveloped to support the Supporting Work Life Balance suite of policies. Initially this will focus on three calculators – annual leave entitlement, marting view entitlement and change in hours.  Work has begun on Phase 2.1  |
| 8. Workforce  |                               | 8.1                               | 5538 Plannii<br>Corpo<br>Resou | uke.  Convention on the Rights of the Child (UNCRC): Getting it Right for Every Child; and The Promise.  Cers   | convened by quarter 1, reporting to<br>Women, Children, Young People and<br>families NES group, Children's Rights<br>reports, covering the periods 2017-2020 and 2020-2023, will be publishe<br>in response to the Children and Your<br>People (Scotland) Act 2014.  | d 6   | in children's rights subgroup will be available by quarter 3.   | NES education will meet the legislative requirements of the UNC convention on the Rights of the Child; Getting it Right for Every Child; and The Promise. | Green<br>e   | The Chiferen's Rights subgroup was established during quarter 1 with<br>representation across Nic Education for Scotland (NES) Describate. This group<br>will be a leading driver in pragressing and promoting children's rights in our work.<br>NES and in addressing the commitments made in our Children's Rights report 202.<br>2023. This report is complete and was published during quarter 1, providing<br>evidence of our work on children's rights. ET updated.  | 0-          | The children's rights subgroup has agreed term of reference and provided update to the NES Vomen, Children, Young Peppe and Families Cropp. The Children's Rights Report for period 2017-2020 is now available on the NES website and the group are supporting and contribiting let bet commitments and Ac. Air previous years, NES will be designing a delivering a range of short learning sessions during Care Experienced Week' in Cocheo 7 Jose high planning currely underway. In addition, a webinar during Quarter's awill focus on rights based participation for infants, children and young people. | Green        | Noted a webnar with 67 attendes on right-based participation in relation to infinate<br>orbiden and young people. Two projects were commenced, the first focused on<br>developing –Learning for Getting Right for Every Child (GREFC) which will be<br>developed for a cross-sector and interprotesional audience. The Secund project is<br>providing support to health boards on UNICIK (implementation. Both projects have<br>received funding from Scottish Government in terms of staffing resource.   | Green        | Considerable progress during this year to progress and further children's rights. During<br>quarter 4, the United Nations Convention on the Rights of the Child (UNICK) project has<br>supported NHS Boards in their readiness for incorporation of the new Act. This has<br>included establishing and foolitating a leaded entewed, providing 3 owerneess raining<br>sessions to \$1111 colleagues, design and delivery of 2 weekbrans focused on taking a<br>children's rights spaced 11/2 participants, and voice and participation (278<br>participants). The children's rights subgroup remains state with an established action<br>plant, acknowledges our responsibilities as public authority. Out content for<br>informed and skilled level examing module on Getting it Right for Every Child (GRREC) is<br>to being reviewed by partners across contributes sectors (Prios, Education, Social<br>Work) to support the delivery of these multi-professional cross-sector resources.  |
| 8. Workforce  |                               | 8.1                               | 5874 Psyche                    | logy In line with the six legal commitments for Corporate Parenting, we will support workforce development such to meet the need of the care-experienced children, open people and adults. A three year high-level action has been developed. We will develop annual plans for our corporate parenting work. We will review relevant publications, evidence and the research literature to keep up to date with the work.   | plan commitments in Corporate Parenting thave been met.  | Demonstrate how our legal commitment in Corporate Parenting have been met.  | have been met.  |   | Green        | Engagement with Equality and Irvanan Rights Steering Group (April 2023) and earlie in January 2023) and the NES Women, Children, Young Repole and Smilles Group (June 2023). We are centimizing to collate our activities into a report, in May 2023 we delivered a presentation to stakeholders on our Corporate Parenting activities are consistent of the Children and young people; From June 2021 (Blodwing on from an earlier update January 2023), we are now using a new Committee meeting template which could be consistent of the Children and young for Corporate Persenting. This exercise committal committee meeting authors to reflect upon our organizational corporate parenting membrane shall be consistent of the Children of the Childre | p<br>i,     | Progress reports along with draft action plans have been developed and shared with internal groups with a paper for the NESE securities Team to follow shortly.  | Green        | EQA template now finalised in quarter three 2032-2012 (and as per previous pilot in 2022-2023) with formation on Corporate Parenting.  Annual work pilan has been completed and shared with the NES Women, Children, Young Repele and Families group.  The progress reprotor continues to be updated with activities—for onward updating to the Executive Team and begrond.  ((The corporate parenting e-Learning module will now progress in quarter four—it is askey that test updates will be provided instead of videos. However, will still scope the potential for videos. There is also the potential to use transcripts as other forms of learning.)   | Blue         | There has been continued engagement with the Equality and Human Rights Steering<br>Group. At the Marc 2020 meeting, a reporting template was shared to collate<br>information on work progressed.  |
| 8. Workforce  |                               | 8.1                               | 5394 Financ                    | be Develop a robust, balanced 3 year financial plan for 2004/25 (value c £600m pa) as part of the Medium Free Developer in a working closely high planning and directorates ten ensure bedges are realistic, required say are identified and activities demonstrate value for money. This enables the organisation to fulfil its strategic a national objectives within agreed funding envelopes.   | ngs  | Work with Planning to develop and distribute guidance for Op planning process to all Directorates.  | All Op plan meetings held and<br>Directorate plans reviewed and<br>consolidated and compared to<br>anticipated SG funding.  | Draft 3 year Financial Plan approved by<br>Board and meet SG submission deadlines<br>by the end of Q4.  | Green        | We have begun an internal review of the finance processes within operational planning to increase efficeny and ensure we are adding value to the overall proces  | Green       | 2021/24 Mitracker has been rolled forward and known changes have been made.<br>2024/25 Report will be issued as agreed on 2 October 2023 ready for Directorate<br>review in Quarter 3.   | Green        | Ongoing engagement with key data networks across NES Boards and within the Scottst<br>Government, including anew Short 15th exching Group for enhancements to workforch<br>data. Maintenance SJA in own in place with NSS/PINE to to ensure ongoing access and<br>updates to NES database housed within NSS/PINE are made are required. We informed<br>OSR (Office of Statistics Regulation), Scottish Government, and all key stakeholders at<br>the time and have a permanent note on the trends data that the March 2000 data was<br>not of the usual standard due to the impact of Covid on our data providers in the<br>Boards.   |              | Funding has been agreed with Scottish Government and the NES Board and NES<br>Executive team.  |
| 8. Workforce  |                               | 8.1                               | 5396 Financ                    | improved and optimized procurement to ensure we receive goods and services at the best price, quality and<br>time, and deliver savings target of 3.25% on addressable spend (average £22mn p.a.)  | an   |   |   | Deliver savings of 3.25% on addressable spend.  | Green        | This target is not a linear calculation as it depends on the relative timing of tender<br>activities and hence when we are able to daim savings. There are also timing issue<br>around data collection at quarter end which make it difficult to be precise, but all<br>indications are that we remain on track to acheive this target   |             | Latest data indicates that we are ahead of our target savings. 5.01% versus 3.25% target   | Green        | Latest data indicates that we are ahead of our target savings. 5.50% versus 3.25% target   | Green        | Q4 data unavailable at date of publication however previous data indicates that NES will<br>remain ahead of our target savings. (Q3 5.50% versus 3.25% target).  |

Page 8 of 11

| Recovery Driver | SG ADP NHS I<br>Action Deliv<br>Reference Refer | Board NES Directorate      | Deliverable Summary  | Q1 Milestones  | Q2 Milestones  | Q3 Milestones  | Q4 Milestones  | Q1 RAG Statu | s Progress in Q1   | Q2 RAG Statu | ss Progress in Q2  | Q3 RAG Status | Progress in Q3  | Q4 RAG Status | Progress in Q4   |
|-----------------|---|----------------------------|--|--|--|--|--|--------------|--|--------------|--|---------------|---|---------------|--|
| 8. Workforce    | 8.1   | 5386 Medicine              | Recruitment and provision of Clinical Fellows across multiple specialities and areas of interest in NHSScotland, to<br>provide educational development and build specialist and leadership capacity in the medical workforce.<br>Recruitment to pre CTT (certificate in Completion of Training) Fellowships: up to 12 Scottish Clinical Leadership<br>Fellows hosted in a variety of partner cognisations and 2 VITE Fellows hosted in which NLS. Recruitment of up to 3   | Fellows; interviews for Medical<br>Education and Health inequality fellows   | Receive agreed additional TIG Fellow   | begin recruitment cases for SCLF and<br>Remote & Rural Fellows for 2024  | Recruit: 12 Scottish Clinical Leadership<br>fellows; 3 SCREDS fellows; 3 Forensic<br>histopathology fellows; and 1 post-CCT TIG<br>fellow.   | Green        | review event of 10 years of SCLF carried out, recruitmen for GP fellows underway. incoming SCLFs matched   | Green        | Clinical fellows have been recruited and have started in post. TiG fellow has been recruited.  | Green         | Clinical fellows have been recruited and have started in post. TiG fellow has been recruited. Recruitment of cohort 15 of SCLFs underway.   | Nue           | Fellows have been recruited and have started in post. TIG fellow has been recruited.  Recruitment of cohort 14 of SCLFs complete.  |
|                 |   |                            | Scottish Clinical Research Excellence Development Scheme (SCREDS) Fellows, up to 3 Forensic Histopathology<br>Fellows and 1 post CCT Training Interface Group (TIG) fellowship.  | Clinical Leadership Fellow (SCLFs) for<br>Aug 23 start; allocation of SCREDS and<br>Histopath fellows  |  |  |  |              |  |              |  |               |   |               |  |
| 8. Workforce    | 8.1   | 5382 Medicine              | Recruit with at least \$5%. fill of the medical training grade establishment headount against agreed national<br>standards and statutory requirements by the end of Round 3 for up to \$18 training programmes arosts Scotland.<br>Recruit to programmes in all regions to \$5% minimum and administer, oversee and record Annual Review of<br>Competence Programs (MRCP) assuranted and outcomes for pages 260/09/700 ranees. Provision of<br>sustainable equitable support for all postgraduate medical doctors in training via the Trainee Development and<br>Welbeing Service. | Have provisional fill rates for rounds 1<br>and 2 of recruitment (August start<br>dates). Communicate trainee<br>information to Health Boards in line<br>with Code of Practice.  | Recruitment activity for round 3 (February start dates)  | Confirm UK fill rate data to SG for<br>round 1 and 2 recruitment. Have<br>provisional fill rates for Round 3<br>(February start) and communicate<br>trainee detail to Health Boards in line<br>with Code of Practice           | Recruit to at least 95% fill of the medical<br>training grade establishment headcount.   | Green        | rounds 1 and 2 overall fill rate of 93K. information on rotations supplied to boards<br>by deadline 7 June; new change report in place to aid boards   | Green        | Recruitment figures are being finalised for Round 3 recruitment.   | Green         | R3 underway, R382 in progress for August start.   | Green         | Round 1 and 2 recruiment activity has been delivered as planned with some additional<br>activity being added due to industrial action in England.  |
| 8. Workforce    | 8.1   | 5408 Pharmacy              | Provide qualified Pharmacists for workforce of MIS & Community Practice in Sociatind, In line with the General<br>Pharmaceutical Council (PMC) standards in Innitial Education & Triang 2021 via delivery of a 1-year Foundation<br>Training Year (FTY) to a minimum 200 trainee pharmacists and undertaking accreditation with the GPHC.  | Obtain Feedback from GPIC on step 2 -<br>NES FTY accreditation submission.   | submission. This will include adapting<br>the NES FTY programme to include   | Pharmaceutical Council (GPhC) FTY<br>accreditation submission. Take part in  | Complete or continue (dates pending)<br>towards (6PA cercellation of the NAS FIY<br>and also contribute to the NAS FIY<br>and also contribute to the NAS FIY<br>and also contribute to the NAS FIY<br>paramacy degree cercellation of both<br>Scottish Schools of Pharmacy (in terms of<br>the Standards of<br>the NAS FIY Programme in<br>Figure 10 to 10 t | Green        | GPIC Feedback on step 2 of Accreditation has not yet been received however is accepted for the insellen. The GPIC has based the FTX Accreditation Methodology which includes step 3. The FTY team can now utilise this to continue planning for step 3.  | Green        | GPMC Feedback for Step 2 has been received. Step 3 dates for submission have<br>been set (Quarter of norward). Auxiliary finisized methodology at this stage.<br>Development of the NISS TY programme incorporating prescribing and full E&T<br>learning outcomes continues to progress.   | Green         | GPIC accordination Step 3 preparations are progressing. Steff resource has been provided for FIP Principal eads to have declared time to prepare accreditation submission. Developments to the FIY 2002-52 programme are documented and developed through the FIY group workload.  Steff: have confirmed the limited for following stages:  Schimbidized or pagements: 29 FEP 2002  - Pre-event meeting with GPIC - 27 March 2024  - Online accreditation visit with GPIC - 17 and 18 April 2024  | 3lue          | GPMC accreditation of the Foundation Training Yesr (FTY) programme Step 3 continuing to progress.<br>Evidence template and supporting documentation submitted.<br>Pre-event Meeting with GPMC 27th MAATO 2014<br>Online Accreditation vist 37th & 18th April 2024 as planned. Overall progression in line<br>with expected 23/24 stages.   |
| 8. Workforce    | 8.1   | 5585 Dental                | Provide places for GDPs: up to 2 cohorts of 15 in Adults with Incapacity; 2 cohorts of 20 in Enhanced Skills<br>Practitioner; 2 cohorts of 15 in inhalation sedation.  | Deliver 3. Adults with Incapacity course<br>for up to 15 learners  | Deliver 1 Adults with incapacity course for up to 15 learners.   | Deliver I Adults with Incapacity course<br>for up to IS learners; I Enhanced Skill<br>Practitioner Domicillary Care Course<br>for up to 20 and 1 cohort of inhalation<br>Sectation for up to 15.                               | Provide places for up to: 4 cohorts of 15 in<br>Adults with Incapacity; 2 cohorts of 20 in<br>Enhanced Skills Practitioner; 2 cohorts of   | Green        | 30 learners from previous cohorts of AWI training in 2022/23 have attended the<br>case presentation session, 3 of whom have satisfactorily completed all elements of<br>the course. A first cohort of 12 learners have commenced the stught element of<br>the AWI course with presentation cases to take place in Q2. 1 dentist has<br>completed the AWI element as part of the Enhanced Sall resistance of Course from<br>2022-23 with 3 others submitting the final case study for review. This means a<br>submitted that the complete submitting the final case study for review. This means a<br>submitted that the course of the course of the course of the course of the course<br>to complete all elements of the course. 13 participants have now undertaken the<br>inhabition sedation case presentation from the course commence in 2023. | Amber        | Gof the 12 learners from the Quarter 1 cohort have now completed all aspects of<br>the Adults with incapacity training and awarded completion certificates. The<br>remaining is the west till complete some aspect of the training. Flamed dates for<br>school in Quarter 2 were postponed due to insufficient number of learners<br>requesting places. 30 of the 11 Enhances Solik Practicioners from the 2027/23 have<br>completed training with one still to undertake the relativing sessions which is<br>because the solid places of the solid places of the solid places of the solid places of<br>board demand is identified.   | Amber         | The planned Adults with incapacity course in Quarter 3 did not take place due to the<br>limited uptake referenced in the Quarter 2 update. Two delegates from previous<br>cohorts have now completed outstanding elements of training during Quarter 3.<br>Additional courses are planned for Quarter 4.<br>The Enhanced Salla Pacisitions Domisting Care course was not progressed due to<br>sinite directs from only a few feaths Boards. The inhabition Selection course will now<br>take place in Quarter 4 due to speake valiability and inlined interest from Boards<br>which meant that running a course in Quarter 3 was not viable.  | Green         | Two cohorts of the Adults with Incapacity Course, including an additional cohort to meet demand from a Health Board, took place in C94 meaning the planned 4 cohorts were delivered in 2023-25. Elemenes underflow the training with 18 Completing all elements in C94 and 7 still having some elements to complete. This makes the 30 is total completing all elements and now able to lay section 14 certificiate in 2023-24. The planned cohorts of Enhanced Salis Practitioner - Counciliary Care training did not take planned cohorts of Enhanced Salis Practitioner - Counciliary Care training did not take 2023-24. Health Board with the parameter in early 2023-25 to determine requirements for this training. One cohort of inhalation sedistion training commenced in Q4 with 14 kenzers smaning visco cohorts were delivered in 2023/24. Hearnes were issued completion certificates for the course with 16 still to complete some element of the course during 2023/24.  |
| 8. Workforce    | 8.1   | 5775 NMAHP                 | We will sward Alled Health Professions Career Followships to members of the Health and Social Care worldorce to<br>enhance their career development through healing on work based projects that address local or national<br>proteints and deliver and harming and development programs. We will continue to enhance the processes<br>and infrastructure that supports the delivery of the scheme.   | 2023/J 4 commence. Deliver one online and one in person session for AHP Fellows Deliver fine allowards Session for AHP relows Deliver final celebration/sharing learning event for previous cohort (2022/2023)   | Deliver series of online sessions to cohort and individual mentorship.   | Award AMP Fellowships for next<br>cohort (2004/2025)<br>Deliver series of online sessions for<br>current (2003/2024) fellows   | Deliver series of online sessions to<br>2023/2024 cohort and individual<br>mentorship.   | Green        | Nineteen Fellows commenced in Cohor S in April, two development sessions held<br>so fac. Celebration event for Cohors 4 held in June, showcasing Fellows' projects<br>and learning. Alumni network bunched.  | Green        | APP career fellows matched to NES mentor and all fellows have accessed at least one mentorship session. Fellowship open to applications for 2024/25 fellowships in this quarter.   | Green         | Delivered the fifth and sidth sessions to Cohort 5 related to AMP rotes in supporting<br>publish halfall append and systems lederling. We have agreed and developed a unique<br>publish halfall appending the publish has designed to the publish and seek<br>evolution, the final design was vected on and selected by the set autonomous decided Per<br>taxming Groups for Cohort 5 Solitated by alumin members. Ongoing learning<br>membraship one-how sessions with effects to help cossible their learning and<br>gather information about their experience with the Fellowship. Understake mindway<br>evaluation with Control 5 Fellows and manages and surveyed Cohort at after 6 months<br>post Fellowship. Alto recruited Cohort 6 of the Fellowship Scheme and held Review<br>Panel. Letters sent to applicants.  | Green         | Delivered the seventh and eighth resistant to Cohort S. which focusized on headership and<br>decision naking and on ARP policy and retarget endewered by 26 Oriel Allael Healen<br>Professions Officer. Continued Peer Learning Groups for Cohort S. Locitated by allumi<br>members. Ongoing bearing membraship one—bore sections with Fellows to consolidate<br>their learning. Understaken final evaluation with Cohort S Fellows and managers to<br>gather information about their experience with the Fellowship and outcomes. Planning<br>underway for cohort S celebration event which will be held in June 2024. Held<br>Fellowship alamine Closs section and 20.34 A focusing on leading to change and impactful<br>ways to share learning. Commencement of cohort 6 passaed due to uncertainty around<br>financial climites and hotting email serior to Fellows and their line managers. Turns Learn<br>content has been developed during 2023 for sustainability with future Cohorts.  |
| 8. Workforce    | 8.1   | 5421 Medicine              | Ensure all doctors working in Scotland continue to have access to a national single approach to Medical Appraisal and Revalidation by continious provision of SOAR and appropriate user support, and deflivering a minimum of 20 New Appraiser training courses (maximum capacity 5 participants per course). 21 Refresher Appraiser training courses (maximum capacity 10 participants per course), a minimum of 3 webinars/workshops and an annual conference to support medical apparaisers and improve appraisal conversations.  |  | In addition to Q1, deliver x2 Refresher<br>courses and x2 workshops scheduled,<br>plus the running of our annual<br>conference.                          | In addition to Q1 and Q2, deliver x8<br>New Appraiser courses, x4 Refreshers<br>and x3 workshops scheduled.  | In addition to Q1-3, deliver x8 New<br>Appraiser training courses; x2 refresher<br>appraiser training and x3 webinars as<br>scheduled, to support medical appraisers   | Green        | Ran s4 New Appraiser courses, s8 Refresher courses, s2 workshops (I cancelled<br>due to undersubscription); also ran a half-day tutors development event.  | Green        | We ran two Refresher courses and one workshop (one cancelled due to low<br>subscription and too close to after the summer holidays). We successfully ran our<br>standallone virtual appraisers conference on 13 September 2023 and this was well<br>received.  | Green         | In Q3 we ran 7 New Appraiser courses (one cancelled due to low subscription), 6 Refreshers and 3 workshops. Additionally we have organised two webinars (one on updated GMP 2024 and the other on ROT) to be held in Q4).  Not related to this target but the SOAR development work mentioned in last quarter   | liue          | In Q4 we ran 8 New Appraiser courses, 4 Refreshers and 3 workshops. Additionally we also ran two webinars on updated GMP 2024 and ROT respectively.  |
|                 |   |                            |  |  |  |  |  |              |  |              | We dio received approval to turn the Band 55-Senior Officer secondment into a<br>permanent post, additionally we also allowed to extend the Band 4 Administration<br>Officer role (previously on a 1 year contract) until end of March 2024.   |               | (funded by SG) has now begun. Aiming to conclude by Q2 in 2024/25.  |               |  |
| 8. Workforce    | 8.1   | 5426 Medicine              | Delivery of mandatory intail and update training for Agrowed Medical Practitioners (AMPI) providing, a minimum of 12 circular inflat intaining course and 88 feet for face update course by \$10(3)/24 as also development and delivery of a face-to-face course which explores the role of an AMP in a Mental Health Tribunal setting by 31/07/2023.  | courses with 1 Initial training course<br>delivered per month and AMP Update   | This will be a rolling programme of<br>initial training courses with 1 course<br>delivered per month. AMP Update<br>training will be delivered on demand | Develop and deliver a face-to-face<br>course on the role of an AMP in a<br>mental health tribunal setting. AMP<br>traininginitial training will be delivered<br>monthly and AMP Update training will<br>be delivered on demand | Deliver 12 Initial Approved Medical<br>Practitioner training courses and AMP<br>Update training to meet expected demand  | Green        | AMP Initial training courses and 9 Update courses have been delivered. Several Update courses have been offered but not viable due to a lack of interest.  | Green        | 3 AMP Initial training courses and 12 Update courses have been delivered in this<br>Quarter.   | Green         | 3 Initial AMP training courses and 16 AMP Update courses have been delivered in<br>Quarter 3.   | Green         | 12 AMP insist training course have been delivered as planned. S5 AMP Update course<br>have been delivered exceeding our planned delivery by 17 course. Development of<br>the Mental Health Tribural session is paused as per NSF requirements. This is a non-<br>mendatory resource which is partially developed and development can be quickly<br>resumed should it be deemed appropriate to do so.   |
| 8. Workforce    | 8.1   | 5439 Medicine              | Delivery of a range of entry-level and continuing professional development educational resources for<br>postgraduste medical trainers (an inimum of 38 lariner workshops, 8 Advanced Medical Educator Courses and 8<br>Leadership in the Learning Environment Course) as well as development of new resources to support the CPO of<br>approved and recognised postgraduate medical trainers.  |  | courses with at least 8 TWs and 1GP  | This will be a rolling of course delivery with at least 10 TWs and two GP entry-level training courses delivered   | Deliver to PG medical trainers: 8 advanced medical educator courses; 38 trainer workshops; and 8 leadership in the learning environment courses.   | Amber        | 7 Trainer Workshops, 1 AMEC and 1 GP TEC course have been delivered in Q1  | Green        | Delivery of 14 Trainer Workshops, 2 GP TEC courses, 1 Leadership in the Learning<br>Environment course and 1 Performance Support course  | Amber         | We have delivered 11 Trainer Workshops, 2 GP TEC courses and 1 each of the AMEC and URLE courses  | Amber         | We have delivered 41 Trainer workshops 3 more than planned. We have also<br>completed the development and roil out of a new 6P trainer entry programme (GP TEC)<br>and have delivered Groubsts. Staffing issues delayed the roil out of CPO courses for<br>trainers however we had but one wadministrators join the FDA team in February and<br>course delivery has picked up since them. We have delivered S-CPD trainer courses.   |
| 8. Workforce    | 8.1   | 5448 Psychology            | Produce quarterly workforce and trainee data Official Statistics in Psychology Services and in Child and Adolescent<br>Mental Health Services (CAMHS), publishing to pre announced deadlines and standards.  | Pubish quarterly workforce and trainee   | Publish quarterly workforce and trained data Official Statistics in Psychology Services and in CAMITS.   | Pubbh quarterly world force and<br>trainee data Official Statistics in<br>Psychology Services and in CAMHS.  | Produce quarterly workforce and trainee data for psychological services.   | Green        | Ongoing engagement with key data networks across NNS Boards and within the<br>Scottish Government. Maintenance SLA is now in place with NSS/PKS to be ensure<br>orgoging access and updates to NSS database housed within NSS/PKS are made as<br>required. We informed CSR (Office of Statistics Regulation), Scottish Government,<br>and all key state-blockers at the time and have a permanent notice on the trend data<br>that the March 2020 data was not of the usual standard due to the impact of Covid<br>on our data providers in the Boards.  | Green        | Ongoing engagement with key data networks across NYS Boards and within the<br>Scottish Government, including new Short LER Working Group for enhancements<br>we workfore data. Maintenance SLA is own in place with National Services Scotting<br>(NSS) / Public Health Scottand (PIGS) to be ensure ongoing access and updates to NIS<br>databases housed within NSS/PGs are made as required. We informed CSR Office<br>of Statistics Regulations, Scottish Government, and all key stakeholders at the time<br>with the scottish of the | Green         | Ongoing engagement with key data networks across NNS floards and within the Scotish Government, including a new Short Life Working Group for enhancements to workforce data. Maintenance, SAL in own ip face with NSS/PRS to to revue regoing access or engoing access or displayed to NNS databases housed within NSS/PRS are made as required. We informed updates to NNS databases housed within NSS/PRS are made as required. We informed DRS (DRIfe of Statists Regulation), Scotth Government, and alley stakeholders at the time and have a permanent note on the trends data that the March 2020 data was not of the usual standard due to the impact of Covid on our data providers in the Boards.   |               | Good progress with ongoing engagement with key data networks across NMS Boards and within the Scottish Government, including a new Short Life Working Group for exhibitations of the Scottish Government, including a new Short Life Working Group for exhibitations of the Scottish (SMS) Public Health Scottish (PINS) to be resure engaging access and services scottand (PINS) Public Health Scottish (PINS) to be resure engaging access and updates to INMS database housed within MSS/PINS are made as required. Database transfer to INMS confirmed by NTS for 2024/25 Roadman following SBAR completion. We transfer to NTS confirmed by NTS for 2024/25 Roadman following SBAR completion. We acknowled to the State |
| 8. Workforce    | 8.1   | SSS2 Workforce             | Design and deliver national succession planning process, infrastructure and governance aligned to local processes<br>and supporting recruitment and onboarding processes for NHS Board CEO and Executive Director roles.   | stakeholders ahead of launching a new  |  |  | Assess overview CEO succession plans, put<br>in place associated development to<br>support succession plan and elithence<br>outcomes for the recruitment and<br>continues for the recruitment and<br>nationally by an external provider.   | Amber        | The national process is owned and led by the Chief People Officer in SG and as delivery partner, NIS can only work in alignment with timeframes set. The design of processes and agrossech have been concluded and are ready to busins' altoyage the rapid reagonize assessment process. Before this can be launched there is an example of the second process. When the second process were support in a place for the implementation of the notional process when busnched in Q2. Regular communication and engagement has been made with stakeholders and through programme governance for the work too. We are also continuing to work with external suppliers to refine the products that will support this new approach.   | Amber        | Aspiring Chief Executive (ACE) pilot process Isunched. All supporting tools developed, tested and serior leadership succession planning app developed and bunched. Succession planning app developed and sunched. Succession planning and reference of this in support of pilot process and origining development of succession planning and the support of pilot process and origining development upon the succession planning tools and the succession planning tools and the succession planning or support. Annual revelopment careful evelopeded and planned for October 2023 for Ready Now ACEs. Revised Governance Framework developeded for anisonal succession planning programme. Ambret status is in regard to delay in initiating system-wide working groups for recruitment and onboarding   | Green         | Two development centres delivered for ACE pilot nominees in Ready Now category.<br>Personalised development reports and readiness assessment provided to DC.<br>Personalised development reports and readiness assessment provided to DC aptricipants.<br>Summary of DC participants with information in creatives and a Telent development themes provided to Chair People Officer and SG seathership and Telent development themes provided to Chair People Officer and SG seathership and provided and provided to the seathership success from the providence and SG seathership success from the provident and personalized with Chief Describe Leadership Success Frofilies. Draft design on aspiring director talent identification and development approximate agreed with SG LIV that empiror to enquiry and engagement with HRD/OD groups. Guidance provided to chief People Officer on potential tools and resources for VRR processes for Board chief Secusive roles. | Green         | Third Development Centre (IDC) complete and 6-8 hours of coaching completed for 27<br>Aspiring Chief Executive (ACE) participants. High level development summaries for DC<br>participants issued or relevant Chief Executive. Senior Leader(bir) dictiveny (XSG) appl<br>designed and developed to provide support for current and aspiring Chief Executive and<br>succession planning processes. 3 x 300 tools and 2 x hinght questionnaires designed,<br>developed and tested on SLG app. Network of Succession Planning leads created and<br>significance provided on applier for last processes. In all advice<br>and assessment process design provided to Chief People Officer and HRD to support use<br>of LSP a 2024 Chief Executive recruitment, processes.  |
| 8. Workforce    | 8.1   | 5553 Workforce             | Define, design and deliver a Orice for Scotland approach for recruitment of Armed Forces (AF) service leavers, veter ans and the wider military community.   | and deliver comms, enagagement and   | deliver comms, enagagement and   |  | Define, design and deliver a Once for<br>Sociand approach for recruitment of<br>those from the Armed Forces community.   | Green        | Q1 milestones achieved. Governance in place and operating, recruitment of small team complete, engagement and outreach to key MOD, Veter ans groups and wider education provides in since complete. Perferensipsy with CTPMOD) and other deducation provides in since complete. Perferensipsy with CTPMOD) and other Working Groups are in place and creating the demand and needs to feeigh the deliverables of the programme. OEMBS, COS & FOO MOS, COM, SC Veterans Unit, Scottish Veteran Commissioner all engaged, briefed and supported. Programme delivery will being in Aug 2 (ingist) events, resemble of MOS Carles Website Armed Forces page, training for HR/OD teams in Regional Boards, etc.).   | Green        | Regional working groups established (N. E., W. & National boards) alongside an external stakeholder group (NOC, CTP etc.).  Commis and engigement plan has been dieinered albeit with substantive revisions controlled to the state of the stat             | Green         | Programme governance working well with ability to engage and shape a new offer.  A lack of permanent NoP has been mitigated successfully and work is currently underway to deeping options for restructive the team-this othered from the underway to deeping options for restructive the team-this othered from the deliver our function. The Band S (PSO) role will be deleted (end contract for incumbent) on 31 box 23 and we will create Band 6 Fingsamme Officer role to support comms, engagement and events delivery.  Soccessful engagement and F2 visits to 10 NMS Boards - this has allowed us to create our delivery plans for 2024/25 with more invested support from across healthcare. Comms, engagement and outreach targets all met - we will review and revise comms work in Quarter 4.   | Sreen         | Continued progress is being made with key stakeholders - internal to NMS Scotland and<br>external. Successful delivery of education and development essions has taken place,<br>or him editors and multire activity is being delivered on time and significant Board<br>on the advanced progress of the same to be able to better define our relationship with the<br>MOD.  With an unifilled 196 pland 63 and appropried but not progressed not consultient as<br>Advanced to the same of the same to the same to the same to the same to<br>mode, the 2 k samd 7 roles are holding significant workload. This is a risk to success or<br>advancement of further quarters (captured in esting risk- QD.)  The AFTP will be one year old in May 24 and a review as identify underway to refine the<br>function and form of the programmer—this way promised on stunct and will allow a new<br>and novel programme to recalibrate and adjust as needed the vision, strategy and<br>critical success factors with Scotlish Government / Office of the Chief Executive NHS<br>Scotland (OCENHS) as the commissioner.  |
| 8. Workforce    | 8.1   | 5554 Workforce             | Implement the NES Widening Access (WA) Framework with action plans aimed at widening access to jobs, cureers and training for our future and existing workforce, including those in under-represented groups, particularly young people and Armed Forces Service Leavers & Veterans.   | The WA Framework and a way forward will have been agreed by the NIS Executive Team by end of June  | Implementation of WA recommendations will be in progres  | Implementation of WA recommendations will be in progress   | Recommendations of WA framework will have been implemented   | Amber        | Presentation of WAF delayed until 1st August   | Green        | The Widening Access Framework (WAF) was approved for implementation by the<br>NES Executive Team in August 2023 and was also noted and supported by the Staff<br>Governance Committee. Operational Plans which underpin the WAF are now in<br>development.   | Green         | Work in Q3 has focused on alignment and identifying opportunities for widening access to be embedded into plains and actions already underway. WA Team members are supporting workstreams for Learning & Colluction Quality Systems Programme in order to establish and embed widening access principles.  Enternally the Widening Access (WA) Team polls to the Colleaguest) have presented at several partnership events to promote NIS as an inclusive Employer including an OU Scotland website for students, a series of CP0 websites for over 120 frontline employability staff in local authorities across Scotland and hosting a work shadowing opportunity at Westport for DuoDay (part of European Disability Employment Weet).   | Green         | Work in Quarter 4 has focused on alignment the WA Framework with the NES Anchors<br>Action Plan, Equalities Outcomes and other NES activities. The aim is to create a<br>cohesies approach to planning and reporting on Anchors based activity.  Widening Access (WA) Team members are supporting NES Planning colleagues to review<br>and update our NES Anchors Strategic Plan, and pull together our first metrics report.  |
| 8. Workforce    | 8.1   | 5555 Workforce             | Design and deliver a national programme of development and peer bearing apportunities to develop bederchip<br>skills, knowledge and behaviours needed to create a culture of collaborative working across health, social care<br>and social work.  | Delivered Developing Senior Systems<br>Leadership (DSSL) programme and<br>evaluated outcomes. Delivered 60% of<br>Directors of public health leadership<br>programme (DPH) and increased<br>community events on leadership<br>speakers, topics and blogs | sector leadership offers. Shape up   | Shape and agree social care and 3rd sector leadership offers. Shape up diversity leaders programme.  | Deliver a national programme of development and peer learning for leadenship and development of collaborative culture.   | Green        | OSS. Delivery of Cohent 1 completed. External evaluator appointed to evaluate cohent 1 of the programme. Selection for Cohent 2 is in pragress. DM+ c60% of Director of Public has been completed. Community Events - 4 community events have been delivered with included 2 clicovery events. In addition 1 Evadership Links were delivered and 6 taster sessions were delivered (4 in person and 2 virtual). Blogs-16 leadership and diversity blogs have been published.  | Green        | SSS Evaluation of Calhert 1 completed. Delivery of either 21 in progress.<br>DNH - 80% of Diversor of Public Health bus been completed.<br>Events - Three community events have been delivered. Four Leadership Links<br>webhars were delivered. One Divership Coffee Connect Sessions delivered<br>Digital - Cauching and Mentoring plateform has been launched.  | Green         | OSS Cahon 1 250h has been completed DM-90 his been completed Events - Started to scope 24/25 delivery, 2 community events; 2 Leadership Links weehbar; 2 Diversity Coffee Connect; and 1 Social work and Social care spotlight session have been delivered. Digital - Launch as new learning record function on the website to allow participants to record their participation in any Leading to Change differs/resources.   | Green         | Developing Senior Systems LederChip (DSS.) - Cahort 2 will complete in April 24 (DSS.) will the ned with new offer being scoped.  Directors of Public Health (DPI) Leadership Programme has Deen completed with evaluation complete by April 24.  Digital, Comms & Events - Started to scope 2021/25 delivery, which will reflect Scottish Government (ES) Inding and direction from 5G3 improving Welbeing and Working Colliures Strategy Group (WWC).  |
| 8. Workforce    | 8.1   | 5556 Healthcare<br>Science | Recruit 18-25 Clinical Scientist posts per year, to key specialties hosted by NHS Boards to ensure the ongoing<br>supply of Postgraduate Healthcare Science staff via the "training-grade" pathway.  | May 2023 demand scoping from service for intake 2024. Note demand for 2023 intake yielded 43 requests for posts in 2023 - we can fully fund 4.   | Anticipate collation of demand scoping<br>and likely affordability to estimate<br>training post numbers  |  | Recruit 18-25 clinical scientists / or<br>whatever number is "affordable" based on<br>exiting or any newly won investment  | Green        | SLA produced for 6 specialities, recruitment for Sept 6 starts underway (not the target of 18-25, and not the service demand of 43)  | Green        | September 2023: six starts underway (not the target of 18-25, and not the service demand of 43).   | Green         | 6 starts underway as per Quarter 2 update. No issues  | Blue          | Six starts underway and commenced in September 2023. No issues with these. 2024/25<br>Operational Planning indicates 24 training posts will be recruited. Provisional offers to<br>service in the process of being made. Awaiting Service Level Agreement (SLA) sign-off by<br>NES.  |

Page 9 of 11

| Recovery Driver | SG ADP NI<br>Action D | 4S Board NES Directorate                                  | Deliverable Summary  | Q1 Milestones  | Q2 Milestones   | Q3 Milestones   | Q4 Milestones   | Q1 RAG Statu | us Progress in Q1   | Q2 RAG State | us Progress in Q2  | Q3 RAG Statu | Progress in Q3   | Q4 RAG Statu | Progress in Q4  |
|-----------------|-----------------------|---|--|--|---|---|---|--------------|---|--------------|--|--------------|--|--------------|---|
| 8. Workforce    | Reference Re          | 5557 Healthcare   | Provide 25-35 training grants (bursary) to specialist Healthcare Science practitioners, Clinical Scientists and Higher   | Completion of Assessment process for   | Finalise and issue of awards / grants.  | Ongoing monitoring / engagement   | Provide 25-35 training grants to healthcare   | Green        | Bursary scheme launched, assessed and closed off. 27 Award made. No problems.   | Green        | Bursary scheme launched, assessed and closed off. 27 Awards made. Additional   | Green        | As per Quarter 2 update, bursary scheme launched, assessed and closed off. 27 Awards   | Blue         | BLUE As per Q3, bursary holders 2023 progressing as planned. Clinicalscientist  |
|                 |                       | Science   | Specialist Practitioners to ensure the ongoing supply of postgraduate Healthcare Science staff:  | awards .   | Incorporate new trainess into our polograduate scientis community and quality monitor progress  | with our wider CPD support for these  | scientists.   |              | Additional support for clinical scientist equivalence applications support in planning, abunch Q2.  |              | ongoing support for clinical scientist equivalence applications support in planning,<br>Jaunched Cluster's Linterleviening candidates to ensure fully commitment. Request<br>to CG1 to apply existing fund to Support Worker RF1 to align with directly<br>commissioned development transversit. Completed Higher specialist training plan<br>reviews and reported to Finance. No tissues.   |              | made. No problems.  Additional ongoing support for clinical scientist equivalence applications support in planning was busineted uning Quarter 2 and continued during Quarter 3. Interviewing candidates to ensure that commitment. Request made to MSC CIO to apply existing fund candidates to ensure that commitment. Accordate to the MSC CIO to apply existing fund candidates to ensure that commitment. Completed Higher specialist training plan reviews and reported to Finance. No issues. |              | equivalence - 19 candidates supported and biomedical science support worker-degree<br>transcript assessment, 25 applicants supported.   |
| 8. Workforce    | 8.1                   | SS62 Medicine   | Lead, develop, evaluate and review medical simulation programmes for: Core Surgical Training (CST) (100% of trainees-approx No. 100; Internal Medicine Training (MT) (MOX) of trainees-approx No. 320 trainees); Higher Specially Training (HST) (70% of trainees - approx No. 120; and Core Psychiatry (60% of trainees (approx No. 120) to provide the highest quality of care.  | Delivery shifts and simulation training to approx 10.05 If interes (CT I and CT) according to the CST strategy; a minimum of 40 IMT3 trainees; up to 12 CT1 Core Psych trainees.   | approx. 100 CST trainees (CT 1 and CT2)<br>according to the CST strategy; a   | to approx. 100 CST trainees (CT 1 and<br>CT2) a minimum of 105 IMT 1 and<br>IMT 2 trainees; up to 18 HST trainees   | Deliver medical simulation programmes<br>for: CST; MRT, 15T and Core Psychiatry to<br>provide the highest quality of care.  | Green        | All courses running as planned 8 out of 8 CST courses; 1 out 1 HST course; 3 out 3 MT courses; 1 out of 1 Core Spych course.  | Green        | CST –) Inductions, 2 out of 18 Bottomery, 18 Bootteramys, 1 Ley skills course; 1 CSGP course, 1 course of 68 Pourse, 1 course, 1 cour | Green        | CCT – I commissioned courses and 9 monthly training day (179 training spaces) MRT – 3 Boottamps, Stalls days delivered [131 training spaces in total) MRT – 2 commissioned courses (15 training spaces) Core Psych – 5 PS courses delivered (15 trainine) in addition we have also delivered 1 ACCS skills daysRxf, Drift & simulation day (ACCS trainines): 7 / Meedinactic courses, 1 CMC course; 1 Ophthalmology Course abd 2 Viscoular corrors for 115 trainines                                 | Blue         | Oblivery skills and simulation training to/ToCST trainers (CT - 3 and CT - 27); 116 MIT valences (MRT - 25, MRT 2 - 3, MRT - 3, Plurainers, 179 trainers on an ASICS course and 13 CT Lone Psych trainers in addition we have bod oblivered for ACEM - ACCS Skills day (11 ACCS trainers); 2 Ansesthetics SHRT courses (24 trainers); 2 IGM courses - organ donation & cardiothoratics (28 trainers); 1 EM T&O course (14 trainers).  |
| 8. Workforce    | 8.1                   | 5599 Dental   | Provide up to 100 places for trainee dental nurses to undertake a pre-registration programme to achieve the<br>Modern Apprenticeship (MA) in Dental Nursing and up to 130 places for trainee dental nurses for the NES Dental<br>nurse induction blended learning course.  | through access to an online Dental   | provide educational resources to<br>support new trainee dental nurses<br>through access to an online Dental<br>nurse induction learning programme to<br>inform safe working practices.  | provide educational resources to<br>support new trainee dental nurses<br>through access to an online Dental<br>nurse induction learning programme<br>to inform safe working practices.  | Provide 100 Modern Apprentice places for<br>trainee dental nurses. New Trainee dental<br>nurses have access to educational<br>resources to support safe working<br>practices on Turas.  | Green        | 71 traines dental nurses currently undertaking modern apprenticeship in dental nursing, due to complete (22. 92 places made available across five sites for next exhort commencing in Q2.   | Green        | 2022-23 MA in Dental Nursing cohort due to complete during Quarter 2 (68), 74<br>traine dental nurses will commence 2023-24 MA in Dental Nursing cohort in<br>September 2023.  | Green        | 41 trainee Dental Nurses have accessed and commenced the New TURAS Dental Nurse<br>Induction online learning programme during Quarter 3, of which 34 have completed.   | Green        | 74 dental nurse trainees on the modern apprentice programme. Our bid for 24-25 has just been approved with an offer of 65 MA places,  |
| 8. Workforce    | 8.1                   | 5629 Workforce  | Provide a national programme to develop NHS Board Chairs and Non-executives fulfil the Blueprint for Good Governance by delivering: Visible ladder of development from pre appointment through to Adept Board Chair;   | Launch of Aspiring Chair programme.<br>Plan for revised Board development  | Delivery of board development<br>programmes in line with Board  | Delivery of board development<br>programmes in line with Board  | Conclusion of Aspiring Chairs Programme.<br>Delivery of board development   | Green        | Aspiring Chairs programme launched, and whole programme planned and managed. Planning for whole programme complete with dates across the year   | Green        | Aspiring Chairs Programme Delivered. Blueprint Module 1 published. Mentoring sessions delivered. New mentors and mentees supported. UB Board development   | Green        | Delivery of Aspiring Chairs Programme; Launch of 2024 Aspiring Chairs Programme; planning for facilitation of sessions with 8 NHS boards on their Self Assessment against  | Green        | 2024 Aspiring Chairs Programme underway; successfully delivered self assessment sessions against the Blueprint for Good Governance with 9 NHS Boards; increased   |
|                 |                       |   | Deliver an Appring Chairs programme and national induction. Facilitate peer to peer learning through Board Chair Action Learning Set. Cross Board Mentroling. Rebrowking events. Design education and training to adders individual and whole Board development training needs: Develop and deliver recommendations in the Blueprint for Good Governance as commissioned by Scottlish Government.  | approach in place.   | Development Plan  | Development Plan.   | programmes in line with Board Development Plan, proposal for next year's Programme.   |              | booked with contribution. Communication about whole programme developed and issued. Improvements planned for whole programme and wide connections across cather NES programmes, other organisations in Scotland and LIK made and links developed. Induction sessions for Board members delivered. Blueprint module completed.           |              | assion delivered. Rousine performance reports started for NIS Boards. Proposal<br>for Appling Chairs 2020 Programme and Board Apprentice(s) Scheme to SC.<br>Bio-print Modele 2 and Succession Planning Module in development. Action<br>Learning Set guidance produced and published and new ones planned.  |              | the Bluegrint for Good Governance, new mentoring partnerships supported; online content reviewed; turas modules nearing completion.  |              | uptake of online modules by non-executive directors; support to Board Secretaries and<br>Board member network; building induction resources for Chair, Board Secretaries and<br>stakeholder board members; Action Learning Sets (ALS) supported; mentoring scheme<br>takeup increased.  |
| 8. Workforce    | 8.1                   | 5698 Optometry  | Support clinical placements by having 100 Cytomerbrits per annum attend at least one teach and treat session at<br>one of the three centre by end of Q46 the next three financial years. Sessions support Independent<br>prescribing placement (24 session requirement).   |  |   |   | 100 optometrists to attend at least one teach and treat session.  | Green        | No risk identified around under delivery against SLA requirements, so green on target currently for by Q 4 delivery.  | Green        | Optiometrists engaged in teach and treat clinics across all four sites.  | Green        | Optometrists continue to engage in teach and treat clinics across all 4 sites.   | Green        | Optometrists continue to engage in teach and treat clinics across all 4 sites.  |
| 8. Workforce    | 8.1                   | 5789 Medicine   | Improve knowledge and skills around human factors and ergonomic principles by delivering: GP specific introductory (I) training workshops (I2 is 30 participants initially), enhanced Significant Event Analysis (Sch) members completing (Quality improvement Activities as part of 69 paciety) training and of appraisals (Delivers and evaluate a Worksoad Analysis method for GP trainees and GP team members; and analyse data and design workshops using systems thinking methods. | programme; complete design of Quality<br>Improvement Activity (QIA) resources  | GPs; publication of GP team QIA<br>resources; analyse AKI qualitative data  | groups of GPs; commence evaluation<br>of GP team QIA resources. Commence<br>pilot of GP workload analysis tool.   | Deliver: GP specific introductory (I) training workshops; (12 × 30 participants initially); enhances (51 x initially); enhances (51 x initially or 61 teams and 67 trainers (61 × 30 participants), design, text and evaluate reconstructs and GP beam members completing (Quality improvement Activities so part of 67 eyes; by terming and for approximal Design, text and evaluate and valuate and of 8 team members, and analyse colds and design workshops using systems thinking methods. | Green        | Delivered 7 QI workshops, SEA training programme design being finalised; GP appraisal QI activity content complete - awaiting completion of wed design; workshop for finalishing testing results being analyses; 2 Akl workshops delivered with the programme of the activity testing results being analyses; 2 Akl workshops delivered | Green        | Delivered 15 QI workshops; delivered further QI workshop with HS to GP cluster each - using this to reade online/remote QI educational resource. GP approach QI state that the properties of the control of GP workshod analysis project.  | Green        | Further 8 QI workshops planned for Feb/ March (will bring total to 23). QI leaderships<br>course for GPT3s delivered - evaluation positive and further dates planned. QP<br>course for GPT3s and Feb GPT stam (I) activities. All - ongoing analysis of data and<br>planning of future workshops.  | Green        | All 8 (I) workshops planned for delivery in Feb/March have now been delivered. Dates side to be agreed for next year. (of appraisal website now leve. Online resources for GP of the production |
| 8. Workforce    | 8.<br>Co              | 81 Workforce rould be 2 for Ilmun B, st in drop rwn list) | Delivery of eflostering Project within NES.  | Initiation Call     Operational Practice Workshop     Signed PID     Benefits Realisation workshop     Otta collection     Impact Assessment   | - Kick Off Meeting - Data Gathering Complete - Finalise comms and present back to RLD - HealthRoster Build Complete - Roster Build Sign Off - Organisational Readiness Review Sign Off - Organisational Readiness Review Sign | - End User Training Handover - Training Sign Off - Inform Stakeholders of Go Live timeline - Deployment Sign Off - Go live timeline sign-off - Configuration sign-off - Benefits Realisation - Adoption Sign Off - Project Sign Off and Handover To Support & CAD - Support Sign Off and Handover To - Support & CAD - Suppor | - Preparation for go live   | Green        | Finitize workshop completed this week. Onable valis cheduled for 16th Jane for floke Task Analysis, Customer Data Sadining and Process Mapping. Workshops scheduled: Once for Scotland (MCT) Workshop. Work to get the following scheduled: Data Gathering 2 & 3.   | Green        | Option build complete     Comms Ram work progress     Queries Log to be completed     Speter familiarisation and Configuration training started.   | Green        | 1. Champions training date scheduled for 18th 8 18th an 2024 2. Go Live confirmed for WI/C 2nd Inanum Por PilleU Inits 3. Suggested WI/C 19th Feb for 8AU on Site 4. Line Manager User Accounts have been created by RLD   | Green        | The eflostering system has been been implemented for staff and managers. Currently<br>annual leave functionally is being used. Through the course of 2024 we will deliver:<br>-reduced working week configuration<br>-sichness absence self service<br>- times:heets<br>- overtime and excess hours   |
| 9. Digital      | 9.1                   | 5868 NES<br>Technology<br>Service                         | Support teaths and Social Care workers care for individuals by providing the ability to view a persons care<br>summary information, digital dermatology referrals and related images.  | Deliver the ability search for and view<br>Emergency Care Summary data as part<br>of an individuals Care Summary   | Identify user needs to best support<br>viewing an individuals Digital<br>Dermatology referrals and related<br>images through Care Summary as part<br>of the Accelerated National Innovation<br>Adoption (ANIA) programme      | Deliver the ability search for and view<br>digital dermatology referrals and<br>related images as part of an individuals  | Identify other datasets to include as part of<br>an individuals Care Summary  | Amber        | Discovery work on this project has lead to the need for clarification of use and<br>value cases; development has commenced but additional User Research required in<br>order to ensure maximum benefits are obtained.   | Amber        | Work has been done to make use of the NES Care Summary Api and demographic<br>service for retrieving emergency care summary data. Discovery work around use<br>cases still ongoing with regards to the digital dermatology use case.   | Amber        | Raadmap of product dependent on steer from Scottish Government Digital Heath 8,<br>care Directorate (DHAC) and Digital Front Door (DFD) project. Development paused.   | Amber        | Raadmap of product dependent on steer from Scottish Government Digital Health &<br>Cure Directorate (DHAC) and Digital Front Door (DFD) project. Development paused.  |
| 9. Digital      | 9.1                   | 5867 NES<br>Technology<br>Service                         | By the end of March 2024 integrate OpenEyes with the National Digital Platform EMPI (Enterprise Master Patient Index) service for demographics search and validation and to post and retrieve a summary dataset from the NDP   | Rollout of v6 to NHS GG&C, the EMPI<br>work is scheduled for Q2.   | As part of the consolidation work, EMPI will be integrated with the application.  | As part of the consolidation work,<br>EMPI will be integrated with the<br>application.  | The EMPI work will have been completed by Q4.   | Green        | Work is on track and scheduled for Q2.  | Green        | Work is now scheduled for the end of Quarter 3.  | Amber        | Impact of delays within the Community Health Index (CHI) programme on dependent team availabilities has delayed this work approximately two months.  | Amber        | Impact of delays within the Community Health Index (CHI) programme on dependent<br>team availabilities has delayed this work. This was then compounded by a production<br>issue; work to be completed in Q1 FY24/25.  |
| 9. Digital      | 9.1                   | 5839 NES<br>Technology<br>Service                         | Support of the Vaccination improvement Programme through the support and maintenance of the Tural<br>Vaccination Management tool which curvelly enables the support of restructed excitation data scross Sostand<br>and the National Clinical Datastore which is the single source of truth for vaccinations in Scotland allowing this<br>data to be shared for reporting, analysis and operational use by other systems   | The programme is in a transition phase and as such the development team are focusing on addressing technical dead twithin the application. Uncertainty around future funding, clinical safety away well the transition of programme from Scottish Government to bublic Health Scottish of the standard of the standard that the safety of the safety | Interface) and application. Additional goals will be determined by the wider  | Will be determined by the wider programme.  | Will be determined by the wider programme.  | Amber        | Market a smaker as white BML work is ongoing, clarity or future direction and<br>governance of all of work and any organizers is all uncertain, this makes the<br>development of a meaningful product roadmap challenging.  | Amber        | Marked, a maker as white Business is Usual work to registing, clustly regarding the<br>Usuare direction and governance of order succlassion programme is still uncertain,<br>this therefore makes the development of a meaningful product readmap<br>challenging.  | Amber        | Maried a smber as white Business At Usual work is organize, clurity re: future direction<br>and governance of wider vaccination programme is still uncertain, this makes the<br>development of a meaningful product readmap challenging.   | Amber        | Maked a Amber as while Business As Usual work is coppoling cluthly to: floure direction<br>and governance of indeview conclaims organizenes is all uncertain. This makes the<br>development of a meaningful product roadmup challenging. New governance<br>arrangements have been confirmed for FAQASS and it is expected that agreed priorities<br>will be confirmed 0.2 FY24/25. NTS continue to actively engage with the programme and<br>advise on technical solutions.   |
| 9. Digital      | 9.1                   | 5870 NES<br>Technology<br>Service                         | England (FNPE) product for use in NHS England to ensure FNP nurses and supervisors have the ability to capture<br>and track visit information  | Safeguarding reports will be delivered<br>by mid-May 2023 then, in line with<br>contractual commitments,<br>development will pause on FNPE until<br>Q3. The Delivery Manager will faise<br>with customer during this time.   | No Q2 milestones are planned for FNPE.  | Will be determined by feedback from Q1/2.   | Will be determined by feedback from Q1/2/3.   | Amber        | As the project has evolved there is an increasing need for a different skillset<br>(Dusiness intelligence/data engineering) which does not exist within NSS in<br>sufficient capacity to meet demands on a growing number of projects.  | Amber        | As the project has evolved there is an increasing need for a different skilbet<br>(Dusiness intelligence/data engineering) which does not exist within NES in<br>sufficient capacity to meet demands on a growing number of projects.  | Green        | As per contract, no work undertaken in Quarter 3.  | Amber        | Minor amendments delivered in line with contractual arrangements. Two of the three<br>person team resigned during QL, recruitment activity underway, skillset of staff sought<br>being reviewed.  |
| 9. Digital      | 9.1                   | 5863 NES<br>Technology<br>Service                         | Provide user support and maintenance for Trans Care Management (juding) houldes tool) which is used by all Older<br>People and Adult on the Provide and Social Control of Social Partnerships and Social Society<br>with staffing information which provides Health & Social Partnerships and Socialsh Government with information<br>in order to provide support to care homes and inform policy decisions in this area.  |  |   |   | Maintain Turs Care Management for all<br>Older people and adult care homes.   | Amber        | Organieg discussions with 5G re. Imager form future, paper submitted to 5G recoptions for tactical solution for Winter Planning 23/24.  | Amber        | Understalling work with SG for the tactical winter planning solution. Short term<br>funding for this kacing pince of work was received from SG. Long term future<br>discussion still on going.   | Amber        | Tactical adultion deployed in November 2023. There is not a dedicated team on this application and the application carrier as to to of technical debt. The future of this product will need to reviewed in Quarter 4.  | Red          | This delicroble has been categoried as field at the end of 2021/24 as there have been ongoing discussions with Scattish Genement in relation to the longer term future of this work and there is no declared NTS team resource for this product. An of 2023/24 Oct, funding has not yet been argened. Not have delivered the majority of the work requested as a result of some short-term funding received from SG and assistance from other NTS teams however this is not a sustainable long-term position.   |
| 9. Digital      | 9.1                   | 5713 NHS Scotland<br>Academy,<br>Learning &<br>Innovation | Deliver TEL slignment with: learning & education strategy: various corporate QI projects; and NES work as dictated by strategic priorities, including engagement and needs assessment with other stakeholders.   |  | Full & complete suite of TEL design modules.  | Identify and deliver TEL actions arising from the learning & education strategy.  | Develop a clear TEL support plan which is agreed with all NHS Boards.   | N/A          | Deliverable added after 2023-24 Q1.   | Green        | Full & complete suite of TEL design modules now published on Turas Learn on<br>Technology Enhanced Learning Design and Facilitation page<br>intege://learn.nes.nhs.com/62366v  | Amber        | Active participation and TEL input in Learning and Education Quality System (LEQS)<br>Corporate improvement Projects - key contributions to Educator Quality and<br>Competence workstream and joint Workstream Leaf for Learning Design and Practice.<br>Analysing publication of Learning and Education Strategy to fully align actions as por Q3<br>larget.  | Amber        | TEL Design and facilitation modules accessible to staff in all Boards, and promoted via<br>NRS Scotland LBD Leads channels. TEL CPD sessions arranged for NRS Scotland<br>eterating Builders Network in 2024, covering Evaluation and Storyboarding. PRIO of TEL<br>1024, and the CPD of TEL<br>monthly session from September 2021 to March 2024, covering key TEL topics.<br>Evaluation report being prepared by GGBC colleagues for publication in April 2024.   |
| 9. Digital      | 9.1                   | 5862 NES<br>Technology<br>Service                         | Support and continually improve the Turas Family Nurse Partnership (FNP) product to ensure FNP nurses and<br>supervisors across Scotland have the ability to capture and track visit information and enhanced reporting.   | Work with SG stakeholders to confirm<br>the requirements of reporting suite.   |   | Refine reporting offering and develop visit tracking.   | Refine reporting offering and develop visit tracking.   | Amber        | As the project has evolved there is an increasing need for a different skillset<br>(business intelligence/data engineering) which does not exist within NSS in<br>sufficient capacity to meet demands on a growing number of projects.  | Amber        | As the project has evolved there is an increasing need for a different skillset<br>(business intelligence) data engineering) which does not exist within NES in<br>sufficient capacity to meet demands on a growing number of projects.  | Green        | First full topic area for SG reporting delivered, major project milestone.   | Amber        | Minor amendments delivered in line with contractual arrangements. Two of the three<br>person team resigned during Q4, recruitment activity underway, skillset of staff sought<br>being reviewed.  |
| 9. Digital      | 9.1                   | 5823 NES<br>Technology<br>Service                         | By end of March 2024 provide a technology solution that enables people to assign learning content to other staff members, suggests learning content based on a persons job role and/or interests and allows people to share and recommend learning content.  | (PMO) to determine deliverables in   | the change programme and user<br>research start determing delivery road   | based on the agreed delivery roadmap  | Continue to work towards delivering to the agreed roadmap   | Amber        | This work aligns with the Turas Refresh corporate improvement programme. NTS are working with PMO to identify plan and deliverables   | Green        | Now falls under the Turas Refresh Corporate Improvement programme and deliverables identified and monitored via PMO.   | Green        | Now falls under the Turas Refresh Corporate improvement programme and deliverables<br>identified and monitored via PMD. Further detail available in Quarter 3 update for<br>deliverable 5905 (now 133).  | Green        | Now falls under the Turas Refresh Corporate Improvement Programme and deliverables identified and monitored via PMO. Further detail available in Quarter 4 update for deliverable 5905 (NHSSA, L.B.).   |
| 9. Digital      | 9.1                   | 5824 NES<br>Technology<br>Service                         | by end of March 2002 provide a technology solution that enables the recording of people who are in training or<br>employment across leaths and Social Circ in Socializad and their related use, employment, learning, education<br>(including placement) records and other attributes that will help support workfore planning, personalisation of<br>learning, improved employment experience, progression and compliance reporting.  | Work with Project Management Office<br>(PMO) to determine deliverables in<br>respect of the Accrediting Body Change<br>Programme.  |   | Agree identified priorities and produce<br>a proposed delivery roadmap  | Start delivery of identified priorities based on the agreed delivery roadmap  | Amber        | This work aligns with the Turas Refresh corporate improvement programme. NTS<br>are working with PMO to identify plan and deliverables  | Green        | Now falls under the Turas Refresh Corporate improvement programme and deliverables identified and monitored via PMO.   | Green        | Now falls under the Turns Refersh Corporate improvement programme and deliverables<br>identified and monitored via PMO. Further detail available in Quarter 3 update for<br>deliverable 5905 (row 133).  | Green        | Now falls under the Tura Refresh Corporate Improvement Programme and deliverables<br>identified and monitored via PMO. Further detail available in Quarter 4 update for<br>deliverable 5905 (NHSSA, L. 8. I).   |

Page 10 of 11

| Recovery Driver | G ADP N             | HS Board NES   | Deliverable Summary  | Q1 Milestones  | Q2 Milestones  | Q3 Milestones  | Q4 Milestones   | Q1 RAG Statu | Progress in Q1   | Q2 RAG State | s Progress in Q2   | Q3 RAG State | us Progress in Q3  | Q4 RAG Status | rs Progress in Q4  |
|-----------------|---------------------|--|--|--|--|--|---|--------------|--|--------------|--|--------------|--|---------------|--|
|                 | teference Re        | eliverable Directorate eference  |  |  |  |  |   |              |  |              |  |              |  |               |  |
| 9. Digital      | 9.1                 | Service  | Technology support of the NMS Soxiand Digital Prescribing and Dispensing Pathways Programme (DPDP) which<br>while set he significant reduction of page prescriptions across Soxiand and efficiencies through the use of the<br>National Digital Platform reusiable service and components.   | Complete the design of the end-to-end<br>DPDP Minimum Viable Product (MVP)<br>Solution Architecture  | advanced electronic signature and<br>public key infrastructure solution. Draft<br>the first iteration of epics and user<br>stories covering the MVP.   | decision. Conceptual and logical data<br>ft models and FHIR/ISON schemas<br>produced. High-level build plan<br>produced.   | y Complete the alpha testing of DPDP API<br>Manager options. Audit and identity and<br>access management requirements added<br>to NDP roadmaps.                         | Green        | Design of the end-to-end DPDP Minimum Viable Product (MVP) Solution<br>Architecture completed.   | Green        | The DRDP programme is jointly delivered by NSS/NES and is currently on track.<br>Quatter 2 Update: Clinical Lead and Director remain embedded in the programme<br>Senior Technical Product Manager in place to scope resourcing needs for 24/25,<br>with a focus on ND Deliverable. The Q3/Q4 milestones will be revised for clarky<br>before the Q3 update window opens.  | Amber        | Programme tracking, as under as lack of confirmed multi-year funding has inhiered<br>resourcing. A building social service in the confirmed multi-year funding has inhiered<br>resourcing. A building behalf to a district the confirmed multi-year plan<br>produced. Clinical Lead and Director remain embedded in the programme. Work<br>has commenced on an alpha test of API Management options.   | Amber         | Alph a testing of two out of three API Manager options complete. Testing of the third<br>option is outstanding. Delay due to resource initially only being available one day per<br>week. I dentify and access management requirements documented and provided to relevant<br>NIP stakeholders. Work on the control of the control of NIP and tresource. Clinical Lead<br>and Director remain embedded in the programme.   |
| 9. Digital      | 9.1 St<br>tie<br>pr | EZZ (also a<br>er 1 PMO<br>oject) Technology<br>Service                | By end of March 2024 continually improve Turst Learn to support NES Online Education Strategy, providing<br>educations across NES Scotland with the ability to create and share engaging educations content. Turst scenar ab<br>provides learners across health and social care in Scotland with the ability to easily identify learning that is<br>relevant and interesting. Ability to report on engagement and completion of learning material. | a (PMO) to determine deliverables in   | the change programme and user<br>research start determing delivery road  | based on the agreed delivery roadmap   | Continue to work towards delivering to the pagreed roadmap  | Amber        | This work aligns with the Turas Refresh corporate improvement programme. NT<br>are working with PMD to identify plan and deliverables. This are also engaged in<br>the wider NES prioritisation of digital requests, some of which may progress this<br>work   | Green        | Now falls under the Turas Refresh Corporate improvement programme and deliverables identified and monitored via PMO.   | Green        | Now falls under the TURAS Refresh Corporate improvement programme and<br>deliverables deminded and monitored via PMO. Further detail available in Quarter 3<br>update for deliverable 5905 (row 133).  | Green         | Now falls under the Turas Refresh Corporate Improvement Programme and deliverables<br>identified and monitored via PIMO. Further detail available in Quarter 4 update for<br>deliverable 5905 (NHSSA, L & I).  |
| 9. Digital      | Ti                  | 05 (also a NH5 Scotland er 1 PMO Academy, oject) Learning & Innovation | Development of online education and learning prospectus.   | Project Scoping and Information<br>gathering to develop TURAS Refresh<br>Programme   | Engagement with SG around funding and requirements for TURAS Refresh programme   | Document (PID) and tenders issued and awarded.   | Refresh programme   | Green        | This is being managed via the Transformation Group but alignment with Turas<br>Refersh and and Qualify Systems OF (Droporate improvement Programmer) project<br>is being actively explored and considered. Discovery questions and underprinning<br>principles which will support categorisation of learning product is under<br>development (learning and education architypes). NES Directorates are aware of<br>need to review and consolidate products.  | Green<br>s   | This work will now sit within a workstream of the Truss Refresh Project Corporate<br>improvement Project, A POID being developed for this work. Enabling work is<br>being progressed, most notably agreement on NES learning and education<br>archetypes which will support categorisation of learning - this underpinning work is<br>complete.  The Knowledge Network (TSN) redesion. First round of user experience interviews.  | 5            | Workstream scope has been developed in line with the other workstreams and the wider TURAS Refresh Programme. Further development schedule for January 2024 to define the required functions, features and outcomes of the prospectus and its potential impact on main and secondary user groups.  | Green         | Ind of project report completed for the Turas Refersh Digital Prospectus Workstream.<br>This has informed the Outline Business case for the Programme which will now be<br>submitted through the governance cycles. As part of the programme to supplement the<br>discovery work, an external technical review highlightest one key foundation<br>architecture changes which will support the building of a Digital Prospectus. Digital<br>Prospectus will continue to be a key workstream in Phase Irve of the Turas Refersh<br>Programme. Key floous for Phase Two is on establishing specific requirements including<br>building personas to ensure user experience is central to the development, and<br>engaging with external users to ascertain the prospectus will meet stakeholder<br>requirements  |
| 5. Digital      | 9.3                 | bobs MHS scotland A addeny, Learning & Innovation                      | Redesign The Knowledge Network (TKXI); manage subscription services; develop and manage Turas Learn conten   | I. I.K. red-sign: Compilete douberly and<br>planning planse, Uper experience<br>interviews, Design wireframers,<br>planning planse, Design wireframers,<br>the planning planning planning planning<br>have moved to new version of<br>RefWorks.<br>Turnss clearn: Migration of Scottish<br>Ambulance service to Turns clearn.<br>Terms of Reference and defined<br>milections agreed for migration of Nict<br>Western tiles and Nic Golden Jubileto<br>to Turns Learn (Golden Jubileto<br>to Turns Learn (Golden Jubileto<br>to Turns Learn (Golden Jubileto<br>dependent on agreement going ahead<br>after options appraisal) | work, user testing, stakeholder<br>engagement;<br>Manages subscription services: submit<br>bid to purchase BMJ Best Practice<br>Comorbidities Manager (BMJ co-<br>morbidities); improve access to OVID<br>databases; | decision made on purchasing BMJ co-  | Develop a survey on the impact of digital<br>library services on practice and circulate to  | Amber        | TNX redesign work progressing but still in the discovery and planning phase. Some user experience interviews have been completed and user survey was Burnched wijb 20th June. Design work in progress and this will also be informed by user feetback. Legary feetbrins platform coded down and all cues should now be using the new platform. NNS Western labs terms of reference and milestones agreed. MNS Goder, ballow explores agreed as Complete and plat to migrate, awarding GNM sign-off. New mild-saly go live date planned with SAC.   | Amber        | The Knowledge Networks (KIN) redesign: first count of user experience interviews complete, there related not crusted design with around navigation. Next steps a softing exercises conducted to support design with around navigation. Next steps a spread and will need thatther discussion in G3.  Working on improving access to OVID databases has been completed with minimal issues.  Unlikely to identify budget for BMI co-morbidities due to request for budget cuts.  MS Golden Jublich here moved their migration to Turss Learn to May 2024.  SAS new go live date proposed for end October 2023.  MSG Western Isles migration date books like it will be delayed.   |              | TRV redesign: The milestone for Islanching the redesigned platform has not been achieved; however, and is a calnete with gover and 0.4. A deciding platform for the new design, in the meantains work is ongoing in the following areas.  Design and situature. Wireframes for the home page have been successfully produced and provisional agreement has been mercated on the manigational structure of the site. And is provisional agreement has been mercated on the manigational structure of the site. And is provisional agreement has been agreed and the team have had training on using the agreed CoLS.  Social Care redesign: Work is also progressing to redesign the social care offerings on that it is more imagenated in to the redesign of the Knowledge Network. Communication on these plans, including user feedback on new social care content, has been shared with key contact.  File and image review. Files and images linked to the current version of The Knowledge Network are under evenium. He interior time to the current version of The Knowledge Network are under evenium. He interior is not progressed to the control of the flow of the control of the Country of | Amber         | The Knowledge Network redesign is nearing completion, targeting a launch date of Jülk April 2024. A communication plan has been developed to support user engagement and promotional activities post-baunch.  Preparations for the national tender of subscriptions content is underway. A value and impact survey was available during efeiturary March on the use of and impact of subscriptions which received over 80 response. A princip fails has been diratted and activities of the property of the pr |
| 5. Digital      | 9.1                 | 5550 Workforce   | Deliver a national programme to improve the digital capability of the health and social care workforce across<br>Scotland. (Also included in 9.3)  | milestones aligned to the<br>commissioned work from the Digital  | milestones aligned to the<br>commissioned work from the Digital  | and milestones aligned to the<br>commissioned work from the Digital  | Delivery of the workstream actions and milestones aligned to the commissioned work from the Digital Health and Care is Strategy and Care in a Digital Age Delivery Plan | Green        | Leading Digital Transoftmation in leadth and Care for Scatland MSC Programme commenced April 2022. The Digital Health and Care Leadership Programme selection process was completed in April with 96 participants this is the burgest cohort to date with a 17% increase on control 13. The Kinvoles on control 13. The Kinvoles on control 13. The Kinvoles on Care Interest that the Care Interest I | Green        | Leading in a Digital Age Board Development Sessions: the iterated content design<br>was signed off by Southlie Government, COSA and NE is high and agreement give<br>to commence with two pilot sessions in August, one with NHS Board Development<br>and a second pilot on with an on-NHS admicen to connect with the rest of the<br>health and care sector. September communications plan implemented for self<br>normination. Coshor 12 of the Digital telephila off are Leadership Programme<br>received Dil applications with 80 places available with 16 places offered on cohort<br>22. Mic ni Leading Digital Transformation in Health and Care Leadership Programme<br>received Dil applications with 80 places available with 16 places offered on cohort<br>22. Mic ni Leading Digital Transformation in Health and Care Leadership Programme<br>revers taking place in September. Sortisin Government, COSIA and NES approved<br>were 12 compulsory and electric course and Vera 3. The ELDe Sessions (Bearning<br>design workshops) for the courses within year 2 planned to take place from<br>Cotcher 2023 Horopub to January 2014. He MS ce evaluation group co-created the<br>lagic model for the programme as part of the evaluation plan for measuring impact<br>Resources have been pulsaded to Trust Learn for practitioners including the<br>Mental Netherland Control of the Professional Development Award (Polis Al-<br>gust, As of Awapot 2012, the NHSS Salls high had aftercated 53,200 size visits from<br>Visit and Control of the School of the Cost of the |              | Pand selection completed in beveraber for Cohon 12 of the Opgial Health and Cur- Leadenship Programs (DV) with 80 participants selected to commerce in January He<br>Opgial Mindset Board Development site was published in Turas and five sessions made<br>available to book with 5 sessions delivered in November Leading ligibil Transformation<br>in Health and Care for Scotland MSF. Programme cours design workshops for Year 2<br>POECHT courses completed during CUP/NoVE. An online network event for the<br>Postgraduate MSF. Programme was held for participants on the 14 of September. A<br>weeken are wide fevered or 21 November on the byour Course and participants of the<br>household of the Course of the Course of the September of the September of<br>2002 in Opgial Champton Networks. How they can support the figial skills of your<br>workforce. The Convolving Information, and data (IMOI) learning revolver continued to<br>grow with over 1110 meginers – 4 sessions, interduction – 7 sessions, bis your<br>Introduction – 7 sessions, Introduction y R – 5 Sessions, Excel skills – 3 Sessions. As of<br>Devember 60, 2012 he MSS 5-38 list below intereduction 2 re- Sessions, Salvy<br>Introduction – 7 sessions, Introduction y R – 5 Sessions, Excel skills – 3 Sessions. As of<br>Devember 60, 2012 held SS-38 list below intereduction 2 re- Sessions, Salvy<br>Introduction – 7 sessions, Introduction y R – 5 Sessions, Excel skills – 3 Sessions and office<br>Certaining Modelay & MSS 5-38 list below the order to the birth of the devision from MSS and<br>over the 150 days, with 4,650 for unique vilont over the latt 30 days, You now learn the<br>Clarical Mindsory Group and uploaded to Tura Learn for ore by practitioners. Nev<br>Clarical Mindsory Group and uploaded to Tura Learn for ore by practitioners, Nev<br>Clarical Mindsory Group and uploaded to Tura Learn for ore by practitioners, Nev<br>Clarical Mindsory Group and uploaded to Tura Learn for ore by practitioners, Nev<br>Comment MR records have been developed and added for Tura cale and for   | Green         | The Professional Development Javard in Technology Enabled Cark Cabort 12 42<br>participants completed on the 31 january 2024 and Cohort 13 commenced on the 22<br>january with 44 participants. Digital health and Social Care Leadership Programme<br>application process for Cohort 23 opened on the 15 january until 18 March following<br>selection panel 80 Participants are commencing on 7th May. The Leading Bigital<br>Transformation in Intellal mod Care for Sociation MSC in-person Postgraduate Learning<br>and Network event was held for the course participants on the 27 February 2024.<br>RSCert for one commention of 19 2024 cleaning mit be light Jage Board<br>Communications campaign for the 2024 bookable date. As of March 2024, the MSG<br>Salls Nah had states of 5,899 set withor no MIS staff over the bast 50 days, with 3,985<br>unique visitions over the last 30 days. The Turas build of the Digital and Data Skills<br>Resource that is more complete, with the poli to funched in March with over 200<br>resources. The Knowledge, Information and Data Learning Network continues to grow<br>with over 131 amendments with 5 community meet ups during 6.8 for training sessions<br>were delivered in 64 covering the different levels beginners, introductory and<br>intermediate in the following subjects: Power BJ, R, Shiny and Sacial skills.  |
|                 |                     | 5895 Planning &<br>Corporate   | Development and approval of a refreshed Corporate Strategy for NES covering there period 2023-26.  | Strategy approval - May 25th 2023.   |  |  |   | Blue         | Strategy approved by NES Board on 25th May 2023  | N/A          | N/A - Deliverable completed in Q1  | N/A          | N/A - Deliverable completed in Q1  | N/A           | N/A - Deliverable completed in Q1  |
|                 |                     | 5896 Planning &<br>Corporate<br>Resources                              | Development and approval of a Communication and Engagement Strategy for NES covering the period 2023-26.   | Strategy approval - May 25th 2023.   | Development of supporting internal communications plan aligned to organisational development activities.   |  |   | Green        | Strategy approved by NES Board on 25th May 2023. Work progressing to develop action plan.  | Green        | Comms and engagement approach paper with clear activities aligned to OD Plan an<br>transformation routemap agreed by Transformation Group (TG).  | d Green      | Update paper presented to TG in December 2023 summarising activity in relation to CIP and comms to support transformation. Positive feedback from staff on new approaches such as monthly CEO standups and topic specific webinars.  |               | Communication and Engagement arrangements outlined in Strategy and supporting documents have been implemented in line with deliverable.  |
|                 |                     | 5892 NHS Scotland<br>Academy,<br>Learning &<br>Innovation              |  | Strategy development.  | Strategy development.  | Strategy approval.   |   | Green        | The Development of a discussion paper and initial meeting of a drafting subgroup have been completed. Meetings have then place with by experior stakeholders (including the NES Chief Executive) and an initial structure and proposal of contents have started to be developed. A governance teminien has been agreed with the Chief Executive, Board Chair and Committee Chairs. A project plan is in place describing all key milestones including those related to consultation.   |              | initial draft of Strategy produced by drafting subgroup and Learning & Education<br>Reference Group, Seven Untribe Restations have been produced incorporating<br>feedback and responses to internal consultation within NES. Next draft has been<br>reviewed by the Chief Escutive and with the be reviewed by Tourist of the NES<br>located. Design work planned and Board Development Session to be conducted on<br>28 October 1023. Listernal consultation will commence as soon as design work<br>complete (Quarter 3).   | Amber        | External consultation regarding MSL searning & Education Strategy now complete with<br>positive response-overall. Board development season delivered with strong support<br>from NSE Board on approach taken. Board approval was planned for 23 November 2023<br>however in discussion with the NSC Date and Chel Escuches this has been delayed with<br>the February 2028 Public Board meeting to allow further time to reflect the external<br>consultations regarden in MSE Storring & Education Strategy content. Therefore, there<br>is some slippage and work will continue this Quarter 4.  | Blue          | The MS Learning and Education Startegy was approved by the NSE Board in February 2022 and is non-politheid. The Startegy is available on the NSE public velosite and through this finit: https://www.nnes.scot.nhs.uk/media/hwdneqnw/nes_learning_and_education_strategy_2023-2026.pdf   |
|                 |                     | Academy,<br>Learning &<br>Innovation                                   | Development and approval of a Research and Innovation (R&I) Strategy for NES.  | Engagement activity.   | Scoping activity.  | Strategy development.  | Ongoing scoping and development to<br>support the revised timescales for the NS<br>Research and Innovation Strategy, with<br>development to continue into 2024/7S.      | Green        | Engagement continues and R&I Startegy recognized as part of suite of enabling<br>strategies undergring NES Startegy 2012-35. Who the Develop structure and<br>capacity within new NRSSA, L&I Directorate continues and will support scoping and<br>development in Q2 - Q3.   | Green        | Engagement developing to inform content of a draft ennovation strategy via the<br>honovation Reference group with accompanying working schedule, Terms of<br>Reference and mixed representation.   | Green        | Internal engagement via the Innovation Reference Group continues to inform content consideration. Due to pacely shallenges has been agreed that the development of a MSS Research & Innovation Strategy will continue into business yes 2024/25; with a second of the Content of the | Green         | Internal engagement via the innovation Reference Group continues to inform and<br>strengthen this worksteram. Now agreed, this work will be little the Innovation Plan, as<br>a complement to the approved NRS Learning and Education Strategy. Innovation activity<br>adigning to 5 key action themes and progressing.  |
|                 |                     | Corporate  | Development and delivery of a referehed approach to performance management across NES which slights with the<br>new NES Strategy and enables the Board to monitor progress in the delivery of its strategic intent and enhances<br>corporate oversight and management of performance at all levels.  | e Approval of Key Performance Indicator<br>(KPs) by NtS Board. Development of<br>data collection and reporting<br>mechanisms for new areas of<br>measurement.  | s Baselining and target setting. Reportin<br>of Quarter 1 data in new reporting<br>format.   | g Phase 2 measures collection and reporting mechanism development.   | Testing of reporting for new areas of<br>measurement shead of implementation<br>into reporting in 24/25.  | Green        | EPis approved by Board. Data collection and analysis agreed for Q1 reporting.  | Green        | ISP reporting for Quarter 1 completed. Definition and measurement of Phase 2 metrics for reporting in Quarter 2 underway.  | Green        | The Learning and Education Qualify System Project is making good progress with leads<br>appointed for all workstreams, regular meriting scheduled and project and programme<br>plans in place. Discovery work is well underway. Some workstreams have moved into<br>development activity (e.g. Ca-Production and Under Experience, Caucator qualify and<br>competence). Whole project development day planned for lanuary 2024, to include<br>TURAS Efferth programme team. Comma and engagement have been greatly enhanced<br>and the project is progressing at pace and has significant traction within directorates<br>across MSS. Alfrids and controls are being managed via the MSF Argamme<br>Management Office (PMO), Project Board and Transformation Group.   |               | Delivery of year 1 of implementation has progressed and KPR Review to inform year 2<br>commenced as planned. Wor for further define and implement metrics will continue as<br>aligned to delivery of broader corporate change activities e.g. Learning and Education<br>Quality Systems Project.   |
|                 |                     | 5898 Planning &<br>Corporate<br>Resources                              | Development of Anchors Strategic Plan for NES.   | Engagement and scoping activity,   | Plan development.  | Approval and commencement of<br>delivery.  | Delivery of milestones as articulated in plan<br>once developed.  | Green        | Contact details provided to SG lead. Awaiting SG guidance on plan development.   | Green        | Data collection underway, initial outline of document in development with timeline<br>set for completion.  | Blue         | Anchors Strategic Plan drafted and approved by the Board at the Public Board meeting<br>held on 23 November 2023.  | N/A           | N/A - Deliverable completed in Q3  |
|                 | pi                  | *1 PMO<br>oject)   | Scope and develop an organisation wide approach to engagement and participation activities in partnership with people with fixed and fiving experience.  | partners who are experienced in this<br>area. Internal engement via NES<br>Educational Leadership Groot (PELG)<br>and staff survey for some awarens and<br>gauge current activity.   | work. Establishment of a NES Versing<br>Group and identification of "Advisors"<br>able to support this work.   | current activity where people with beved operiones are engaged in the design of our educational resources. Sogging of our educational resources. Sogging of potential for a Community of Practice. | policy requirements to support activity.<br>Identification of further areas of work.  | Green        | acore group constitute of MES colleagues from corporate planning, corporate improvement, the workforce directions and the social care effects and the social care of the effects of the social care all the effects of the effect of the effects of the effect of the effects of the effec |              | in Quarter 2 the Co-production and Lived experience workstream has progressed the following activities:  **Men membership of the core group has been extended to provide a good level of crost-directorate representation.  **Partice core group took part in a workshop covering supects of the workstream and particularly the ways in which colleagues could be involved in developing the NES Adviced management resources have been allocated to support development of a project plan, identify of risks and dependencies and stakeholder mapping and to design flash report template.  **Spressions of interest have been received from colleagues interested in the development opportunities offered as advices working with his workstream.  **Spressions of interest have been received from colleagues interested in the development opportunities offered as advices working with his workstream.  **Spressions of interest have been received from colleagues interested in the development opportunities offered as advices working with his workstream.  **Spressions of interest have been received from colleagues interested in the development opportunities of the collection and spressions of the collection of the collection and teaded with the collection of the collection and teadership group and staff stores; place from collection and teadership group and the collection and teadership group and staff stores; place from collection and teadership group and the collection and teadership group and teadership group and the collection and teadership group and teadership group and the collection and teadership group and the collection and teadership group and the collection and teadership group and th                                     | Green        | in Quarter 3 the Co-Production and Used experience workstream has progressed the following activities:  — The core group consisting of cross directorate representation has met on a monthly basis.  — The workstream facilitated a NES Educational Leadership Group session and collated colleges of which the workstream facilitated a NES Educational Leadership Group session and collated colleges of week, experiences, does and suggestions to inform the workstream Progressian Colleges of the Colleg | Green         | The Enemench has been duffed and socialised with ozen MES teams. It has been reveneded to the MES florational selections forgo who provided receiback via a saddlet. It has also been shared with some external partners who have provided receiback. We will be presented to ET little this month, in addition, we have engaged with colleagues internally who have highlighted previous examples of engagement with people with two desperience, and have both explored the potential for a Community of which we have engaged as emploite to gather case studies. Further, we have exceed the exploration of the MES, while bringing forward recommendations for its refinement.  |
|                 | Ti                  | (06 (also a NHS Scotland er 1 PMO Academy, Learning & Innovation       | · ·  | Programme discovery and development of programme structure   | identification of worksteams and workstream leads  | Discovery commenced for programme workstreams  | Framework developed and policy gaps identified.   | Green        | SIAD. Section Responsible Officers) identified, Project initiation Document approved, and project band relabilished and will meet for the 1st time on 28th July Workstream have been agreed and PMLO is supporting workstream leads to establish workstream project. Identification of resource to support project leads (where not already in place) is underway through Transformation Group.  | Green        | Project Boards continue to meet on monthly basis. Workstream Leads identified.<br>Resource requirements for each workstream partially understood.<br>Capacity: new Principal Educator (Learning & Education Quality) under recruitment<br>Project opportunities disseminated across NES.   | Green        | The Learning and Education Quality System Project is making good progress with leads appointed for all workstreams, regular meining scheduled and poject and programme plans in place. Discovery work is well underway. Some workstreams have moved into development activity je. Co-Production and their Experience, Caucture quality and conspictured. Whose project development day planned for sharway 2004, to include constitution. Whose project development day planned for sharway 2004, to include and the project jet progressing appear and has spirificant traction which development and the project jet progressing appear and has spirificant traction which development across NES. All risks and controls are being managed via the NES Programme Management Office (PMO), Project Board and Transformation Group.   | Green         | The Learning and Education Quality System (ECGS) Project continues to make good<br>progress with a number of workstream producing outputs for approval through NS<br>Exec Team. These will contribute to the LECS project as a whole and demonstarte that<br>progress is being made. 5 of? workstream have moved out of discovery phases and<br>are undertaking development activity. Commitment from workstream leads and<br>competing priorities in local teams and fiscal/resource constraints.   |
| 10. Climate     | 10.1                | 5907 Finance   | Development of NES Climate Emergency & Sustainability Strategy   |  |  |  | Strategy development including scoping<br>and engagement activity with stakeholders.  | N/A          | N/A  | N/A          | N/A  | N/A          | N/A  | Green         | Draft NES Climate Emergency & Sustainability Strategy developed and reviewed via the<br>NES Climate Emergency and Sustainability Group and appropriate stakeholder<br>engagement has taken place. On track for presentation to the Executive Team and the  |
|                 |                     |  |  |  |  |  |   | l            | 1  | 1            |  |              |  |               | NES Board in 2025/25 Quarter 1.  |

Page 11 of 11



**NHS Education for Scotland** 

**NES Public Board** 

Agenda Item: 10a

Meeting Date: 23 May 2024

#### 1. Title of Paper

1.1. Whistleblowing Executive Lead Annual Whistleblowing Report 2023/24

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

2.1. Nancy El-Farargy, Planning and Corporate Governance

#### 3. Lead Director(s)

3.1. Christina Bichan, Director of Planning and Performance

#### 4. Situation/Purpose of Paper

- 4.1. The National Whistleblowing Standards (the Standards)<sup>1</sup> set out how the Independent National Whistleblowing Officer (INWO) expects all NHS Scotland service providers to handle any whistleblowing concerns.
- 4.2. Whistleblowing is defined as "when a person who delivers services or used to deliver services on behalf of a health service body, family health service provider or independent provider (as defined in section 23 of the Scottish Public Services Ombudsman Act 2002) raises a concern that relates to speaking up, in the public interest, about an NHS service, where an act or omission has created, or may create, a risk of harm or wrong doing"<sup>2</sup>.
- 4.3. In line with the Standards, all NHS Scotland Boards are required to publish an Annual Whistleblowing Report. The attached report at Appendix 1 is the third annual report and presents our whistleblowing performance for the period 01 April 2023 to 31 March 2024.

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

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

### 5. Background and Governance Route to Meeting

- 5.1. The attached Annual Whistleblowing Report (Appendix 1) builds on the quarterly whistleblowing reports that were submitted to the Staff Governance Committee.
- 5.2. The Executive Team received the Annual Whistleblowing Report at their meeting on Tuesday 23 April 2024.
- 5.3. The Staff Governance Committee received the Annual Whistleblowing Report at their meeting on Monday 29 April 2024.

#### 6. Assessment/Key Issues

- 6.1. Appendix 1 Annual Whistleblowing Report 2023-2024 outlines:
  - A brief 'at-a-glance' summary of key highlights during 2023-2024.
  - An introduction, context and the legal frameworks behind the work.
  - A chronological summary of our activities during 2023-2024.
  - The whistleblowing annual return and key performance indicators.
  - A conclusion to the report.

#### 6.2. Some key highlights include:

- During 2023-2024, two whistleblowing concerns were received: one at stage one and the other at stage two.
- Two additional Confidential Contacts were recruited, bringing our pool to four.
- Two of the Confidential Contacts introduced themselves in a recorded video message.
- Eighty-seven percent of line managers (308/354) completed the required training on "Turas Learn".
- From all NHS Scotland boards, we achieved the highest 'iMatter' survey scores on the two whistleblowing questions.
- 6.3. Chaired by Christina Bichan, Director of Planning and Performance, the Whistleblowing Steering Group continued to meet to review and discuss the work.
- 6.4. This is the third Annual Whistleblowing Report and we have welcomed the opportunity to reflect on our activities throughout 2023-2024, and on our experiences and learning to date.
- 6.5. We continue to encourage all staff to raise any concerns and continue to ensure that everyone feels supported in doing so.

#### 7. Recommendations

7.1. The attached Annual Whistleblowing Report 2023-2024 (Appendix 1) is for review and approval.

| Au          | tho | r to include any narrative by exception in Section 6 of the cover paper.  |
|-------------|-----|---|
|             | a)  | Have educational implications been considered? Yes No   |
| $\boxtimes$ | b)  | Is there a budget allocated for this work? Yes No   |
|             | c)  | Alignment with Our Strategy 2023-2026 People, Partnerships and Performance  |
| $\boxtimes$ |     | <ol> <li>People objectives and outcomes</li> <li>Partnership objectives and outcomes</li> <li>Performance objectives and outcomes</li> </ol>  |
| $\boxtimes$ | d)  | Have key strategic risks and mitigation measures been identified? Yes No  |
| $\boxtimes$ | e)  | Have equality, diversity, human rights and health inequality issues been considered as per Fairer Scotland Duty: Guidance for Public Bodies and Corporate Parenting as per the Children and Young People (Scotland) Act 2014?  Yes No |
| $\boxtimes$ | f)  | Has an Equality Impact Assessment (EQIA) been completed or in progress for this piece of work? Yes No   |
| $\boxtimes$ | g)  | Have you considered emergency climate change and sustainability implications as per <u>DL (2021) 38</u> ? Yes No  |
|             | h)  | Have you considered a staff and external stakeholder engagement plan?<br>Yes<br>No  |
|             |     | or: Nancy El-Farargy<br>03 May 2024   |

Author to complete **checklist**.

NHS Education for Scotland (NES)



# **Annual Whistleblowing Report 2023-2024**

**NHS Education for Scotland** 

03 May 2024



## **Contents**

| 1. | Whistleblowing 2023-2024: At-a-glance                       | 3  |
|----|---|----|
|    | Introduction  |    |
| 3. | Context and legal frameworks                                | 5  |
| 4. | The whistleblowing procedure                                | 8  |
| 5. | Our activities during 2023-2024                             | 11 |
| 6. | Whistleblowing annual return and key performance indicators | 15 |
| 7. | Conclusion  | 18 |
| 8. | Appendix A: Key Performance Indicators                      | 19 |



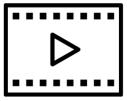
#### 1. Whistleblowing 2023-2024: At-a-glance

# NHS Education for Scotland Whistleblowing 2023-2024 At-a-glance

Two

additional Confidential Contacts were recruited, bringing our available pool to four.

Two Confidential Contacts introduced themselves in a recorded video message. They highlighted their role and their willingness to provide advice and support to colleagues.



**87%** 

of line managers completed the required training.

| Concerns            | Stage one | Stage two |
|---------------------|-----------|-----------|
| Upheld              | •         | 1         |
| Partially<br>upheld | •         | •         |
| Not upheld          | 1         | -         |

2 CONCERNS RECEIVED

In the national 2023 'iMatter' survey, we achieved the **highest score** (in NHS Scotland) on the whistleblowing statements:

- Confident to safely raise concerns about issues in the workplace.
- Confident that concerns will be followed up and responded to.



Figure 1: Whistleblowing 2023-2024 'at a glance' summary.



#### 2. Introduction

- 2.1. This is the third NHS Education for Scotland (NES) Annual Whistleblowing Report, which presents our whistleblowing performance during 01 April 2023 to 31 March 2024 inclusive.
- 2.2. The Public Services Reform (The Scottish Public Services Ombudsman) (Healthcare Whistleblowing) Order 2020¹ created a new route for whistle-blowers in the healthcare sector to bring escalated complaints to the Scottish Public Services Ombudsman (SPSO) (via the Independent National Whistleblowing Officer. Subsequently, the April 2021 National Whistleblowing Standards² (the Standards) set out a national procedure for all NHS Scotland boards to handle any whistleblowing concerns.
- 2.3. Since the launch of the Standards, we continued to build on experiences and learning to date, and to promote a culture where everyone is confident to raise any concerns in the public interest. We continued to engage with our staff to foster a more open, honest and inclusive working culture, and to give assurances that any issues will be investigated fully and impartially.
- 2.4. In line with the Standards, all NHS Scotland boards are required to publicly report on any whistleblowing concerns on a quarterly basis and to publish an annual report. Throughout 2023-2024 the Staff Governance Committee received a whistleblowing performance report on a quarterly basis.
- 2.5. This report is presented as follows:
  - A summary of the context and legal frameworks (p. 5).
  - An overview of the whistleblowing procedure (p. 8).
  - A chronological summary of our activities during 2023-2024 (p. 11).
  - The whistleblowing annual return and key performance indicators (p. 15).
  - A conclusion to the report (p. 18).

Annual Whistleblowing Report 2023-2024

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

<sup>&</sup>lt;sup>2</sup> Independent National Whistleblowing Officer (2021) 'The National Whistleblowing Standards - April 2021'. Edinburgh: Scottish Public Services Ombudsman. Available at:

https://inwo.spso.org.uk/sites/inwo/files/Standards/NationalWhistleblowingStandards-AllParts.pdf (Accessed: 24 January 2022).



#### 3. Context and legal frameworks

- 3.1. To understand the background behind current whistleblowing arrangements in NHS Scotland, several reports merit a mention.
- 3.2. Firstly, the NHS Scotland Staff Governance Standard<sup>3</sup> outlines the responsibility of employers to ensure that staff feel safe to speak up about any wrongdoing. It also places a responsibility on staff to speak up on issues that may cause upset and alarm, in line with the whistleblowing policy.
- 3.3. The Mid Staffordshire NHS Foundation Trust Public Inquiry report<sup>4</sup> highlighted the need for a common patient-centred culture, clear standards and measures of compliance, and openness, transparency and candour throughout 'the system'. The resulting 290 recommendations aimed to put patients and their safety first, with cultural change required at all levels. The recommendations included patient, public and local scrutiny, performance management and clear metrics on quality.
- 3.4. Leading on from the above Public Inquiry report, the February 2015 'Freedom to speak up' review<sup>5</sup> highlighted the need for additional measures to ensure that all NHS staff can freely raise any patient safety concerns. The report was related to NHS England, however, the Scottish Government welcomed it and used its findings to further support, encourage and promote whistleblowing in NHS Scotland. The findings were also considered in relation to the whistleblowing policy in place at the time and the potential change to NHS Scotland's whistleblowing approach.
- 3.5. The 2019 report by John Sturrock QC investigated allegations of bullying and harassment in NHS Highland. This was commissioned by the Scottish Government and was submitted to the then Cabinet Secretary for Health and Sport, Jeane Freeman. Proposals for improvement included an independent whistleblowing process and the provision of an independent "guardian" for anyone wishing to report inappropriate behaviour, and for those whom such behaviour is alleged.

\_

<sup>&</sup>lt;sup>3</sup> Scottish Government (2012) 'Staff Governance Standard: A Framework for NHSScotland Organisations and Employees'. 4<sup>th</sup> edition. Edinburgh: Scottish Government. Available at: https://www.staffgovernance.scot.nhs.uk/media/1342/staffgovernance-standard-edition-4.pdf (Accessed: 28 June 2019).

governance-standard-edition-4.pdf (Accessed: 28 June 2019).

<sup>4</sup> Crown Copyright (2013) 'Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry, Chaired by Robert Francis QC: Executive Summary'. London: The Stationery Office. Available at:

http://webarchive.nationalarchives.gov.uk/20150407084003/http://www.midstaffspublicinquiry.com/sites/default/files/report/Executive summary.pdf (Accessed: 3 August 2015).

<sup>&</sup>lt;sup>5</sup> Francis, R. (2015) Freedom to speak up. An independent review into creating an open and honest reporting culture in the NHS.' Available at: https://webarchive.nationalarchives.gov.uk/20150218150953/https://freedomtospeakup.org.uk/wp-content/uploads/2014/07/F2SU\_web.pdf (Accessed: 11 November 2019).



- 3.6. In response to the Sturrock review, the Scottish Government published their report in May 2019<sup>6</sup>. It highlighted the required learning and reflection for all NHS Scotland boards and committed to building a more open, honest and inclusive culture. Several initiatives were subsequently put in place across NHS Scotland, and these included:
  - The establishment of an Independent National Whistleblowing Officer for NHS Scotland, to investigate the handling of any whistleblowing complaints.
  - The appointment of dedicated Whistleblowing Champions (as Non-Executive Directors) for each NHS Scotland board.
  - A review of the 'Once for Scotland' workforce policies<sup>7</sup>.
  - A standardised 'Once for Scotland' procedure for handling any whistleblowing concerns.
- 3.7. The Public Services Reform (The Scottish Public Services Ombudsman (Healthcare Whistleblowing) Order 2020<sup>8</sup> allowed the Scottish Public Services Ombudsman to take on the Independent National Whistleblowing Officer role. This gives whistle-blowers the opportunity to seek independent external review of their concern raised. The Independent National Whistleblowing Officer also has a national leadership role in providing direction, support and guidance to NHS Scotland boards regarding the National Whistleblowing Standards<sup>9</sup>. These Standards were launched in April 2021 and outline the NHS Scotland-wide procedure for handling any whistleblowing concerns.
- 3.8. The Public Interest Disclosure Act 1998<sup>10</sup> is to protect employees who make disclosures in the public interest and allows them to bring action with respect to victimisation. The qualifying disclosures for protection are:
  - A criminal offence.
  - Failing to comply with a legal obligation.
  - A miscarriage of justice.
  - A risk to health and safety.
  - A risk to the environment.
  - Concealment of any of the above.

Annual Whistleblowing Report 2023-2024

<sup>&</sup>lt;sup>6</sup> Scottish Government (2019) 'The Scottish Government Response to the Sturrock Review: into cultural issues related to allegations of bullying and harassment in NHS Highland'. Edinburgh: Scottish Government. Available at: https://www.gov.scot/publications/scottish-government-response-report-bullying-harassment-nhs-highland/ (Accessed: 30 June 2019).

<sup>&</sup>lt;sup>7</sup> Crown copyright (NHS Scotland) (2024) 'Workforce policies'. Available at: https://workforce.nhs.scot/policies/ (Accessed: 11 April 2024).

<sup>&</sup>lt;sup>8</sup> Crown Copyright (2020) 'Scottish Statutory Instruments. 2020 No. 5. The Public Services Reform (The Scottish Public Services Ombudsman) (Healthcare Whistleblowing) Order 2020'. Available at: https://www.legislation.gov.uk/ssi/2020/5/made (Accessed: 22 October 2020).

<sup>&</sup>lt;sup>9</sup> Independent National Whistleblowing Officer (2021) 'The National Whistleblowing Standards - April 2021'. Edinburgh: Scottish Public Services Ombudsman. Available at:

https://inwo.spso.org.uk/sites/inwo/files/Standards/NationalWhistleblowingStandards-AllParts.pdf (Accessed: 24 January 2022).

<sup>&</sup>lt;sup>10</sup> Crown Copyright (1998) 'Public Interest Disclosure Act 1998. Chapter 23'. Available at: http://www.legislation.gov.uk/ukpga/1998/23/data.pdf (Accessed: 29 October 2019).



- 3.9. In summary, the overall aim is to ensure that all NHS Scotland staff (and others working alongside NHS Scotland):
  - Have the confidence to speak up about any public interest concerns.
  - Feel safeguarded against any potential victimisation and detriment.
  - Know that any issues will be investigated thoroughly and timeously.



# 4. The whistleblowing procedure

- 4.1. The National Whistleblowing Standards came into force for all NHS Scotland boards on 01 April 2021, and replaced any local whistleblowing policies.
- 4.2. The Standards consist of:
  - The whistleblowing principles (which underpin the approach to handling any concerns), and the definitions of "whistleblowing" and "whistle-blower".
  - An overview of the procedure, including the definitions of what is a
    whistleblowing concern, who can raise a concern and a brief description of the
    procedure for handling these concerns.
  - The required governance arrangements.
  - Arrangements for Health and Social Care Partnerships, organisations providing student and trainee placements, and volunteers.
- 4.3. The initial process is to ensure that any issues are dealt with early, via business-as-usual procedures. All staff are encouraged to raise any concerns locally and to have the confidence that they will be positively dealt with professionally and promptly. Although business-as-usual concerns are not part of the formal whistleblowing procedure, they can be an important precursor. If business-as-usual processes are not suitable (for example, for serious high-risk cases), or if all previous means have been exhausted, then a whistleblowing concern can be raised. Whistleblowing should normally be seen as a last resort.
- 4.4. "Whistleblowing" is defined as 11:

"...when a person who delivers services or used to deliver services on behalf of a health service body, family health service provider or independent provider (as defined in section 23 of the Scottish Public Services Ombudsman Act 2002) raises a concern that relates to speaking up, in the public interest, about an NHS service, where an act or omission has created, or may create, a risk of harm or wrongdoing."

- 4.5. Under the Standards, all whistle-blowers are afforded support, legal protections, and confidentiality. A formal whistleblowing concern can be raised when:
  - It is not related to a Human Resources issue.
  - It is in the public interest (for example, patient safety).
  - It is raised within six months (this being the normally accepted time-limit).
  - The business-as-usual process has already run its course (where applicable).

Annual Whistleblowing Report 2023-2024

<sup>&</sup>lt;sup>11</sup> Crown Copyright (2020) 'Scottish Statutory Instruments: 2020 No. 5. Public Services Reform: Scottish Public Services Ombudsman. Public Health. National Health Service. The Public Services Reform (The Scottish Public Services Ombudsman) (Healthcare Whistleblowing) Order 2020'. The Stationery Office. Available at: <a href="https://www.legislation.gov.uk/ssi/2020/5/pdfs/ssi\_20200005\_en.pdf">https://www.legislation.gov.uk/ssi/2020/5/pdfs/ssi\_20200005\_en.pdf</a> (Accessed: 21 April 2022).



- 4.6. If a whistle-blower does not wish to use the Standards for a whistleblowing concern, then the organisation will decide on how to proceed. It is indeed 'good practice' to investigate any issues raised regardless of whether they are raised under the Standards or not.
- 4.7. Anonymous and "unnamed concerns" cannot be formally investigated under the Standards. An anonymous concern is where no-one knows the identity of the whistle-blower. An unnamed concern is where the person raising the concern does not want his/her details recorded within the whistleblowing systems. Both these types of concerns limit the protections available to the whistle-blower and cannot be referred to the Independent National Whistleblowing Officer. However, once again it is recommended practice to investigate any issues, whether they are raised under the Standards or not.
- 4.8. The Standards note a three-stage procedure. At the end of stage two, whistle-blowers are signposted to the Independent National Whistleblowing Officer (Figure 2).
- 4.9.

### Stage one

NHS Education for Scotland

- · Little or no investigation required.
- Early resolution: response issued within five working days.
- Information on stage two provided.

### Stage two

NHS Education for Scotland

- · For issues that require investigation.
- Stage two is also used when stage one is not appropriate.
- Acknowledged within three working days.
- · Detailed response issued within 20 working days.

### Stage three

Independent National Whistleblowing Officer

· Offer of independent external review.

Figure 2: Summary of stages.

4.10. To support the Standards, all NHS Scotland boards are required to have a dedicated Whistleblowing Champion as a Non-Executive Director of the board. The role is to provide independent oversight of the whistleblowing agenda and to provide assurance to the board on the organisation's compliance with the Standards. There is no operational function in relation to the application of the whistleblowing policy or in any investigation of concerns. This dedicated role replaced the previous nominated Non-Executive Director with additional whistleblowing responsibilities 12.

<sup>&</sup>lt;sup>12</sup> Gray, P. (2015) 'Non-Executive Whistleblowing Champion. Letter to NHS Scotland Health Board Chairs (29 September 2015)'. Edinburgh: Scottish Government.



- 4.11. Board members are required to monitor the number of concerns on a quarterly basis at their public board meetings. An annual report that sets out whistleblowing performance is also required.
- 4.12. Confidential Contacts are appointed in each NHS Scotland board to provide support and advice to a whistle-blower (or potential whistle-blower). They offer a safe and supportive environment to discuss any issues of concern and can signpost individuals to support required. Confidential Contacts are not involved in any operational investigation or management of a concern. They support speaking up and help build trust in the process.
- 4.13. The National Whistleblowing Standards are part of the 'Once for Scotland' Workforce Policies programme<sup>13</sup>. These are single, standardised policies that apply to all NHS Scotland employees. There are currently 18 policies under this banner, and include Bullying and Harassment, Grievance, Whistleblowing and the workforce policies investigation process.

\_

<sup>&</sup>lt;sup>13</sup> Crown copyright (NHS Scotland) (2024) 'Workforce policies'. Available at: https://workforce.nhs.scot/policies/ (Accessed: 11 April 2024).



# 5. Our activities during 2023-2024

- 5.1. During 2023-2024 we continued to promote the Standards and to encourage colleagues to speak up on any public interest concern.
- 5.2. In April 2023, we continued to provide progress updates on an informal (unnamed) concern.
- 5.3. Throughout 2023-2024 quarterly whistleblowing performance updates were provided to the Staff Governance Committee. We also provided the Independent National Whistleblowing Officer with updates on our performance and attended some of their webinars.
- 5.4. The second Annual Whistleblowing Report (2022-2023) was tabled at the Executive Team meeting (on 20 April 2023), the Staff Governance Committee (on 04 May 2023) and the public NES Board meeting (on 25 May 2023). Following approval by the NES Board, it was published on 26 May 2023.
- 5.5. Gillian Mawdsley, Non-Executive Director and Whistleblowing Champion provided the NES Board with an assurance report at the NES Board meeting on 25 May 2023.
- 5.6. In May 2023, we published our corporate Strategy 2023-2026, further outlining our commitment to using whistleblowing (and feedback in general) to measure and monitor our performance as an organisation.
- 5.7. In May 2023, Nancy El-Farargy developed a short whistleblowing presentation, to support the induction of newly appointed NHS Education for Scotland Non-Executive Directors.
- 5.8. In May 2023, the Confidential Contacts – Karen Wilson, Director of NMAHP and Deputy Chief Executive and Graham Paxton, Principal Lead – further introduced themselves in a recorded video presentation. They highlighted their role and their willingness to provide a 'safe space' for information, advice and assistance to potential whistle-blowers and to anyone seeking advice about whistleblowing (and related issues). They reiterated their independence from investigating any whistleblowing concerns and provided a summary of the October 2022 all-staff survey responses. In addition, the definition of business-as-usual concerns and some fictional examples were provided. Other existing processes for resolving business-as-usual concerns were highlighted. A reminder of the "TURAS Learn" line manager training offer was also provided. This video communication was a result of the responses from the all-staff survey that was distributed during the first NHS Scotland speak up week. Analysis highlighted that staff wished to find out more about business-as-usual concerns and the Confidential Contacts. The video will serve as an ongoing and useful education and training resource for interested parties.



- 5.9. In May 2023 and August 2023, we contributed to the Staff Governance Standard Monitoring return by providing information on our 2022-2023 whistleblowing performance.
- 5.10. On 12 June 2023, the national "iMatter" health and social care staff experience survey opened to NHS Education for Scotland staff. The questionnaire gave all our staff the opportunity to reflect upon, and feed-back on their experiences at team and organisational levels. Two additional non-mandatory statements on raising concerns, were included in the 2023 survey<sup>14</sup>:
  - "Thinking of your experience in the last 12 months please tell us if you agree or disagree with the following statements:"
    - "I am confident that I can safely raise concerns about issues in my workplace." (Six-point Likert scale.)
    - "I am confident that my concerns will be followed up and responded to." (Six-point Likert scale.)
- 5.11. To build data and yearly comparisons, it is expected that the same two whistleblowing statements will be used in the 2024 iMatter survey.
- 5.12. In August 2023, NHS Scotland boards were invited to review a guidance and information document on the role of whistleblowing champions.
- 5.13. On 24 August 2023, the Scottish Government announced the reappointment of Gillian Mawdsley as Non-Executive Director and Whistleblowing Champion for NHS Education for Scotland (from 01 February 2024)<sup>15</sup>.
- 5.14. In August 2023, Michael Matheson, the then Cabinet Secretary for NHS Recovery, Health and Social Care, Scottish Government, issued a letter regarding patient safety (in the wake of the 'Lucy Letby' verdict) to all NHS Scotland Board Chairs and Chief Executives. It sought assurance from NHS Scotland boards on existing processes and systems for the early identification, reporting and robust timely investigation of any patient safety concerns. This included any concerns that may have been raised through the whistleblowing procedure. The Scottish Government reiterated the seriousness and importance of speaking up, and the policy in place to address any concerns at the earliest possible stage. It also outlined matters related to corporate governance and noted the results of the iMatter survey questions, which included two statements on raising concerns. In response to that letter, we highlighted our responsibilities associated with the Staff Governance Standard and our engagement with the annual iMatter survey. We also noted our work on 'Leading to Change', and work on board development in developing senior leaders.

.

<sup>&</sup>lt;sup>14</sup> Scottish Government (2023) 'Health & Social Care Staff Experience Report 2023'. Edinburgh: Scottish Government. Available at: https://www.imatter.scot/media/2112/health-and-social-care-staff-experience-survey-2023.pdf (Accessed: 30 January 2024).

<sup>&</sup>lt;sup>15</sup> Scottish Government (2023) 'Non-executive Whistleblowing Champion Board Members reappointed to NHS Scotland Boards'. Available at: https://www.gov.scot/publications/non-executive-whistleblowing-champion-board-members-reappointed-to-nhs-scotland-board



- 5.15. On 05 September 2023, several staff attended the Scottish Speak Up conference<sup>16</sup>. This event was independently organised by a group of speak up ambassadors and was supported by several speakers from organisations, which included the Independent National Whistleblowing Officer and the Scottish Government. The day concluded with reflections from the Independent National Whistleblowing Officer on the National Whistleblowing Standards since their launch in April 2021.
- 5.16. In September 2023, a concern was received and was investigated as a stage two whistleblowing concern (this is discussed in the next section).
- 5.17. On 15 September 2023, Christina Bichan, Director of Planning and Performance, and Professor Lindsay Donaldson, Deputy Medical Director met with colleagues from the Independent National Whistleblowing Officer office to support them in developing their understanding around how the Standards have been implemented with respect to doctors in training. This was a positive meeting which raised awareness of our work and supported the further development of relationships with the Independent National Whistleblowing Officer colleagues.
- 5.18. In September 2023, the Whistleblowing Steering Group (chaired by Christina Bichan, Director of Planning and Performance) met and discussed current arrangements, the Confidential Contacts, and preparations for speak up week (02-06 October 2023).
- 5.19. On 19 September 2023, Pamela Renwick, General Manager, Workforce, was appointed as an additional (third) Confidential Contact.
- 5.20. Hosted by the Independent National Whistleblowing Officer, the second national speak up week took place between 02 October 2023 and 06 October 2023. This was an opportunity for all health boards to highlight the benefits of speaking up and to demonstrate that speaking up is welcomed and valued. The theme was "learning from concerns". Our activities involved two intranet news-feed articles:
  - "Speak up week: Nancy El-Farargy reflects on the Whistleblowing Standards."
  - "Speak up week is for everyone."
- 5.21. The Independent National Whistleblowing Officer advised that the next speak up week will be held on 30 September 2024 to 04 October 2024.
- 5.22. In October 2023, a stage one concern was concluded (this is discussed in the next section).
- 5.23. On 23 November 2023 at the public Board meeting, the NHS Education for Scotland iMatter report was made available. This included information on two new (nonmandatory) whistleblowing statements (as per the next paragraph).

<sup>&</sup>lt;sup>16</sup> Scottish Speak up conference Tuesday 5th September 2023 (2023). Available at: https://www.speakup.scot/programme (Accessed: 7 July 2023).



- 5.24. On 28 November 2023, the NHS Scotland-wide iMatter Health and Social Care staff experience report was published <sup>17</sup>. With respect to the two new (non-mandatory) whistleblowing statements for 2023, our board had the highest scores in NHS Scotland for both measures. It is also worthy to note that the difference between the two scores is three points (and is the lowest in NHS Scotland):
  - "I am confident that I can safely raise concerns about issues in my workplace." Score = 86<sup>18</sup>.
  - I am confident that my concerns will be followed up and responded to." Score = 83<sup>19</sup>.
- 5.25. In December 2023, the Whistleblowing Steering Group convened, and discussions included the peer network for Confidential Contacts, future promotional communications/articles on the Confidential Contacts and line manager whistleblowing training.
- 5.26. On 20 December 2023, Professor Lindsay Donaldson, Deputy Medical Director, was appointed as an additional Confidential Contact. This brought our pool of Confidential Contacts to four (Karen Wilson, Graham Paxton, Pamela Renwick and Lindsay Donaldson).
- 5.27. In early 2024, we contributed to the request from the NHS Scotland Human Resources' Directors group for some reflective and evaluative information on the work of the National Whistleblowing Standards. This stemmed from a meeting request from the Independent National Whistleblowing Officer to the Human Resources' Directors group.
- 5.28. On 01 February 2024, a reminder on "essential learning" was issued to all staff, via the "NES Matters!" newsletter.

\_

<sup>&</sup>lt;sup>17</sup> Health and social care staff experience report (2023). Available at: https://www.staffgovernance.scot.nhs.uk/monitoring-employee-experience/health-and-social-care-staff-experience-report/.

<sup>&</sup>lt;sup>18</sup> This score is "based on the number of responses for each point on the scale (Strongly Agree to Strongly Disagree) multiplied by its number value (6 to 1). These scores are added together and divided by the overall number of responses to give the score to show level of engagement." The NHS Education for Scotland overall response rate to the survey was 88%. Responses to these two statements were not mandatory (and the sample counts are currently not accessible).

<sup>19</sup> Ditto.



# 6. Whistleblowing annual return and key performance indicators

- 6.1. This section of the report outlines our whistleblowing annual return and the ten key performance indicators (KPIs). Each KPI is annotated within the relevant paragraph and summarised in Appendix A.
- 6.2. To support staff learning, two of the Confidential Contacts delivered a video presentation (in May 2023) on their role. This work was a result of the all-staff survey that was distributed during the first NHS Scotland speak up week (KPI 3).
- 6.3. During 2023-2024, two whistleblowing concerns were received (KPI 4). A set of stage two concerns was received during quarter two and a stage one concern was received during quarter three.
- 6.4. The first set of concerns was received on 07 September 2023 and was acknowledged on 11 September 2023, meeting the three working day timescale. Given the complexity of the issues raised, the concerns were investigated at stage two, under the leadership of Professor David Felix, Postgraduate Dental Dean and Director of Dentistry. The concerns were related to patient safety policy, education and practice. The investigation was concluded on 01 November 2023 and the concerns were fully upheld (KPI 6). This stage two investigation took 40 working days (KPI 7) and comprised of half of all concerns closed during 2023-2024 (KPI 5). The investigation resulted in four main findings designed to support improvement and implement learning within NHS Education for Scotland and the broader health and social care system (KPI 1). It is expected that the impact of these recommendations will be seen in the longer term through changes in how we approach education and training in respect of patient safety (KPI 1). The actions will be revisited in guarter one 2024-2025 to assess early progress. As well as the recommendations arising from the investigation, there was learning for the corporate team in respect of the value of a 'safe space' for confidential discussion and consideration of concerns (KPI 2). Positive feedback regarding the recommendations was received from the whistleblower (KPI 2).
- 6.5. The Executive Medical Director and the Chief Executive's office received the stage one concern on 20 October 2023. It was acknowledged upon receipt (on the same day). It was related to patient safety issues, bullying, and supervision of education and training of doctors in training at a territorial health board. The concerns relating to staffing levels (and subsequent trainee education and training supervision and patient safety) were reviewed at stage one and were not upheld (KPI 6). Following consideration by the Deputy Medical Director and the Chief Executive, the response was issued on 25 October 2023 and closed in under five working days (KPI 7). This concern comprised of 50% of all cases closed (KPI 5). Discussion with the territorial health board gave sufficient assurance, alongside business-as-usual quality management arrangements, which ensure that there is ongoing monitoring. It was agreed to keep a watching brief to ensure that trainee doctors are properly supported and supervised (KPI 1).



- 6.6. A summary of concerns received in 2023-2024 (KPIs 4-10) can be seen in Table 1.
- 6.7. **Table 1:** Summary of cases in 2023-2024 (KPIS 4-10).

|        |   | Stage one |    |             |    | Stage two (direct) |                   |             |    |
|--------|---|-----------|----|-------------|----|--------------------|-------------------|-------------|----|
|        |   | Q1        | Q2 | Q3          | Q4 | Q1                 | Q2                | Q3          | Q4 |
| KPI 4  | The total number of concerns received = 2.  | 0         | 0  | 1           | 0  | 0                  | 1 <sup>20</sup> . | 0           | 0  |
| KPI 5  | Concerns closed as a percentage of all concerns closed.   | -         | -  | (1)<br>50%  | -  | -                  | -                 | (1)<br>50%  | -  |
|        | Percentage of stage one concerns closed.  | -         | -  | 100%        | -  | -                  | -                 | -           | -  |
|        | Percentage of stage one concerns closed within five working days.   | -         | -  | 100%        | -  | -                  | -                 | -           | -  |
|        | Percentage of stage two concerns closed.  | -         | -  | -           | 1  | -                  | -                 | 100%        | -  |
|        | Percentage of stage two concerns closed within 20 working days.   | ı         | ı  | -           | ı  | ı                  | -                 | Nil         | -  |
|        | Number of concerns upheld as a percentage of all concerns closed at each stage.                                     | -         | -  | -           | -  | -                  |                   | (1)<br>100% | -  |
| KPI 6  | Number of concerns partially upheld as a percentage of all concerns closed at each stage.                           | -         | -  | -           | -  | -                  | -                 | -           | -  |
|        | Number of concerns not upheld as a percentage of all concerns closed at each stage.                                 | -         | -  | (1)<br>100% | -  | -                  | -                 | -           | -  |
| KPI 7  | Average time in working days for response.  | -         | -  | 4           |    | -                  | -                 | 40          | -  |
|        | Number and percentage of concerns closed within five working days (stage one).                                      | -         | -  | (1)<br>100% | -  | -                  | -                 | -           | -  |
|        | Number of stage one cases extended.   | -         | -  | Nil         | -  | -                  | -                 | -           | -  |
| KPI 8  | Number and percentage of concerns closed within 20 working days (stage two).  | -         | 1  | -           | 1  | -                  | -                 | Nil         | -  |
|        | Number of stage two cases extended.   | -         | 1  | -           | 1  |                    |                   | 1<br>(100%) |    |
| KPI 9  | The number of concerns at stage one where an extension was authorised as a percentage of all concerns at stage one. | -         | -  | 0           | -  | -                  | -                 | -           | -  |
| KPI 10 | The number of concerns at stage two where an extension was authorised as a percentage of all concerns at stage two. | -         | -  | -           | -  | -                  |                   | 100%<br>(1) | -  |

 $<sup>^{\</sup>rm 20}$  This stage two concern was received in quarter two and closed in quarter three.



- 6.8. Within NES, all line managers are required to complete the line manager level whistleblowing training on TURAS Learn. As of 31 March 2024, the overall compliance was 87%, with 308 line managers having completed the required e-Learning, and 46 yet to complete (13%) (KPI 3). This is a slightly improved position and targeted approaches to address gaps in compliance are being taken forward across directorates to further improve performance. Compliance with essential learning modules was included in the personal objectives of all staff in 2023-2024 with the intent of improving overall organisational performance. The Workforce Directorate has continued to promote the required essential learning modules and monitor their levels of compliance (KPI 3).
- 6.9. We continue to listen to our staff (and others) to address any concerns raised and to make any required improvements. We have also welcomed the opportunity to reflect on the work delivered to date, to foster a more open, honest and inclusive working culture.



# 7. Conclusion

- 7.1. This is our third Annual Whistleblowing Report and we have welcomed the opportunity to reflect on our activities throughout 2023-2024, and on our experiences and learning to date.
- 7.2. Throughout 2023-2024, we continued to engage with our staff, the Whistleblowing Steering Group, the Staff Governance Committee and the NES Board regarding our whistleblowing arrangements. The appointment of two additional Confidential Contacts (bringing our pool to four) has been welcomed and reiterates our commitment to supporting everyone to speak up at the earliest appropriate opportunity.
- 7.3. In conclusion, we recognise the important role in setting the tone and culture that values the contributions of all our staff to have the confidence to speak up in the public interest. We continue to encourage all staff to raise any concerns and continue to ensure that everyone feels supported in doing so.

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

03 May 2024

A skilled and sustainable workforce for a healthier Scotland.

© NHS Education for Scotland, 2024.



# 8. Appendix A: Key Performance Indicators

**Table 2:** Overview of the Key Performance Indicators (KPIs) reported.

|        | Key Performance Indicators (KPIs)  | Location                             |
|--------|--|--------------------------------------|
| KPI 1  | A statement outlining learning, changes or improvements to services or procedures as a result of consideration of whistleblowing concerns.                     | Paragraphs 6.4 and 6.5.              |
| KPI 2  | A statement to report the experiences of all those involved in the whistleblowing procedure (where this can be provided without compromising confidentiality). | Paragraph 6.4.                       |
| KPI 3  | A statement to report on levels of staff perception, awareness and training.   | Paragraphs 6.2 and 6.8.              |
| KPI 4  | The total number of concerns received.   | Paragraph 6.3 and Table 1.           |
| KPI 5  | Concerns closed at stage one and stage two of the whistleblowing procedure as a percentage of all concerns closed.   | Paragraphs 6.4 and 6.5, and Table 1. |
| KPI 6  | Concerns upheld, partially upheld, and not upheld at each stage of the whistleblowing procedure as a percentage of all concerns closed in full at each stage.  | Paragraphs 6.4 and 6.5, and Table 1. |
| KPI 7  | The average time in working days for a full response to concerns at each stage of the whistleblowing procedure.  | Paragraphs 6.4 and 6.5, and Table 1. |
| KPI 8  | The number and percentage of concerns at each stage which were closed in full within the set timescales of 5 and 20 working days.                              | Table 1.                             |
| KPI 9  | The number of concerns at stage one where an extension was authorised as a percentage of all concerns at stage one.  | Table 1.                             |
| KPI 10 | The number of concerns at stage two where an extension was authorised as a percentage of all concerns at stage two.  | Table 1.                             |



**NHS Education for Scotland** 

**NES/24/39** 

Agenda Item: 10b

Date: 23 May 2024

**Public Board Meeting** 

- 1. Title of Paper
- 1.1 Non-Executive Director Whistleblowing Champion Report 2023/24
- 2. Author of Paper
- 2.1 Gillian Mawdsley, Non-Executive Director and Whistleblowing Champion
- 3. Lead Director(s)
- 3.1 N/A
- 4. Situation/Purpose of paper
- 4.1 This paper brings the Non-Executive Director and Whistleblowing Champion 2023/24 Annual Report to the Board for assurance.
- 5. Background and Route to Meeting
- 5.1 The Whistleblowing Champion role has specific responsibilities including that an annual report is prepared and delivered to the Staff Governance Committee as the delegated Committee for whistleblowing governance and scrutiny by the Board.
- This report was delivered verbally and reviewed by the Staff Governance Committee at its meeting held on 29 April 2024. It followed the delivery of the 2023/2024 Annual Whistleblowing Repor. The Committee confirmed that the report provided satisfactory assurance.
- 5.3 For information, in the past few years, the whistleblowing champions of each of the NHS Boards had been required to provide an annual update on whistleblowing to the Cabinet Secretary for Health and Social Care. Its purpose was to provide an update on the assurance role from each of the NHS whistleblowing champions. No such letter was required this year though separately assurance as outlined below was supplied by each Board.

- 5.4 Attention is drawn to paragraph 5.14 of the 2023/2024 Annual Whistleblowing Report this is included on this Agenda at Appendix 1 of Item 10a that in August 2023 Michael Matheson, the then Cabinet Secretary for NHS Recovery, Health and Social Care, Scottish Government, sought assurance from NHS Scotland boards on processes relating to patient safety concerns in light of the 'Lucy Letby' verdict. Attention is drawn to the response sent by NES as outlined in this paragraph which included aspects of assurance and specific reference to the role of whistleblowing.
- 5.5 Mention should be acknowledged more widely of the importance of the Letby case. It provides a stark warning as to what can happen when systems do not work effectively. It is important to understand that this case also offers opportunities as well as stressing the importance of seeking out learning lessons where systems have failed. It is encouraging that NES has and continues to consider how learning from this case may impact on NES with its extensive role on education and training and to ensure that any similar issues arising in Scotland can be effectively identified and processed appropriately.

# 6. Assessment/Key Issues

- 6.1 This is the third report since the National Whistleblowing Standards came into effect. It is important to acknowledge that it inevitably took some time for all systems originally in place in NES at the outset to be reviewed and for all relevant and appropriate governance arrangement to be secured. This was a complex process as the need and responsibility to ensure knowledge and compliance with whistleblowing processes extended beyond just NES's staff but to others with whom NES interacts including trainees and independent contractors by example. The fact that such systems are being seen to operate efficiently and effectively as outlined below is commendable and represents the input of a considerable volume of work.
- 6.2 Progress has been made by the Team to ensure that these effective systems are in place and have been seen to withstand robust examination to ensure that they are operating effectively.
- Though NES does not seek out the incidence of whistleblowing events, there have been two recorded over the year as outlined by their report (Agenda 10a). Numbers remain very low. The complexity of one of these whistleblowing concerns is outlined at paragraph 6.4 (of Appendix 1 included on this Agenda with Item 10a) that brought forward recommendations to be made in the approach to education and training in respect of patient safety, and corporate team learning in relation to the value of a 'safe space' for confidential discussion, The implications arising from these recommendations require to continue to be monitored. What is also important is that the system was seen to work with positive feedback received from the whistle-blower themselves.

- That outcome to the whistleblowing event should be noted in conjunction with the iMatters survey results which are included at paragraph 5.24 (of Appendix 1 included on this Agenda with Item 10a). NES were recorded as having the highest scores within any of the NHS Boards. That is helpful as it indicates the effectiveness of the whistleblowing processes and it provides a measure of assurance. However, it should not foster complacency. It is therefore pleasing to note progress including the appointment of two new confidential contacts especially now on the medical front. This spans all manner of NES's work and reflect differing levels of seniority which is important. The work and time commitment of the four confidential contacts is much appreciated, as is their obvious interest and engagement apparent in the internal meetings.
- 6.5 Encouragement of training on whistleblowing by line managers does remain an area of ongoing concern though the trend should be noted as continuing upwards on its completion. Initiatives from the Executive team are to be much welcomed to continue that progress to active engagement which will increase the compliance with the mandatory training available on TURAS. Regular reports to Committee and Board address these issues and continues to be a topic on which attention must remain fully focused.
- 6.6 The work of the whistleblowing steering group is proactive and well engaged and committed. The annual Speak Up Week is an important opportunity to be involved and engage bilaterally. It provided this year a valuable opportunity for a number of NES staff to meet face to face and to hear from various experts and be involved in engaged discussion on a range of topics. This group continues to provide a base for planning of awareness raising for the future. Already plans are underway for the identification and commitment to Speak Up Week to be held from 30 September to 4 October 2024.
- Appropriate governance routes clearly exist to provide the necessary assurances and are embedded at the various Committee and Board levels. Reporting quarterly to the Staff Governance Committee, is working well even where there may be a quarterly nil return, it keeps attention focused on the need to ensure incidents of whistleblowing are being regularly monitored. With whistleblowing concerns arising being recognised as discussed above, the systems in place are working effectively providing a regular route of reporting. This allows the necessary assurance to be provided and promote confidence to the Board.
- The overall aim with whistleblowing continues as highlighted before to be in the development of a more holistic environment within all NHS Boards, and to provide an evolving culture in promoting whistleblowing and supporting whistle-blowers. NES plays an important role which has been embraced in the work outlined in supporting specifically medical training of the further development of relationships with the Independent National Whistleblowing Officer colleagues.
- 6.9 Assurance can therefore be provided regarding whistleblowing that there are clear signposts/systems in place supporting NES's work in relation to

whistleblowing along with the provision of resources at all levels. There is a clear commitment to achieving the necessary awareness of whistleblowing and access to advice as and when required.

### 7. Recommendations

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

Author to complete checklist. a) Have Educational implications been considered? Yes  $\boxtimes$ П No **b)** Is there a budget allocated for this work? Yes No c) Alignment with NES Strategy 2019-2024 1. A high-quality learning and employment environment  $\times$ 2. National infrastructure to improve attraction, recruitment, training and retention 3. Education and training for a skilled, adaptable and compassionate  $\boxtimes$ workforce |X|4. A national digital platform, analysis, intelligence and modelling |X|5. A high performing organisation (NES) d) Have key strategic risks and mitigation measures been identified?  $\boxtimes$ Yes No e) Have Equality, Diversity, Human Rights and health inequality issues been considered as per Fairer Scotland Duty: Guidance for Public Bodies and Corporate Parenting as per the Children and Young People (Scotland) Act **2014**? X Yes No f) Have you considered Emergency Climate Change and Sustainability implications as per **DL** (2021) 38? |X|Yes No g) Have you considered a staff and external stakeholder engagement plan?

Author: Gillian Mawdsley

Yes

No

**Date**: May 2024

|X|

**NES** 



**NHS Education for Scotland** 

NES/24/40

**NES Public Board Meeting** 

Agenda Item: 10c

Date of meeting 23 May 2024

- 1. Title of Paper
- 1.1. 2023-24 Equality and Diversity Annual Report
- 2. Author(s) of Paper
- 2.1. Katy Hetherington, Principal Lead Equality, Diversity and Human Rights
- 3. Lead Director(s)
- 3.1. Tracey Ashworth-Davies, Director of Workforce and Deputy Chief Executive (Corporate) and Karen Wilson, Director of Nursing and Deputy Chief Executive (Clinical)
- 4. Situation/Purpose of paper
- 4.1. The Board is asked to note and approve this end of year report for the period April 2023-March 2024. This includes progress on NES's Equality Outcomes since the mid-year report in November 2023 and activities in NES to progress equality, diversity and inclusion. Plans for activities in 2024-2025 are highlighted for the Board to note as well as an update on recent policy and legislative developments (Appendix 1).
- 5. Background and Governance Route to Meeting
- 5.1. The paper has been informed by end of year reports, approved by the Staff Governance Committee on 29th April 2024, Education and Quality Committee on 9th May 2023, and Technology and Information Committee on 13th May 2024. Each Committee has responsibility for scrutiny of aspects related to the Committee's business.

### 6. Assessment/Key Issues

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

- 6.1. Equality, diversity and inclusion are central to achieving our purpose to be a collaborative, innovative and inclusive learning organisation.
- 6.2. There has been a specific focus this year on anti-racism, including a corporate objective for all staff to increase their learning on anti-racism, equality, diversity and inclusion and a performance objective for the Executive Team. A development session for the Board took place in June 2023 and training for line managers on anti-racism is being rolled out with 200 line managers now having taken part in training.
- 6.3. The Scottish Government issued guidance in March 2024 to Chairs and Chief Executives that NHS Boards will develop and deliver against an antiracism plan. The plan is to cover both workforce and racialised health inequalities. Further information is provided as part of our plans for 2024/2025.
- 6.4. The Partnership Forum and the Executive Team have approved an all staff objective for the new financial year for 2024-2025. This supports a continuous approach to learning on equality, diversity and inclusion.
- 6.5. Further information is set out in Appendix 1 on progress with NES's equality outcomes since the Board's mid-year report in November 2023. Staff Governance, Education and Quality and the Technology and Information Committees have approved end of year updates on the outcomes relevant to each Committee's business. It was noted by the Education and Quality Committee that progress is on activity rather than outcomes but it is recognised that this is the nature of how the outcomes have been drafted and will be addressed as NES identifies new equality outcomes for 2025-2029.
- 6.6. The Technology and Information Committee noted that Fairer Scotland Impact Assessments should be considered at the earliest stages of strategic areas of work. The Staff Governance Committee noted the plans for work with other national health boards on the anti-racism plan and to incorporate NES's Anchors Plan activities within an overall equality, diversity and inclusion plan.
- 6.7. There are legislative requirements under the Public Sector Equality Duty that NES is required to meet, including developing a fresh set of equality outcomes. This is an opportunity for NES to set out its equality, diversity and inclusion plan to deliver NES's strategy and meet legislative and policy requirements. The specific requirements and proposed plans are set out in Appendix 1.
- 6.8. NES will continue to support its staff to learn and act on equality, diversity and inclusion to deliver NES's strategy. This will include providing learning and development opportunities for staff, progressing work on educator

competency, supporting a vibrant staff network infrastructure, carrying out Equality, Fairer Scotland and Children's Rights Impact assessments and supporting the health and social care workforce through the development of learning products for the Equality and Diversity Turas Learn Zone.

# 7. Recommendations

# 7.1. The Board is asked to:

- Note the key activities progressed over 2023-24
- Note progress on NES's Equality Outcomes at Appendix 1
- Note the priorities for 2024-2025, including to meet statutory requirements by April 2025 set out in Appendix 1
- Approve this end of year report covering April 2023-March 2024.

| Author to complete <b>checklist</b> .  Author to include any narrative by exception in Section 6 of the cover paper.   |
|--|
| Have Educational implications been considered?  ☐ Yes ☐ No   |
| Is there a budget allocated for this work?  ☐ Yes ☐ No   |
| 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  Have key strategic risks and mitigation measures been identified? |
| <ul><li>✓ Yes</li><li>✓ No</li></ul>   |
| 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?  |
| Has an Equality Impact Assessment (EQIA) been completed or in progress for this piece of work?  ☐ Yes ☐ No   |
| Have you considered Emergency Climate Change and Sustainability implications as per DL (2021) 38?  ☑ Yes □ No  |
| Have you considered a staff and external stakeholder engagement plan?  ☑ Yes □ No  |
| Author name: Katy Hetherington Date: May 2024  |

NES

# Appendix 1: End of Year Report – Equality and Diversity

## 1. Progress towards NES's Equality Outcomes

The Committee is provided with an update on progress (since the mid-year report) with the Equality Outcomes relevant to the Committee's business.

### Outcome 1:

Our support for youth employment with a particular focus on engagement and supporting transitions from school, college and university for those further from the labour market or more likely to experience barriers to full employment: young people who are care-experienced, disabled, or from Black and minority ethnic or socioeconomically disadvantaged communities.

This outcome covers a range of work in NES and predates the establishment of the NHS Scotland Academy, our Widening Access Framework and our Anchors Action Plan.

The Youth Academy's work is continuing to address the challenges around supporting young people to progress into careers in health and care. The Pathway Pilot qualification is now reaching completion (June 2024) and a full evaluation report will be produced by Skills Development Scotland, with input from Youth Academy staff, in Autumn. The Academy is currently recruiting for three additional posts - funded via the Medical ACT-budget – to help address the continuing fall in Scottish-domiciled young people applying for Medicine degree courses. These posts will include a substantial element of working on widening access/participation work, understanding the barriers to Medicine for some young people and working collaboratively with universities, local authorities and other partners to address these. An Equality Impact Assessment on the Youth Academy's work is in development and incorporates this work.

The NES Widening Access Framework was approved by the Executive Team in August 2023. NES submitted its Anchor Plan to the Scottish Government in November 2023. This summarises NES's dual role in the NHS Scotland Anchor Strategy, as an individual health board and as a national board supporting a "once for Scotland" approach to workforce development issues. It is anticipated that the Widening Access Framework and Anchor Plan cover similar activities and a review has been undertaken to consider how best to progress, with the proposal that the Anchors Action Plan becomes the primary document.

### Outcome 2:

The proportion of refugee health professionals achieving professional registration and the number of international recruits attracted and supported into NHS Scotland is increased.

The Centre for Workforce Supply (Health) continues to work with Scottish Government funded International Recruitment (IR) Leads at Boards to centrally coordinate and accelerate international recruitment in line with Scottish Government targets and associated funding. The Centre for Workforce Supply does this via managing a monthly community of practice for International Recruitment Leads, troubleshooting challenges, identifying, developing and sharing best practice guidance. The Centre for Workforce Supply also collects data on the progress of recruitment of IRs; over the previous three financial years, the number of internationally educated nurses, midwives and Allied Health Professionals joining NHS Scotland has grown.

NHS Scotland Academy continues to support internationally educated nurses and midwives newly recruited to NHS Scotland through the delivery of NMC OSCE Preparation digital resources, developed to support international recruits pass a Nursing and Midwifery Council (NMC) Examination as part of the registration process to work independently in the UK. Six hundred and eighty-three (683) learners from NHS Boards across Scotland have used the NHS Scotland Academy resources for OSCE preparation in the last twelve months. Two-hundred and sixty-three (263) existing NHS staff have used the Educators' resources designed to help them support their recruits through the process.

NES continues to work with the Scottish Refugee Council and partners (SSSC, NHS Scotland Academy, College Development Network, Open University, Skills Development Scotland, Princes Trust, Public Health Scotland, Improvement Service and DWP) to look at 'Employment and Education Opportunities for Refugees and Asylum Seekers'. The group is sharing information and resources, coordinating existing activity and support and has been asked to present to the Anchors Workforce Workstream with a view to becoming a sub-group of that programme.

### Outcome 3:

NES contributes towards reducing the UK-wide attainment gap for medical trainees from Black and Minority Ethnic backgrounds and International Medical Graduates by designing and monitoring evidence-informed activities.

The Advancing Equity in Medical Education Steering Group continues to meet regularly to plan and deliver specific interventions that aim to address differential attainment that exists in postgraduate medical education and training. The core group is currently considering the 2024 General Medical Council annual submission, following positive feedback about the 2023 report.

The attainment gap remains a significant issue, especially for doctors from ethnic minority backgrounds. It is known that the factors that cause the attainment gap are complex and operate at the individual, institutional and policy levels. Addressing it will therefore require action at all these levels. The Advancing Equity Group is also linked with the Trainee Development and Wellbeing service around neurodiversity and how to ensure our training pathways and processes are flexible and accommodate diversity in our trainee population.

An action plan for the next 12 months is now being progressed and will be updated upon during 2024-2025 to the Board.

### Outcome 4:

We will continue to enhance the inclusivity of education and training programmes for disabled learners in NHS Scotland through:

**a.** Expanding the availability of technology enhanced learning which reflects best practice in accessibility and increases flexibility in learning opportunities.

The Technology Enhanced Learning (TEL) Team was established in 2021 to provide support to our staff in adjusting to delivering learning remotely. The team continues to support all NES educators and corresponding business support staff, through the development of resources and guidance, bespoke support and through the facilitation of a NES TEL community of educators. It has now been confirmed that the team will be continue through NES baseline funding from April 2024.

An Equality Impact Assessment was undertaken as part of NES's Learning and Education Strategy and is now published on the NES website.

**b.** Establishing arrangements for reasonable adjustments passports for trainees under the Lead Employer programme.

Work is underway nationally through the Once for Scotland Workforce Policies programme to develop a guide on reasonable adjustment for NHS Scotland staff, based on existing good practice. Passporting functionality has been included in the development plans for the Turas platform, subject to funding. NES is also contributing to a working group set up by SG Health Workforce Equality to share practice and identify gaps to support disabled staff. NES continues to support our staff and NES Doctors and Dentists in Training with reasonable adjustment and individual learning plans. There is high demand for the support provided by the Specialist Lead for Disability and the Training Wellbeing and Development Service.

**c.** Providing holistic careers advice and person-centred support for disabled trainees through the Training, Wellbeing and Development Service.

The Senior Specialist Lead for Disability continues to deliver one-to-one support and case management for our staff and NES employed doctors and dentists in training (DDiT).

The Training Wellbeing and Development Service has continued to support trainees progress with their learning and empower them to make appropriate career choices. This includes tailored person-centred services such as advice on wellbeing, careers and signposting to specialist services. There is a particular need to support educators and trainers to support neurodivergent trainees and work is underway to contact relevant local NHS support mechanisms. A seminar to raise awareness about neurodiversity and to share the findings from a recent survey with medical

trainees on neurodivergence and mental health was held on 16th April 2024 (over 230 attendees). The NES Equality Team is also developing a new training resource on neurodiversity in 2024 with input from different disciplines in NES.

### Outcome 5:

We support and develop the knowledge and skills required by our educators and designers to support accessible and inclusive learning. This will focus on accessibility and inclusion, digital solutions to support learning, culture and antiracism knowledge and skills.

The knowledge and skills of our educators is a key part of NES's Learning and Education Strategy. An Educator Capabilities Framework has been developed and this will include a self-assessment for staff to consider as part of the personal development and review process. One of the 'core competencies' within the framework is in relation to Equality, Diversity and Inclusion. This has the aim of ensuring all NES educators have the knowledge and support to: "Ensure all elements of learning from design through to improvement, learner admissions to feedback are inclusive, provide equality and value diversity."

Our Learning and Education Strategy highlights the importance of inclusive practices and products across NES. It is reflected in one of NES's Principles for Learning and Education, which will be embedded in our learning and education policies as they are developed within our Learning and Education Quality System (a Corporate Improvement Programme). This will drive awareness and provide assurance of a consistent approach to developing and delivering education in an accessible and inclusive way across NES.

A new digital learning resource on 'Cultural Humility' was launched in November 2023 and over 700 learners across health and social care have completed the training, including 139 learners in NES. A new Equality, Diversity and Human Rights Module was launched in December 2023, providing an updated learning resource for NES staff and the wider health and social care workforce.

The corporate objective to increase understanding and self-reflection on anti-racism, equality, diversity and inclusion will continue in 2024/25.

As referenced under Outcome 4, the Technology Enhanced Learning Team provide ongoing support to NES Educators to support accessible and inclusive learning.

#### Outcome 6:

Our approach to digital design enables and facilitates equality and equity of access using digital and technology through the pillars of accessibility, accommodation, acceptability, availability, and affordability.

Key and Intermediate Measures towards this outcome provide a framework to track progress towards this outcome.

### **Design systems**

Feedback from users with dyslexia and people using screen readers has been central to making improvements. Enhancing the Turas design system to improve the translation of design elements into accessible web components for use by people navigating by keyboard and people with disabilities (ARIA specification). Work is underway across the Experience, Developer, and Testing teams to finalise this guidance. The Turas 'roadmap to accessibility' outlines the planned developments.

### **Websites**

The WCAG (Web Content Accessibility Guidelines) were updated to version 2.2 in July 2023. The MTS (Management training scheme) and Periodontal websites are due to launch with fixes and redesigns to the new standard. In anticipation of the Public Sector standard for web and mobile browsers updates, a programme of work is underway to update audits and publish accessibility statements across the portfolio.

# Turas appraisal

Feedback from people using screen readers about difficulty accessing the Personal Development and Planning element of the Appraisal application has prompted fixes to the application to enhance the application experience and effectiveness.

**Platform services**. The NDP Integration Service is a platform service enabling health service extension where unwarranted variation in access, inequality in outcomes, and service redesign have identified a need to enhance care quality and report key outcomes. The following NHS Health Boards are supported with one or more service integrations:

- NHS Greater Glasgow and Clyde
- NHS Forth Valley
- NHS Grampian
- NHS Highland

Examples of services supported include COPD (Chronic Obstructive Pulmonary Disease), Heart Failure and Appointments.

### **Digital Front Door (DFD)**

Prototyping with members of the EQIA network tested methods of identity verification for NDP DFD Programme. People with varying levels of comfort using technology, including those who support people with hearing and sight loss have been included.

### **Testing framework**

The Testing function works to an approach which tests for key NHS Scotland requirements in business / productivity applications and technology infrastructure and management. The standards aim to ensure ease of integration, usability, and ready availability of technology and devices across NHS Health Boards and related health services and organisations.

#### General

Equality scoping prompts have been developed to inform key technology considerations, mitigations, reasonable adjustments, differential attainment, and equality impacts for NES Technology Service to consider in our research design and delivery. An integrated project initiation form has been designed to collate outcomes of key impact assessments and information required to support technology design and delivery. The form includes areas including Children's Rights Action Plan and emerging technology like Artificial Intelligence.

NES Technology Service has met the duty to publish Accessibility statements. A programme of work is underway to update audits and publish statements to reflect the WCAG (Web Content Accessibility Guidelines) to the WCAG 2.2 standards which came into effect in late 2023.

Artificial Intelligence guidance from the Equality and Human Rights commission to ensure compliance with the Public Sector Equality Duty is being applied to the scoping work. This aims to identify areas in our work using emerging technology and to consider the impacts on our general and specific duties. Additional key areas include review of the service, decision-making, procuring goods and services, and partner and supplier relationships.

### Outcome 7:

We contribute to the development of an inclusive and diverse workplace culture through our national leadership and management programmes for health and social care managers and leaders.

NES builds in equality, diversity and inclusion into the design and delivery of management and leadership programmes. An EQIA for the National Leadership and Management Programmes and Resources has been developed by the OD & Leadership team and has been approved, subject to the programmes being progressed.

The Leading to Change team have developed a Leading to Change Allyship Hub to host learning resources and share best-practice guidance and stories from across the sectors about how to be a good ally in the workplace. This aims to develop a network of active allies across health, social care and social work in Scotland. This Hub is part of an ongoing Allyship Programme and an EQIA has been published. Leading to Change continues to run a blog series to highlight diverse voices across the sectors, with an accompanying "Diversity Coffee Connect" event series to offer the opportunity for discussion and reflection around topics connected to inclusion and diversity. A Diverse Leaders Programme is in development, with an aim to enable and encourage diverse leaders at all levels to be identified and supported into more senior roles across health, social care and social work.

NES was commissioned by the Scottish Government to develop a Transgender Care Knowledge and Skills Framework for the NHS workforce and this is due for publication at the end of May 2024. Work continues to explore resources and training

to support best care of trans people. This includes staff working at all levels in NHS Scotland.

There has been interest from other Boards in NES's anti-racism training that has been delivered to over 200 line managers in NES. The material is being translated into a digital resource for the Equality and Diversity Turas Learn Zone to support the wider health and social care sector. This should be available in June 2024.

The Scotland Deanery has an updated section on the Training Development and Wellbeing Service on <a href="sexual misconduct">sexual misconduct</a>. This includes guidance for trainees and a pledge to eradicate sexual misconduct and contribute to a culture that does not tolerate inappropriate behaviours, improve reporting mechanisms and ensure training is in place. NES's equality team has worked with Close the Gap and Equally Safe at Work to tailor an <a href="e-learning module">e-learning module</a> on sexual harassment for line managers for the health and social care workforce. This was published on 26th April 2024.

### Outcome 8:

NES is an inclusive employer, with:

**a.** Effective employee voice, including staff networks with effective influence on policy.

### **Progress**

A short survey has been designed to measure perceptions of NES as an inclusive organisation. This was issued in May 2024 and will be repeated every 6 months. It will be reported to the Board as part of the set of Strategic KPIs. Staff will be asked to complete equality and diversity monitoring to allow analysis by protected characteristic and to understand if there are differences in perceptions of inclusion and to inform actions.

NES's staff networks continue to meet and are supported by our Learning Content & Staff Network Officer and the Staff Network Chairs. The Committee was updated on a range of activities that had taken place as part of the mid-year report, including achieving the 'Established' Level for the Carer Positive Award and renewing our Disability Confident Award. The Under-represented Minority Ethnic Staff Network and the LGBTQ+ networks are both looking for new Chairs and work is underway to promote this opportunity across the organisation. A new peer network on neurodiversity for NES Doctors and Dentists in Training was established to provide a support mechanism. However, low numbers attended and further work is now underway to address this with a positive response so far to proposals. NES will explore whether a staff network event can take place in 2024/5 to bring all networks together to share and learn from each other.

**b.** Improved recruitment outcomes for young candidates, minority ethnic candidates and disabled candidates

We published our annual equality and diversity employment monitoring report following approval at the Board in November 2023. This shows for our 2022-23 report that 24% of applications were made from candidates from Black, Asian and Minority Ethnic backgrounds, which is an increase from 21% in 2021-22. the year before. This varies across Directorates with more diversity in applications for posts in Medical, Workforce and Technology Services Directorates. The data shows there is a difference in rates between White and Black, Asian and Minority Ethnic backgrounds from interview to appointment. It is important to monitor this as it can highlight the potential for bias in the process.

8% of applicants for all posts identified as disabled, which is below the working-age population in Scotland with a disability. 6.6% of candidates are between 16-24, which is largely the same as 2021/22 at 6.5%.

We continue to monitor our recruitment data by protected characteristics and promote e-learning on recruitment. We have also developed guidance on bias in recruitment and have been rolling out anti-racism training to line managers.

New equality and diversity monitoring questions have been updated in April 2024 on JobTrain and eESS and staff will be encouraged to update their details. A <u>blog</u> has been published on NHS Scotland Careers website about why this information is asked and will be used internally to improve NES workforce data. Our next annual workforce monitoring report will be produced early in 2024 to cover the period April 2023-March 2024.

An updated Apprenticeships approach has been developed and is scheduled to be presented to the Executive Team in May 2024. This builds on the existing Modern Apprentice (MA) employment offering within NES, extended to include Technical and Graduate Apprenticeships. This updated approach will support an appropriately integrated MA programme for NES, linking in directly with workforce planning and each Directorate's 2024-25 Operational Plan.

**c.** An adaptable and flexible workforce with positive support for staff wellbeing

NES continues to consider improving the provision of services for disabled staff and trainees, led by our Specialist Disability Advisor and <u>Training Development and Wellbeing Service</u>. This will include assessment processes, reasonable adjustments, case management, ongoing support and trainer awareness. As referred to above, we also support a range of staff networks and peer support sessions and achieved the Carer Positive 'Established' Award in 2023.

Since the Board's last update, there have been a variety of activities to support staff wellbeing. This has included:

Inviting our Employee Assistance Programme, Optima Health, to the Line Manager Network in February.

NES Menopause meet ups continue and guidance for line managers, including on reasonable adjustments is available.

Positive feedback on a 6-week pilot on Mindful Self-Leadership has led to this now being part of the wider wellbeing offer for staff from May.

A new Wellbeing Matters hub was launched in March 2024. Wellbeing Matters will continue to grow over the coming months and key reporting indicators will be provided in the Committee's mid-year report in 2024.

# 2. Mainstreaming Outcomes

As well as specific outcomes, to focus efforts to mainstream the Equality Duty into day to day work, NES also set two mainstreaming outcomes in 2021:

 Improve our Equality Impact Assessment (EQIA) performance, ensuring a systematic approach to using EQIA to inform the development of new workstreams.

The NES Equality Team continue to offer regular EQIA drop-ins for staff to ask questions and learn from colleagues who are involved in EQIA. These have been popular sessions and will continue in 2024/5. The guidance and templates are also being continuously improved to support staff with EQIA, most recently learning from the approach taken by NHS Lothian to incorporate the UNCRC.

EQIA is a legal requirement and is an important way for us to mainstream equality into our work. NES publishes its EQIAs on its website and activity is reported to the Equality Team via Directorate representatives on the Equality and Human Rights Steering Group. There has been an increase in EQIAs undertaken this year and over 25 have been identified or are in progress as of March 2024. Work is underway to identify strategic plans for 2024/5 to support Fairer Scotland Impact Assessment.

 Build capacity – both technical and educational – to deliver accessible digital learning.

Progress in this area has been reported in relation to equality outcomes 4 and 5, reported above.

Part 2: Looking ahead to 2024/2025

As part of our legislative requirements under the Public Sector Equality Duty, by April 2025 we will publish a report on:

- progress with our current set of Equality Outcomes
- how we have mainstreamed equality into our work
- how we have used employee equality monitoring information
- a fresh set of Equality Outcomes for 2025-2029
- a new Equal Pay Statement.

This provides NES with the opportunity to set out its plan on equality, diversity and inclusion, specifically:

- how this will support delivery of the NES strategy.
- meet our legislative requirements on the Public Sector and Fairer Scotland Equality Duties.
- meet policy requirements, such as an anti-racism action plan.

Identifying new Equality Outcomes (a requirement of the Public Sector Equality Duty) will set out NES priorities to address inequality through its functions, including its role as an employer. Involving people with relevant protected characteristics will be an important part of developing evidence-informed outcomes.

NES will continue to support its staff to learn and act on equality, diversity and inclusion to achieve our ambition as an inclusive organisation. This will include:

- a programme of learning sessions during 2024-25.
- support to educators from the Technology Enhanced Learning Team.
- progress with delivering NES's Learning and Education Strategy.
- supporting and promoting our staff networks.
- carrying out equality, fairer Scotland and children's rights impact assessments.

A new biannual staff survey on inclusion will inform a new Strategic Key Performance Indicator for the Board and areas for improvement across the organisation. Analysis by protected characteristics will identify any differential staff experiences.

The Equality, Diversity and Human Rights team are developing new learning products for the health and social care sector on anti-racism, neurodiversity and LGBTQ+. An up to date module on sexual harassment, with a forward from the Scottish Government's Director-General, Health and Social Care, was launched at the end of April. The team is facilitating a learning network across health and social care to avoid duplication, share resources and support a Once for Scotland approach to training in equality, diversity and inclusion. Plans are underway to improve the Equality and Diversity Zone on Turas and improve links to other resources, for example Leading to Change resources such as the newly launched Leading to Change Allyship Hub.

### 3. Policy and Legislative Updates

The Equality and Human Rights Commission (EHRC) published <u>guidance</u> for employers on menopause in the workplace. If menopause symptoms have a long term and substantial impact on a woman's ability to carry out normal day-to-day activities, these symptoms could be considered as a disability. This requires an employer to make reasonable adjustments and to not directly or indirectly discriminate because of the disability.

The EHRC published a report, <u>Is Scotland Fairer?</u> in November 2023 to provide a review of equality and human rights in Scotland. It provides a mixed picture of progress and highlights the continuing lower healthy life expectancy, poorer mental health for those living in the most deprived areas of Scotland.

The Worker Protection (Amendment of Equality Act 2010) Act 2023 will come into force from October 2024. Employers will need to take 'reasonable steps' to prevent sexual harassment of employees. Such steps could include training for staff, up to date policies and ensuring effective reporting procedures. If a tribunal finds an employer has breached this duty, it can increase compensation by up to 25%.

Scottish Government consulted in February 2024 on a suite of 'Once for Scotland' policies, including a refresh of NHS Scotland's Equality and Diversity and Gender-based violence policies. Work by Scottish Government is planned to develop a guide to address sexual harassment, led by two Scottish Clinical Leadership Fellows working in Scottish Government, for approval over summer 2024.

To help facilitate the incorporation of the United Nations Convention on the Rights of the Child (UNCRC) into the Scottish legal framework through the UNCRC (Incorporation) (Scotland) Bill, the Scottish Government commissioned NES to offer and provide support to NHS Boards in Scotland. This has included a UNCRC Implementation Leads Network and NES has delivered awareness sessions to over 1200 health and social care staff.

Katy Hetherington Principal Lead – Equality, Diversity and Human Rights 23 May 2024

#### **AUDIT AND RISK COMMITTEE**

NES/AR/24/20

### Minutes of the Fifteenth NES Audit and Risk Committee held on 18 January 2024

**Present:** Jean Ford, (JF) Non-Executive Director and Committee Chair

Ally Boyle, (AB) Non-Executive Director Olga Clayton, (OC) Non-Executive Director Anne Currie, (AC) Non-Executive Director

In attendance: Jenn Allison, (JA) Committee Secretary

Christina Bichan, (CB) Director of Planning and Performance (08b &14)

Jim Boyle, (JB) Executive Director of Finance

Nancy El-Farargy, (NEF) Specialist Research Lead (item 14) Annie Gunner-Logan, (AGL) Vice Chair of NES (in attendance on

behalf of Board Chair)

Laura Howard, (LH) Deputy Director of Finance Debbie Lewsley, (DL) Risk Manager (item 16)

James Lucas, (JL) Internal Audit, KPMG (until 10:35) Kenny McLean, (KM) Procurement Manager (item 17) Christopher McClelland, (CM) External Audit, Audit Scotland

Karen Reid, (KR) Chief Executive (until 11:45) Syed Shah, (SS) Internal Audit, KPMG (until 10:35)

Della Thomas, (DT) Board Secretary and Corporate Governance

Principal Lead

Simon Williams, (SW) Principal Educator (item 15)

### 1. Chair's welcome and introduction

1.1 The Chair welcomed everyone to the Audit and Risk Committee (ARC), which is the first hybrid ARC meeting since Committee meetings have been held via MS Teams during the pandemic.

# 2. Apologies for absence

- 2.1 The Committee noted apologies from Gillian Mawdsley, Non-Executive Director, David Garbutt, Chair of NES and Helen Russell and Carol Grant, Audit Scotland.
- 2.2 James Lucas and Syed Shah, Internal Audit KPMG, would leave the meeting after Internal Audit items (item 08).

### 3. Declarations of interest

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

### 4. Notification of any other business

4.1 There were no other business items identified.

#### 5. Audit and Risk Committee Minutes 05 October 2023

(NES/AR/24/02)

5.1 The minutes were approved as a correct record, following a minor correction to names of External Auditors.

## 6. Action Status Report

(NES/AR/24/03)

- 6.1 The Committee noted that 14 of the 17 actions have been marked as complete or closed and that 3 remain in progress.
- 6.2 The Chair provided an update submitted by Kenny McLean, Head of Procurement, regarding the closure of action 12.8 from 05 October 2023 meeting to investigate how NES may be able to contribute to the Global Citizen Scheme, who donate medical equipment to third world countries:
  - NES procures very little hardware, and this tends to be transferred to other Boards, who take on full ownership, support and maintenance. Information regarding the Global Citizen Scheme has been shared with Boards.
  - A child crisis manikin and some consumables have already been donated to Zambia.
  - Additionally, a former NES clinical lead has taken up a post in Kenya covering East Africa and they are exploring if there is an option to donate equipment and contribute to community projects.
- 6.3 The Committee were content to approve the completed actions and were satisfied with the progress updates for the open actions.

### 7. Matters arising from the Minutes

7.1 There were no matters arising from the previous minutes.

# 8. Internal Audit Reports

### a) Core financial controls - Budget management

(NES/AR/24/04)

- 8.1 The Chair invited James Lucas to introduce the internal audit report which focussed on budget setting and management processes.
- 8.2 James Lucas informed the Committee that each year the Internal Audit Plan includes a review to assess an area of financial control in support of the annual internal audit opinion.
- 8.3 The Committee noted that the audit provided an overall assessment of 'significant

assurance with minor improvement opportunities'. The audit reported that there are effective controls in place which are underpinned by a detailed budgeting process to enable effective coordination between both internal and external stakeholders.

- 8.4 The Committee noted that 4 low risk findings were raised to establish thresholds and responsibilities: to investigate and address significant variances; increase compliance with Standing Financial Instructions (SFIs) with regards to virement approvals; improve documentation used within the Additional Cost of Teaching (ACT) budget for the Dental Directorate; and simplify guidance documents.
- 8.5 The Committee noted the management actions and were content with the report and the assurance provided.

# b) Complaints Handling Process

(NES/AR/24/05)

- 8.6 The Chair welcomed Christina Bichan to the meeting, who was in attendance to answer any questions from the Committee.
- 8.7 The Chair invited James Lucas to introduce the report which assessed whether there are robust governance arrangements in place to ensure NES is compliant with the Complaints Handling Process (CHP) against the wider NHS Model CHP (NMCHP).
- 8.8 The Committee noted that the audit provided an overall assessment of 'significant assurance with minor improvements required', finding that NES has good controls in place and robust governance arrangements.
- 8.9 The Committee noted that 3 medium and 4 lower priority areas were raised for improvement regarding: improving the quality and frequency of reporting; improving tracking and reporting of lessons learned; arrangements for the Central Legal Office (CLO) to review any stage two level complaints.
- 8.10 Christina Bichan assured the Committee that the processes currently in place are compliant with the CHP, the CLO are involved at appropriate times, and that the recommendations will ensure these processes are formally documented.
- 8.11 The Committee raised a query regarding ongoing communication about complaints with the complainant. Christina Bichan assured the Committee that regular communication takes place, and that correspondence is tracked, however this process requires to be documented.
- 8.12 The Committee raised a query regarding general performance of complaints in NES. Christina Bichan informed the Committee that she expects the Key Performance Indicators (KPIs) will show that NES performs well in relation to handling complaints.

- 8.13 Discussion took place regarding the development opportunity for a Once for Scotland complaints process and complaints management system. James Lucas informed the Committee that the majority of NHS Scotland Boards use manual systems, such as spreadsheets, to manage complaints and that a system could help to remove potential errors. He added that internal auditors do not see this as a priority.
- 8.14 Christina Bichan informed the Committee that national work is ongoing to create a "Complaints Handling Framework". She confirmed that it would not be a priority for NES to lead development of a Once for Scotland complaints system.
- 8.15 The Chair on behalf of the non-executive whistleblowing champion, asked why there had been no reference to whistleblowing in the report. Christina Bichan confirmed that the first step of the process is to identify which process is applicable, whistleblowing or complaints. An audit has already been conducted regarding the whistleblowing process and this audit reviews the complaints process.
- 8.16 The Committee noted the management actions and were content with the report and the assurance provided.
- 8.17 The Committee asked that the report is progressed to the Education and Quality Committee (EGC) for the EQC to receive progress updates on the process with the management actions.

  Action JA/CBi
  - c) Status update Progress Report

(NES/AR/24/06)

- 8.18 The Chair invited James Lucas to introduce the report.
- 8.19 James Lucas informed that Committee that the internal audit plan is on track, with 2 of 6 internal audits complete. Fieldwork for Additional Cost of Teaching (ACT) funding is complete, and the draft report is in progress. The Property Transaction Monitoring report is not required this year as there have been no applicable transactions. Planning for the remaining 2 internal audits is in progress.
- 8.20 The Committee noted that 5 management actions have been closed since the 05 October 2023 ARC meeting. Management has requested revisions to implementation dates of 4 of the 17 outstanding actions. The progress report now includes a short summary of all outstanding audit actions, including the actions not yet due.
- 8.21 The Committee noted their concern that due dates for the 2 remaining open actions from the 2022-23 Cloud Disaster Recover report had been extended again, this time to 28 June 2024. However, they were assured of the ongoing progress and were content with the explanation provided in the report.

8.22 The Committee were content with the progress against the internal audit plan and management actions and were content with the assurance the report provided.

# d) Draft Summary Internal Audit Plan

(NES/AR/24/07)

- 8.23 The Chair invited James Lucas to introduce the Draft Summary Plan for Review and Comment.
- 8.24 James Lucas informed the Committee that a risk-based approach to planning audits is taken, starting with the overall strategy and key corporate risks facing NES as an organisation.
- 8.25 The Committee noted that 5 audits have been scheduled for 2024-25 which provide coverage on the key areas required to provide an Internal Audit opinion to inform NES' Annual Governance Statement at the end of 2024-25.
- 8.26 The Committee noted that there is 1 internal audit area that is yet to be agreed following removal of a potential audit regarding the NHS Scotland Academy which was deemed no longer necessary. The scope of the Climate Change audit, which was rolled forward from the 2023-24 plan, is yet to be fully agreed.
- 8.27 James Lucas informed the Committee that the Network Information Systems (NIS) audit, conducted annually by the Information Commissioners Office, sufficiently covers areas in relation to Cyber Security therefore further discussion will take place with the Director of NES Technology Services (NTS) to agree a suitable audit.
- 8.28 James Lucas informed the Committee that Internal Auditors will expand the indicative scopes further in discussions with the key stakeholders and provide the ARC with a final draft Internal Audit Plan in April 2024. This will also include the KPMG internal audit charter.
- 8.29 The Committee were content with the summary draft plan.

# 9. External Audit Planning Update

(NES/AR/24/08)

- 9.1 The Chair invited Christopher McClelland to introduce the paper to update the Committee on the progress of the external audit planning for the 2023-24 audit year.
- 9.2 Christopher McClelland informed the Committee that External Audit are in the process of meeting with NES staff and Internal Auditors to identify the significant audit risks which will become the focus of the 2023-24 audit work. It is anticipated planning will be complete by the end of January 2024.

- 9.3 The Committee noted that as part of the 2023-24 audit, External Auditors have confirmed they will be reviewing the best value theme of fairness and equality, to determine how well this is embedded.
- 9.4 The Committee were content to approve the update and noted that the draft Annual Audit Plan will be provided presented to the April 2024 ARC for approval.

## 10. Operational and Financial Planning 2024-25

(NES/AR/24/09)

- 10.1 The Chair invited Jim Boyle to update the Committee on development of the Operational and Financial Plans for 2024-25, including the impact of the Scottish Government (SG) funding for 2024-25, as announced on 19 December 2023.
- 10.2 Jim Boyle updated that Directorate Operational Planning meetings for 2024-25 had identified approximately £2m of new requests. The Committee noted that the internal planning meetings had taken place before NES had been made aware of the exceptionally tight fiscal environment and that it is unlikely that these could be funded.
- 10.3 Jim Boyle went on to update the Committee that SG have informed NES that they have applied a 3% saving of the entire NES baseline. This 3% reduction has also been applied to other non-patient facing Boards. Jim Boyle reported that he and the CEO had written to SG to outline the implications of this reduction and the associated risks. He went on to outline to the Committee some of the implications and impact for delivery.
- 10.4 Karen Reid outlined the measures that the Executive Team are putting in place to respond to the situation and assured the Committee that conversations are ongoing with SG. She advised that an update on the financial situation will be provided to the full Board at the meeting scheduled for 19 January 2024.
- 10.5 The Committee noted their confidence at the strong focus being taken by the Executive Team.
- 10.6 The Chair thanked Jim Boyle and his team for producing the report and noted that further reports will be presented to the NES Board on 19 January 2024, 28 February 2024 and 28 March 2024.
- 10.7 James Lucas and Syed Shah, KPMG Internal Auditors left the meeting.
- 11. Corporate Governance Package Board Standing Orders, Board Code of Conduct, Board Scheme of Delegation, Board Standing Financial Instructions & Committee Terms of Reference (NES/AR/24/10)

- 11.1 The Chair invited Della Thomas to introduce the Corporate Governance Package for annual review and approval for submission to the Board on 08 February 2024.
- 11.2 Della Thomas outlined that the Board Corporate Governance Package comprised of the below items and any revisions were highlighted in the cover paper.
  - Board Code of Conduct
  - Board Scheme of Delegation
  - Standing Financial Instructions (SFIs)
  - ARC Terms of Reference (ToRs)
  - Technology and Information Committee (TIC) ToRs
  - Staff Governance Committee (SGC) ToRs
  - Remuneration Committee ToRs
  - Education and Quality Committee (EQC) ToRs
- 11.3 The Committee commended to the quality of the Corporate Governance pack and the significant work that had gone into producing it.
- 11.4 The Committee requested a minor amendment to the Board Scheme of Delegation to include a delegated deputy in some of the columns that presently read as Not Applicable (N/A).

  Action: DT/LH
- 11.5 The Committee requested that information is included in the SFIs to specify who approves management consultant contracts.

  Action: LH
- 11.6 It was noted that the General Nursing Council are moving from being applicable for Internal Audits to Independent Verification. Laura Howard will liaise with Annie Gunner Logan for further information regarding this, so it can be considered if this relates to any changes required to the SFIs.

  Action: LH
- 11.7 The Committee reviewed each element of the Corporate Governance package and approved the item for onward progression to the 08 February 2024 Board, subject to the agreed changes.

#### 12. ARC 2024/25 Schedule of Business

(NES/AR/24/11)

- 12.1 The Chair invited Della Thomas to present the 2024-25 draft Schedule of Business (SoB). Della Thomas thanked Jenn Allison for her assistance with this paper. She advised the Committee that the SoB has been prepared based on the rolling SoB for 2023-24 and that changes were highlighted in the cover paper.
- 12.2 The Chair of the Committee noted that she had some minor amendments and will raise these with the Committee Secretary. Action: JF/JA

12.3 The Committee approved the 2024-25 ARC SoB.

# 13. Draft Committee Annual Report template

(NES/AR/24/12)

- 13.1 The Chair invited Laura Howard to introduce the paper.
- 13.2 Laura Howard informed the Committee that the Board requested a review of the Committee Annual Reports format, to ensure these were proportionate, but still complied with guidance.
- 13.3 Laura Howard advised the Committee that the revised approach is consistent with other NHS Boards and includes the following sections:
  - Introduction
  - Governance Arrangements
  - Membership and Meetings
  - Administration and Communication
  - Any issues/exceptions such as delayed or deferred items
  - Terms of Reference (Appendix 1)
  - Business Transacted during the year
  - Schedule of Business
  - Outstanding Matters
  - Future Developments
  - Conclusion
- 13.4 The Committee noted that authors of the Committee Annual Reports will be instructed to keep these reports as focused and strategic as possible, avoiding unnecessary levels of detail, in order that Committees and the Board can focus on the key issues. Reporting by exception will be encouraged.
- 13.5 Laura Howard informed the Committee that it is recommended that the detailed Committee Discharge of Remit is removed, as this is summarised in the main report.
- 13.6 The Committee noted that 2 new sections have been included in the ARC report as part of the business transacted during the year covering Fraud and Climate Emergency and Sustainability. This will ensure the full remit of the Committee is covered.
- 13.7 A query was raised regarding inclusion of the Best Value Report for the Annual ARC report. Laura Howard informed the Committee that the Best Value Report will remain an element of the ARC annual report, however this particular report will also be reviewed for streamlining.

13.8 The Committee approved the proposed format changes of the Committee Annual Reports.

# 14. Draft NES Policy for controlled documents

(NES/AR/24/13)

- 14.1 The Chair welcomed Christina Bichan and Nancy El-Farargy to the meeting and invited them to present the Policy for approval.
- 14.2 Nancy El-Farargy informed the Committee the draft NES Policy for controlled documents have been developed in response to an audit by the Information Commissioner's Office.
- 14.3 The policy provides a governing approach to the development, approval and management of strategies, policies and Standard Operating Procedures (SOPs). This will enable the development of standardised controlled documents that will be subject to corporate level controls and administration.
- 14.4 The Committee agreed it was an excellent document and raised a query regarding communicating to staff and gathering feedback. Christina Bichan explained that feedback has already been gathered from various groups across NES and that the policy is currently being tested by two different Directorates. She added that the Senior Operational Leadership Group (SOLG) will play a key role in communicating to staff and collating feedback.
- 14.5 A query was raised regarding if there was an intention to document and monitor documents review dates, persons responsible, effectiveness and how compliance. Karen Reid agreed that this will be included in future development and links to work previously requested by the ARC, which due to workload pressures had been put on hold. The Chair advised that she would be happy to discuss requirements further. Christian Bichan thanked the Chair for this offer and agreed to explore this further.
  Action: CBi/NEF
- 14.6 The Committee were content to recommend the Policy's approval by the NES Board at the February 2024 meeting.

# 15. ARC delegated Strategic Key Performance Indicator (SKPI) report

(NES/AR/24/14)

- 15.1 The Chair welcomed Simon Williams to the meeting and invited him to present the paper.
- 15.2 Simon Williams informed the Committee that the report provides an update on the 4 SKPIs relevant to the ARC for the period July 2023 to September 2023 (Q2 2023-24). Quarter 3 data is currently being collected and will be presented to the Board in February 2024.

- 15.3 Jim Boyle added that the savings target from vacancy lag and procurement will be exceeded. He informed the Committee that it is anticipated that the figures in relation to SKPIs will be further refined prior in the report to the Board on 08 February 2024.
- 15.4 A question was raised regarding the red, amber, green (RAG) status of the SKPIs. Simon Williams confirmed that RAG ratings will be discussed and agreed prior to the next ARC meeting.

  Action: SW
- 15.5 The Committee were content that the report provides them with adequate assurance.

# 16. Q3 Strategic Risk Update and NES Scoring Definitions and Matrix Proposal (NES/AR/24/15)

- 16.1 The Chair invite Jim Boyle and Debbie Lewsley to introduce the paper.
- 16.2 Debbie Lewsley informed the Committee that the Risk Register was recently reviewed by the Executive Team and individual risk owners. The Committee noted that within the last reporting period one new risk has been added to the Strategic Risk Register relating the importance of NES being an evidence-based data driven organisation.
- 16.3 The Committee were pleased with the new format of the report, which they agreed is concise and well presented.
- 16.4 The Committee raised a query regarding how ARC members can receive assurance that the other delegated risks are being scrutinised by the other NES Committees. Jim Boyle confirmed that these risks will be reported to the ARC within regular risk updates.
- 16.5 The Committee raised a query regarding how Internal and External Audit engage with the ongoing changes to the risk register. Jim Boyle explained that both Internal and External Auditors have sight of the developing risk register and, ensure their audits are adequately aligned to current risks.
- 16.6 The Committee noted the proposed scoring, and it was suggested that risks rated 1-5 and 5-1 should be rated as low rather than medium. It was agreed that this change will be recommend to the Executive Team for discussion.

  Action: DL/JB
- 16.7 The Committee requested that the scoring matrix is included as an appendix to each risk report.

  Action: DL
- 16.8 The Committee approved changes to the NES Strategic Risks, the NES Scoring Definitions and Matrix proposal, and additional categories, scoring definitions and risk updates.

## 17. NES Procurement Strategy 2024/27

(NES/AR/24/16)

- 17.1 The Chair welcomed Kenny McLean to the meeting to present the NES Procurement Strategy.
- 17.2 Kenny McLean informed the Committee that the Procurement Reform (Scotland) Act 2014 requires all public sector organisations with an annual spend of greater than £5m to publish a Procurement strategy.
- 17.3 The Committee noted that NES Procurement Strategy aligns with the Sustainable Procurement Duty, outlined in the Procurement Reform (Scotland) Act 2014, and recently published in the Scotlish Government Public Procurement Strategy for Scotland.
- 17.4 Kenny McLean explained that the Procurement Strategy underpins the principal procurement objectives which supports our Equality, Diversity, Human Rights and Health Inequality issues as per 'Fairer Scotland Duty'. He added that careful consideration has been given to the importance of the Climate Change Emergency and our collective NHS Scotland drive towards reducing emissions.
- 17.5 The Committee raised a query regarding fair work elements of procurement in the event that an organisation may reverse previous living wage commitments due to the current financial climate. Kenny McLean assured the Committee that this is a key aspect of NES' procurement requirements and that this relates to a small number of our partners.
- 17.6 Karen Reid left the meeting.
- 17.7 The Committee asked a question regarding the capturing of overall impact. Kenny McLean informed the Committee that qualitative and quantitative data highlighting impact will be included in the half year report to the ARC.
- 17.8 The Committee asked a further question specifically in relation to compliance with the Fairer Scotland Duty and how this may impact on wider social inequalities. Kenny McLean agreed to meet with Ally Boyle to discuss this further.

  Action: KM
- 17.9 The Committee approved NES Procurement Strategy 2024-27 for publication. The Committee also noted plans to review policies, procedures and training to align with NES' Strategic Framework.

## 18. Counter Fraud Update

(NES/AR/24/17)

18.1 The Chair invited Laura Howard to present the paper.

- 18.2 Laura Howard informed the Committee that the new Counter Fraud Strategy 2023-26 was issued by Scottish Government and Counter Fraud Services (CFS) in November 2023.
- 18.3 The Committee noted that there have been no declarations of interest received since the previous report for staff or Board Members. An all-staff communication will be issued to remind staff of their responsibilities to declare any gifts and hospitality received.
- 18.4 The Committee noted that NES has not been involved in any cases of potential fraud reported to CFS since April 2023 and that NES are on track to complete actions related to 2022-23 bi-annual National Fraud Initiative exercise.
- 18.5 Laura Howard informed the Committee that NES are progressing well with the implementation of the NHS Scotland Counter Fraud Standard. The Committee noted that it expected NES will meet the standard for 10 of the 12 components by end of 2023-24.
- 18.6 CFS have issued the national fraud risk assessment log and the NES Fraud Annual Delivery Plan. NES' approach to the fraud risk assessment and fraud annual action plan are set out in appendices 1 and 3.
- 18.7 The NES Counter Fraud Policy approved by the Board in November 2022 has been reviewed and no updates are required at this stage. The next review will take place in 2025 when the new partnership agreement with CFS is in place.
- 18.8 The Committee ask a question in relation to the timescale for developing mitigations for theft. Laura Howard explained that this exercise is on track for completion by 31 March 2024.
- 18.9 The Committee raised a question regarding the Counter Fraud Action Plan and if actions are mandated or agreed. Laura Howard informed the Committee that this is agreed between NES and Counter Fraud Services during conversations throughout the year.
- 18.10 The Committee noted the details contained in the report provided and confirmed it provided assurance that NES is fulfilling its requirements to counter Fraud in the NHS.

## 19. Climate Emergency and Sustainability

(NES/AR/24/18)

19.1 The Chair invited Jim Boyle to present the paper.

- 19.2 Jim Boyle updated that following approval from ARC and the NES Board, the 2022-23 Annual Report on Climate Emergency and Sustainability and 2022-23 Public Bodies Climate Change Duties Report were to be submitted to the Scottish Government (SG) and the Sustainable Scotland Network (SSN) respectively. He reported that no substantial issues have been raised by SG or the SSN.
- 19.3 Jim Boyle advised that the non-executive director Champion for Climate Emergency and Sustainability, Gillian Mawdsley, presented on her experiences of attending COP 26 in Glasgow in November 2021 to the Climate Emergency and Sustainability Group meeting on 20 November 2023.
- 19.4 The Committee noted that a video presentation will be communicated to NES staff in early in 2024, to raise awareness of NES' role in addressing the impact of the climate emergency through our own activities, and in our role of supporting NHS Scotland.
- 19.5 The Committee also noted that a Clinical Subgroup met on 15 December 2023 to discuss how best practice can be developed for raising awareness through our education and training programmes.
- 19.6 The Committee were content with the update and confirmed it provided assurance that NES is progressing the Climate Emergency and Sustainability requirements.

## 20. Audit Scotland Reports

- 20.1 The Committee noted the following Audit Scotland Reports:
  - Scottish Government's Workforce Challenges
  - Environment, Sustainability and Biodiversity Annual Report 2022-23
  - Audit Scotland Biodiversity Duty Report

## 21. Review of Meeting Effectiveness

- 21.1 The Chair invited the Committee to provide feedback regarding the effectiveness of the meeting.
- 21.2 The Committee agreed that the quality of information provided in reports has helped to provide assurance. The Committee particularly noted that the cover paper for item 14 Policy for Controlled Documents was an excellent example of what they expect from a cover paper.
- 21.3 Discussion took place regarding how successful the first hybrid meeting was, and it was agreed that it worked well, and that the sound and visual quality was good. For the future when attending from a meeting room, it would be helpful to position those in attendance nearer to the camera.

# 22. Date and time of next meeting

- The next meeting of the Audit and Risk Committee will be held on Wednesday 24 April 2024 at 09:30am.
- 22.2 A private meeting with Auditors had been scheduled to take place after the meeting, however External Auditors were unable to attend, and the Committee agreed that this should be held after the meeting on 24 April 2024.

NES January 2024 JA/DT/JB/JF

# **Approved Minute**

### **NHS Education for Scotland**

NES/SGC/24/15

Minutes of the Eighty Third Meeting of the Staff Governance Committee held on Thursday 22 February 2024, 10:15 - 11:25am

\*\*\*The meeting was held in hybrid format via Microsoft Teams and in-person at the NES Westport office in Edinburgh.

**Present:** Anne Currie (AC), Committee Chair

Nigel Henderson (NH), Shadow Chair, 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: Tracey Ashworth-Davies (TAD), Deputy Chief Executive

(Corporate)/ Workforce Director

Ameet Bellad (AB), Senior Specialist Lead, Workforce (For item

(80

Christina Bichan (CB), Director of Performance and Planning

(For item 10)

Rob Coward (RC), Principal Educator (For item 09) Ann Gallacher (AG), Senior Admin Officer / Committee

Secretary (Minute-Taker)

Janice Gibson (JG), Associate Director, Organisational

Development, Leadership and Learning (ODLL)

CarolAnne Keogh (CK), Head of Service, Human Resources

(HR)

Debbie Lewsley (DL) Planning & Corporate Governance

Manager (For item 09)

Karen Reid (KR), Chief Executive

| 1.  | Chair's welcome and introduction   |
|-----|--|
| 1.1 | The Chair welcomed everyone to her last Staff Governance Committee (SGC) meeting before she retires on 29 February 2024. She particularly welcomed Nigel Henderson who is taking over as SGC Chair from 01 March 2024. Debbie Lewsley, Planning and Corporate Governance Manager was welcomed to her first SGC meeting for agenda item 09. |
| 1.2 | Karen Reid thanked Anne Currie on behalf of the Board Chair, Board members, Executive Team and staff for all her valuable work and the contribution she has made since joining NES in September 2018. She welcomed Nigel Henderson as the new SGC Chair. Anne Currie thanked   |

|     | Karen Reid, the Committee and all the staff for their hard work, support and kindness. She went on to say that she has had a wonderful experience working in NES.   |
|-----|---|
| 2.  | Apologies for absence   |
| 2.1 | Apologies for absence were received from the following regular Committee meeting attendees: David Garbutt, NES Board Chair, Della Thomas, Board Secretary and Principal Lead (Corporate Governance) and Nancy El-Farargy (NE), Manager, Planning and Corporate Resources. |
| 3.  | Notification of any other business  |
| 3.1 | There were no notifications of any other business.  |
| 4.  | Declaration of interests  |
| 4.1 | As per the new 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 | Gillian Mawdsley reported that in relation to item 16, the Remuneration Committee minutes refer to the consultants' pay award, and she is a member of the Distinction Awards Committee. The Committee noted there was no conflict of interest.                            |
| 5.  | Draft minutes of the Staff Governance Committee meeting held on 02 November 2023 (NES/SGC/24/02)  |
| 5.1 | The minutes of the SGC meeting held on 02 November 2023 were approved as an accurate record of the meeting.   |
| 6.  | Action Status Report and other matters arising (NES/SGC/24/03)  |
| 6.1 | The Committee noted that thirteen actions were marked as complete on the action list and one action was in progress.  |
| 6.2 | CarolAnne Keogh is progressing Action 9.5 in relation to the SGC Ex-Officio member.   |
| 6.3 | The Committee approved the completed actions and confirmed that the progress made with the open action provided satisfactory assurance.   |
| 6.4 | There were no matters arising.  |
| 7.  | Director of Workforce Report (NES/SGC/24/04)  |
| 7.1 | The Chair invited Tracey Ashworth-Davies to introduce the Director of Workforce Report.   |

| 7.2  | Tracey Ashworth-Davies introduced the report and highlighted the following key topics to the Committee: the Wellbeing Workstream of the Ways of Working and Property Programme, the training delivered to line managers on anti-racism, recruitment activity, National Trainee Services work and the communication work that has taken place.                                  |
|------|--|
| 7.3  | She reported that the NES Digitally Enabled Workforce Team had been awarded the Digital Health & Care Team Award at the national Digital Health & Care Awards in February 2024, indicating their strengths as a team and their achievements in supporting the development of digital skills across the health, social care and housing sector.                                 |
| 7.4  | The Committee welcomed the great achievement and thanked everyone for the work they had done to enable digital confidence and capability.  |
| 7.5  | The Committee asked if there was an issue in relation to progressing Viva Engage. Tracey Ashworth-Davies said that the work had been paused pending future funding decisions on Microsoft 365 at a national level.   |
| 7.6  | The Committee asked if the Wellbeing Hub supports individual resources and team resources. CarolAnne Keogh responded that the Wellbeing Framework supports individuals, teams, line managers and all NES staff. It is a preventative approach rather than a reactive approach.   |
| 7.7  | The Committee asked if there was an increase in the number of Employee Relations Cases. CarolAnne Keogh responded that there has not been an increase in the number of cases.  |
| 7.8  | The Committee noted the number of clinical negligence cases that were received in quarter 3 and queried if anything could be learned from them. Clinical negligence cases would entail a detailed learning event analysis which provides opportunity for associated learning to be shared with colleagues including trainees, educational supervisors, and training practices. |
| 7.9  | The Employee Director reported that staffside and Human Resources work in partnership on the employee relation cases. She added an observation that, since hybrid working, cases are coming to light further downstream than previously, requiring additional work to deescalate them.   |
| 7.10 | The Committee asked if there were any themes from the escalated cases. The Employee Director will feedback on the themes.  Action: LG  |
| 7.11 | The Non-Executive Director Whistleblowing Champion asked for assurance that there were no whistleblowing concerns raised in relation to the employee relations cases. Christina Bichan confirmed there was no whistleblowing crossover.  |

|      | absence from similar NHS national boards. The Committee asked if sickness absence was accurately recorded. Tracey Ashworth-Davies responded that line managers are encouraged to record sickness absence correctly. She went on to say that NES's sickness absence figures have   |
|------|---|
| 8.3  | October to December 2023 in phase 2 of implementing the new SKPIs that assure the SGC the Staff Governance Standard is being applied in NES.  The Committee welcomed the report and noted the figures for staff   |
| 8.1  | The Chair welcomed Ameet Bellad to the meeting and asked him to introduce the Delegated SGC Strategic Key Performance Indicator (SKPIs) Report.  Ameet Bellad introduced the performance report on the data available from  |
| 8.   | Delegated SGC Strategic Key Performance Indicator (SKPIs) Report (NES/SGC/24/05)  |
| 7.20 | Ameet Bellad joined the meeting at 11.57am.   |
| 7.19 | The Committee took the Whistleblowing agenda item next.   |
| 7.18 | CarolAnne Keogh left the meeting.   |
| 7.17 | The Committee approved the Director of Workforce report and confirmed that it provided the Committee with satisfactory assurance.   |
| 7.16 | The Chair thanked Tracey Ashworth-Davies and the team involved for the detailed report.   |
| 7.15 | The Employee Director added that these were the anticipated staff concerns. Work is taking place with the design and facilities teams and staff are positive overall about the proposed move to the new building.   |
| 7.14 | The Committee asked how the Glasgow change of office base consultation was received by stakeholders. CarolAnne Keogh reported that staff have responded positively to the change. Questions/feedback relating to parking, meeting room and desk space availability have been reported to the design team. There has been activity on Tomorrows NES page on the intranet and the online form. All queries and responses have been added to the FAQs. |
| 7.13 | In relation to the East Region Recruitment Service (ERRS), the Committee enquired about the evaluation and what our assessment is on the recruitment engagement arrangements. Tracey Ashworth-Davies responded that the evaluation will be looking at cost efficiency and if this is the best service for NES.  |
| 7.12 | The meeting noted it would be useful to have timescales against the intranet and resources refresh and the review of NES internal communications on climate change & sustainability.  |

|     | always been lower than the national average figures. The Committee asked that a form of words be added to the report to reflect this, as this will give further assurance.   |
|-----|--|
|     | Action: AB   |
| 8.4 | The Committee enquired if there was a reason for the increase in the disabled staff pay gap figure. Ameet Bellad responded that the Annual Equality & Diversity End of Year performance report coming to SGC in April 2024 goes into detail for all the protected characteristics. |
| 8.5 | In relation to the RAG scores for SKPI05 and SKPI06, the Committee asked if target percentage figures would be added to these. Tracey Ashworth-Davies responded that this is in progress.  |
| 8.6 | The Chair thanked everyone for the work done on the report and the Committee approved the report.  |
| 8.7 | Ameet Bellad left the meeting. Rob Coward and Debbie Lewsley joined the meeting.   |
| 9.  | Delegated SGC Strategic Risk Report (NES/SGC/24/06)  |
| 9.1 | The Chair welcomed Rob Coward and Debbie Lewsley to the meeting and asked them to introduce the Delegated SGC Strategic Risk Report.   |
| 9.2 | Debbie Lewsley introduced the report which sets out the strategic risks relating to the SGC remitted responsibilities.   |
| 9.3 | Tracey Ashworth-Davies reported on the fiscal environment challenges and the work that has taken place with staff on Fixed Term Contracts.   |
| 9.4 | The meeting noted that due to the current fiscal environment Risk 13 might become a higher risk.   |
| 9.5 | In relation to Risk 4 the Committee suggested that the wellbeing hub is included as an action and asked for a form of words that state we have direct responsibility for trainees.  Action: RC/DL  |
| 9.6 | The meeting noted that the report was not correctly formatted when it was  |
|     | finalised.  Action: RC/DL  |
| 9.7 | The Chair thanked Rob Coward and Debbie Lewsley for the work they had done on the report. The Committee confirmed the report provided assurance and approved the report.   |
| 9.8 | Rob Coward and Debbie Lewsley left the meeting.  |

| 10.  | Quarter 3 Whistleblowing Report (NES/SGC/24/07)   |
|------|---|
| 10.1 | The Chair invited Christina Bichan to introduce the Quarter 3 Whistleblowing report.  |
| 10.2 | Christina Bichan introduced the report which provided an update on whistleblowing activities for the quarter 3 period from 01 October 2023 to 31 December 2023.   |
| 10.3 | Christina Bichan reported that during this period NES received one whistleblowing concern. She apologised to the Committee for the missing word in line 13 of paragraph 6.2. She added that NES had received the highest iMatter scores in relation to whistleblowing related questions of all NHS Scotland Boards.   |
| 10.4 | The Committee asked if the whistleblowing questions were mandatory in the iMatters survey and if a completion percentage was known. Christina Bichan responded that the questions were not mandatory, and a high percentage of NES staff completed them. Trends will be picked up going forward.  |
| 10.5 | The Committee welcomed the improved compliance score for the whistleblowing E learning module for line managers on TURAS Learn.   |
| 10.6 | The Chair thanked Christina Bichan and Nancy El-Farargy for the positive report and the Committee confirmed the report provided assurance.  |
| 10.7 | The Chair asked the Non- Executive Director Whistleblowing Champion if she had any additional remarks to make.  |
| 11.  | Non-Executive Whistleblowing Champion Remarks   |
| 11.1 | The Non- Executive Director Whistleblowing Champion thanked Christina Bichan and Nancy El-Farargy for their hard work. She added that having a whistleblowing concern gives assurance that the process is working and asked if the compliance target is realistic. She welcomed the increase in the number of confidential contacts and the work taking place to continually improve the outcomes and learning. |
| 11.2 | The Chair thanked the Non- Executive Director Whistleblowing Champion for her comments.   |
| 11.3 | The Committee confirmed that the report provided satisfactory assurance.  |
| 12.  | 2024-2025 Draft Committee Schedule of Business (NES/SGC/24/08)  |
| 12.1 | Tracey Ashworth-Davies introduced the Draft Committee Schedule of Business (SoB) that is used as the basis to ensure all the items that require Committee governance and scrutiny are scheduled and sequenced effectively. This report was taken as read.   |

| 12.2 | The Chair opened up the meeting for questions and there were none.  |
|------|---|
| 12.3 | The Chair thanked all for their work done on the report and the Committee approved the report.  |
| 13.  | Identification of any new risks raised at this meeting  |
| 13.1 | The Committee noted there were no additional risks identified at the meeting.   |
| 14.  | Employment Tribunals (NES/SGC/24/09)  |
| 14.1 | The Committee noted the Employment Tribunals update.  |
| 15.  | Policy/Scottish Government Director Letters as appropriate to Staff Governance Committee (NES/SGC/24/10)  |
| 15.1 | The Committee noted the Director Letters update.  |
| 16.  | Redacted Remuneration Committee minutes from meeting 06 December 2023 (NES/SGC/24/11)   |
| 16.1 | The Committee noted the Remuneration Committee minutes.   |
| 17.  | Change Management Programme Board minutes (NES/SGC/24/12)   |
| 17.1 | The Committee noted that the 27 November 2023 Change Management Programme Board minute had the wrong next meeting date on it.  Action: CD   |
| 18.  | Health, Safety and Wellbeing Forum minutes (NES/SGC/24/13)  |
| 18.1 | The Committee noted the Health, Safety and Wellbeing Forum minutes.   |
| 19.  | Partnership Forum minutes   |
| 19.1 | There were no Partnership Forum (PF) minutes for noting since the last PF meeting took place on 31 August 2023.   |
| 20.  | Any other business  |
| 20.1 | There were no other items of business discussed at the meeting.   |
| 21.  | Review of Committee Effectiveness   |
| 21.1 | 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?                              |
|------|--|
| 21.2 | The Committee confirmed they were content with the quality of reports and welcomed the level of detail contained within reports which allow them to fulfil their role efficiently. |
| 21.3 | The meeting closed at 11:25am.   |
| 22.  | Date and time of next meeting  |
| 22.1 | The next meeting of the Staff Governance Committee will be held on Monday 29 April 2024 at 10:15am.  |

AG/LS/NH/TAD

NES

March 2024

Approved NES/EQC/24/12

#### **NHS Education for Scotland**

## **EDUCATION & QUALITY COMMITTEE**

7 March 2024 from 10:15am to 12:20pm

Approved minutes of the fourteenth meeting of the Educational & Quality Committee (EQC) held on Thursday 07 March 2024 as a hybrid meeting, in person at the Westport Office, Edinburgh and via Microsoft Teams

**Present:** Annie Gunner Logan (AGL), Non-Executive Director (Chair)

Olga Clayton (OC), Non-Executive Director Shona Cowan (SC), Non-Executive Director Nigel Henderson (NH), Non-Executive Director

**In Attendance:** Rob Coward (RC), Principal Educator, Executive Secretary

Alan Dennison (AD), Dean of Postgraduate Medicine (item 14)

Janice Gibson (JG), Associate Director, Organisational Development

Leadership and Learning (ODLL)

Kevin Kelman (KK) Director of NHS Scotland Academy (NHSSA),

Learning & Innovation

Gordon Paterson (GP), Director of Social Care

Ryan Reed (RR), Head of Programme NHSSA, Learning and Innovation

Karen Reid (KR), Chief Executive and Accountable Officer

Lorraine Scott (LS), Associate Manager CEO & Chair Office (Minutes)

Simon Williams (SW), Principal Educator (Item 10b)

Karen Wilson (KW), Executive Director of Nursing, Midwifery and Allied Health Professions (NMAHP), Deputy CEO (Clinical) and joint EQC

**Executive Lead** 

#### 1. Welcome and Introductions

1.1 The Committee Chair welcomed everyone to the meeting.

# 2. Apologies for absence

- 2.1 Apologies were received from Peter Donnelly, Co-opted Committee Member.
- 2.2 Apologies were also received from regular Committee attendees, Emma Watson, Executive Medical Director and joint EQC Executive Lead, David Garbutt, Board Chair and Della Thomas Board Secretary and Principal Lead for Corporate Governance.

# 3. Notification of any other business

3.1 There were no notifications of any other business.

## 4. Declarations of interest

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

# 5. Draft Minutes of the meeting held on 7 December 2023

- 5.1 The Chair invited the Committee to review the draft minutes from the 07 December 2023 EQC meeting.
- 5.2 The meeting noted that a correction was required to record Olga Clayton's apologies, as she was not present at the meeting.

  Action: LS
- 5.3 The Committee approved the draft minute, subject to the above amendment.

## 6. Action Status Report and other matters arising

- 6.1 The Chair invited the Committee to review the action status report and asked the Committee to note that it contained 6 completed actions and 1 action in progress.
- 6.2 Karen Wilson provided an update on the 'in-progress' action relating to the NHS Scotland Academy Annual Report. She reported that she had a meeting with the EQC Committee Chair, and the Board Chair and it had been agreed that the NHS Scotland Academy Annual Report scheduled to 09 May 2024 Committee meeting will provide assurance, particularly around evaluation and impact of each activity in relation to individual projects. This decision has been shared with Kevin Kelman.
- 6.3 The Committee agreed that this action could be marked as completed.
- 6.4 The Committee approved the action report.

# 7. Education & Quality Executive Leads Report

7.1 The Committee Chair remarked that this was an informative report, providing a breadth and depth of the activity within NES relating to the remit of the EQC. The Chair invited Karen Wilson to introduce the report.

- 7.2 Karen Wilson advised that the report is provided to Committee for assurance, and it highlights the key strategic issues and updates relating to education and quality. Karen Wilson asked the Committee to note that the format of the report had changed in line with the NES's Strategy areas of People, Partnerships and Performance.
- 7.3 The Chair invited the Committee to provide any comments on the redesigned format to Rob Coward who had supported the development of the new layout. No comments from the Committee were made at this stage.
- 7.4 The Committee Chair opened the report for comments and questions.
- 7.5 The Committee asked if the critical emerging issues outlined in the report posed any additional risks or impact to NES.
- 7.6 Rob Coward advised the Committee that these obstacles had already materialised, and therefore they are considered as issues rather than risks.
- 7.7 The Committee noted that funding for bespoke partnerships was mentioned in the report and asked if NHS Boards contributed funding towards the training.
- 7.8 Karen Wilson reported that that there are no financial transactions in relation to this work across the NHS, however there are some projects that generate income. Karen Wilson remarked that the preference for NES is to offer "train the trainer" courses to allow territorial NHS Boards to become self-sufficient.
- 7.9 The Committee noted that nationwide issues can affect NES, for example recruitment progress can potentially be delayed on a UK wide basis, due to issues such as industrial action, which can impact even though there is no industrial action in Scotland.
- 7.10 Karen Reid advised that there have been occasions where industrial action has affected recruitment, which led to rescheduling However, she confirmed that NES had proceeded with recruitment albeit later than planned.
- 7.11 The Committee discussed the modernisation of TURAS materials for practice supervisors, assessors and academic assessor preparation and noted that the relaunch had been enhanced through an evaluation process. The Committee requested some further background on this evaluation process and asked if there was potentially an evaluation process for other roles.
- 7.12 Karen Wilson reported that new standards had been established by the Nursing and Midwifery Council (NMC) at the onset of the pandemic leading to a less effective integration compared to the usual NES standards. She advised that feedback from staff and students indicated a lack of understanding regarding these new roles, prompted evaluation and subsequent adjustments.

- 7.13 The Committee noted that the Leading to Change community events were held as part of an initial campaign to raise awareness of the Leading to Change branding among Health and Social Care colleagues. The Committee asked for some further detail on these community events.
- 7.14 Janice Gibson reported that these events, which included visits to different workplaces, provided an opportunity to conduct a needs analysis and identify key challenges for the development of Leading to Change Programme. She went on to advise that after a year, strong relationships have been established with key stakeholders, and planning is underway for the next phase of the project now that these relationships have been formed.
- 7.15 The Committee asked if the cost efficiencies, and any cost savings, could be monitored in relation to the NES Technology Enhanced Learning (TEL) Knowledge Sharing Network.
- 7.16 Karen Reid reported that NES will, in the future, capture the use of online learning and the influence it has on reducing travel and other factors in cost savings. She asked the Committee to note that this has not been feasible to date due to budget restrictions, but there are expectations to obtain this information over the 2024-25 business period.
- 7.17 The Committee noted that the report refers to the National Centre for Remote and Rural Health and Care and queried when Social Care Services will also be included in this work.
- 7.18 Karen Reid reported that a recent paper has been presented to the Executive Team (ET) on the National Centre for Remote and Rural Health and Care. She advised that this report acknowledged the advantages of combining Primary and Social Care. Karen Reid remarked that due to recent Scottish Government (SG) budget constraints, it had been recommended to prioritise the initial stage with a Primary Care focus. Karen Reid went on to report that ET had discussed further proposals for Acute, Primary and Social Care for consideration by SG, whilst being mindful of the fiscal environment, with the aim to implement Primary Care by April 2024. Phase 1 of the National Centre with a focus on Primary Care was implemented and funded from October 2023.
- 7.19 The Committee noted that the National Centre for Remote and Rural Health and Care is multiprofessional and hosted within the Medical Directorate and led by Pam Nicoll (PN), as interim Director. The Committee agreed that it would be helpful to receive an update at a future EQC meeting, Action: LS/PN
- 7.20 The Committee noted the reference to Medical Education Reform in the paper and asked if there was any further update on this area of work.
- 7.21 Karen Reid reported that a comprehensive Medical Education Reform Route Map is under development, which holds significant strategic importance for NES. She advised that once this route map is finalised, the reporting governance will be through EQC. Karen Reid remarked that it will also be presented to the NES Board.

- 7.22 Karen Wilson added that a positive discussion had taken place with the 4 UK nations in relation to Medical Education Reform and that an update on this would be given to EQC. She noted that Medical Education Reform is being led by Emma Watson and Lindsay Donaldson (LD), Deputy Medical Director.
- 7.23 The Committee welcomed these developments and asked that the Medical Education Reform Route Map is scheduled to a forthcoming EQC for review and approval, once it is available, and noted that an update on the outcomes of the Medical Education Reform discussions, involving the 4 nations, would also be forthcoming.

  Action: LS/EW/LD
- 7.24 The Chair updated the Committee that she would be attending the Queen Elizabeth University Hospital to observe an enhanced monitoring visit and reminded members that this opportunity is open to them, for their own learning, training and orientation around the work that NES is part of.
- 7.25 The Committee referenced the update in the report in relation to the NHS Scotland Academy (NHSSA) and noted the positive impact on waiting times for patients that the national endoscopy training programme and national ultrasound training programme is having. The Committee asked how the impact is being reported.
- 7.26 Kevin Kelman advised the Committee that the annual review for each of the programmes listed will be included in the NHSSA Annual Report that is scheduled for the 09 May 2024 EQC meeting.
- 7.27 The Committee noted that the Widening Access pathway pilot is evolving. The Committee asked for some further information about why Skills Development Scotland (SDS) will not continue to contribute to this work.
- 7.28 Kevin Kelman reported that there have been financial constraints and NHSSA have been in contact with Colleges, with the aim to maintain the programme where they can cover the cost from existing budgets. He went on to advise that new localities are evolving, he mentioned that Fife & Fife College and NHS Lothian & Mid Lothian College have recently expressed interest in taking part in the programme.
- 7.29 The Chair noted the loss of SDS funding and the mitigating measures in place to address the loss.
- 7.30 The Committee noted the Lead Executive Report and confirmed that it provided satisfactory assurance with the quality, performance and management of education and training activities.
- 7.31 The Committee Chair thanked all those who had contributed to the report.

# 8. Annual Report on Externally Regulated Programmes

- 8.1 The Committee Chair invited Rob Coward to introduce this report.
- 8.2 Rob Coward advised the Committee that the report is a snapshot of key workstreams which NES delivers and are subject to external scrutiny by a regulatory body or other organisation. It aims to provides assurance to EQC that these relationships are managed effectively.
- 8.3 The Chair acknowledged the report provided members with comprehensive information regarding the extent of NES's engagement with external organisations and remarked that despite only capturing a portion of NES's portfolio, it reflects a noteworthy level of effort.
- 8.4 The Committee requested that future reports included the specific point in the cycle of events for scrutiny, for example, to determine the position within the 5-year cycle for Scottish Qualification Authority (SQA).
- 8.5 Rob Coward confirmed this will be added for future reports. Rob Coward asked the Committee to note that although scrutiny visits are 5-yearly there are interactions within this cycle (for example, external verification). **Action: RC**
- 8.6 The Committee requested summary details on the recommendations for improvements, made by the regulatory bodies, and asked if this could be provided within the narrative of future reports. The Committee commented that this information would strengthen governance and would provide further assurance that the recommendations made are linked to work plans.
- 8.7 Rob Coward advised that he would liaise with directors to ensure that this was captured for future reports. **Action: RC**
- 8.8 The Committee noted the recommendations and confirmed that the report provided the necessary assurance with the status of NES's education activities and programmes subject to external regulation and scrutiny.
- 8.9 The Committee Chair thanked everyone involved in preparing this report.

## 9. Outcome of Complaints Handling Audit and Implications for EQC

- 9.1 The Committee Chair invited Rob Coward to introduce the report.
- 9.2 Rob Coward advised that this report presents EQC with the findings from the recent internal audit of NES's complaints handling processes and a proposal for EQC in respect of future reporting. Rob Coward informed the Committee that it was proposed at the 18 January 2024 Audit and Risk Committee meeting that

quarterly reports would be prepared for the EQC to address the recommendations made. He advised that EQC and then the Board, will receive the annual report as per the usual sequencing. Rob Coward asked the Committee to note that as the Annual Report goes to the Board, it is made publicly available at that time and then published on the NES website.

- 9.3 The Committee expressed concerns regarding the potential identification of the complainant, particularly as NES receives few complaints. The Committee questioned the necessity of producing quarterly reports, considering the low number of complaints and the increased workload it may entail.
- 9.4 Rob Coward assured the Committee that all necessary measures are taken to maintain anonymity as the annual complaints report is already published externally.
- 9.5 The Committee agreed the recommendations and agreed to receive quarterly complaints reporting on a trial basis for a year and then review.
- 9.6 The Committee agreed that only new complaints will be reported to the EQC and if no complaints are received within the quarter a verbal update will be sufficient to record no complaints. A standing item will be added to the EQC agenda and the EQC rolling Schedule of business updated accordingly.

  Action: LS
- 9.7 The Committee noted the findings of the internal audit of NES's complaints handling processes and agreed that an update should be provided to ARC, notifying the 1-year trail period for quarterly complaints reports to EQC.

  Action: RC

## 10 (a) Presentation – Implementation of NES Education and Learning Strategy

- 10.1 The Committee Chair invited Ryan Reed to present an overview and proposal on how the role of EQC and the EQC Terms of Reference link with the Strategic Key Performance Indicators (SKPIs) and the NES Education and Learning Strategy.
- 10.2 The Committee Chair asked that a copy of the presentation should be shared with members of EQC after the meeting.

  Action: LS
- The Chair remarked that the presentation established a clear connection between EQC's role in enhancing the quality of education provided by NES and how the SKPIs will help to assess the effectiveness and quality of the learning and education implemented.
- 10.4 The Chair invited questions from the Committee.
- The Committee asked what role the Committee had in supporting the Board decision making in the current financial situation, as well as the process for determining new proposals, additionally what governance measures are in place to support these decisions.

- Karen Reid reported that there are 2 processes in NES which provide robust executive level governance. She advised that the first is the Corporate Radar, which is a process for the review of new commissions. She reported that these are received monthly by ET for review and approval. Karen Reid reported that the projects and the budget must align with the Board approved NES 2023-26 Strategy and meet the required standards.
- Karen Reid went on to outline a second process associated with the Annual Delivery Plan. She advised that this operationalises the NES 2023-26 Strategy. She reported that this will be approved by full Board in due course. Karen Reid advised that if any modifications are presented to the Board, then these would be sequenced through Committees as appropriate for any aspects of Board delegated governance, particularly in relation to Board delegated strategic risks and SKPIs.
- The Committee asked what support was available to staff in relation to the new proposals for the implementation of the NES Education and Learning Strategy and what information might be available to assist them during the process.
- Ryan Reed advised the Committee that a process to support staff was planned.

  10.10 He reported that this is still in the discovery stage, but measures will be taken to ensure that staff are supported with any decisions taken.
- The Committee discussed the process that had been utilised to prepare and develop the original SKPIs and the process for the annual review of the SKPIs. The Committee noted that some of the EQC delegated SKIPs currently do not have data available.
- Karen Reid advised the Committee that the Southern Academic Model, the
  10.12 Balanced Scorecard Approach and the European Foundation for Quality
  Management framework was used to assist with development of NES' SKPIs.
  She asked the Committee to note that during the developmental process NES
  engaged with various organisations across the UK to understand how they gather
  measurement information and NES also collaborated with Universities during the
  developmental process.
- Karen Reid advised that for a few of the SKPIs that are delegated to the EQC, work is in its exploratory stage to identify how to collect the relevant data and confirm the strategies required to provide the information for future EQC reports. Karen Reid went on to advise that the development of the SKPIs during this first year has been an iterative process and assured the EQC that the provision of future data to the Committee will be sufficiently robust for the scrutiny required.
- The Committee Chair asked if the holistic approach set out in the presentation will help improve understanding for those SKPIs where there are no existing metrics or datasets available for reporting.

- 10.15 Ryan Reed confirmed that the implementation of the NES Learning and Education Strategy and SKPIs are linked, and the aim is to have a core set of questions across NES which will provide consistency.
- 10.16 The Committee noted that within the presentation there is a recommendation for a dashboard to be developed. It was agreed that this would be presented to a future Committee meeting and also be linked with the SKPI report. Action: LS/RR
- 10.17 The Committee Chair thanked Ryan Reed for the presentation.

# 10(b) EQC Strategic Key Performance Indicators (SKPIs): Update

- 10.1 The Committee Chair welcomed Simon Williams to the meeting in support of this item and invited Ryan Reed to introduce the report.
- 10.2 Ryan Reed advised that the report invites the Committee to review the status of the EQC delegated SKPIs approved by the NES Board in May 2023.
- 10.3 The Committee Chair opened the item up to the Committee for questions.
- 10.4 The Committee acknowledged the level of detail provided and the candid evaluation of the current situation and noted some of the challenges in identifying suitable metrics and data sources.
- 10.5 The Committee raised a query whether gathering data for certain SKPIs may have an impact on user experience. The Committee commented that if the accessibility of TURAS was reduced then the parameter around the development of the SKPI should be considered to ensure accessibility is not affected for the user.
- 10.6 Simon Williams advised the Committee that the criteria used for reviewing the SKPIs shall incorporate all feedback received in relation to timescale, costs and impact assessment and user experience and this will also include the feedback offered by EQC at today's meeting.
- 10.7 The Committee discussed the further development and revisions of the SKPIs and asked when this was planned.
- 10.8 Simon Williams advised that all SKPIs will be reviewed by May 2024, which will include those presented to EQC today.
- 10.9 The Committee requested an opportunity to offer feedback and influence the further development of the SKPIs relevant to the EQC.
- 10.10 Karen Reid advised that she would discuss this with the Board Chair to agree how non-executives will be involved in the SKPI review. **Action: KR**
- 10.11 The Committee requested that additional detail be added noting any highlights or concerns in future SKPI reports to EQC. The Committee suggested that the 'insights and action' column could be expanded to include details that are relevant to Committee.

  Action: SW/RR

- The Committee suggested that it would be helpful for the consistency and clarity throughout the SKPI report to be improved, for example a range of different types of sectors are noted as Health, Social Care, Local Authority, Private Sector, Voluntary Sector. The Committee advised that there are only 3 sectors Public, Private and Third Sector and asked if future reports could be amended to reflect this.

  Action SW/RR
- The Committee noted that there were inconsistencies between the Strategy, the 10.13 Framework and the new SKPIs around lived experiences.
- Ryan Reed acknowledged that each situation presents unique challenges which are relevant to the specific work context, and the Framework is designed to promote engagement and development. He went on to advise that it is anticipated that qualitative data will be able to be demonstrate the impact of ongoing work.
- The Committee agreed the recommendations that a sub-group is formed by the Education & Quality Executive Group (EQEG) which shall take forward the SKPI discovery activity and that the sub-group is empowered to progress the work reporting back to EQC.
- The Committee Chair thanked Simon Williams and Ryan Reed for their paper, and they left the meeting.

# 11. EQC Strategic Risk Report and identification of any new risks emerging from this meeting

- 11.1 The Committee Chair invited Rob Coward to introduce the report.
- 11.2 Rob Coward advised that there are 2 strategic risks relevant to EQC and the details are provided in the report.
- 11.3 The report was opened to the Committee for questions.
- 11.4 No questions were raised, and the Committee noted the report and confirmed that the risks delegated to EQC are managed effectively.

## 12. Draft EQC Schedule of Business 2024-25

- 12.1 The Committee Chair invited Rob Coward to introduce this report.
- 12.2 Rob Coward noted that this report brings the Schedule of Business (SoB) for 2024-25 for Committees approval and advised that there are some revisions added to the report and detailed in section 6.2.

Karen Reid reported that a piece of due diligence work is currently in progress in relation to the reports that come through Board and the Board Committees. She advised that the Committee will be updated if this has any implications for the EQC SoB.

The Committee Chair opened the paper for questions.

12.4 No questions were raised, and the Committee approved the report.

12.5
 The Chair thanked Rob Coward for presenting the paper and thanked the other
 12.6 authors involved in preparing the EQC SoB.

# 13. Consultations Log

13.1 The consultations log was noted.

# 14. Medical ACT Sharing of Information: Summary of Activities by NHS Board 2022-23

- 14.1 The Committee Chair welcomed Alan Denison to the meeting and invited him to introduce the report.
- Alan Denison advised that the report provided a summary of Medical Additional Cost of Teaching (ACT) activities carried out by NHS Boards between April 2022 and March 2023. He reported that an aim of the paper is to share and showcase the learning, innovation and expertise that Medical ACT funding has supported in the NHS across Scotland. He advised that it also highlights the future challenges and opportunities that exist in the clinical education of medical students.
- 14.3 The Chair opened to the Committee for questions.
- 14.4 The Committee asked a question whether the expenditure for the ACT monies spent on training and resources is shared between professions.
- 14.5 Alan Denison advised that SG provide the ACT funding for medical student's education however there is flexibility around some ACT bids where it is multiprofessional, and the funding is used to promote inter-professional working.
- 14.6 Karen Reid invited the Committee to note that there is an Internal Audit for ACT which is currently being reviewed to simplify guideline for Boards and how they will be improved and that this report will be presented to EQC at a future meeting.
- 14.7 The Committee noted that there were a lot of acronyms within in the report which were not explained. Alan Denison advised that a detailed glossary will be attached to the Annual Report.

  Action: AD

- 14.8 The Committee confirmed its assurance with the information of the Medical ACT funded activity supplied by Boards.
- 14.9 The Committee Chair thanked Alan Denison for the paper, and he left the meeting.

# 15. Scottish Government and NES Educational policies

15.1 The Committee noted that there were none for this meeting.

#### 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 discussed any aspects where effectiveness could be improved and noted the areas for improvement in relation to abbreviations in full for one of the reports.

# 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 Education and Quality Committee will be held on 09 May 2024, 10:15am – 12:45pm as hybrid meeting.

NES LS/DT/AGL/KW April 2024

**Approved – Annie Gunner Logan** 

## TECHNOLOGY AND INFORMATION COMMITTEE (TIC)

NES/TI/24/11

Minutes of the Eleventh NES Technology and Information Committee held on Monday 13 February 2024 10:15 – 12:45 via Microsoft Teams.

Present: David Garbutt, Non-Executive Director and Chair of TIC

Ally Boyle, Non-Executive Director Shona Cowan, Non-Executive Director Jean Ford, Non-Executive Director

Angus McCann, Ex-Officio Member and Non-Executive Director,

NHS Lothian

In attendance: Jenn Allison, Senior Officer, Board / CEO Office

Colin Brown, Head of Strategic Development Paula Baird, Principal Lead, Workforce (item 09)

Jim Boyle, Executive Director of Finance Debbie Lewsley, Risk Manager (item 10) Jackie Sweeney, Senior Finance Manager Christopher Wroath, Director of NTS

#### 1. Welcome and introductions

1.1 David Garbutt welcomed everyone to the meeting.

1.2 The Chair informed the Committee that Paula Baird would be welcomed for item 09, Digital Skills and Leadership, Debbie Lewsley would join for item 10, Strategic Risk.

## 2. Apologies for absence

2.1 The Committee noted that apologies were received from Karen Reid, NES Chief Executive, Tracey Ashworth-Davies, Director of Workforce / Deputy Chief Executive (Corporate), David Felix, Director of Dental and Caldicott Guardian, and Della Thomas, Board Secretary & Principal Lead - Corporate Governance.

#### 3. Declarations of interest

- 3.1 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 which item this related to.
- 3.2 The Committee confirmed there were no declarations of interest in relation to the business on the agenda of the meeting.

## 4. Notification of Any other Business

4.1 There was no other business raised for discussion.

# 5. Minutes of the meeting 30 October 2023

(NES/TI/24/02)

5.1 The minutes were approved as an accurate record.

## 6. Committee Rolling Action Log

(NES/TI/24/03)

- 6.1 The Committee noted that of the 15 actions, 14 have been marked as completed or have been closed.
- 6.2 The Committee noted the action for the Chair of the TIC to write to the Network Information System (NIS) auditors regarding the redacted NIS audit report can also be marked as complete. The Chair updated that he has spoken to SG, who commission the NIS audit, to state that the TIC disagrees with elements of the NIS report being redacted. SG agreed that it would be preferable if management comments would be removed from the official report and unredacted versions of management comments issued to individual Boards separately.
- 6.3 The Committee approved the completed actions and noted the progress updates on the action list.

# 7. Executive Lead Officer's Report

(NES/TI/24/04)

- 7.1 The Chair invited Christopher Wroath to make any introductory remarks in relation to the Executive Lead Officer's Report.
- 7.2 The report provided the Committee with an overview of progress on delivery since the last meeting in October 2023. This included an update on the status of Commissions from Scottish Government (SG), key areas of risk, a summary of expenditure to date and a current forecast of the end of year anticipated financial position, identifying significant over or under spends.
- 7.3 Christopher Wroath informed the Committee the key challenge facing the NTS Directorate at present relates to financial uncertainties for financial year 2024-25. Christopher informed the Committee that the NES Executive Team have been working to re-prioritise deliverables against NES' Strategic outcomes. As a result of this NTS will continue to engage with stakeholders in NES and Scottish Government (SG) Digital Health and Care (DHAC) to secure agreement on a consolidated delivery plan at the earliest opportunity.
- 7.4 Christopher Wroath informed the Committee that NTS SLT are modelling the best, medium and worst-case DHAC funding scenarios by the end of February. The Committee noted that NTS senior leadership team have met to commence scenario planning for potential impact to the NTS delivery and resourcing plan. NTS and DHAC revised delivery plans will be submitted to the next meeting for oversight.
  Action: CW
- 7.5 Christopher Wroath confirmed to the Committee that NTS are working closely with Finance and Workforce colleagues to retain temporary staff where possible, and he thanked Jim Boyle and Finance colleagues for their support. Jim Boyle added that conversations are taking place across NES regarding retention of short-term

- staff and noted that the reliance on short term staff for delivery is more acute in NTS.
- 7.6 The Committee recognised the importance of the potential future benefits that the Turas Refresh Programme can have on improvement to services across Health and Care in Scotland.
- 7.7 Discussion took place regarding the Digital Maturity Assessment. A summary highlighted the results of the assessment, written by NES colleagues, had been reported to the previous TIC for noting. Christopher Wroath informed the Committee that the official report from SG will be submitted to the TIC when it has been received and a further update will be provided to the next meeting.

**Action: CW** 

- 7.8 A query was raised regarding why NES was required to return £0.9m to SG for the Digital Front Door (DFD) work. Christopher Wroath explained that DHaC are yet to confirm where this work sits in their wider priorities. Christopher Wroath explained that NTS continue to progress work in relation to identity management which will contribute to preparatory work required for DFD but other work will be paused until SG confirm requirements. The Committee noted this may have wider implications for short term staff currently working on DFD.
- 7.9 During the course of the discussion the Committee underscored the importance of being able to make progress on key priority areas while recognising the current financial uncertainties. The ongoing discussions with SG will provide the basis for securing confirmation of SG expectations on funding. The Chair expressed concern about the apparent lack of a cohesive delivery plan as a result of the funding approach and confirmed that he would be discussing this with Karen Reid on her return.

  Action: DG
- 7.10 The Committee asked about SG's plans for further roll-out of OpenEyes and SCI-Diabetes and Digital Prescribing programmes following their successful pilots. Christopher Wroath explained that the speed and control of the National roll out is out of NES's control as these are programmes led by SG. The Committee also noted that roll out will also depend on the local Boards' ability to engage with the project. Christopher added that it is hoped that the ANIA programme will help in terms of Board engagement.
- 7.11 The Committee noted the outstanding actions in relation to Internal Audits and asked if the Committee can be assured that actions will be complete by end June 2024. Christopher Wroath assured the Committee that work is progressing well to close outstanding actions and that it is expected actions will be complete by end March 2024.
- 7.12 The Committee noted that NES have been asked by SG to be the formal delivery partner for the Accelerated National Innovation Adoption programme (ANIA) and asked for more information regarding the requirements for NES. Christopher Wroath explained that NES have been invited as delivery partner due to NES' experience around cloud-based technology as well as NES' role regarding innovation.

- 7.13 The Committee noted that 3 posts, funded by ANIA, will be created in NES to support this work. Christopher Wroath added that he has fed back to SG that more funding would be required to achieve the full aspirations of the ANIA programme. It was agreed that a paper in relation to this area of work should be submitted to the next TIC meeting.
  Action: CW
- 7.14 The Chair thanked Christopher Wroath and his team for the report. He suggested that there was a need for more clarity about progress on individual projects and their related costs to enable the Committee to provide appropriate scrutiny.

# 8. Cyber Security

(NES/TI/24/05)

- 8.1 The Chair invited Christopher Wroath to introduce the paper and highlight any key areas.
- 8.2 Christopher Wroath informed the Committee that he is confident that NES continue to have the best parameters in place with the resources available, in relation to cyber resilience. Christopher informed the Committee that NES has worked with the NHS Scotland Cyber Centre of Excellence (CCoE) to implement the Microsoft Defender for Cloud products, providing increased threat detection and monitoring capabilities of NES's internal hosted Windows infrastructure.
- 8.3 The Committee noted that NTS continue to develop monitoring and alerting capabilities to further deliver a comprehensive preventative cyber resilience position and that this will require further and extensive collaboration with Scotland CCoE as the service expands and matures.
- 8.4 The Committee agreed that it would be beneficial to increase staff training, awareness, and culture of Cyber Security in NES and asked if the Executive Team could review the cyber security top tips module to determine whether it should be made essential learning for staff. Christopher Wroath informed the Committee that the data handling module is part of the essential learning suite and noted that he will speak to Workforce colleagues regarding the cyber security top tips being included.

  Action: CW
- 8.5 The Committee noted the update on work relating to Cyber Security in NES and confirmed the report provided satisfactory assurance.

# 9. Digital Skills and Leadership Programme

(NES/TI/24/06)

- 9.1 The Chair welcomed Paula Baird to the meeting and invited her to provide an update on progress of the Digital Skills and Leadership Programme.
- 9.2 Paula Baird informed the Committee that all areas of work are on track and on budget except for embedding Viva Engage into the M365 Skills Hub. The

- Committee noted that any changes to the NHS Scotland Microsoft Office 365 National Tenancy must be agreed by all 22 Health Board.
- 9.3 A query was raised regarding how skills will be utilised of the participants of the masters programme. Paula Baird informed the Committee that each of the 48 participants have Executive Lead Sponsors who will discuss related areas of work for future involvement. Paula added that a number of participants are already involved in Digital improvement projects.
- 9.4 The Committee were pleased with the numbers of learners to date and asked if there was continued interest in the programmes and if e-learning was also available to third sector. Paula Baird explained that interest for courses and material remains high and that anyone can set up an account on Turas Learn and that a variety of digital learning material is open access.
- 9.5 The Committee felt that the programme for non-executives has had a positive impact on those who have taken the course and asked if this would also be available to other public bodies. Paula Baird explained that it is already available for non-executives in social care, social work and the housing sector and that more communications will go out to promote this.
- 9.6 A question was asked regarding identifying opportunities and gaps in relation to learner requirements for the digital leadership work. Paula Baird explained that subject matter experts have been trained across Boards and that they can help to identify gaps, she added that anyone can identify requirements via the skills hub.
- 9.7 Discussion took place regarding the Digital mindset programme and the potential value of bringing this into Board Development sessions.
- 9.8 Paula Baird informed the Committee that the Digital Enabled Workforce team have been nominated for team of the year at the Digital Health and Care awards. The Committee congratulated Paula and her team for the nomination.
- 9.9 The Committee noted the progress of Digital Skills and Leadership Programme in NES, including the new governance structures relating to delivery of the Digital Health and Care Delivery Plan. The Committee confirmed the report provided satisfactory assurance.
- 9.10 The Chair thanked Paula Baird for the report and she left the meeting.

# 10. TIC Delegated Strategic Risk Report

(NES/TI/24/06)

- 10.1 The Chair welcomed Debbie Lewsley to the meeting and invited her to provide an update regarding the 5 strategic risks delegated by the Board to the TIC.
- 10.2 The Committee noted the five strategic risks considered relevant to TIC's remitted responsibilities, which have been subject to a recent review by individual risk owners.

- 10.3 Debbie Lewsley updated that the Executive Team have also recently reviewed the Strategic Risk Register and agreed to widen the scope of Strategic Risk 13 to cover recruitment within all Directorates not just specifically NES Technology. This resulted in the risk moving from the TIC Assurance Framework to the Staff Governance Assurance Framework. The Committee noted this and asked that risks in relation to recruitment continue to be reported to the TIC. Action: CW/DL
- 10.4 The Chair pointed out that that if executives wish to propose that another strategic risk is reported to another Committee, this should come to TIC for approval.

**Action: CW/DL** 

- 10.5 The Committee noted that one new risk has been added to the Strategic Risk Register which sits within TIC's Assurance Framework. This risk relates to NES not being an evidence-based data driven organisation (SR15), the current net score is 6, which sits outwith the Board's risk appetite for risks categorised as 'Governance'. Actions have been identified to help mitigate the risk.
- 10.6 The Chair requested that risks identified in the Executive Lead officers Report are reviewed against the Directorate and Strategic risk registers to ensure relevant risks are covered.
  Action: CW/DL
- 10.7 The Committee asked for more information on risks 6 and 7 regarding Business Continuity and Cyber Security. Christopher Wroath informed the Committee that a half day crisis response simulation session has been arranged for 06 March and results of this will be reported to the ET on 12 March as well as the next TIC. Christopher added that the ET will also be reviewing Strategic Risks on 12 March.
- 10.8 The Committee noted that there have been no changes to other risks aligned to TIC within this reporting period and agreed the report provided them with satisfactory assurance. The Committee noted the ongoing improvement plans for the Strategic Risk Register and reporting.
- 10.9 The Chair thanked Debbie Lewsley for the report, and she left the meeting.

# 11. TIC Delegated Strategic Key Performance Indicator (SKIPs) Report (NES/TI/24/07)

- 11.1 The Chair invited Christopher Wroath to introduce the report, which shows progress against Strategic Key Performance Indicators (SKIPs) delegated to TIC as of Quarter 3 2023-24.
- 11.2 There are five strategic KPIs delegated to the TIC. Data for two of these are scheduled to be presented for the first time at the end of 2023-24 Quarter 4. The remaining three are rated Green.
- 11.3 The Committee noted the report and confirmed that it provided them with satisfactory assurance.

- 12.1 The Chair invited Christopher Wroath to present the 2024-25 TIC Schedule of Business which has been aligned with the TIC ToRs, approved at the 30 October 2023 TIC.
- 12.2 The Committee noted that the draft NES Innovation Strategy has been scheduled as a new item for comment and approval for onward sequencing to November 2024 Board for final approval.
- 12.3 The Committee also noted the following items which have been added as standing items:
  - Strategic delegated Key Performance Indicator Report
  - Strategic delegated Risk Report
  - Turas Refresh Progress Report from the Director of NHS Scotland Academy, Learning and Innovation and Director of NTS
  - Turas Refresh Programme Board update as a verbal update from the Chair of the Programme Board (TIC Co-opted member)
  - Turas Refresh Programme Board Minutes (for noting)
  - Turas Refresh Programme Board ToRs (for noting annually)
- 12.4 The Committee approved the 2024-25 TIC Schedule of Business.

# 13. Identification of any new risks emerging from this meeting

13.1 It was noted that risks identified in the Executive Lead officers Report would be reviewed against the Directorate and Strategic Risk Registers to ensure relevant risks are covered and identify if any Directorate risks should be escalated to the Strategic Risk Register.

## 14. Any Other Business

14.1 There was no other business for discussion.

# 15. Review of Effectiveness of Meeting

15.1 The Committee were satisfied with the effectiveness of the meeting but suggested some further work on project progress reports and the preparation of specific papers where this was merited.

# 16. Date and time of next meeting

16.1 The next meeting of the Technology and Information Committee will be held on Monday 13 May 2024 via Microsoft Teams at 10:15.

NES February 2024 JA/DG/CW