

WORKFORCE PLAN 2018/19

Quality Education for a Healthier Scotland

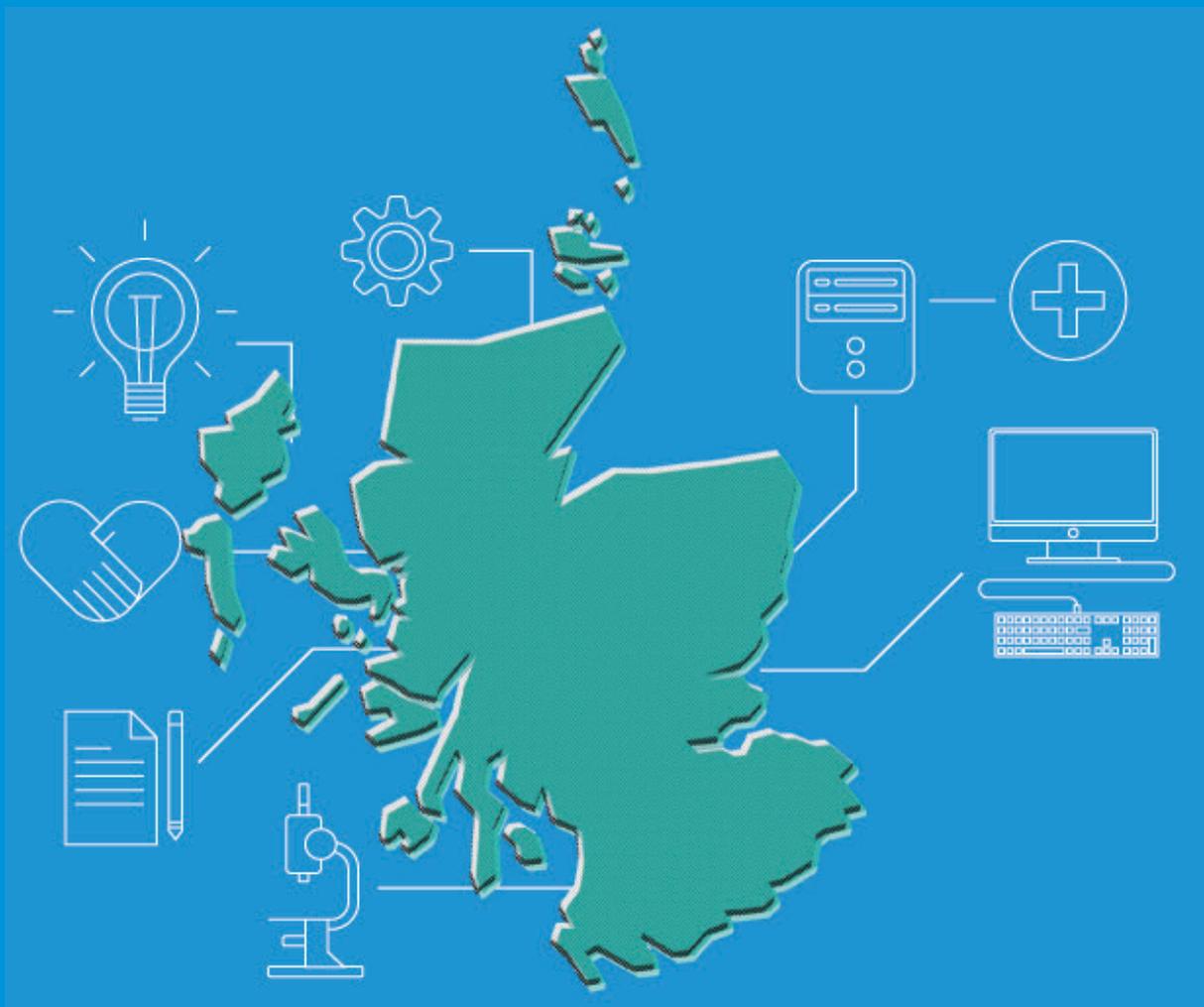


Table of Contents

1. Introduction	2
2. NES Initiatives, Priorities and Key Challenges for 2018-19	2
2.1. Healthy Organisational Culture	3
2.2. Sustainable Workforce	3
2.3. Capable Workforce	4
2.4. Workforce to Deliver Integrated Services	5
2.5. Effective Leadership and Management	5
3. Planning Context within NES	5
3.1. Approach to Workforce Planning in NES	6
4. Plan, Purpose & Strategic Workforce Planning Objectives	7
5. People and Organisational Development Strategy	9
6. Performance Management	10
7. Key Workforce Challenges	11
7.1. Healthy Organisational Culture	13
7.2. Sustainable Workforce	13
7.3. Capable Workforce	13
7.4. Workforce to Deliver Integrated Services	14
7.5. Effective Leadership and Management	14
8. Recruitment, Retention & Potential and Career Development	14
9. Affordability/Availability and Adaptability	15
10. Risk Management	15
11. APPENDIX 1: WORKFORCE SUPPLY	17
12. APPENDIX 2. EQUALITY AND DIVERSITY PROFILE	25

1. Introduction

NHS Education for Scotland (NES) is a national health board, working with stakeholders to provide education, training and workforce development for those who work in and with NHSScotland and, increasingly, in the wider health and social care arena.

Based in centres across Scotland and working closely with frontline educational support roles and networks, our more than a thousand staff have a national role in providing access to training and development at all career stages be it undergraduate, postgraduate or in-career professional development.

As in previous years, this Workforce Plan is aligned with our vision - 'Quality Education for a Healthier Scotland' and our mission 'to provide education that enables excellence in health and care for the people of Scotland'. It reflects and responds to the rapidly developing landscape in health and social care, including among other policies the Health and Social Care Delivery Plan and the National Health and Social Care Workforce Plan.

Our strategic framework for 2014-19, Quality Education for a Healthier Scotland, is aligned with the 2020 Route Map priorities and Quality Strategy. It shows how we contribute to health and social care integration through the provision of high quality education and training which enable NHSScotland staff to deliver the best possible care.

Its five strategic themes supported by nine key outcomes support the three quality ambitions of safe, effective and person-centred care and make a significant contribution to the Everyone Matters: 2020 Workforce Vision.

2. NES Initiatives, Priorities and Key Challenges for 2018-19

Our workforce plan is reviewed every year to ensure its alignment with updated local, regional and national plans and policies.

We will continue to improve our systems, processes and structures, sharing best practice and resources to deliver our services in a more streamlined way while

progressing our workforce, organisational development, digital and property strategies. This will involve maintaining efficient and effective business support while delivering organisational improvement programmes and releasing resources to invest in new areas.

Our priority initiatives for 2018-19 include the following. These are arranged under the priority areas of Everyone Matters, the workforce strategy for NHSScotland.

2.1. Healthy Organisational Culture

We will embed *iMatter* through the second year of organisation wide implementation during 2018, supporting teams to implement their action plans and embed our leadership behaviours, values and ways of working. We will continue to drive four core areas of organisational performance improvement where our services can be better integrated and delivered more efficiently.

We will continue to promote the health, wellbeing and resilience of our workforce. The establishment of *Our Way*, co-produced with our staff, promotes positive organisational culture and behaviour aligned to our organisational values. We will continue the development and provision of *I want to know more...* sessions on key issues such as dignity at work, organisational values and well-being. We will maintain our *Health Working Lives Gold Award* and promote positive mental health, healthy eating and physical activities while preparing our workforce for further organisational change.

2.2. Sustainable Workforce

The *National Health and Social Care Workforce Plan* highlighted opportunities to develop a more consistent national approach to education, training and workforce development to help develop a more sustainable 'pipeline' of skilled staff for health and care. Working with the Scottish Credit and Qualifications Framework Partnership (SCQFP), territorial boards and the higher and further education sectors, we will develop national commissioning and *Recognition of Prior Learning* (RPL). This will involve national guiding principles and an overarching process.

The *Health and Social Care Workforce Plan* is clear that better workforce data and planning is key to developing sustainable services. We are leading the development

of a cloud-based data platform bringing together existing workforce data sources which will enable scenario planning for future workforce demand and supply. We will also work to develop training in how to apply new workforce planning guidance.

To improve recruitment and retention, we will work with others to develop a stronger employer brand supported by social marketing, develop our use of social media, build a new *Careers Portal* and develop an employee engagement tool to support *iMatter*. This will enable interactive and collaborative employee engagement and seamless job application or register of interest in work opportunities.

We will work with the further and higher education sectors and Young Scot to connect with employers and provide a national work experience scheme informed by young people's experiences. This will be supported by national principles and guidelines to enable a consistent approach to recruitment, employment and development which supports more flexible movement across employers.

2.3. Capable Workforce

We will build digital capability and use technology to encourage participation in learning through our *TURAS Learn* system. We will continue to invest in learning and development and increase participation in personal development planning and essential learning. We will continue to improve employee engagement and drive forward our programmes of digital transformation and organisational performance improvement to develop a flexible workforce with the ability to work across traditional boundaries.

Digital technology offers real benefits in delivering more efficient and safe person-centred services. In line with the *Digital Health and Care Strategy* we will provide training and support to enable our workforce to be confident with digitally enabled services.

Under the Digital Health and care Strategy, Scottish Government has asked NES to host a new entity- 'NES Digital Services'- which is charged with the delivery of the Scottish Health and Care 'national digital platform' which will deliver relevant real-time data and information from health and care records.

The staffing establishment of NES Digital Services will grow very rapidly, with different roles and career paths commensurate with modern digital organisations. Identifying innovative solutions within the context of NHS Scotland frameworks is a key workforce priority in 2018/19 and in future years.

2.4. Workforce to Deliver Integrated Services

Through our established health and social care integration group we support cross sector and multi-professional working, sharing evidence-based practice in learning and development. We will also develop collaborative working principles and practice to support the *National Board Collaborative Discussion Document* and our ambition to work in different ways across traditional boundaries.

2.5. Effective Leadership and Management

We will continue to develop *TURAS Appraisal* to support executive and senior manager performance management arrangements. We will develop leadership and management capacity and capability through our *Managers Passport* and *Coaching Skills for Managers* programmes. We will also extend the use of Workforce Scotland developments such as *Leadership Exchanges* and the *Scottish Coaching Collaborative*.

3. Planning Context within NES

This plan aligns with Scottish Government's Health and Social Care Delivery Plan, the National Plan, our strategic framework for 2014-19 and our Annual Operational Plan 2018-19.

Our vision: **Quality Education for a Healthier Scotland**

Our mission: **Education that enables excellence in health and care for the people of Scotland**

Our strategic framework for 2014-19 Quality Education for a Healthier Scotland supports this ambition and is based around five strategic themes supported by nine outcomes. We report annually on these outcomes. As well as support for the Health and Social Care Delivery Plan and the Health and Social Care Workforce Plan, these themes and outcomes help to deliver key national policy drivers including the

National Clinical Strategy, Everyone Matters: the 2020 Workforce Vision, health and social care integration, reducing health inequalities and wider public sector reform.

Our five strategic themes are:

- Theme 1: An excellent workforce
- Theme 2: Improved quality
- Theme 3: New models of care
- Theme 4: Enhanced educational infrastructure
- Theme 5: An improved organisation

As the 'people' organisation of NHS Scotland, we have key expertise and capabilities to deliver a Once for Scotland approach and can achieve significant improvements in quality, consistency, efficiency; and most importantly in the employment experience of our workforce.

As a National NHS Board, we have focussed our planning on the contribution that we will make to driving the work of the Health and Social Care Delivery Plan, on our own or in collaboration with other National NHS Boards under the auspices of the National Board Discussion Document 2018-23. We are committed to working in collaboration with other National and Territorial NHS Boards, both locally, regionally and nationally and across the wider public sector.

3.1. Approach to Workforce Planning in NES

Workforce Planning is integrated with all strategic and annual operational and financial planning processes. Our Strategic Framework and annual plans are aligned with Scottish Government priorities and regulatory and key stakeholder requirements. Our People & Organisational Development Strategy, which informs our Workforce Plan, is aligned with our Strategic Framework and Everyone Matters.

NES recognises the rapidly changing context within which the health and social care system is operating across Scotland. We recognise that pressure on territorial boards, in particular in relation to workforce redesign and capacity to invest time and financial resources in education and training, requires NES to be flexible and wherever possible to add value through 'delivering once for Scotland' as agreed with our key stakeholders. Our engagement with Boards, Health and Social Care Partnerships, regulators and professional bodies are vital to the effective delivery of

our services. We continue to drive forward with developments to maximise the expertise across NES to deliver collaboratively across professional groups and across sectors.

In the course of 2017-2018, we have developed a real time, comprehensive people dashboard which is available and reviewed regularly by internal committees, including the Partnership Forum. This governance enables us to monitor performance against our Workforce Plan and to importantly, to inform decision making. The dashboard is being rolled out Quarter 1 2018/19 to support workforce planning and as an additional corporate performance measure.

Staff Governance and the experience that prospective and current staff have of NES continues to be very important to us and performance against Staff Governance Standards is reviewed regularly by the Staff Governance Committee and the Partnership Forum.

4. Plan, Purpose & Strategic Workforce Planning Objectives

The Workforce Plan is approved by the Executive Team, Partnership Forum and Staff Governance Committee and is used along with other plans to monitor and review progress against workforce objectives. Our strategic people objectives are aligned to the Strategic Framework and Corporate Plan.

As a national board we support our health and care workforce in delivering the highest quality healthcare and sustainable transformational change. Operating in an increasingly busy and shifting landscape, we need to be outward looking and versatile, with a strong and confident focus on innovation and impact.

Our role as lead employer for trainee doctors and dentists, our contribution to nationwide digital transformation, emerging collaborations across the national boards, and our promotion of leadership development in every profession and at every level require working in partnership with a large number of organisations, shaping shared priorities, with a clear emphasis on:

- the drive for improvement, transformation and evaluation
- digitally enabled service redesign and
- creating a sustainable workforce.

This Workforce Plan primarily supports the delivery of NES Strategic Theme 5 (NES Strategic Framework 2014-19) and associated activities as follows:

- An Improved Organisation
- Enhancing the capability of our staff to give their best and achieve their potential
- Supporting and Developing our Staff
- Performance Improvement
- Efficient and Effective Corporate Resources

Our strategic themes are delivered through key outcomes which in relation to the NES workforce is focussed on: - 'An Effective Organisation where all staff are enabled to give their best and our values are evident in every day work'. We need our workforce to have the skills and attributes to drive forward a broad and dynamic programme of service and transformation.

We will continue to embed the NES leadership behaviours and values and ways of working from recruitment and bringing these values and behaviours to life. Utilising the learning from our Values Based Recruitment pilot we will focus on adopting these in our Hiring Manager toolkit across all NES selection and recruitment processes, supporting managers to make positive decisions.

Continuing our commitment to leadership and management development we will, in addition to our credit rated Manager's Passport Modules 'Leading Successful Teams' and 'Successfully Developing Others', be providing our 4 -day Coaching Skills for Managers course as a credit rated programme from 2018. We will also extend our use of leadership exchanges and the Scottish Coaching and Mentoring Collaborative.

We will continue to build on the levels of confidence and competence of our staff using technology to encourage participation in learning. The launch of Turas Learn in tandem with Turas Appraisal will support staff in NES to make the connections between their PRP discussions and accessing required learning from within the Turas platform, whether this is booking a course, completing eLearning or maintaining their personal learning record.

Our approach to learning and development will be future orientated with the aim of ensuring that we have a workforce equipped with the knowledge and skills to support NES as continuously improving digitally enabled, creative and resourced organisation. We will establish NES priorities for future skills requirements, promoting and increasing the uptake of work-based learning and skills development using the range of apprenticeship frameworks as appropriate.

5. People and Organisational Development Strategy

The Workforce Plan is aligned with our People and Organisational Development Strategy. The implementation of the People and OD Strategy is planned and approved through the NES operational planning process with progress against plan objectives reported on quarterly through our planning system. The Executive Team, Partnership Forum and Staff Governance Committee approve supporting strategies that facilitate the implementation of the People & OD Strategy with supporting objectives also agreed.

Our 2014-2017 strategy has been refreshed to cover a two-year period from 2018 to 2020, with the option to review if there are significant changes to the organisational environment. We will enhance the accessibility of the strategy to support improved connection to individuals and what matters to them. This will incorporate co-production principles, allowing colleagues from across NES to contribute and shape the People & OD “message”, complementing expert input from the HR and OD teams.

The Strategy brings together a range of resources, plans and commitments that are key to improving our working lives and our performance:

- Our Workforce Plan
- Our Leadership Capabilities and ways of working
- Our Way
- Our Agile Workforce Guide
- Our Equality and Diversity Outcomes and Mainstreaming Priorities
- Our Workforce Directorate Plans and Targets.

Developing a workforce that is open to change and focused on improvement is central to the Health and Social Care Delivery Plan. We will support key strands of work under the Scottish Government's Project Lift aimed at transforming leadership development, talent management, performance appraisal and values-based recruitment.

We will also develop further applications on our TURAS platform to track skills, roles and competencies and assemble high-potential employees, resulting in a pool of talented people to be drawn upon. Over time the aim is to support with a single national system of organisational, leadership and workforce development to work with local systems on evaluation, improvement, transformational change and leadership.

6. Performance Management

Performance management happens both at a corporate and individual levels. In NES, there are links between both these elements of performance management via the Operational Planning process. In NES, performance management is about delivering organisational effectiveness through leading, managing and developing our people and their contributions.

NES continues with its commitment to optimise employee performance management to deliver NES's strategic aim of establishing systems which better connect individual performance with the organisational aims and outputs.

Our Personal Review & Planning Policy (PRP) requires that annual Quality Assurance (QA) checks are undertaken to determine the effectiveness of this activity in NES. Whilst NES has regularly achieved high completion rates for PRP, taking a more proactive approach to our annual QA process underpins our aim of ensuring staff have a meaningful appraisal and are supported to develop their skills, knowledge and competence. Individual objectives are more clearly aligned with organisational aims and personal development plans reflect the development needs arising from those objectives.

Data gathered and analysed over the five years from introduction of the QA process gives us a robust baseline against which to assess the impact that the

implementation of Turas Appraisal and Turas Learn will have. Turas Appraisal, which has been developed by NES Digital was made available to all NES staff from 2 April 2018 in time to support our usual Performance Review and Planning (PRP) window of April – June 2018. *Turas Appraisal* more easily supports meaningful conversations around performance and development than the previous e-KSF system. The launch of *Turas Learn* in tandem with *Turas Appraisal* will support staff in NES to make the connections between their PRP discussions and accessing required learning from within the *Turas* platform.

During 2018 we will continue to develop Turas Appraisal to support executive and senior manager performance management arrangements.

7. Key Workforce Challenges

Key workforce challenges faced by NES are to be viewed within the context of the publication in 2016 by Scottish Government of the Health and Social Care Delivery Plan and in 2017 of the National Health and Social Care Workforce Plan. Increasing collaboration between national Health Boards across Scotland will also have an impact on the way in which NES works and the demands on our workforce. We will therefore continue to develop our workforce to ensure that our workforce is sufficiently versatile to respond to the known challenges of the present and the unknown challenges of the future, ensuring that the workforce is appropriately skilled for working across boundaries and with partners outside the formal organisation.

In 2018-19, we will continue to take forward developments which enable the implementation of the policies mentioned above, of our Strategic Framework, workforce objectives and the priority action areas of the 2020 Workforce Vision (Healthy Organisational Culture, Sustainable Workforce, Capable Workforce, Workforce to deliver Integrated Services, and Effective Leadership and Management).

NES faces workforce challenges in the recruitment and retention of staff in key professional groups, the availability of staff with the right mix of contemporary clinical and education experience, the unwillingness of health boards to grant secondments and general concerns about potentially taking what is perceived to be a risk in moving organisation at an uncertain economic time.

Recruitment, retention and career progression opportunities for software developers, data scientists and a range of staff working within the digital environment is a real and present challenge which will need to be worked on in 2018/19. This is a workforce that is in short supply and we will be reviewing different approaches to addressing this in 2018. Our work here will impact on the wider digital, data and e-health community across NHSScotland and engagement with networks will be important.

Other areas where we have workforce supply challenges is in respect of the full range of finance roles. In Edinburgh we are competing with the financial services sector which provides regular and generally well remunerated opportunities. We will review potential changes in practice and approach in the course of 2018 and work to identify where we might be able to change the narrative of our offer, whether we need to invest more in growing our own talent and any other relevant actions we can take.

The resourcing model for postgraduate medical and dental education, relies on consultant staff taking up part time sessional roles which are essential to our education delivery. There is a noticeable trend, with consultants leaving service in the age 55-60 age bracket and ceasing active work all together. The pattern that we have enjoyed to date, is for the consultant cohort to generally retire at age 60 and continue part time engagement with ourselves. We will work with the Medical Directorate in 2018 to try and understand the reasons for this change and identify any mitigating actions we might be able to take.

The United Kingdom's withdrawal from the EU has the potential to have workforce implications, many of which at this stage are unclear. We are working closely with Scottish Government, Health Boards and other partners to manage this sensitively and in partnership. We have a good understand of the composition of our workforce and the number of non UK EU nationals we employ. We have a stable workforce and at this stage have not detected any material change in the proportion of non-UK EU nationals in our workforce. Under our delivery model, we rely on clinical secondments from the service and we are already detecting changes in individual's work and retirement patterns. This could be exacerbated by EU withdrawal. Another area of potential concern is the University sector predicting a significant impact on

the availability of clinical academic staff. Any impact on the education and skills sectors to attract and retain staff would impact on our ability to deliver. The impact at this stage is unknown.

Overall the workforce challenge remains delivering an improved organisation, ensuring that our staff have the capacity and capability to give their best and achieve their potential. Our People and OD Strategy is therefore designed to enable a capable, sustainable and flexible workforce that has the skills to adapt to a changing world. The following points are set out according to the five priorities in Everyone Matters.

7.1. Healthy Organisational Culture

We will embed iMatter through the second year of organisation wide implementation during 2018, supporting teams to implement their action plans and embed our leadership behaviours, values and ways of working. We will continue to drive four core areas of organisational performance improvement where our services can be better integrated and delivered more efficiently.

7.2. Sustainable Workforce

We will continue to promote the health, wellbeing and resilience of our workforce. The establishment of Our Way, co-produced with our staff, promotes positive organisational culture and behaviour aligned to our organisational values. We will continue the development and provision of I want to know more... sessions on key issues such as dignity at work, organisational values and well-being. We will maintain our Health Working Lives Gold Award and promote positive mental health, healthy eating and physical activities while preparing our workforce for further organisational change.

7.3. Capable Workforce

We will build digital capability and use technology to encourage participation in learning through our TURAS Learn system. We will continue to invest in learning and development and increase participation in personal development planning and essential learning. We will continue to improve employee engagement and drive forward our programmes of digital transformation and organisational performance

improvement to develop a flexible workforce with the ability to work across traditional boundaries.

7.4. Workforce to Deliver Integrated Services

Through our established health and social care integration group we will support cross sector and multi-professional working, sharing evidence-based practice in learning and development. We will also develop collaborative working principles and practice to support the National Board Collaborative Discussion Document and our ambition to work in different ways across traditional boundaries.

7.5. Effective Leadership and Management

We will continue to develop TURAS Appraisal to support executive and senior manager performance management arrangements. We will develop leadership and management capacity and capability through our Managers Passport and Coaching Skills for Managers programmes. We will also extend the use of Workforce Scotland developments such as Leadership Exchanges and the Scottish Coaching Collaborative.

8. Recruitment, Retention & Potential and Career Development

NES has a highly skilled and professionally qualified workforce and has been successful in attracting talented people to the organisation. In addition to monitoring turnover we also calculate a stability index which measures the retention rate of employees with over one years' service. In 2017/18 our stability index decreased slightly from the previous year, averaging 88.85% (92.43% in 2016/17). Recruitment and retention is not a significant issue for us, with this slight decrease to be expected in a changing work environment.

Our increasing commitment to working collaboratively and our contribution to digital transformation presents us with a workforce challenge of understanding our staff skills base and how to plan future development and succession planning to meet the future skills needs of the organisation. Underpinned by the refreshed People and OD Strategy we will take a strategic approach to recruiting and retaining a flexible and sustainable workforce that can transform and respond to organisational change with

resilience and challenge. A key element of this approach will be the development of a 'Youth Employability' strategy.

Additionally, using digital innovation, we have enhanced our attraction and recruitment approach to streamline the overall time to hire, and piloted Values and Competency Based Recruitment to ensure that we attract and select the highest calibre of individual.

We are working towards enhancing our presence within the employment market place to attract and recruit an exemplar workforce and improve our systems and workforce data to enable managers to self-serve.

Work will also continue to develop approaches that enable staff to progress their careers, including provision for succession planning and targeted talent management in support of this. We have completed the identification of key posts for succession planning, addressing the risks associated with key posts being vacant for extended periods. The method being adopted incorporates a risk rating approach to ensure objectivity and consistency with other aspects of NES's Business Continuity Planning. Targeted development plans will be agreed for those identified in succession plans. Future work during 2018 will focus on developing an inclusive and flexible approach to skills development and career pathways.

9. Affordability/Availability and Adaptability

NES has integrated workforce, operational and financial planning ensuring that our workforce is affordable. As in previous years, we are also satisfied that our workforce projections are based on realistic assumptions regarding future supply.

There are a number of workforce challenges set out in this plan. However, our programmes of organisational change and development will help us develop and support a more versatile workforce and allow us to meet these challenges.

10. Risk Management

Through our regular monitoring of all workforce, financial and operational plans, NES is able to assess and manage workforce risks. NES recognises that a more formal approach to succession planning is required for roles beyond the senior

management team and is implementing a risk-based approach to succession planning. Succession Planning has been added to the NES Business Continuity Plan as an associated plan, with Directorate Management Teams allocated responsibility for developing succession plans for each key post identified, and will therefore be reviewed at regular intervals. Integrated with our operational planning process is the identification and categorisation of risks associated with each objective. This enables us to monitor risks associated the implementation of the plan. There is good, real time reporting on the management of our staffing establishment and in respect of a number of key workforce planning objectives such as performance management. The NHSScotland Dignity at Work survey and emerging data under iMatter also provides information on areas of risk, improvements and progress which are built into our operational and staff governance action plans.

11. APPENDIX 1: WORKFORCE SUPPLY

1. WORKFORCE SUPPLY: CURRENT WORKFORCE

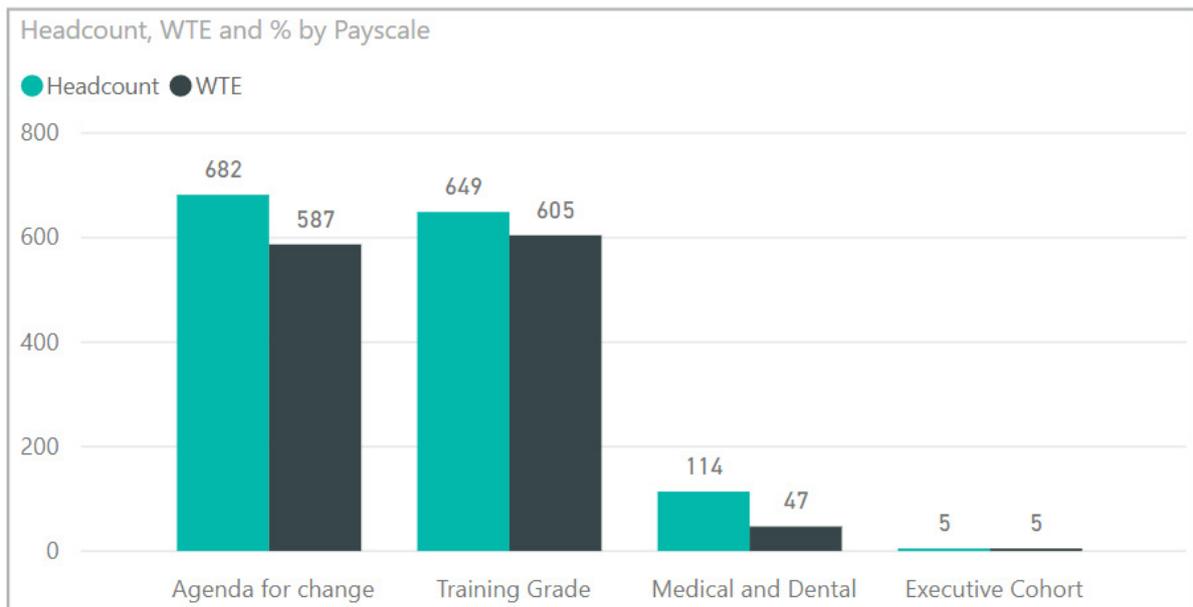
Our workforce reporting, identifies and monitors key workforce trends such as establishment and staff in post figures, staff Equality and Diversity (E&D) profile, recruitment metrics, sickness absence rates, turnover rates, employee relation activity and training metrics.

At 31st March 2018 NHS Education for Scotland (NES) directly employed 1426 staff, (the headcount [HC]), an increase of 11.7% on the previous year's figure. The whole-time equivalent (WTE) figure is 1227.06, an increase of approximately 12.5%. This is due to NES now employing more Training Grades (Trainees employed by NES, such as GP Specialty Training Registrars and Fellowships) as part of the Lead Employer model.

In this appendix, Training Grades and Education & Support staff (all other NES employees) are treated as a single group in some cases and as two distinct groups where that is appropriate.

Figure 1 below shows workforce composition across the defined national pay scales.

Figure 1



2. ESTABLISHMENT

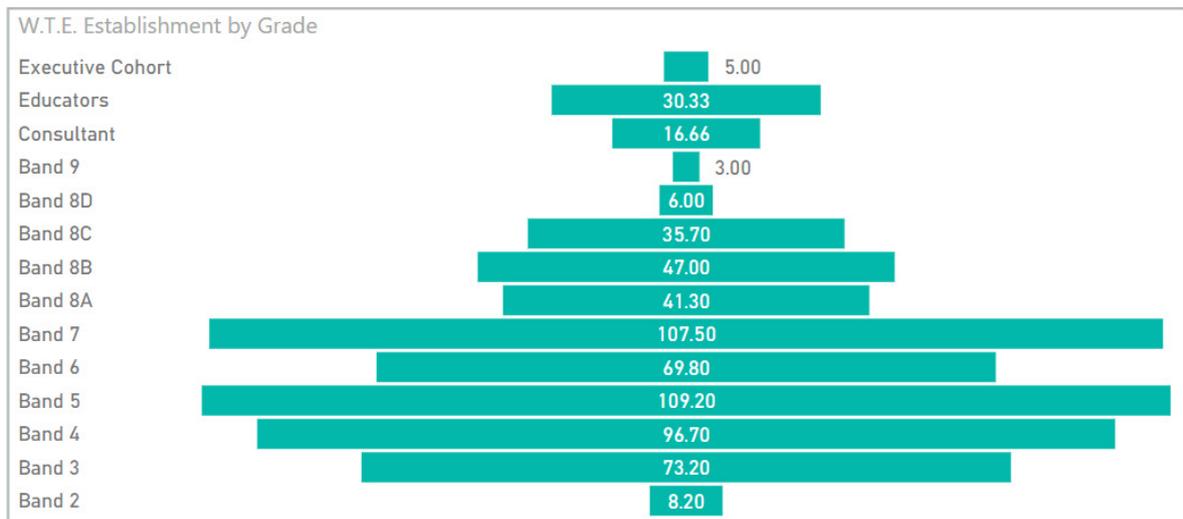
The NES Establishment is defined as the total number of posts with either permanent or fixed term funding which have been authorised by the Executive Team. All vacancies, contract extensions and any proposed changes to the staffing establishment are subject to a robust business case, reviewed in partnership and agreed by the Executive Team.

A breakdown of posts by pay grade is shown below for all Agenda for Change staff, Medical and Dental Grades and the Executive Cohort.

Figure 2 below shows the numbers of posts on each grade and provides a baseline for managers to use when planning for service redesign.

As the workforce planning for Medical trainees is done on a national level in partnership with Scottish Government, this figure does not include Training Grades.

Figure 2



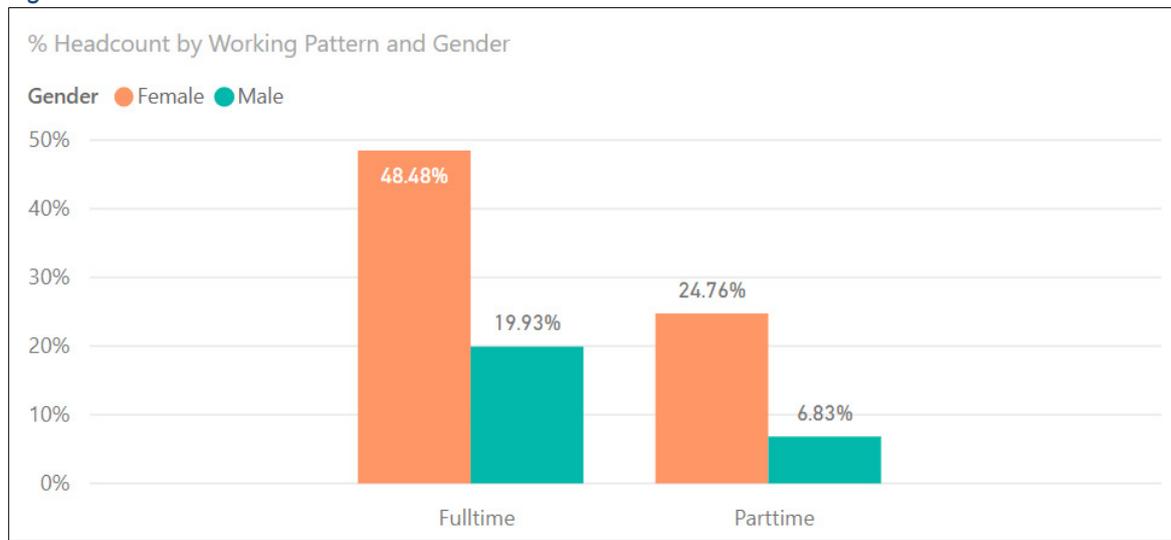
3. STAFF WORKING PATTERN & CONTRACT TYPE

Flexible Working

As at 31st March 2018 a total of 31% of staff in NES worked part-time (see Figure 3), including those working compressed hours or having a flexible working pattern. This compared with 25.8% in NHS Scotland.

There is a difference in staff working pattern between Training Grades and Education & Support staff (all other NES staff):

Figure 3



The application of fair access to flexible working practices is a principle embedded in NES Human Resources (HR) policies. The most common flexible working practices in NES continue to be part-time working, compressed hours, job sharing and home working. In addition to this all NES staff are entitled to flexitime working arrangements. NES is committed to taking a comprehensive, strategic but practical approach to realising the benefits of an agile workforce.

Contract type

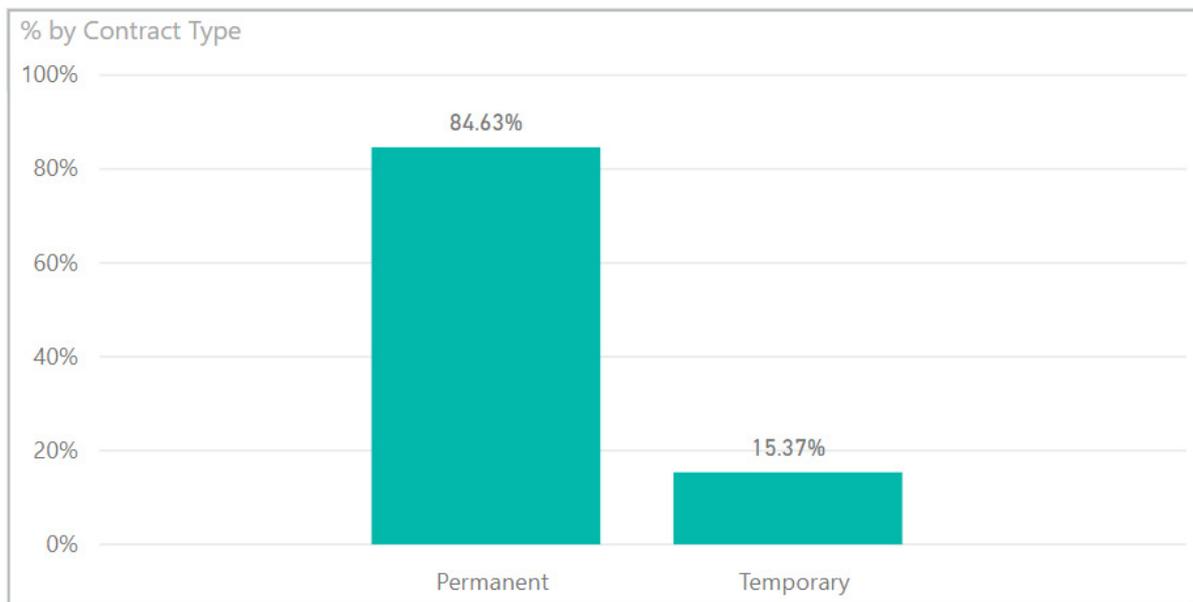
NES continues to use temporary workers to provide additional resources and to allow for flexibility on a short-term basis.. We also continue to receive time-limited funding in some areas which necessitates the use of fixed-term contracts. We have a practice in partnership of making fixed term appointments where appropriate in order to retain posts to be available for staff who become subject to redeployment as a

result of organisational change. We are reviewing the impact of the use of fixed term contracts as high staff turnover can be counter-productive in terms of efficiency

All Training Grades are on fixed term contracts as NES only employ these trainees while in their training programme.

As at 31st March 2018, 15% of Education and Support staff were on fixed term contracts (see Figure 4). This is the same proportion as in 2016-17.

Figure 4



4. STAFF LOCATION AND FUNCTION

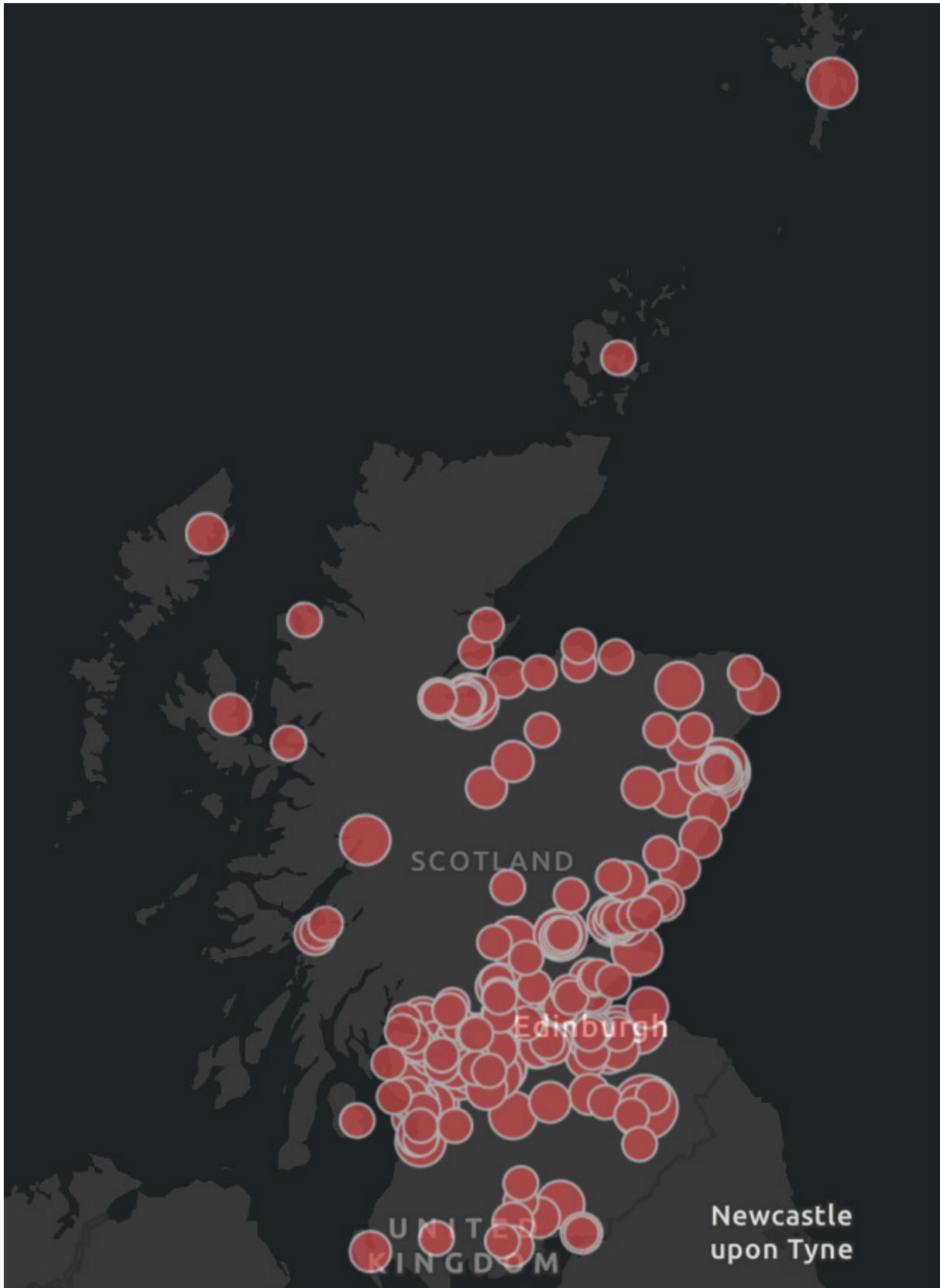
NES Central Offices are located in Edinburgh and Glasgow, with regional offices located throughout Scotland. The main regional centres are in Dundee, Inverness, Aberdeen and Edinburgh. Most staff who work in the regional locations work either in the Medical or Dental Directorates.

NES Central Offices, based in Edinburgh and Glasgow, host the Nursing, Midwifery and Allied Health Professions (NMAHP), Workforce, Psychology and Pharmacy functions, along with a range of corporate services.

In addition to NES offices, some staff are also based at universities, hospitals or other health board offices. Training Grades are based all over Scotland, with the majority based in the west of Scotland.

Location of Training Grades

Figure 5



Education and Support staff

Figure 6

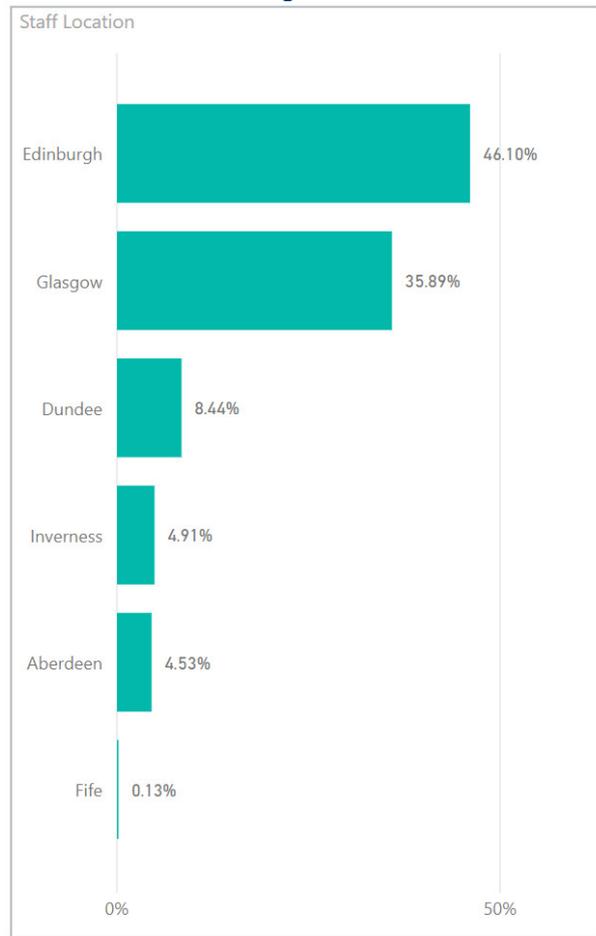
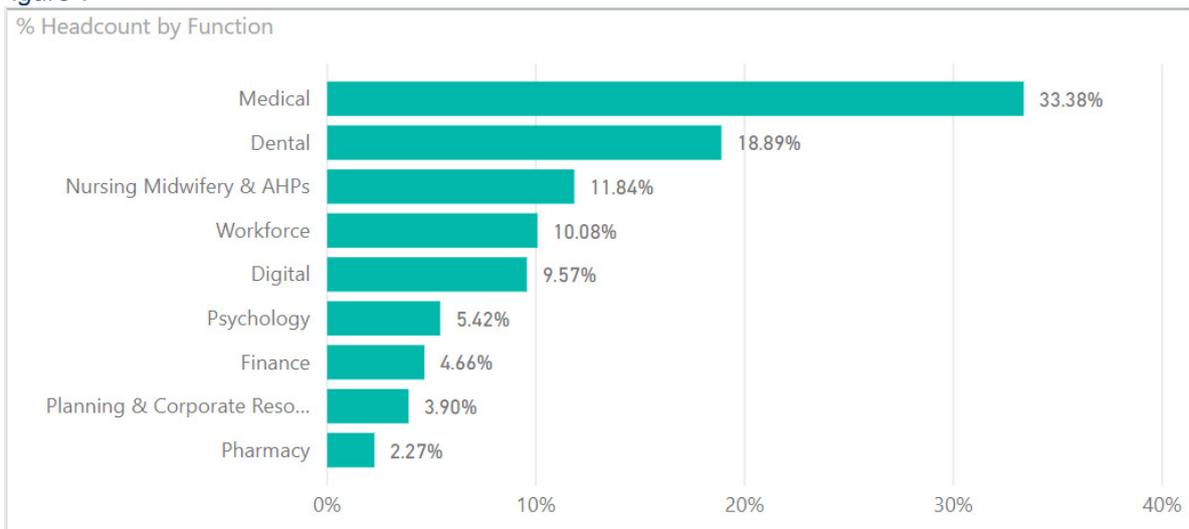


Figure 7



5. ABSENCE

HR continues to provide support and advice on absence management across the organisation, with absence being monitored and reported to managers. All absence cases are managed within the appropriate policies and absence management policies ensure that staff are supported and managers have effective arrangements in place. Reporting is available at Directorate, Department and team level for all leave types.

In 2017-18 the sickness absence rate for NES averaged 2.42%. This compares favourably with reported sickness absence figures across NHSS at 5.39%. In NES, the average number of days lost through sickness absence per employee per annum was 1.59 days as compared to 1.91 days in the previous year.

Figure 8

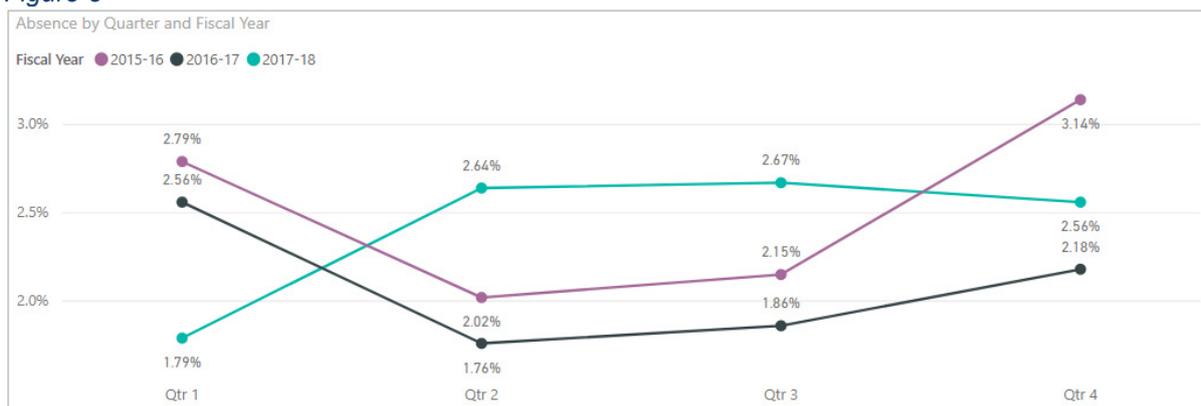
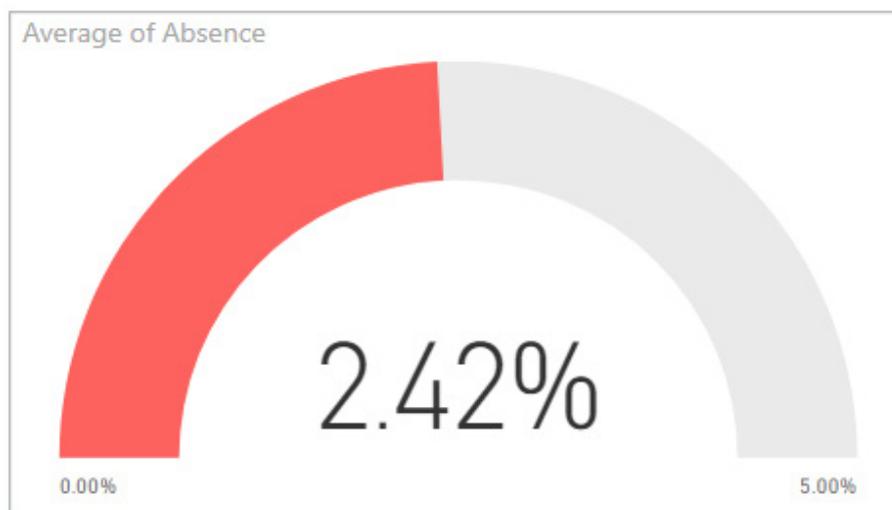


Figure 9 – 2017/18



6. TURNOVER

NHSScotland’s overall average turnover in 2016-17 was 6.6%. This compares to a figure of 3.59% for NES over the same period.

There is a commitment within NES to strict vacancy controls and redeployment. This enables us to deliver sustainable service redesign. We continue to work on developing a versatile workforce which will be able to respond speedily to future needs. The stability index indicates the retention rate of employees with over one-year service as at 31st March 2018 was 88.85%. These figures do not include Training Grades as training posts are rotational and on a fixed term basis.

Figure 10

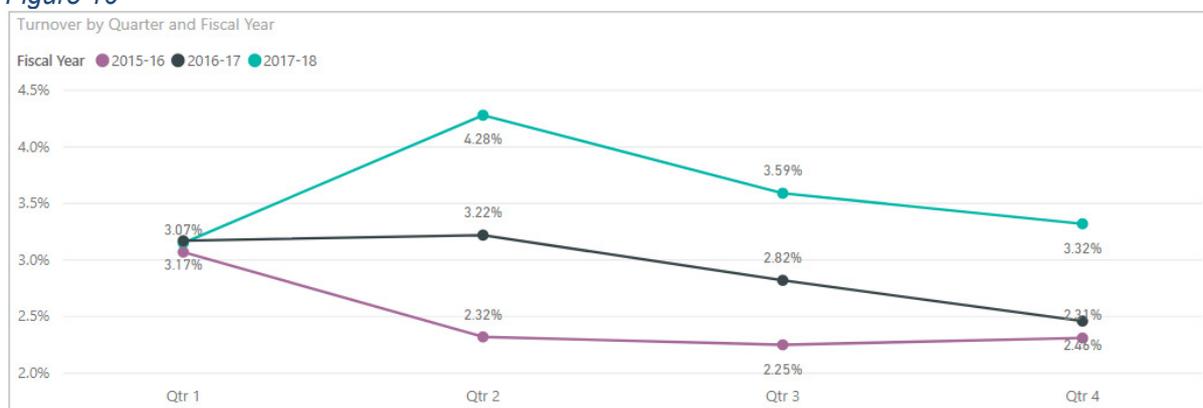
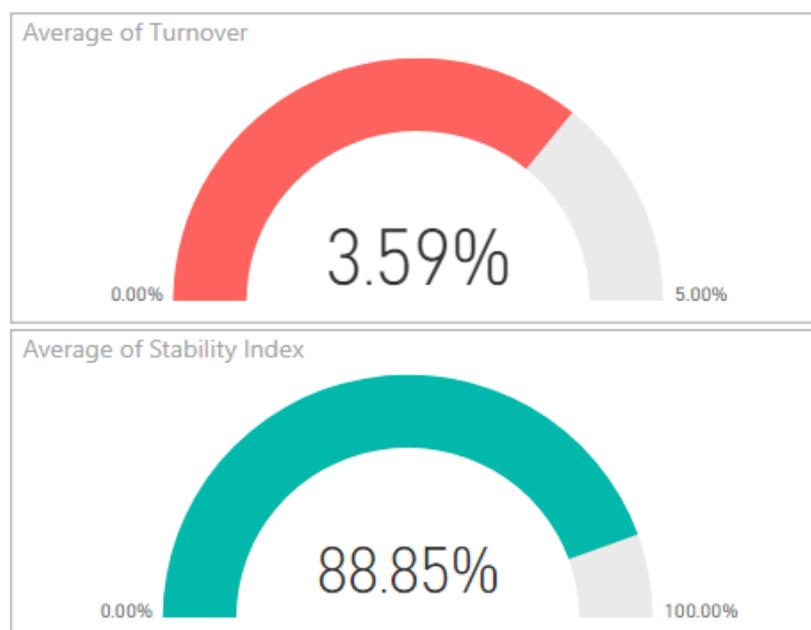


Figure 11



12. APPENDIX 2. EQUALITY AND DIVERSITY PROFILE

1. INTRODUCTION: EQUALITY AND DIVERSITY DATA

Equality monitoring information provides intelligence which enables us to understand how people experience their employment journey with NHS Education for Scotland (NES), based on their protected characteristics.

This report is a starting point for further investigation and a more sophisticated intelligence led approach to management, engagement and development based on the protected characteristics. The report satisfies our statutory obligation under the Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012 to publish information annually relating to the diversity profile of our workforce and an analysis of equality and diversity in staff retention, development and recruitment and selection. The data in this report relates only to employees who are directly employed by or on secondment to NES. It excludes those who work with us but are engaged on other arrangements.

Figure 12



We collect equality monitoring data on the protected characteristics set out in Figure 12, as defined in the Equality Act 2010, for all applicants to NES and our staff. Data on recruitment and selection to postgraduate and vocational training posts in medicine (including all Foundation and specialty training posts), dentistry, pharmacy and psychology is collected through national recruitment processes. That data is analysed and reported elsewhere.

We also collect data on the protected characteristic of gender reassignment, but numbers fall below the minimal reporting threshold to maintain confidentiality and is therefore not included in this report. Following recommendations of good practice, we do not report statistics where low numbers may compromise confidentiality². We will aggregate smaller categories into larger ones where it is meaningful to do so. In some cases, disaggregated reporting is not possible because small numbers overall do not support statistically valid analysis.

We collect a range of data relevant to the protected characteristic of pregnancy and maternity, including maternity leave, parental leave, special leave and flexible working arrangements. This data is used to inform equality impact assessment and policy reviews. Further analysis and reporting of this data is carried out to inform our quadrennial review of equality outcomes and biannual reports on delivery progress and the impact of equality mainstreaming. The data relevant to pregnancy and maternity are reported biannually in our equality mainstreaming reports, because they require a more longitudinal approach to analysis.

In 2015 we began recording information about carer status of our workforce, using a definition aligned to that of the Carer Positive kitemark. We achieved the Carer Positive (Engaged) award in November 2015. Nearly 25% of women in the 35-44, 45-54 and 55-64 age groups, and more than 10% of men in the 35-44 age group identified themselves as carers at that time. In 2016-17 we completed the transition of our workforce data to the national HR system e:ESS which does not have a dedicated data field for carer status. We identified a way to configure an open field in e:ESS to support this function and implemented this arrangement in 2017-18. This will enable us to continue to gather and use data on carer status for our staff.

2. THE NES WORKFORCE

The NES workforce can be grouped in two broad categories- Education and Support staff (E&S) and General Practice Specialty Registrars (GPStRs). E&S staff are made up of employees responsible for education, training and workforce development for those who work in and with NHSScotland and staff who provide support functions such as Finance, Procurement, Property and Facilities Management, Communication, Digital, Planning, Human Resources and Organisational Development.

GPStRs are employed as specialty trainees in practice settings. There are 18 GP training programmes ranging between three and four years across Scotland both in hospital and general practice settings. NES employs GPStRs whilst they are in the General Practice component of the training programme and from August 2017 NES also employed GP trainees based in NHS Grampian as part of the early adopter model for lead employer of Doctors and Dentists in Training. (DDiT). All references to GPStRs in this report refer to the GP specialty trainees who are employed by NES unless specifically noted otherwise. Given the very different contexts of the two staff groups, they are analysed separately in this report unless otherwise noted.

The data in this report is as at 31st March 2018 and covers the period 1st April 2017 – 31st March 2018 unless specifically noted otherwise. As such, they describe the workforce at a particular point in time and offer a summary overview of key metrics relating to workforce composition, recruitment, development and retention.

We have invested in the development of high quality workforce data and use our data in a dynamic, intelligence-driven way to inform policy development and review on a continuous basis. We have begun to use people-data in analytical processes to solve workforce-related issues. Workforce analytics uses people-data, collected by a variety of systems to look for correlations between multiple data sets. At its core, Workforce analytics enables HR practitioners and managers in NES to gain insights into the workforce with a view to enhance policies and practices and a focus on the human capital element of the workforce, which can ultimately inform more evidence-based decision making. We use equalities intelligence as part of this process on an

ongoing basis, and our access to modern data visualisation tools supports our Board, Managers and HR Business Partners to make sense of this intelligence and to use it for improvement.

3. WORKFORCE COMPOSITION: STAFF IN POST

This section on workforce composition describes staff in post as at 31st March 2018 by protected characteristics.

3.1. Gender

The majority of staff employed by NES are female. Figure 13 shows the percentage of E&S staff employed at different grades by gender. Women are the majority at each staff grade (including senior management grades) with the exception of the Consultant and Educator cohorts. Approximately one third of the staff employed on Medical and Dental consultant grades are female, which is slightly lower compared to the demographic profile of the wider NHS workforce, which reports 39% female staff at Consultant grade¹.

Figure 13 Distribution of Staff by Gender and Grade

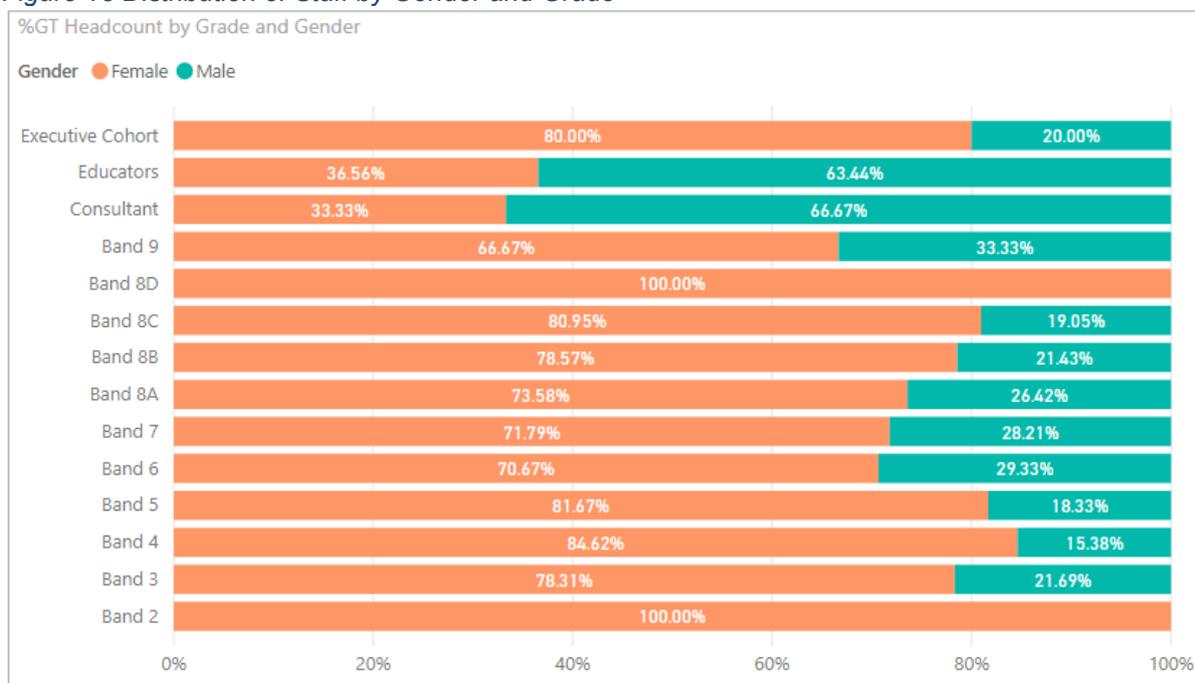
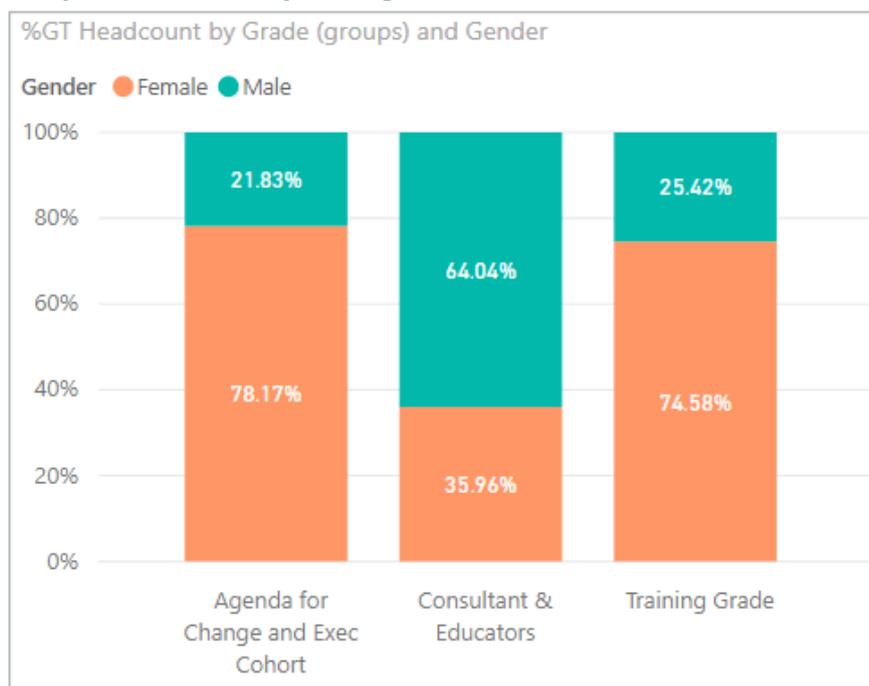


Figure 14 illustrates this gender difference between the Medical/Dental and Agenda for Change/Executive Staff grouping.

¹ <http://www.isdscotland.org/Health-Topics/Workforce/Publications/2018-06-05/Medical-and-Dental.asp>

Figure 14 Summary of Gender for Major Categories of Staff



The gender balance of the medical workforce is changing, particularly in the specialty of General Practice; Figure 14 illustrates that approximately 75% of the GPStRs employed by NES are women. Although the intergenerational change in gender balance is particularly notable in General Practice, it is a more widespread trend in Medicine; 59% of all doctors in postgraduate training in Scotland (across all specialties and Foundation training) are female².

A substantial proportion of the GPStRs employed by NES are in less than full time training: just under a quarter (23.83%) of female trainees and 6.17% of male trainees are currently training less than full time.

3.2. Ethnic Origin

Approximately 90% of E&S staff are of white ethnic origin. Of these, the majority are white Scottish or other British. This is a slight reduction in our ethnic diversity from last year. Figures 15-16 summarise the ethnic origin for the E&S staff cohort.

² Trainees in Scotland as at General Medical Council National Training Survey 2017 census date = 21 March 2017.

Figure 15 Ethnic Origin for E&S Staff

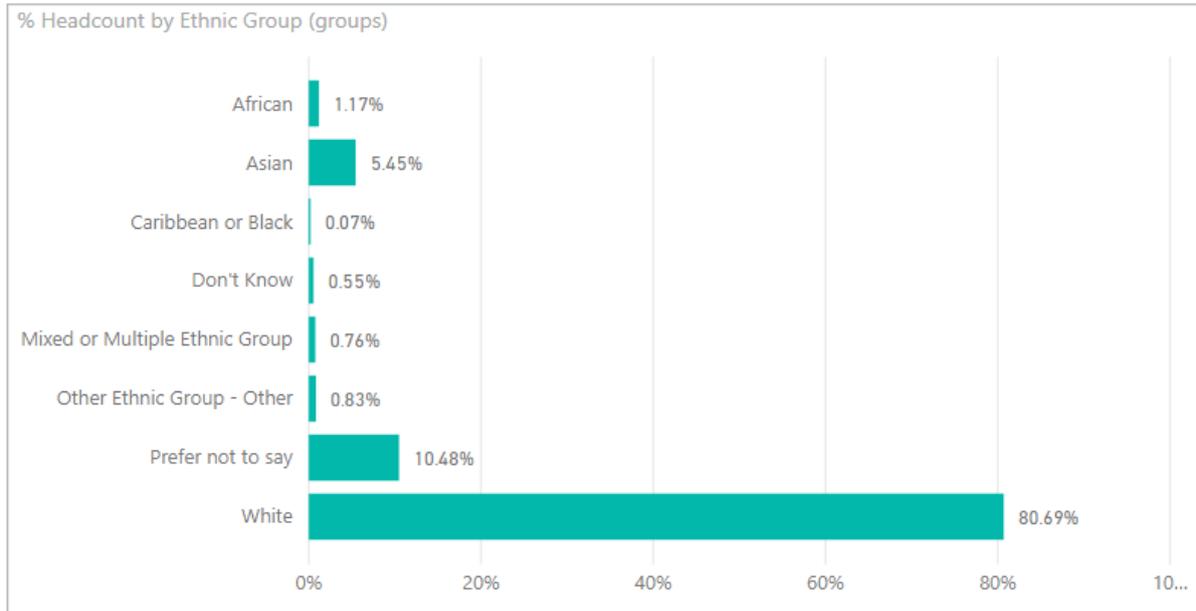
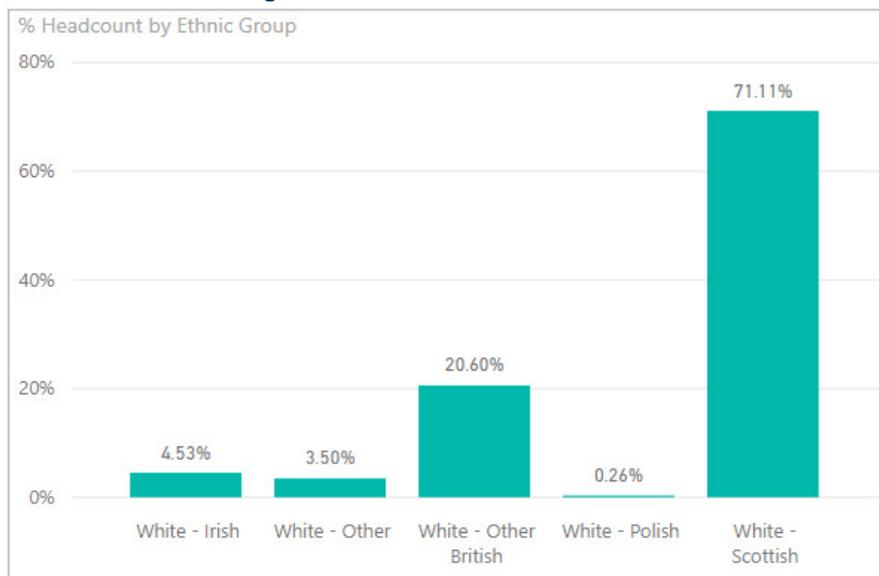
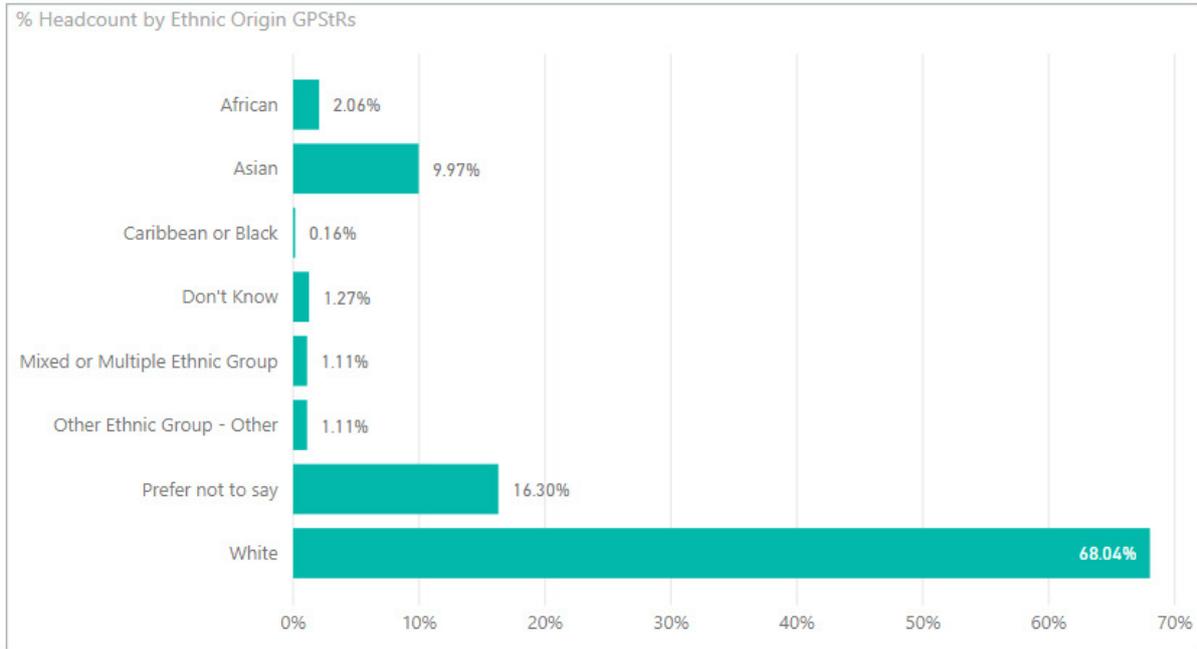


Figure 16 Detail of White Ethnic Origin for E&S Staff



The population of GPStRs continues to be considerably more diverse than the E&S staff, reflecting the global and UK-wide recruitment of this cohort, as illustrated in Figure 17.

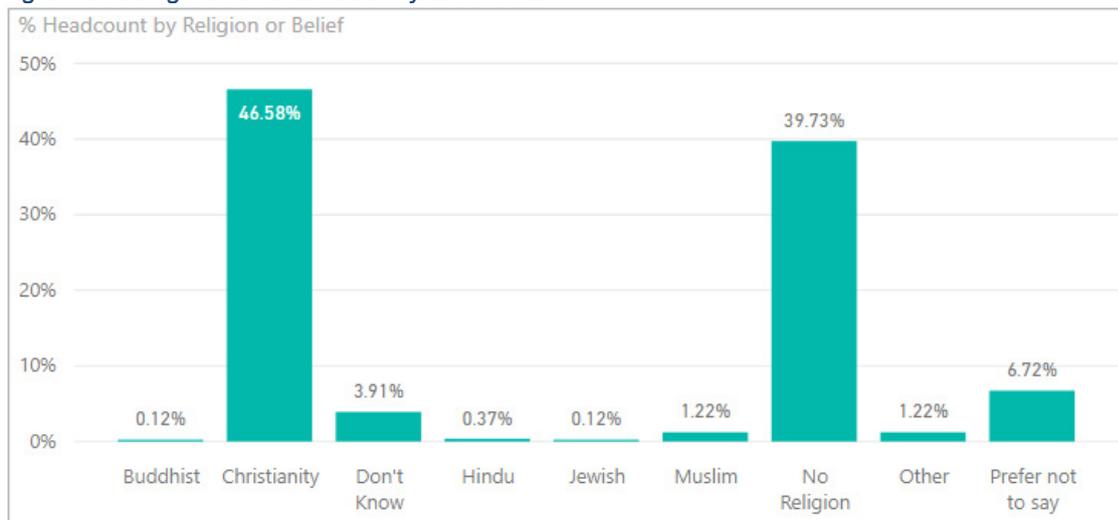
Figure 17 Ethnic Origin for GPStRs



3.3. Religion or Belief

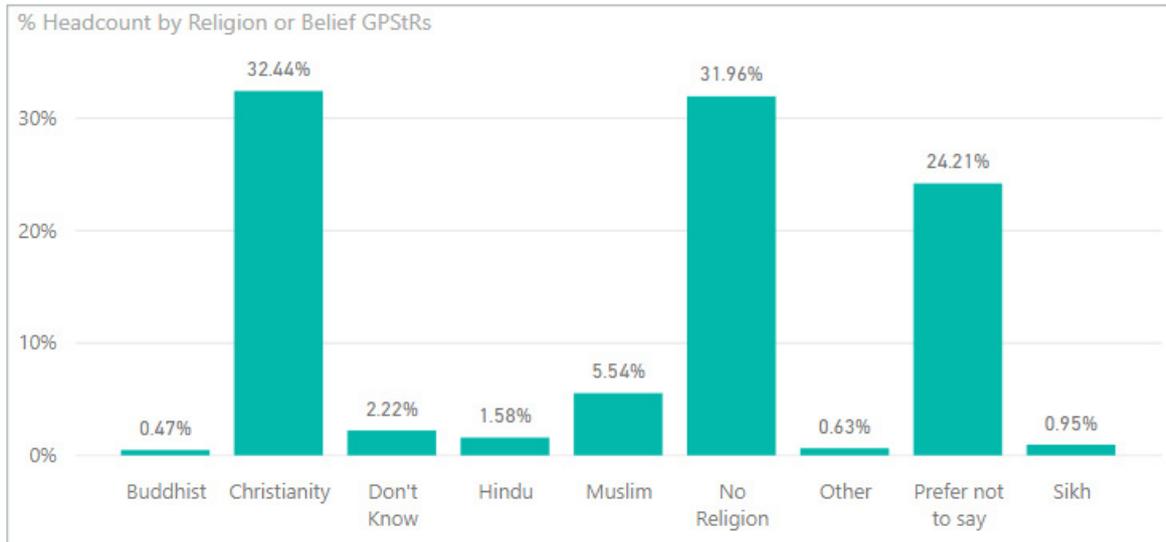
Nearly 40% of NES E&S staff identify themselves as having no religion. People of white Scottish, white Other British or Chinese Ethnic origin are most likely to describe themselves in this way. Individuals who prefer not to identify their religion often prefer not to identify their ethnic origin or other personal characteristics as well. The majority of those who identify as having a religion identify as Christian; the remainder reflect a range of religious identifications as noted in Figure 18.

Figure 18 Religious identification by E&S Staff



The higher percentage of trainees reporting diverse religious identification, summarised in Figure 19, reflects the greater ethnic and national diversity of this group. As with E& S staff, 'no religion' is most common among white Scottish and white Other British populations, and those who prefer not to provide information about religion are also likely to not provide information about ethnic origin and other personal characteristics.

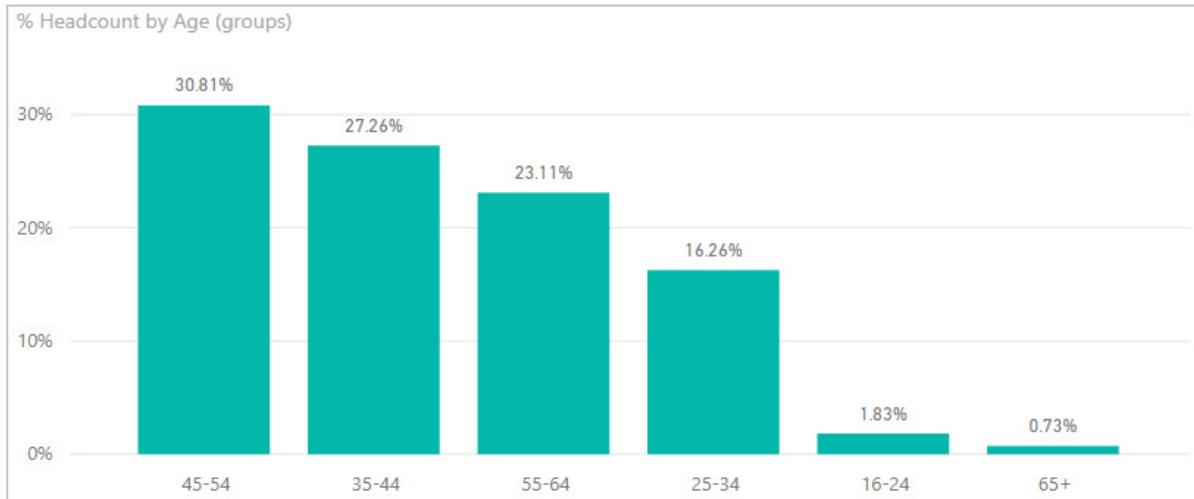
Figure 19 Religious identification by GPStRs



3.4. Age

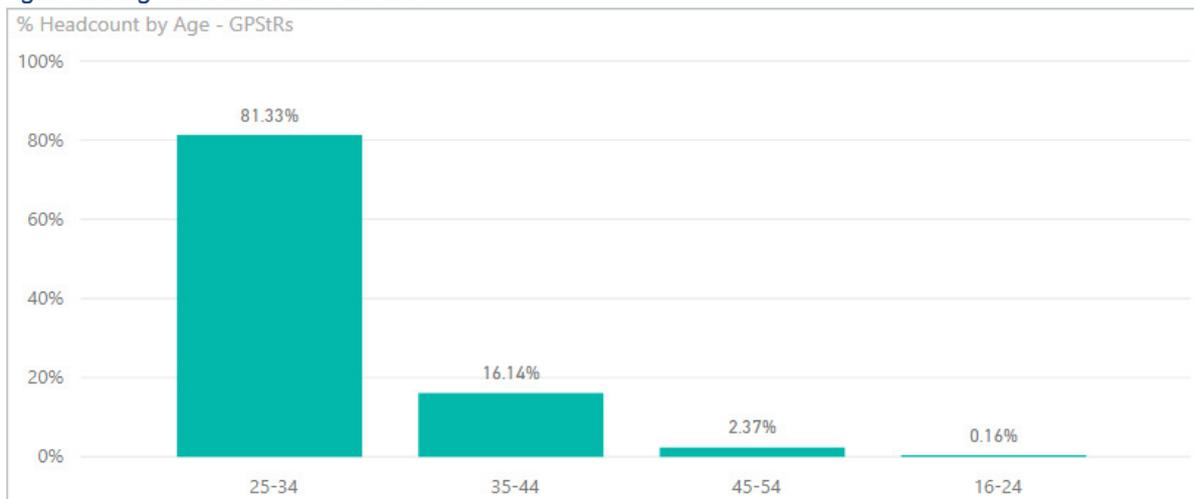
Our age profile is consistent with data from previous years. As indicated in Figure 20, our most numerous age band is 45-54. The NES workforce includes a high number of specialist posts, which is one factor skewing the organisational age profile towards more experienced staff. We have used this data to inform our Healthy Working Lives Strategy.

Figure 20 Age Distribution – E&S Staff



The GPStRs, as expected for medical specialty training grade posts, are primarily aged 25-34.

Figure 21 Age Distribution - GPStRs



3.5. Disability

Approximately 3% of E&S staff identify themselves as disabled, with 91% identifying themselves as not disabled and the remaining staff choosing not to respond. Those who do identify themselves as disabled are somewhat over-represented in the 45-54 age cohort. Men are also slightly over-represented.

2.85% of GPStRs identified themselves as disabled; 92.09% as not disabled with the rest either preferring not to say or not providing information. Among GPStRs

identifying themselves as disabled, women are over-represented, as are trainees in the 35-44 age cohort.

These figures are consistent with our data from previous years.

3.6. Sexual Orientation

Among E&S staff, a lower percentage of staff identify themselves as lesbian, gay or bisexual relative to the general population estimate (2.81%, compared to Stonewall's population estimate of 6%). This is broadly consistent with data from previous years.

Just over 3% of GPStRs identify as LGB; men are more likely to identify as gay or bisexual than women.

4. STAFF RETENTION

We analyse patterns of employee relations casework, disaggregated by protected characteristic, and the profile of staff who leave the organisation during the year. We also carry out thematic analysis of exit interviews.

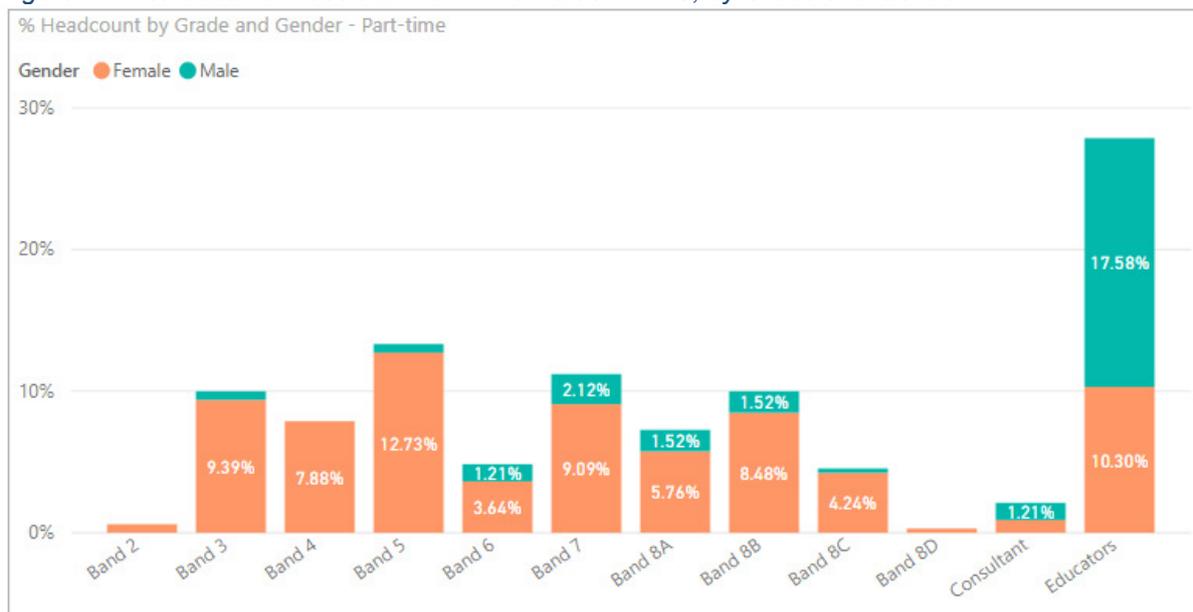
Casework is classified as formal management of a range of employee relations activities, including attendance management, disciplinary, grievance and capability. We collect and analyse data on a range of activity.

Our overall rate of reported employee relations activity is very low. Only 3.7% of staff were involved in any employee relations activity during the year; 87% of these instances involved attendance management. NES received three new formal flexible working requests during the year and all were approved. However, as noted in appendix 1 (section 3) all NES staff are entitled to flexitime working arrangements. We are committed to taking a comprehensive, strategic but practical approach to realising the benefits of an agile workforce, and in practice many staff work are able to work flexibly using informal, agile arrangements.

Within our E&S staff cohort, we have a number of roles being delivered on a less than full time basis across the organisation. Figure 22 illustrates the distribution of staff working part time by gender and grade. Virtually all Consultant/Educator roles are part time; these staff normally have a main clinical appointment within another

organisation. Within the Agenda for Change grades, women are far more likely to work part time than men. There are several notable peaks in the less than full time workforce – at bands 3, 5 and 8B. Band 8B staff are typically working in senior educational lead roles and many of them are likely to also have clinical appointments in other organisations. The most senior level of management (Agenda for Change Band 9 and Executive Cohort) are all full-time appointments, although there are a number of senior roles (up to and including band 8 (c) that are delivered on a part-time basis.

Figure 22 Distribution of Less than Full Time Roles in NES, by Grade and Gender

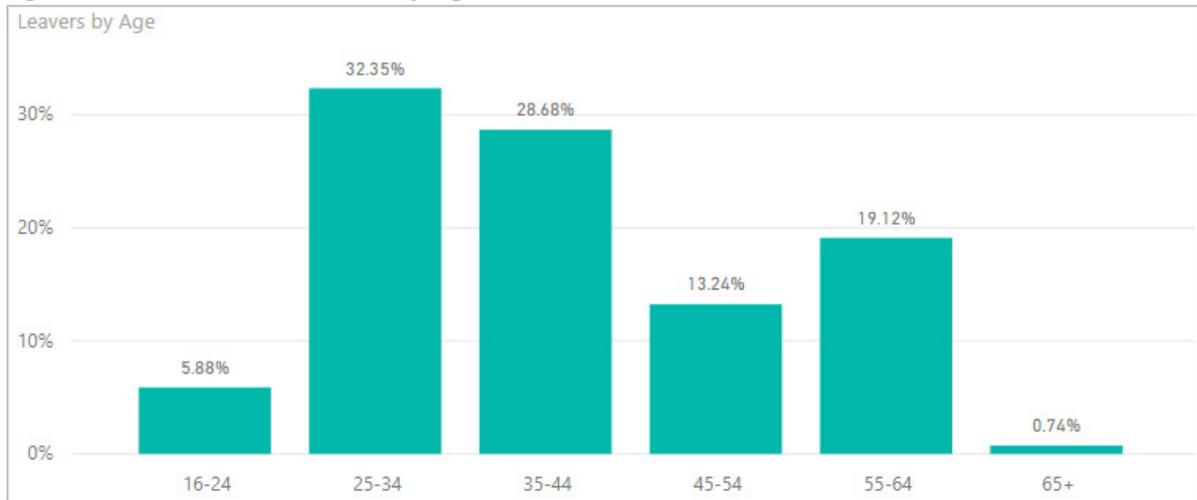


5. TURNOVER

GPStRs work for NES on a rotational basis only for a fixed term during a portion of their postgraduate specialty training. The following analysis of turnover therefore refers to our E&S staff.

NES has a very low overall turnover rate. Data on leavers indicates that the profile of leavers matches the profile of the organisation in relation to all protected characteristics other than age. Staff in the two youngest age bands are disproportionately likely to leave NES. The distribution of leavers by age is provided in Figure 23.

Figure 23 Distribution of Leavers by Age



Our data enables us to analyse the reasons for leaving provided in exit interviews by age. In their exit interviews, staff in the two youngest age bands are more likely to indicate either that they are moving to other NHS employment within Scotland or to cite lack of opportunity as a reason for leaving NES. Those who are 35-44 are more likely to cite 'other reasons' for leaving, with around 20% going to other NHSScotland posts and a further 8% to posts outwith NHSScotland. At 45-54, reasons for leaving are divided between other posts, promotions, early retirement and other reasons, while at higher ages staff are increasingly (although not exclusively) leaving to retire.

6. STAFF DEVELOPMENT

Education for GPStRs is governed through their specialty training programme and follows the curriculum set by the Royal Colleges. The remainder of this section focuses on development for E&S staff.

We analyse access to development for E&S staff by reviewing data on promotions, secondment or internal attachment, 'acting up' or temporary promotion and data on training. Although our systems enable us to disaggregate all of the data by protected characteristics, some datasets (promotions, secondment/internal attachment, acting up) are quite small and permit only limited analysis.

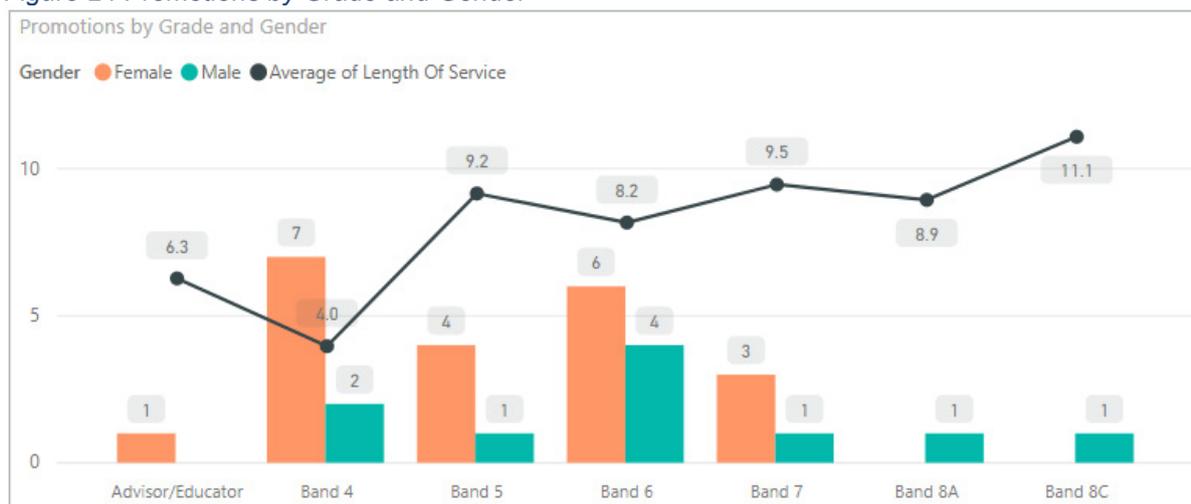
6.1. Promotions

A promotion within NES is defined as a staff member moving to a higher grade/band. During the reporting period we recorded 31 promotions.

The average length of service for staff receiving promotions was 7.33 years.

Figure 24 shows the distribution of promotions by grade (of the promoted post) and gender, with a line showing average length of service.

Figure 24 Promotions by Grade and Gender



Further analysis of the relation between age, grade and length of service in relation to promotion highlighted the following patterns:

- Younger staff who received promotion progressed to promoted posted more quickly.
- Staff progressing to band 4 progressed more quickly.
- Men progressed more quickly than women overall (10 men with average 5.97 years' service vs. 21 women with average 7.98 years' service)
- The age group 35-44 at band 5 appears to be a particularly slow progression point.

This is the first year we have been able to run the data analysis in this way. The analysis of this small dataset opens avenues for further inquiry and we will continue to build on this analysis to inform our approach to staff development and succession planning.

6.2. Staff Training

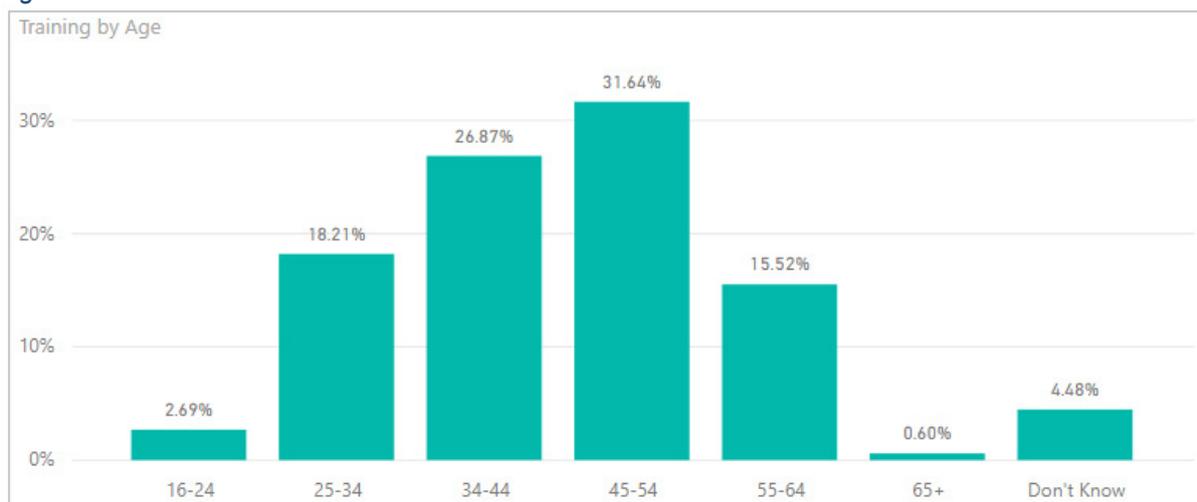
We offered a range of in-house development courses for staff during the year. Areas of focus included digital skills to support staff to use new and existing systems, coaching skills for managers, and a number of courses to support line manager development, including Mentally Healthy Workplace.

Approximately 34% of staff attended at least one training session during the year. We analysed the profile of attendees, benchmarking it against our organisational diversity profile and found that the profile of attendees is representative of the organisational profile.

We also delivered a series of essential learning modules, including equality and diversity. By 31st March 2018, 80% of E&S staff and 77% of GPStRs had completed their essential learning E&D modules.

In last year’s report we noted that older staff seemed to be less likely to undertake training. Figure 25, which provides the percentage of staff who participated in at least one training course, distributed by age band, indicates that in this year we had good participation from all age groups, including those in the older age bands. The focus on manager development, as well as the flexible options for digital skills development have both had positive uptake and both are likely to be factors in this increasing engagement.

Figure 25, Percentage of Staff Participating in Training (Excluding Essential Learning), Distributed by Age



7. RECRUITMENT AND SELECTION

The outcomes for recruitment and selection of E&S staff are analysed in this section. GPStRs are recruited by NES for NHSScotland through a through a national recruitment process. The standards and criteria for this process are set at UK level. Analysis of the outcomes of GP speciality recruitment are outwith the scope of this report.

Table 1 summarises the overall number of applications, number of individuals shortlisted, interviewed and appointed to our E&S staff during the period 2010-2018.

Table 1 Recruitment: E&S Staff, 2010/11 – 2017/18

Recruitment Activity: Summary, 2010/11– 2017/18 (E&S)				
YEAR	Number of Applications	Shortlisted	Interviewed	Appointed
2010-11	2257	423	296	107
2011-12	1907	371	294	108
2012-13	2829	624	395	145
2013-14	2288	626	557	94
2014-15	1771	627	470	126
2015-16	2160	740	600	192
2016-17	2361	674	567	155
2017-18	1496	1104	411	125

Attraction

Although the total number of applications received last year fell, a higher percentage of applicants were shortlisted in the initial review of applications. In 2017-18 we revised our approach to advertising posts, adopting a model which offered clearer and more precise information about the post and the skills and knowledge required in the person specification. This may have resulted in more targeted applications for posts, with a greater number of applicants able to identify and target the posts for which they were well qualified. This is a process that we will keep under review.

In order to enhance the capacity and capability of our staff to give their best and achieve their potential, and to promote greater flexibility within the NES workforce, our vacancies are advertised internally only in the first instance (i.e. to existing NES

staff and agency workers). If an appointment is not made following an internal process, the vacancies are then advertised externally. There are some extenuating circumstances where external recruitment is carried out without an internal process; these situations must be approved by the NES Executive Team.

The recruitment data included in this analysis incorporates data from both internal and external recruitment.

Our data for the 2017-18 year indicated a reduction in attracting applicants from black and minority ethnic communities. Applicants indicating BME, mixed or other ethnic origins totalled only about 9% of all applicants overall.

Similarly, only about 9% of applicants to E&S posts identified themselves as disabled. More notable is the rise in applicants choosing not to disclose whether or not they were disabled (25.96%; compared to 7.5% in 2016-17).

Outcomes of recruitment

NES collects data on the protected characteristics of applicants to posts, and is able to analyse the breakdown of applicants at the point of application, shortlisting, interview and appointment. Summaries of this data are presented in the following tables. We carried out statistical testing using a linear probability model to determine whether any of the differences were statistically significant. We analysed differences in the probability of being shortlisted, on the probability of being appointed (conditional on having been shortlisted) and on the probability of being appointed (conditional on having been interviewed). No statistically significant differences were found for the characteristics of gender, disability, ethnic origin, religion or sexual orientation. The only significant effect was found for age. This is discussed further below.

Figure 26: Recruitment, Progression by Gender

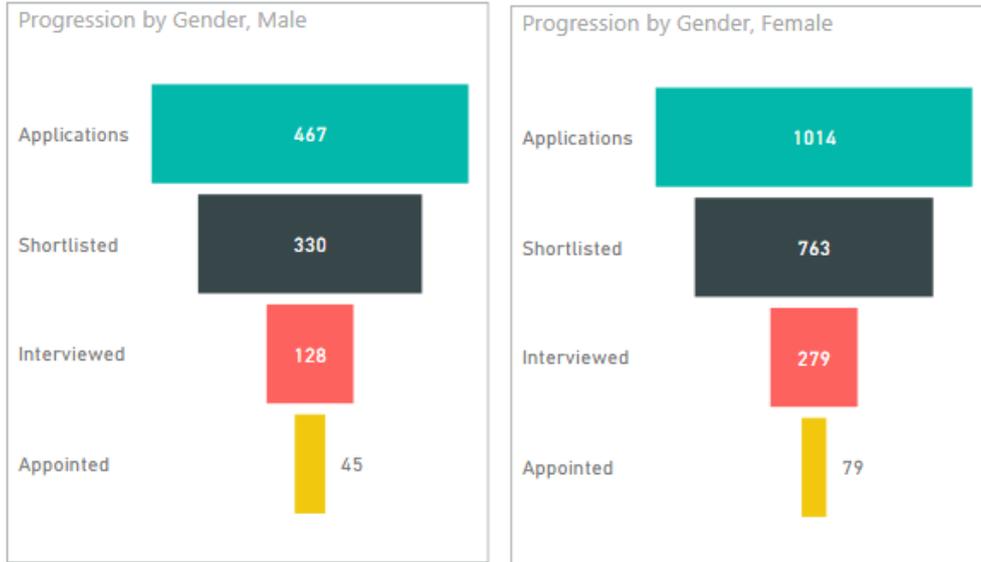


Figure 27: Recruitment: Progression by Disability Status

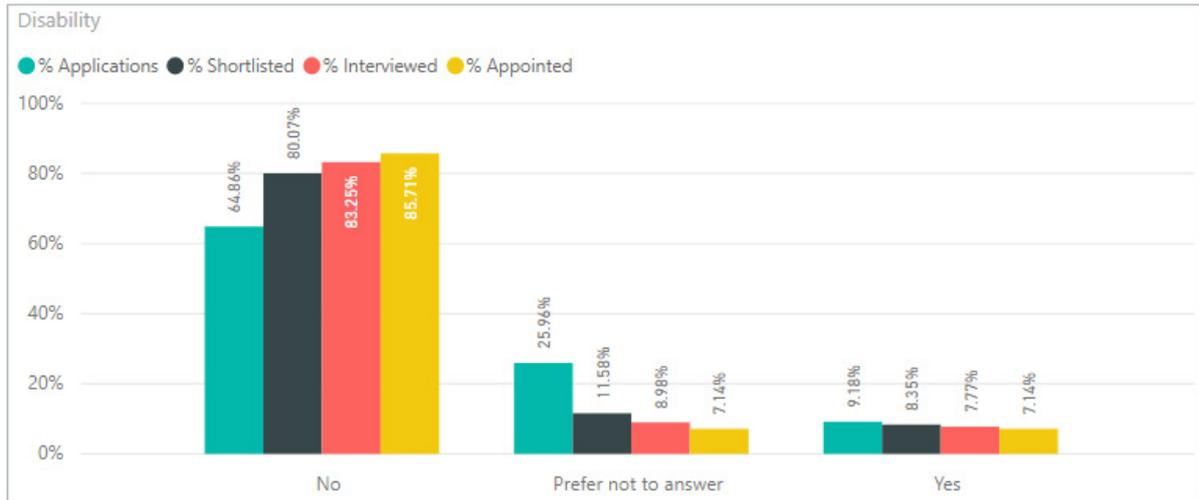


Figure 28: Recruitment: Progression by Ethnic Origin

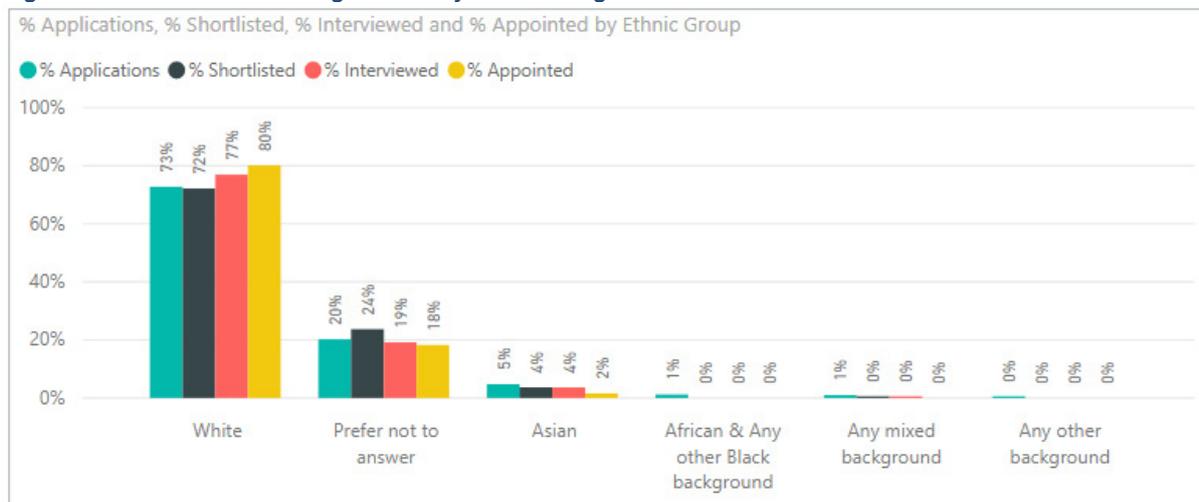


Figure 29: Recruitment: Progression by Religion

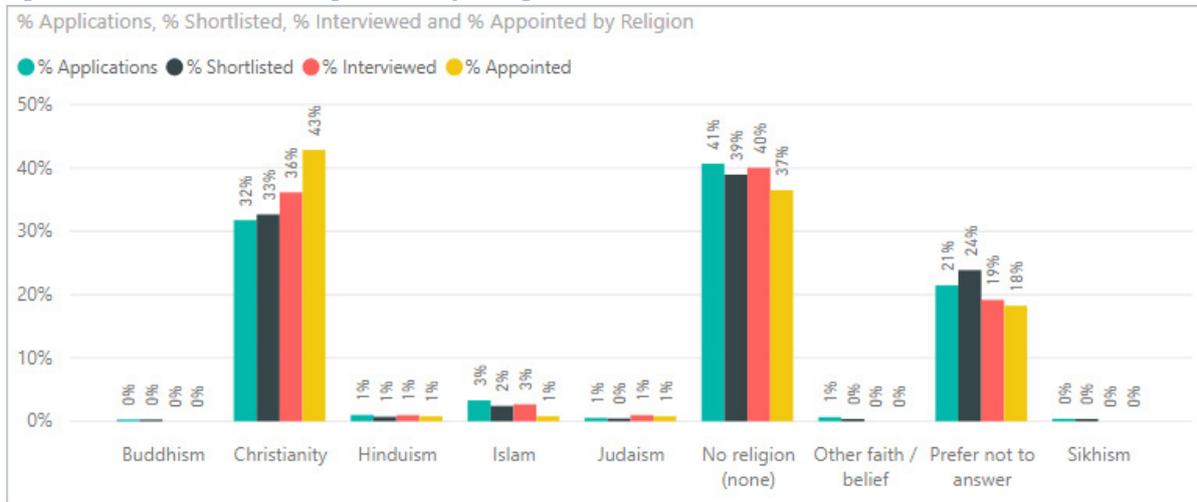


Figure 30: Recruitment: Progression by Sexual Orientation

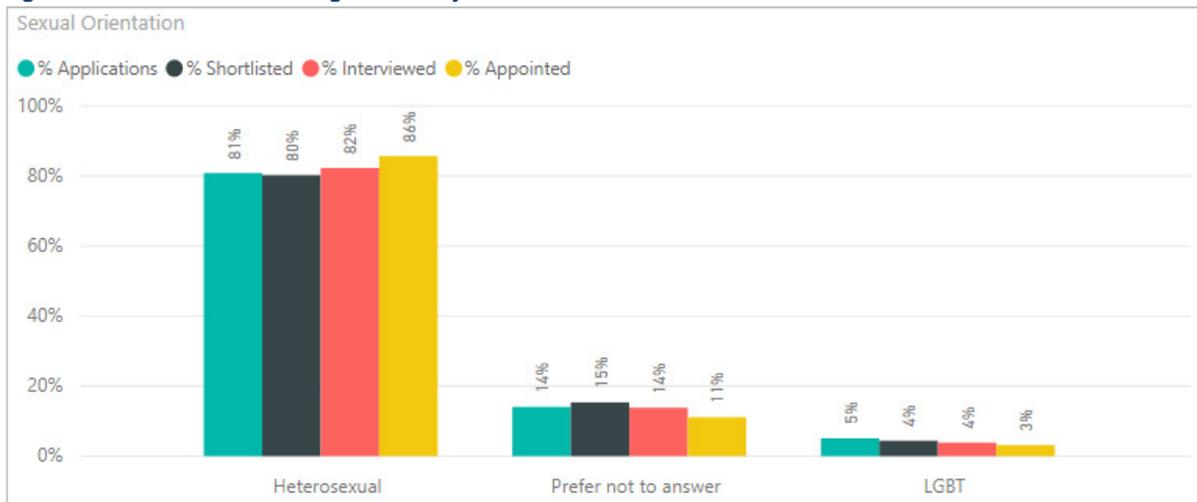


Figure 31: Recruitment: Progression by Age Group

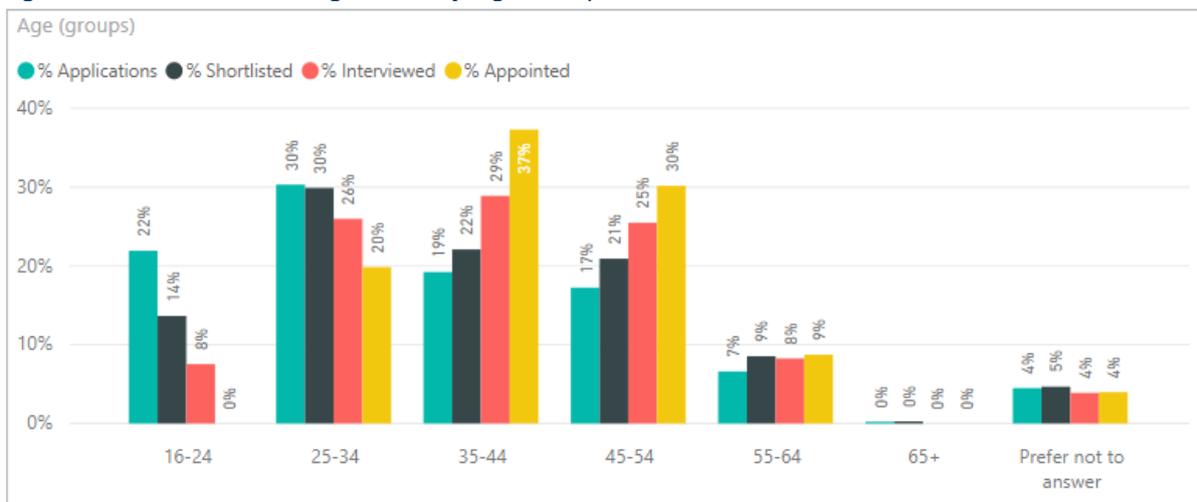


Figure 31 illustrates that applicants aged 16-24 are less likely to be successful at every stage. Those 25-34 are less likely to be appointed, while those 35-44 are more likely to be appointed. This is a similar pattern to our results from previous years.

Last year we undertook work to improve the information available on how to apply for posts, complete applications, the types of information panellists should look for and other information to support the application process, with a particular focus on supporting young people to develop their applications. Although this work may have been helpful, the results of our analysis suggest that this type of intervention alone is insufficient to improve the outcomes for younger applicants and further action is required.

8. FAIRER SCOTLAND DUTY

The Fairer Scotland Duty requires that we have due regard to the need to take steps to reduce inequalities of outcome caused by socio-economic disadvantage when making strategic decisions about how to exercise our functions. In relation to our workforce plan, this duty is particularly applicable to:

- Access to employment, training and career development;
- Ensuring an inequalities-based approach to our support for health and wellbeing of staff;
- Supporting digital skills and inclusion through our digital transformation work.

NES has provided continuing education funding to support staff to obtain qualifications or undertake a study programme which will allow them to deliver more effectively for the organisation. The process for awarding funding for continuing education, set in the context of our Learning and Development Policy, is designed to be person-centred and effective in ensuring fair and equitable access to support for ongoing personal and professional development. Our policy targets continuing education support for staff in lower pay bands. No new round of applications was held this year, but funding continued for those who were continuing in programmes.

We have also supported staff to achieve work-based qualifications aligned to the Business and Administrative Education Pathways.

We are currently rolling out Graduate Apprenticeship opportunities in:

- Business Management
- Business Management and financial services
- IT Management for Business
- IT Software Development
- Cyber Security

Our Healthy Working Lives strategy, which supports staff health and wellbeing, is underpinned by a focus on the social determinants of health and health inequalities. We provide support for all staff to participate in health promoting activity through Healthy Working Lives, funding mass participation activities like the Step Count Challenge and supporting minimal cost in-house physical activity offerings which are staff-organised and led.

We achieved the Engaged level of Carer Positive and are continuing to progress through the framework to support carers in the workplace.

Priority Initiatives 2018-19: Support for Fairer Scotland Objectives

The priority initiatives outlined in this Workforce Plan will deliver benefit for NES staff and NHSScotland in accordance with the Fairer Scotland Objectives identified above. More specifically:

Ensuring an inequalities-based approach to our support for health and wellbeing of staff will be supported through Healthy Working Lives and the management capacity and capability developments of Our Way and the Managers Passport;

Supporting digital skills and inclusion through our digital transformation work through inequalities-sensitive commissioning and design of digital products and services, digital literacies support, and ensuring that we continue to provide our staff with the digital tools and infrastructure they need to be effective.

9. RECOMMENDATIONS

Based on the analysis set out in this report, we will support our sustainable workforce and healthy organisational culture objectives through delivering educational and awareness activities to support dignity at work, organisational values and well-being, ensuring that these take account of the findings of this analysis. We will also further develop our educational support for recruitment and selection, with a particular focus on supporting effective equality and diversity practice in Values Based Recruitment.

Specific activity and outcomes are planned and reported through our Equality Outcomes and Mainstreaming Priorities plan and its associated progress reports, which can be found on our website at <http://www.nes.scot.nhs.uk/about-us/equality-and-diversity/equality-reports.aspx>.

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