

AGENDA FOR THE ONE HUNDRED AND EIGHTY-FOURTH BOARD MEETING

Date: Thursday 06 February 2025

Time: 10:15 – 12:15

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 Eighty-third Board Meeting 21 November 2024
For Approval NES/25/02
5. **10:20** Matters arising from the Minutes and notification of Any Other Business
6. **10:21** Actions from previous Board Meetings
For Review and Approval NES/25/03
7. **Chair and Chief Executive reports**
- 7a. **10:25** Chair’s Report
For Information and Assurance NES/25/04
- 7b. **10:35** Chief Executive’s Report
For Review and Assurance NES/25/05
8. **Performance Items**
- Quarter Performance Management Reports:**
- 8a. **11:00** Quarter 3 Delivery Report
For Review and Approval (C. Bichan / A. Shiell) NES/25/06
- 8b. **11:15** Quarter 2 Strategic Key Performance Indicators:
Board Performance Report 2024-25
For Review and Approval (C. Bichan / S. Williams) NES/25/07

8c. 11:20 Quarter 3 Finance Report 2024/25 NES/25/08
For Review and Approval (J. Boyle / L. Howard / A. Young)

8d. 11:30 Quarter 3 Strategic Risk Report NES/25/09
For Review and Approval (J. Boyle / D. Lewsley)

9. Strategic Items

9a. 11:40 Strategic Risks Annual Review and Risk Appetite NES/25/10
For Review and Approval (J. Boyle / D. Lewsley)

10. Governance Items

10a. 11:55 Corporate Governance Package (Board Standing Orders, Board Code of Conduct, Board Scheme of Delegation, Board Standing Financial Instructions & Committee Terms of Reference) NES/25/11
For Review and Approval (J. Boyle / D. Thomas / L. Howard)

Significant issues to report from Standing Committees:

10b. 12:00 Technology & Information Committee, 2 December 2024 & 27 Jan 2025
(D. Garbutt, verbal updates)

10c. 12:03 Education and Quality Committee, 13 December 2024
(D. Garbutt, verbal update)

10d. 12:06 Audit and Risk Committee, 16 January 2025
(J. Ford, verbal update)

11. Items for Homologation

11a. 12:09 Changes to Board and Committee Membership NES/25/12
(D. Thomas, for homologation)

NES Standing Committee Minutes:

11b. 12:10 Audit and Risk Committee, 07 October 2024. NES/25/13
(For homologation)

11c. 12:10 Education and Quality Committee, 12 September 2024. NES/25/14
(For homologation)

11d. 12:10 Technology and Information Committee, 27 August 2024. NES/25/15
(For homologation)

11e. 12:10 Technology and Information Committee, 2 December 2024.
(For homologation)

NES/25/16

12. 12:10 Any Other Business

13. 12:15 Date and Time of Next Meetings:

- Private Board: 06 February 2025 follows on from Public Board (Hybrid Meeting)
- Public Board: 27 March 2025 at 10.15 (Hybrid Meeting)
- Private Board: 27 March 2025 follows on from Public Board (Hybrid Meeting)

D. Thomas, Board Secretary.
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NHS Education for Scotland

Draft Minutes of the One Hundred and Eighty Third Board Meeting held on 21 November 2024 at 10:15am – 1:25pm

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)
Jim Boyle (JB), Executive Director of Finance
Olga Clayton (OC), Non-Executive Director
Shona Cowan (SC), Non-Executive Director, left during item 9b, rejoined during item 10c
Jean Ford (JF), Non-Executive Director
Lynnette Grieve (LG), Non-Executive Director / Employee Director
Annie Gunner Logan (AGL), Non-Executive Director
Gillian Mawdsley (GM), Non-Executive Director / Whistleblowing Champion
Karen Reid, (KR) Chief Executive and Accountable Officer
Karen Wilson (KW), Executive Director of Nursing Midwifery and Allied, Health Professionals / Deputy Chief Executive (Clinical), left during item 10b

In attendance: Christina Bichan (CBi), Director of Planning & Performance
Lindsay Donaldson (LD), Deputy Medical Director
Nick Hay (NHay), Principal Manager – Communications and Engagement
Kevin Kelman (KK), Director of NHS Scotland Academy, Learning & Innovation
Kellie King (KKi) Scottish Pharmacy Clinical Leadership Fellow
Debbie Lewsley (DL), Risk Manager (Item 9b)
David Main (DM), Technician, NES Technology Service (providing technological support for part of the meeting)
Claire Neary (CN), Lead Business Partner, Communications
Gordon Paterson (GP), Director of Social Care
Lorraine Scott (LS), Associate Manager Chair and CEO Office (minute taker)
Alison Shiell (ASh), Manager, Planning & Corporate Resources (Item 9c)
Andrew Sturrock (AS), Postgraduate Pharmacy Dean / Director of Pharmacy, left during item 10b
Della Thomas (DT), Board Secretary / Principal Lead Corporate Governance
Christopher Wroath (CW), Director of NES Technology Service
Alan Young (AY), Principal Lead, Finance (Item 9a)

1. Chair's Welcome

- 1.1. The Chair welcomed everyone to the meeting, particularly Kellie King, Scottish Pharmacy Clinical Leadership Fellow, observing the meeting as part of her development.

- 1.2. The Chair asked the Board to note that Laura Howard and Alan Young will be joining the meeting for item 9a, Debbie Lewsley will be joining for item 9b, Alison Shiell will join the meeting for item 9c, Simon Williams will join the meeting for item 9d, Katy Hetherington for item 10a and Janice Gibson will join the meeting for item 10b.
- 1.3. The Chair acknowledged that Shona Cowan, Non-Executive Director would leave the meeting between 12:10pm and 12:48pm to provide non-executive input into the NES induction programme meeting.

2. Apologies for absence

- 2.1. Apologies were received from Board members Ally Boyle (AB) and Nigel Henderson (NH), Non-Executive Directors and Emma Watson, Executive Medical Director.
- 2.2. Apologies were received from regular Board attendees Colin Brown, Head of Strategic Development and David Felix, Director of Dentistry.

3. Declarations of Interest

- 3.1. There were no declarations of interest made in relation to the business of the meeting.
- 3.2. The Board noted a declaration of connection for Jean Ford as a member of NHS Ayrshire and Arran Board in relation to the de-escalation of enhanced monitoring at NHS Ayrshire mentioned in the Chief Executives Report and also a declaration of connection for Gillian Mawdsley in relation to the Equalities Outcome Mid-Year Review Report and her connection with the Scottish Refugee Council.

4. Draft Minutes of the One Hundred and Eightieth Second Meeting – 26 September 2024 (NES/24/72)

- 4.1. The Board approved the draft minute of 26 September 2024 meeting.

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

- 5.1. There were no matters arising in relation to the minutes of the last Board meeting.
- 5.2. No items of any other business were raised.

6. Actions from previous Board Meetings (NES/24/73)

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

- 6.2. The Board noted that there was a total of 22 actions on the rolling action log and 19 have been marked as complete.
- 6.3. The Chair noted that actions 6.3 and 7.23 were requests for information and that these have been circulated via correspondence to the entire Board and these actions have now been marked as complete. The Board confirmed that the shared information provided satisfactory assurance.
- 6.4. The Board noted that 2 actions remain ongoing, these are 8.6 Talking Heads Co-Pilot update and 9.14 in relation to reviewing NES Publications and preparing a version for children and young people.
- 6.5. The Board noted that 1 action, 7.36, remains in progress which relates to the publication of the ePad which is part of the Digital Prioritisation.
- 6.6. The Board agreed the action list.

7. Chair and Chief Executive reports

7a) Chair's Report (NES/24/74)

- 7.1. The Chair submitted his report to the Board for information and assurance. These details recent engagements and activities since the 26 September 2024 Board meeting, both in his capacity as Chair of the NES Board and as a member of the NHS Scotland (NHSS) Board Chairs Group (BCG).
- 7.2. The Chair asked members of the Board if they had any questions.
- 7.3. The Board asked whether any feedback has been received since the Scottish Government Annual Review meeting.
- 7.4. Karen Reid informed the Board that initial feedback received was positive, advising that a letter with points for future consideration will be received within a few weeks as per standard protocol. She noted that during the session, specific areas were highlighted including the suggestion to consider a name change for NES to reflect our social care role and also the Minister's request for NES's contribution in Social Care, and development in the leadership space.
- 7.5. The Chair advised the Board that if they have any suggestions regarding the name change to direct them to him and he will forward on as appropriate to the CEO.

7b) Chief Executive's Report (NES/24/75)

- 7.6. The Chair invited Karen Reid to introduce the report which comes to the Board for review and assurance.
- 7.7. Karen Reid thanked Kirsteen McColl, Manager Planning & Corporate Resources and Clare Butter Associate Manager, Planning & Corporate Resources for their assistance in preparing this report.

- 7.8. Karen Reid informed the Board of the acceptance of the Resident Doctors' pay deal, which had just been notified today. The Board were pleased to hear this.
- 7.9. Karen Reid mentioned the Scottish Parliament's pause on the National Care Service, however noted that the Minister is still keen to progress parts of the Bill, including Anne's Law. She also informed the Board that NES was asked to provide specific information on social care education and learning offers to Scottish Government, which we did accordingly.
- 7.10. Karen Reid advised the Board that Lee Savarrio from NHS Greater Glasgow and Clyde will join NES on 3 January 2025 as the new Dental Director.
- 7.11. Karen Reid informed the Board that an application for the UK Boardroom Apprentice Scheme has been submitted and confirmation if we have been allocated a Boardroom Apprentice is expected by the end of November 2024, with a possible start date in January 2025.
- 7.12. Karen Reid highlighted that the Digital Enabled Workforce team were finalists in the Digital Leaders UK awards, noting that reaching the Top 10 is a significant achievement for the team.
- 7.13. Karen Reid advised the Board that the Scottish Qualifications Authority (SQA) system verifications quality assurance visit reported a high level of confidence in NES SQA work, which is positive feedback for future considerations particularly if extending the SQA centre for Social Care and Karen noted this significant success for the Dental Directorate.
- 7.14. Karen Reid noted the significant progress made on the Transformation Route Map highlighting the substantial amount of activity being achieved.
- 7.15. Karen Reid informed the Board about the recent launch of the Digital Dermatology Pathway, which is not mentioned in the report due to timing. She acknowledged Christopher Wroath and his team for their efforts, noting that this initiative aims to reduce waiting times for skin conditions, improve patient outcomes and noted that it will improve efficiency and productivity for territorial Boards.
- 7.16. Karen Reid reported that the recruitment process for an Associate Director of Human Resources (HR) has begun, noting that there has been significant interest in the position. Karen Wilson will chair a stakeholder session, with interviews scheduled for 11 December 2024, she advised that an update will be provided to the Board at the next meeting. **ACTION: KR**
- 7.17. Karen Reid informed the Board that the Executive Team will be implementing organisational changes, advising that a report will be presented to the Change Management Programme Board (CMPB) on 25 November 2024, detailing these changes. It was noted that the Chair has already communicated the proposals to the Non-Executive Directors, and that any feedback will be provided during a future Board meeting. **ACTION: KR**

- 7.18. The Chair thanked Karen Reid for her introduction and opened the meeting to other members of the Executive Team for their introductory remarks.
- 7.19. Christopher Wroath highlighted the collaboration which enabled the launch of the digital dermatology initiative on 11 November 2024. He noted that contributions from the Centre for Sustainable Delivery, the NES Technology Service, National Services Scotland (NSS) Digital, Health and Care director support, the private company Consult Connect also local Boards such as Greater Glasgow and Clyde, Renfrewshire Health and Social Care, Dumfries and Galloway's Greencroft and Gillbrae Medical Practices all participated in this initiative. Christopher Wroath acknowledged the efforts of everyone involved in the project, stating that this collaboration exemplifies how NHS Scotland should operate to achieve future success. He also thanked Kevin Kelman for his coordination and collaboration and recognised all team members for their contributions.
- 7.20. Karen Wilson acknowledged the contributions from Psychology on pages 12 and 18 of the report regarding Trauma, noting its significance in the community.
- 7.21. Kevin Kelman highlighted item 6.1b as an example of recent collaboration with the Academy of Medical Sciences, noting that Karen Reid has been invited to join their Forum Advisory Group. He further advised that this positive partnership has resulted in a Hospital-at-Home collaboration event scheduled for the New Year.
- 7.22. The Chair noted that there have been numerous hospital at home models previously reported. Kevin Kelman acknowledged this, stating that the objective is to develop common approaches, and advised that it is still early in the planning stages and the aim is to create a forum for colleagues to discuss and debate the initiative to collectively determine the necessary activities to be undertaken. Karen Wilson also noted the existence of a National Network designed to consolidate the various models to identify the most effective practices, emphasising that this is a very active initiative. Kevin Kelman advised that the event details will be shared with the Board. **ACTION: KK/LS**
- 7.23. Jim Boyle noted that United Nations Climate Change Conference or Conference of the Parties (UNFCCC), more commonly known as COP29 is currently taking place and that NES has provided high-level information on its website in relation to this. He advised that if there are any implications for NES resulting from the Conference that these will be updated to the Board at a future meeting.
- 7.24. Lindsay Donaldson reported the de-escalation of NHS Tayside and NHS Ayrshire and Arran from enhanced monitoring on 23 October 2024, advising that this was due to effective collaboration between NES and local managers. She advised that The Queen Elizabeth Hospital, and general surgery at Monklands Hospital, remain under enhanced monitoring. She remarked that she is optimistic that continued support will reduce this number to zero. The Chair commended the Medical Directorate's efforts, noting that the new support measures have led to this reduction adding that the Chief Operating Officer also acknowledged this achievement at the recent Annual Review meeting.

- 7.25. Andrew Sturrock highlighted the success of Maxine McCabe, a senior educator in pharmacy, for her achievement in becoming the first community pharmacist in the UK to be credentialed at an advanced practice level by the Royal Pharmaceutical Society. He advised that this accomplishment is an indication of the progress of community pharmacy services in Scotland. He asked the Board to note that Maxine McCabe's role as a part-time clinical practitioner and her involvement in training programmes, serve as a model for trainees. Andrew Sturrock advised that there are plans to assist more community pharmacists in obtaining similar credentials and to use Maxine McCabe's success as an example in this sector. The Chair suggested that we publish details of this good news story. **ACTION: AS/NH**
- 7.26. The Chair thanked the Executive Team for their introductory remarks and opened to the meeting for invited questions from participants
- 7.27. The Board noted at section 4.2a of the report, that 15% of trainees required development of specific competencies and asked if this percentage was average or higher than normal.
- 7.28. Lindsay Donaldson advised that the doctors' developmental outcomes are impacted by unmet curriculum requirements and a need for more development time. She reported that this number reflects the lack of opportunities for some trainees, rather than major issues. Lindsay Donaldson added that the quality and safety group monitors these outcomes regularly and has not found any specialty or regional outliers which would require urgent interventions.
- 7.29. The Board asked if there was any feedback received or questions raised during the Hybrid Working Policy session.
- 7.30. The Employee Director advised that a session on the hybrid working policy for all staff will be held on 5 December 2024. She noted that the recent session was specifically for line managers, and that the policy has been well received by them as it enables them to manage their teams more effectively. The Employee Director advised that during the webinar, several questions were raised, such as queries about core hours, flexible working patterns, and how to bring teams together. The Employee Director advised that bringing teams together has helped to address concerns regarding working patterns.
- 7.31. The Board commented that it would be helpful to receive the Performance section of the report first and suggested that it would be beneficial to link the performance information, within the report, with the Strategic Key Performance Indicators (SKPIs), to align with the SKPI quarterly report. Karen Reid advised that this would be reviewed for the next report. **ACTION: KR/CBi**
- 7.32. The Board noted a 41% increase in Freedom of Information (FoI) requests queried the reasons behind this and asked if there was the capacity to handle this increased volume of requests.
- 7.33. Karen Reid advised that training has been provided to opposition members on how to interrogate Turas for information as some details requested in FoI is already available in the public domain. She advised that this training has been offered to others and it is hoped this will reduce FOI numbers.

- 7.34. Christina Bichan advised the Board that this rise in FoI requests has been seen across all Boards. She reported that NES now has a dedicated staff member assigned to manage FoI and this helps NES maintain their strong performance against time scales. Christina Bichan also reported that to ensure resilience, other team members can also support FoI activities, preventing reliance on a single individual.
- 7.35. The Board asked about the timelines for the Glasgow Office, which had been affected by external factors, and inquired about the staff update from October 2024 and its reception. The Board also requested information on the development of options and projected timescales.
- 7.36. Jim Boyle explained that timelines for the Glasgow Office have been delayed due to uncontrollable factors and there is work underway to secure a new contractor, with tender returns expected soon. He advised that it is anticipated that two strong bids will be received and, after review he will seek approval from the Audit and Risk Committee. Karen Reid reported that the Joint Consultative Forum and Partnership Forum have been updated monthly and that we have communicated effectively with staff through property updates in Town Halls. The Employee Director mentioned that staff have acknowledged their appreciation of the updates.
- 7.37. The Chair thanked Karen Reid and colleagues and acknowledged a very comprehensive report.
- 7.38. The Board agreed that the report provided assurance.

8. Strategic Items

8a) Anchors Strategic Plan – Update on Progress. (NES/24/76)

- 8.1. The Chair invited Christina Bichan to introduce the report which comes to the Board for assurance.
- 8.2. Christina Bichan provided an update on the Anchors Plan, noting that the first Anchors Strategic Plan was approved in November 2023 and a further iteration of the report would come to the Board after incorporating Scottish Government guidance for further development issued in late October 2024. Christina Bichan advised that the recent guidance emphasised the need for specific, measurable objectives, clear governance mechanisms, and she expected requirements for all national Boards to include specific objectives across workforce, procurement, and land and assets.
- 8.3. Christina Bichan reported that the 2025-2026 Annual Delivery Plan guidance, including Anchors requirements, is expected in early December 2024 and advised that there are ongoing discussions with workforce colleagues about deliverables and priorities for the upcoming year.
- 8.4. The Chair asked if there was collaboration between Boards in the planning and delivery of the Anchor Plan.

- 8.5. Christina Bichan advised that the Scottish Government has created a document summarising Boards' plans and identifying collaboration opportunities and that workshops have been held for Boards to discuss these. She advised that the National Board of Directors of Planning group have discussed aligning responsibilities and plans and final confirmation from the guidance is awaited before moving forward with collaboration.
- 8.6. The Chair opened for questions, as there were none, the Chair thanked Christina Bichan for the report.
- 8.7. The Board noted the update provided and acknowledged that a further update will be provided at a future meeting. **ACTION: CBI**

8b) Engaging Stakeholders Report (NES/24/77)

- 8.8. The Chair invited Nick Hay to introduce the report for review and approval.
- 8.9. Nick Hay provided a short presentation which summarised the report:
- I. The 2024 stakeholder survey was conducted in-house due to fiscal constraints, using a refined distribution list from the 2022 survey. Questions were aligned with the previous survey for comparison, with new questions added to gauge engagement and barriers to utilisation.
 - II. The survey received 1186 responses, with the majority from NHS territorial boards (42%), followed by national boards (24%), health and social care partnerships (12%), and independent healthcare contractors (11%).
 - III. Awareness of NES and its strategies was relatively high, but there was less awareness of specific strategies. The majority of respondents saw NES's role primarily in education, training, and workforce development, with digital services being the least recognised role.
 - IV. The average satisfaction score was 6.36 out of 10, with a Net Promoter Score (NPS) of -15, indicating room for improvement. Satisfaction varied among stakeholder groups, with national boards and public sector colleagues more likely to recommend NES.
 - V. Key barriers included time constraints, lack of awareness, and access issues. Stakeholders desired more education and training resources, better support for continuous professional development, and enhanced digital skills and leadership training.
 - VI. Proposed actions included enhancing communications, creating consistent branding, developing a cohesive approach to communications and marketing, and monitoring progress to address recommendations effectively.
- 8.10. Karen Reid reported that the stakeholder survey report did not yet yield the desired results, indicating a disconnect between the organisation's work and stakeholder recognition especially in digital services like Turas. She referred to a targeted communications plan which has been established noting that it will highlight NES's education and training offerings. Karen Reid remarked that it

will also provide details of the development of marketing and engagement strategies to ensure stakeholders understand NES's contributions.

- 8.11. Karen Reid highlighted the inconsistency with NES branding. She reported that we have 27 social media accounts and 44 website addresses, some of which do not mention NES at all. She advised that there was a need to standardise branding and messaging.
- 8.12. The Chair emphasised the need to establish a clear identity for NES, including refreshing branding and communication materials, especially with the potential name change. He also noted that many leadership programmes in Scottish Government barely mention NES, indicating the need for better visibility. He also suggested that an improvement with the appraisal system could reduce negative perceptions and enhance recognition of NES's contributions.
- 8.13. The Chair stressed that all members should actively promote the NES brand when engaging with stakeholders and during public appearances.
- 8.14. The Chair thanked Nick Hay for the report and opened for questions.
- 8.15. The Employee Director remarked that many people use NES's TURAS platform without knowing it's a NES product and suggested adding information about NES's digital work in the "About Us" section on the website to improve awareness. She also highlighted that the multiple different websites can cause confusion and recommended accessing the Scottish Deanery through NES to reinforce the connection. The Employee Director highlighted that NES staff should be aware of NES's role as a digital Board and suggested some quick wins for example clearly mentioning NES on all social media accounts and websites to boost recognition.
- 8.16. Christina Bichan agreed with updating the "About Us" section on the website, stating there is a refreshed standard narrative that can reflect our digital work.
ACTION: NH
- 8.17. The Board noted that only 9 Local Authorities responded to the survey and asked what could be done to increase what NES can offer to Local Authorities and if possible, to include this development in our Anchor Strategy
- 8.18. Karen Reid advised that the reduced contribution is possibly related to the current challenges experienced by Local Government and may not be a reflection on NES. She reported that she and the Chair have had a recent discussion with Convention of Scottish Local Authorities (COSLA) to improve engagement. Karen Reid advised that she discuss with COSLA colleagues how to strengthen the connection perhaps through COSLA Leaders or the COSLA Health and Social Care Committee.
ACTION: KR
- 8.19. The Board expressed interest in the responses received around recruitment and retention, noting that social care, public sector boards and territorial Boards did not want NES to focus solely on domestic recruitment. The Board noted a strong interest in improving retention rates.

- 8.20. Karen Reid acknowledged the challenge of recruitment and retention, advising that individual employers want to manage their own recruitment and retention strategies. She remarked that there are lessons to be learned from the NHS England's "People Promise" initiative, which has shown positive results in retention.
- 8.21. Karen Reid highlighted the importance of flexibility in work patterns, particularly in nursing, where part-time working and alternative work patterns have been effective in retaining staff. She also noted that the RCN (Royal College of Nursing) is looking into this issue, and there are lessons that can be applied to support Boards, Local Government, and Health and Social Care Partnerships in addressing retention challenges.
- 8.22. Karen Wilson reported that the Ministerial Nursing and Midwifery Task Force are also focusing on retention as a significant issue.
- 8.23. Gordon Paterson emphasised the need to caveat the Local Authority responses as there were 147 respondents from Health and Social Care and advised that some of these responders will work in the Local Authority, and they may also include social care and justice and children's services, he also acknowledged that this sector would have expressed frustration as there is a gap between their expectations and what has been funded for delivery. He reported the importance of retaining Social Care Nurses within the Nursing and Midwifery Task Force, advising that qualification requirements could result in a significant workforce loss with currently, only 48% of adult social care workers able to meet these qualifications, risking removal from the register if they don't qualify soon.
- 8.24. The Board acknowledged the points raised and emphasised a need for NES to improve its visibility and awareness amongst stakeholders and suggested a "Did you know?" campaign to highlight various services and support NES provides.
- 8.25. The Board highlighted the importance of addressing the gaps in provisions and desired improvements identified in the Stakeholder survey and emphasised the importance of linking future planning and strategy iterations to the feedback received from stakeholders, effectively implementing a 'You Said We Did' approach and suggested that NES focus on ensuring that the strategy delivers improved products and outcomes for stakeholders rather than only focusing on brand name and changes.
- 8.26. The Board asked how to benchmark performance against similar organisations and whether the issues raised in the report are typical.
- 8.27. Karen Reid reported that every person in the health and social care workforce across NHS Scotland will have an interaction with a NES product however not everyone will realise that they are being trained by NES and the move to brand our products and change our name should help to change this perception.
- 8.28. The Board asked if Justice organisations had been surveyed and how their feedback was captured. The Board asked for further clarity on the category of 'other' and asked if it could be clarified which Scottish Government funded bodies are interacting with NES.

- 8.29. Nick Hay reported that justice colleagues were not specifically targeted, nor were they asked to identify their roles and acknowledged that this in an area for improvement in future surveys. **ACTION: NH**
- 8.30. The Board asked if the stakeholder survey captured NES's commitment to training on climate change.
- 8.31. Karen Reid reported that the timing of the survey may have affected the inclusion of the climate-related work as significant initiatives in this area occurred after the survey was conducted. She advised that these will be reflected in future surveys.
- 8.32. The Board suggested that raising awareness of NES may be a campaign of 'did you know' where this would involve highlighting to various services the extensive work of NES.
- 8.33. Karen Reid noted that a workshop is being arranged with NHS Chief Executives to raise awareness of the work that NES does with the aim to improve the understanding and support NES can offer.
- 8.34. Nick Hay reported that all social media accounts will be consolidated and would be facilitated by NES's withdrawal from X by the end of March 2025. He acknowledged the need to redevelop the corporate website.
- 8.35. The Chair thanked Nick Hay for his contribution and the Board approved the report.
- 8.36. Laura Howard and Alan Young joined the meeting during item 8b.

9. Performance Items

9a) Quarter 2 Finance Report. (NES/24/78)

- 9.1. The Chair welcomed Laura Howard and Alan Young to the meeting who had joined to support Jim Boyle. The Chair invited Jim Boyle to present the report which comes to the Board for approval.
- 9.2. Jim Boyle reported that this was a Quarter 2 report and in addition provided the Board with an update on recent financial activity. He reported a change in funding allocations from £17.9 million (9%) reported to a current £14.4 million (7%), advising that the largest allocation outstanding was of £12 million for shortfall coverage.
- 9.3. Jim Boyle advised that social care core funding was confirmed after discussions with the Scottish Government. He also reported £108 million of funding moving from non-recurring to baseline as a positive development and this will increase to £115 million as the Agenda for Pay awards have been confirmed.
- 9.4. Jim Boyle confirmed that the pay awards for Consultants was agreed at 10.5% and that as noted at the start of the meeting that Resident Doctors pay award has been settled, he advised that this will be advised in the next allocation letter

from Scottish Government and he also acknowledged that Scottish Government have committed to fully fund the pay awards.

- 9.5. Jim Boyle reported a £1.2 million underspend position for the year at this stage and noted that it is likely that the allocation of £291,000, reflected in the report as a red risk, in relation to TURAS refresh redesign project phase 1, will not come to NES in this financial year and that NES will have to self-fund this amount.
- 9.6. Jim Boyle reported that discussions will continue with NES, Scottish Government and Policy Teams around the Resident Doctor Rotations and how this will affect NES.
- 9.7. Jim Boyle remarked that discretionary spending restrictions continue as requested by the Director General. He highlighted that the UK budget announced on 30 October 2024, will impact the next financial year. However, the announcement of the Scottish budget is still pending, he advised that the Chancellor of the Exchequer reported that £3.4 billion will be allocated to Scotland. Jim Boyle emphasised the importance of communicating across NHS Scotland that this allocation will not alleviate financial pressures. He further mentioned that £65 million is needed for agenda for change pay awards.
- 9.8. The Chair opened the meeting for questions.
- 9.9. The Board acknowledged the work undertaken across NES to get the funding into the baseline budget.
- 9.10. Jim Boyle advised that although this is a good outcome, this does not mean that the baseline funding is protected from future reductions and remains cautious although this does provide stability for financial planning.
- 9.11. The Chair asked about the financial impact of the reduced working week, noting that the figure reported seemed low.
- 9.12. Jim Boyle explained that the only financial impact to date for this financial year is the cost of overtime for the first month, which was £96,000, however noted that future reduction of hours to 36.5 hours per week and then 36 hours per week would have a greater impact and further considerations would need to be made.
- 9.13. The Chair noted the Director General's announcement about non-executive pay adjustments over the next three years and asked about this impact.
- 9.14. Jim Boyle acknowledged the information and noted that consideration on how to assess the impact, would be necessary however he noted that any additional requests from Scottish Government would need to be fully funded to ensure that NES are not exposed to any significant risk
- 9.15. The Board asked if any major programmes had been ceased to manage the underspend and enquired if there were any plans to use the underspend rather than contributing it to the £12 million shortfall.

- 9.16. Jim Boyle clarified that no major programmes had been ceased to manage the underspend and mentioned that there was an agreed programme of spending reductions with the government, which helped reduce the anticipated shortfall from over £15 million to £12 million, he also noted that NES were taking advantage of opportunistic savings and had not terminated or held back any significant elements of NES's strategy.
- 9.17. The Chair thanks Jim Boyle, Laura Howard and Alan Young and the Board approved the report.
- 9.18. Debbie Lewsley, Alison Shiell and Simon Williams joined the meeting during the discussion.
- 9.19. Shona Cowan left the meeting during the discussion to provide input to a NES staff induction meeting.

9b) Quarter 2 Strategic Risk Report (NES/24/79)

- 9.20. The Chair welcomed Debbie Lewsley to the meeting and asked her to present the report which comes to the Board for assurance.
- 9.21. Debbie Lewsley presented the quarterly update to the Strategic Risk Register and highlighted the following movements in the scoring of several risks:
- i. Strategic Risk 2 decreased due to the conversion of £108 million of non-recurrent funding to baseline.
 - ii. Strategic Risk 3 increased due to the current non-executive vacancy.
 - iii. Strategic Risk 4 increased due to staff awareness of savings impacts on retention and well-being.
 - iv. Changes in risk titles for Strategic Risks 1 and 4 were noted.
- 9.22. Debbie Lewsley advised that the Executive team have reviewed the strategic risks, with updates included in the cover paper and that the Control Risk Assurance proposal was approved and is being implemented. She also advised that the Risk Management Group is developing directorate risk reports for better transparency and assurance.
- 9.23. Laura Howard and Alan Young left the meeting.
- 9.24. The Chair thanked Debbie Lewsley for the report. He asked Committee Chairs to avoid making minor frequent adjustments to the Risk Register and suggested focusing on maintaining stability and ensuring mitigations are effectively measured. He highlighted the need for the Board to focus on the content of the risk register rather than the format.
- 9.25. Jim Boyle confirmed the importance of prioritising the content of the risk register over its format and acknowledged that changes to the format have improved focus on risks. He emphasised identifying and managing the right risks as crucial.

- 9.26. Jim Boyle also ensured consistency in describing control ratings and mentioned that controls assurance work will support maintaining this consistency in the risk register's presentation.
- 9.27. The Board suggested that the Strategic Risk 1 score be reviewed in light of the stakeholder survey discussion. **ACTION: DL**
- 9.28. The Employee Director reported that the Strategic Risk relating to staff being disengaged and advised that mitigating actions are already in place including webinars and communications relating to the fiscal position.
- 9.29. Gordon Paterson emphasised the importance of supporting staff wellbeing and suggested that the Board be sighted on the level of activity in the Wellbeing Matters area. He suggested a formal presentation to the Executive Team and perhaps a Board Development session. **ACTION: GP/DT**
- 9.30. The Board approved the Q2 Strategic Risk report and noted the approved NES Control Assurance Proposal.
- 9.31. The Chair thanked Debbie Lewsley for the report, and she left the meeting. Alison Shiell and Simon Williams joined the meeting.

9c) Quarter 2 Delivery Report (NES/24/80)

- 9.32. The Chair invited Alison Shiell to present the report which comes to the Board for approval.
- 9.33. Alison Shiell presented the 2024-2025 Quarter 2 delivery update, highlighting progress against the Annual Delivery Plan (ADP), noting that out of 175 deliverables, 142 are completed or on target, 29 are progressing with minor delays, and 3 are experiencing significant delays. She advised that the number of red deliverables has reduced from 7 in Quarter 1 to 3 in Quarter 2 and that funding delays continue to impact some deliverables.
- 9.34. Alison Shiell highlighted to the Board that the report now includes an overview of deliverables affected by funding delays, specifying whether these delays are within or outside NES's control. She advised that a projected status column has been added to the full Quarter 2 update, allowing directorates to provide an anticipated status for future quarters. She reported that the overview slides in Appendix 1 have been enhanced to include details about red and amber deliverables, similar to the table in the cover paper.
- 9.35. Alison Shiell highlighted to the Board significant achievements during this quarter which included the Mobile Skills Unit training 149 social care staff and the successful live test of the National Digital Dermatology Pathway.
- 9.36. The Chair thanked Alison Shiell for her report and suggested sharing the successes of the significant achievements through NES communication channels. He then asked if there were any questions from the Board. **ACTION: ASH/NH**

- 9.37. The Board requested clarity on whether the delays are within NES's control or due to external factors.
- 9.38. Alison Shiell confirmed that the report now includes details on whether the delays are within NES's control or not.
- 9.39. The Board appreciated the inclusion of the additional information however suggested adding a summary in the cover paper to highlight the overall performance.
- 9.40. Alison Shiell acknowledged this requested and agreed to add in this summary for the next report. **ACTION: ASh**
- 9.41. The Chair thanked Alison Shiell, and the Board approved the report.
- 9.42. Alison Shiell left the meeting.
- 9.43. Katy Hetherington joined the meeting.
- 9d) **Quarter 1 Strategic Key Performance Indicators: Board Performance Report 2024-25 Delivery Report** (NES/24/81)
- 9.44. The Chair welcomed Simon Williams and asked him to introduce the report.
- 9.45. Simon Williams provided an overview noting that this is the fifth quarterly report on NES's progress against Strategic Key Performance Indicators (SKPIs) and the first following the revised governance process. He noted that the report was first circulated to the board and each standing committee and advised that due to timing, updates for the report have been taken from unapproved Committee minutes.
- 9.46. Simon Williams reported that in Quarter 1, 39 measures were reported, of these, 23 were green, 4 were amber, and 4 were red with 8 measures having no Red, Amber, Green (RAG) parameters attached. He advised that on each of the amber and red measures, comments are included in the report.
- 9.47. The Chair thanked Simon Williams for his introduction and opened for questions.
- 9.48. The Board suggested that this report and other performance reports be taken earlier in the agenda and emphasised the importance of linking performance data to the organisation's strategic ambitions.
- 9.49. The Chair advised that this would be reviewed for the next meeting. **ACTION: DT**
- 9.50. The Board approved the report
- 9.51. The Chair thanked Simon Williams for the report, and he left the meeting.

10. Annual Items

10a) Equality and Diversity Outcomes Mid-Year Report (NES/24/82)

- 10.1. The Chair welcomed Kathy Hetherington to the meeting as invited her to introduce the report.
- 10.2. Katy Hetherington introduced the report, highlighting the importance of promoting inclusivity and addressing disparities within the organisation. She stressed the need for continuous efforts to integrate equality and diversity into the organisational culture and operations. The report provides an overview of the current state of equality and diversity, identifies areas for improvement, and outlines actionable steps to enhance inclusivity and equity.
- 10.3. The Chair asked if the NHS in Scotland holds a national set of statistics about workforce diversity.
- 10.4. Katy Hetherington advised she would find this out and feedback to the Chair.
ACTION: KH
- 10.5. The Chair opened for questions, noting that this report had been to a number of Committees already. As there were none the Board approved the report.
- 10.6. The Chair thanked Katy Hetherington for the report, and she left the meeting.
- 10.7. Janice Gibson joined the meeting during this report.

10b) NES iMatter Staff Experience Report 2024 (NES/24/83)

- 10.8. The Chair welcomed Janice Gibson to the meeting and invited her to introduce the report.
- 10.9. Janice Gibson emphasised the importance of considering the iMatter report in the context of the challenging fiscal position and other factors impacting staff morale and satisfaction, such as negative media coverage about the Health and Social Care system. Janice Gibson highlighted that NES has worked consistently to prioritise staff engagement, performance, well-being, and morale, also noting that NES seeks to learn and understand from the iMatter scores, implementing actions based on feedback and learning from other Boards performing well.
- 10.10. Janice Gibson noted that the comparative report for the whole NHS would be released soon, and NES is likely to be one of the highest-performing boards in key measures of workforce engagement and satisfaction. NES's own scores remain high, with an 84% response rate and 85 points in staff engagement. Janice also pointed out that board visibility has improved, and the uptake on action planning remains consistently high, with 87% of teams submitting an action plan by the deadline and 90% post-deadline.
- 10.11. Janice Gibson commended the Executive Team for sharing their action plan, demonstrating transparency and commitment to being a learning organisation.

- 10.12. The Chair thanked Janice Gibson for the report, noting the excellent results and requested that the NHS comparative report be shared widely including in newsletters. He suggested that members of the board continue to increase their visibility and join Town Hall meetings when appropriate. **ACTION: NH**
- 10.13. The Chair opened to members for questions.
- 10.14. The Board noted that the questions related to 'my team' and 'my organisation' and asked how the survey would pick up the wider issues.
- 10.15. Karen Reid reported that when the iMatter survey was posted it was at the time when the fiscal position was critical, and staff had received news on fixed term contracts and noted that it will be interesting to compare NES's position alongside other Boards when the comparative report is released. Karen Reid acknowledged that NES would take learning from other organisations who are doing well.
- 10.16. The Employee Director noted that the score remains high even though the survey was circulated at a time of fiscal pressures.
- 10.17. The Employee Director noted that Board visibility is an area where other boards often score low, she remarked that even if individual non-executive directors are known, the collective board's visibility might not be as apparent. The Employee Director suggested that increasing the visibility of the board as a collective could potentially improve this score in future IMatter surveys.
- 10.18. The Employee Director remarked that the questions relating to Performance Management should not be included in the survey as this is a confidential matter.
- 10.19. The Board noted the results of the report and confirmed that it provided the necessary assurance.
- 10.20. The Chair thanked Janice Gibson for the report, and she left the meeting.
- 10.21. Karen Wilson and Andrew Sturrock left the meeting
- 10.22. Shona Cowan re-joined the meeting
- 10c) Annual Climate Emergency and Sustainability Report NES/24/84 and Public Bodies Climate Change Duties Report 2023-24 (NES/24/84)**
- 10.23. The Chair invited Jim Boyle to introduce the report.
- 10.24. Jim Boyle reported that the Cover Report contains details for the 2 reports which were attached as appendices, noting that the Public Bodies Climate Change Duties Report is a return which all Public Bodies not just NHS Boards are required to submit annually.

- 10.25. Jim Boyle reported that both reports for 2023-24, which are subject to Board approval are required to be submitted to Scottish Government by the end of November 2024.
- 10.26. Jim Boyle advised that both reports have been sequenced through the Audit and Risk Committee for comments, and thanked those who provided comments, especially Gillian Mawdsley who is the Board Climate Change Champion, advising that the comments have been incorporated into the final report submitted today.
- 10.27. Jim Boyle reported that this is a long-term project however required swift progress recording and noted the funding details supplied in Appendix 2. He reported that there is improved data gathering on electricity usage and the report now includes home working carbon emissions, which highlight the significant impact of remote work compared to the previous year. This proxy estimation covers 75% of employees working from home, with further consideration to be given for future reports.
- 10.28. Jim Boyle reported that the NES Annual Climate Emergency and Sustainability Report outlines the approved strategy for the financial year, detailing steps on how to proceed and enhance specific work areas. He advised that the action plan supporting the strategy is highlighted as important, with regular updates and reports to assure the Board. Jim Boyle reported that the action plan has been distributed and will be discussed at future audit and risk committee meetings.
- 10.29. Jim Boyle informed the Board that NES supported Scotland Climate Week with various events, emphasising the importance of contributing to this national initiative. He mentioned plans to establish an ambassador network of volunteers focused on climate issues to raise awareness and improve NES's efforts in this area which will include climate and emergency topics for training and education programs as a key focus for NES.
- 10.30. The Chair thanked Jim Boyle for the report and opened for questions.
- 10.31. Gillian Mawdsley noted that the reports are for submitting to Scottish Government therefore recognised that these are the formal templates required, however asked if it would be possible to add in suggested timescales on the report. She asked if there would be feedback from Scottish Government on the reports.
- 10.32. Jim Boyle reported that feedback will be received from Scottish Government on the Annual Climate Emergency and Sustainability Report but not on the Public Bodies Climate Change Duties Report and advised that any feedback received will be reported to Audit and Risk Committee.
- 10.33. The Board approved the Annual Report for 2023/24 on the NHS Scotland Global Climate Emergency and Sustainable Development Policy and approved the submission of the 2023/24 Annual Report to the Scottish Government by 30 November 2024.

- 10.34. The Board approved the proposed Public Bodies Climate Change Duties Report and approved the submission of the 2023/24 Public Bodies Climate Change Duties Report to the Sustainable Scotland Network by 30 November 2024.

11. Governance Items

11a) Board Assurance Framework (NES/24/85)

- 11.1. The Chair advised that this paper can be taken as read and opened up for questions.
- 11.2. The Board commented on the differential in roles and responsibilities for the Whistleblowing Champion.
- 11.3. Della Thomas noted that this will be reviewed, and the report will be updated to reflect this.
- 11.4. The Chair thanked Della Thomas for the report
- 11.5. The Board approved the report.

11b) 2025-26 Board and Committee Meeting Dates (NES/24/86)

- 11.6. The Chair advised that this paper be taken as read and opened for questions.
- 11.7. The Board suggested that this report be scheduled earlier in the year next time to allow diary holds to be implemented avoiding diary clashes. **ACTION: LS**
- 11.8. The Board approved the report, and the Chair thanked Della Thomas for the report.

Significant issues to report from Standing Committees:

11a) Audit and Risk Committee (ARC) 3 October 2024

- 11.9. The Chair invited Jean Ford to provide a verbal update from the recent ARC held on 3 October 2024.
- 11.10. Jean Ford reported that 2 further Internal Audit Reports were received; these were Core Financial Controls which noted that significant assurance with minor improvements required and Workforce, HR and Finance data which was partial assurance with improvements required. ARC received detailed responses to the recommendations and are comfortable with the actions required.
- 11.11. The Chair thanked Jean Ford for the update, there were no questions from the Board.

11b) Staff Governance Committee (SGC) 7 November 2024

- 11.12. The Chair invited Lynnette Grieve to provide a verbal update from the recent SGC held on 7 November 2024.
- 11.13. Lynnette Grieve reported that items covered today were on the SGC Agenda, however noted the workforce report submitted by Karen Reid was more reflective of current position within HR and Workforce than previous reports received. The in-depth SGC monitoring report was paused with a request to focus on bullying, harassment and whistleblowing. The Letby Assurance paper was brought back to SGC for review and assurance.
- 11.14. There were no questions from the Board.

12. Items for Homologation or Noting

- 12.1. NES Standing Committee Minutes

12.1a) Audit and Risk Committee, 13 June 2024. (NES/24/87)

The minutes of this meeting were homologated by the Board.

12.1b) Staff Governance 22 August 2024. (NES/24/88)

The minutes of this meeting were homologated by the Board.

13. Items for Noting

NES Annual Review Presentation (NES/24/89)

14. Any Other Business

- 14.1. There were no other items of business for consideration at this meeting.

15. Date and Time of Next Meetings

- 15.1. The Chair announced the forthcoming meetings as Board Development Meeting with Scottish Social Services Council (SSSC): 27 November at 14:00, Board Development Meeting 23 January 2025 at 10:15, Public Board Meeting 06 February 2025 at 10.15, Private Board Meeting 06 February 2025 at 12:30
- 15.2. The Chair thanked everyone for their attendance and all papers presented.
- 15.3. The meeting closed at 13:25

Agenda Item 6

6 February 2025

Rolling Action List arising from Board meetings

Minute	Title	Action	Responsibility	Date required	Status and date of completion
Actions raised at Board meeting on 21 November 2024					
7.16	Chief Executive's Report	Provide an update on the recruitment progress of Associate Director of Human Resources (HR)	KR	06 Feb 2025	Complete An update has been added to the February CEO report.
7.17	Chief Executive's Report	Provide an update on organisational changes within the Executive Team	KR	06 Feb 2025	Complete Information added to CEO report to create alignment in respect of performance information.
7.22	Chief Executive's Report	Share hospital at home event details	KK/LS	28 Jan 2025	Complete An email with an update on the event and link was shared with members
7.25	Chief Executive's Report	Communicate good news story – the first community pharmacist in the UK credentialed at an advanced practice level	AS/NH	23 Jan 2025	Complete This story has been shared on NES website
7.31	Chief Executive's Report	For the next Chief Executive's Report, link Performance information within the report to Strategic Key Performance Indicators aligning with the SKPI quarterly report	KR/CBi	06 Feb 2025	Complete The February 2025 CEO report has been updated to reflect the requested change.

Minute	Title	Action	Responsibility	Date required	Status and date of completion
8.7	Anchors Strategic Plan – Update on Progress	A further update to be provided.	CBi	27 Jan 2025	Complete As part of the 25/26 National Planning ask, guidance has been issued to Boards in respect of anchors plans and priorities. Action to agree priorities is being taken forward along with colleagues in Scottish Government and this will be reflected in the draft Annual Delivery Plan (ADP) which will be presented for Board review and approval ahead of submission.
8.16	Engaging Stakeholders Report	Update the 'About Us' section of website with narrative on NES digital work	CBi	06 Feb 2025	Complete "About Us" section now updated.
8.18	Engaging Stakeholders Report	Discuss with COSLA colleagues how to strengthen the connection with NES and raise awareness of the work we do	KR	06 Feb 2025	Complete KR has raised this with COSLA and has a slot on a future COSLA Leaders agenda to discuss.
8.29	Engaging Stakeholders Report	Review and include justice colleagues in future surveys	NH	06 Feb 2025	Complete A cross section of stakeholders will be targeted in all future surveys.
9.27	Quarter 2 Strategic Risk Report	Review Strategic Risk 1	DL	Dec 2024	Complete Risk was reviewed by Risk Owner in December 2024. No change to risk rating has been made, but the controls and actions have been reviewed and updated where appropriate
9.29	Quarter 2 Strategic Risk Report	Add the topic of Wellbeing Matters to a future Board Development Session / Executive Team Presentation	GP/DT	06 Feb 2025	Complete The topic of Wellbeing Matters has been added to the 2025-26 Board Development rolling topic list. A date for this topic will be proposed in the Board Schedule of Business scheduled to 27 March 2025 Board.

Minute	Title	Action	Responsibility	Date required	Status and date of completion
9.36	Quarter 2 Delivery Report	Share successes of significant achievements provided in the report	ASh/NH	06 Feb 2025	Complete Q3 key achievements (and contact information) shared with Corporate Communications to be considered for potential internal / external comms. Consideration will be given to continue this process in future quarters.
9.40	Quarter 2 Delivery Report	Add summary to highlight overall performance in cover paper	ASh	06 Feb 2025	Complete 'Summary of Delivery Position' section added to Quarter 3 Delivery Report cover paper presented at Agenda Item 8a. This section will be included in all future quarterly delivery reports going forward.
9.49	Quarter 1 Strategic Key Performance Indicators: Board Performance Report 2024-25 Delivery Report	Performance Reports to be taken earlier in the agenda	DT	06 Feb 2025	Complete 06 February Board agenda reflects this change
10.4	Equality and Diversity Outcomes Mid-Year Report	Find out if the NHS in Scotland holds a national set of statistics about workforce diversity	KH	22 Nov 2024	Complete Katy Hetherington has clarified that this information is taken from individual Boards Equality and Diversity data and held in a central data base. She has advised that there is variation in the completeness of the data.
10.12	NES iMatter Staff Experience Report 2024	Share iMatter results in newsletters and Town Hall meetings	NH	29 Nov 2024	Complete An all-staff email was circulated on 29 Nov 2024
11.7	2026-27 Board and Committee Meeting Dates	Schedule this report earlier in the year to avoid diary clashes	DT	06 Feb 2025	Complete This change in scheduling has been reflected in the 2025-26 SoB which is sequenced to 27 March 2025 Board for approval.

Actions raised at Board meeting on 26 September 2024

Minute	Title	Action	Responsibility	Date required	Status and date of completion
8.6	Draft Transformation Route Map	Progress a 'Talking Heads' Co-Pilot update for staff	NHay	06 Feb 2025	Complete An AI webinar is scheduled for March 2025 which will incorporate Co-Pilot. A Talking Heads update for staff will follow by end of April 2025.
8.18	Draft Transformation Route Map	Suggested changes made by the Board be incorporated as appropriate and shared with the Board via correspondence	CBi/NH	tbc	In Progress Further changes have been requested and final version is still to be circulated when complete.
Actions raised at Board meeting on 15 August 2024					
7.36	Chief Executive's Report	Review the requirements for the Electronic Practice Assessment Document (ePad) update for Paramedics and progress the programme for roll out	KW	06 February 2025	In Progress This is specifically in relation to the development work for the ePADs (Electronic Practice Assessment Document) for paramedics and physiotherapists being subject to the NES Executive Team AOP digital prioritisation process where it has been rolled forward into the 25/26 process which has not completed so the timetable for commencement is not as yet agreed.
9.14	2020-2023 Corporate Parenting Triennial Progress Report	Plan for a version of this report to be prepared for children and young people	GP	06 February 2025	Complete Specialist Research Lead in Corporate Planning will develop a child friendly version of the Corporate Parenting report.

NES / LS / DT / CD
Jan 2025

NES/25/04
Agenda Item
February 2025



CHAIR'S REPORT

David Garbutt, Chair of NES Board

06 February 2025

1. Introduction

- 1.1. Since the last Board meeting on 21 November 2024, I have attended meetings and events, as well as internal NES meetings, Board and Standing Committees.
- 1.2. I welcomed George Valiotis our new non-exec who joined us on Monday 6th January 2025. George Valiotis brings over 25 years of leadership experience at the intersection of health, education, and human rights. He has extensive experience locally in Scotland, and internationally. You will find George's biography here - [George Valiotis | NHS Education for Scotland](#).
- 1.3. I also welcome Louise Harker, our new boardroom apprentice. Louise joined NES on 1 January 2025 and will be with us until 31 December 2025. Louise's Biography here - [Louise Harker | NHS Education for Scotland](#).

2. Summary of Engagement from 25th November 2024

- 2.1. On 25 November, I met with Ally Boyle, non-exec to discuss his new role as Planning and Performance Committee (PCC). We had a detailed discussion about how the new Committee will manage business and how it will take on the assurance role from TIC
- 2.2. I attended the Aspiring Chairs programme meeting, we discussed leadership, the role of the Chair, working with non-executive colleagues and ethical standards. We also discussed the potential for widening membership to other Boards and this is to be discussed with SG colleagues.
- 2.3. NES and Scottish Social Services Council (SSSC) held a Joint Board Development meeting in person on 27th November in our Westport Office. In this meeting, we discussed the SSSC NES Joint delivery plan, strategic alignment and shared objectives, and memorandum of understanding and joint delivery plan priority access.

3. Summary of Engagement December 2024

- 3.1. On the 4th of December I joined the Improving Wellbeing and Working Cultures Strategic Board meeting, we discussed the public and population health framework, racialised health, the remit of the board and an update on workforce specialist service and workforce development programme. I then attended the 2024 Scottish Government Post-Budget Meeting with NHS Chief Executives, Chairs and Directors of Finance and IJB Chief Officers and Chief Finance Officers.
- 3.2. I joined the Welcome Event for the UK [Boardroom Apprentice](#) system on the 9th December. There were a variety of speakers who spoke about the experience of recent boardroom apprentices, the discussed the background to the programme and the programme founder. Attendee's included

boardroom apprentices from the 2024 current programme and Current host boards.

- 3.3. On the 11th December, I attended the NHS Chairs Meeting with the Cabinet Secretary, finance and budget (2024/25) and Programme for Government and Health and Care Priorities were on the agenda. The importance of the Reform agenda was stressed to all participants.

4. Summary of Engagement January 2025

- 4.1. I attended the SG/NES Strategic Sponsorship Meeting on January 8th. We discussed the budget, savings, and NES priorities This continues to be an effective forum for involving our sponsor team

I then had an introductory meeting with Lee Savarrio, our new [Director of Dental](#) who joined our organisation on 1st January 2025. I have asked Lee to meet as many of the Board members as he can and hope you can all get an opportunity to speak to him in person.

- 4.2. On the 14th Jan I had an induction meeting with George Valiotis, NES's new non-executive Director. George has a wide level of experience in Scotland and throughout Europe. I am sure we will all benefit from his expertise as we move forward/

- 4.3. I met with Simon Edgar, Director of Medical Education & Associate Medical Director for NHS Lothian to discuss the Scottish landscape. Simon was instrumental in supporting the work I undertook in relation to Doctors Wellbeing and as a result of that and Prof. Michael West's work on wellbeing Simon introduced many of the recommendations in NHS Lothian.

- 4.4. I attended the NHS Board Chairs Improving Population Health Group (IPHG) and the Board Chief Executives (BCE) Population Health Group meeting on January 16th. The agenda included discussions on the Population Health Framework, Health and Social Care Reform, and emerging priorities from each group.

**David Garbutt
Chair**

Chief Executive's Report
Professor Karen Reid, Chief Executive



Date: 06 February 2025

1. Introduction

- a) The agenda for our 6 February 2025 meeting will consider one strategic item: Strategic Risks and Risk Appetite.
- b) The Board will also receive two annual governance items for review and approval, including the Corporate Governance Package and Counter Fraud Strategy. The Strategy shows the work underway in NES, which supports the Strategy to Combat Financial Crime in NHS Scotland, including the work required to support compliance against the Counter Fraud Standard.
- c) The 2024-25 Quarter 3 Performance reports relating to Strategic Risk, Finance, and Performance will be reviewed and approved along with our Quarter 2 Strategic Key Performance Indicator Report.

2. Updates and Announcements

2.1. UK and Scottish COVID-19 Public Inquiries

- a) We continue to monitor the progress of the UK and Scottish Inquiries. Since the last report to the Board, we have not received any specific requests for information.
- b) The Scottish COVID-19 Inquiry has published the dates and themes of two sets of impact hearings which will take place in the first half of 2025. These are Worship and Life Events (29 April-2 May 2025) and Equalities and Human Rights (10-20 June 2025).
- c) The UK COVID-19 Inquiry are presently covering [Module 4 “Vaccines and therapeutics”](#).

2.2. National Care Services (NCS)

- a) On 13 November 2024 Minister for Social Care, Mental Wellbeing and Sport Maree Todd wrote to the Health, Social Care and Sport Committee, confirming the Scottish Government would not be seeking to start Stage 2 consideration of the National Care Service (Scotland) Bill on Tuesday 26 November 2024 as planned, and that it would work with the committee and parliamentary bureau to agree a revised timetable for 2025. She noted that the Scottish Government remained committed to plans for an NCS and would carefully consider the views of the committee, stakeholders, members of the public and political parties.
- b) On 21 November 2024, Ms Todd gave a statement to the Scottish Parliament. In it, she covered why the reform of social care is necessary, what the Scottish Government is currently doing to drive improvement, why the NCS is essential to achieving the change that people want and need, and why Stage 2 was paused.
- c) On 26 November 2024, Ms Todd and her officials gave evidence to the Health, Social Care, and Sport Committee. The focus of the questioning covered areas such as spending to date, opposition to the Bill, measures to address immediate concerns,

amendment of existing legislation, national insurance increase, accountability and the relationship with COSLA, integration, ethical commissioning, co-design, National Social Work Agency, and Anne's Law.

- d) Minister for Social Care, Mental Wellbeing and Sport, Ms Todd addressed Parliament on Thursday 23rd January to outline the future of the National Care Service (NCS). She advised of her intention to remove Part 1 of the Bill and to proceed with parts 2 and 3 only. This removes the need for structural reform and, rather than creating a new statutory NCS Board, the intention is to establish an Advisory Board with membership made up of unpaid carers, people who access care, NHS, council, and integration joint board leaders, the third sector and representatives from the Scottish Government.
- e) Ms Todd advised that the Scottish Government remains committed to the ambitions of the NCS and will proceed with plans to introduce Anne's Law, to embed rights to breaks from caring for unpaid carers and to improve data sharing across the health and social care sector, through primary legislation.
- f) The Minister intends that the new Advisory Board will ensure that targeted support is provided where standards are not being met and it will oversee progress in respect of key policy areas, such as GIRFE, the carers and dementia strategies and national, joint missions on delayed discharge and drug deaths.
- g) In her statement to parliament Ms Todd confirmed that a Charter of Right will be published and that the review of the National Health and Social Care Standards will progress. She reaffirmed the Scottish Government's commitment to overhauling eligibility criteria and for developing standards and guidance to support ethical commissioning. In respect of the workforce, Ms Todd advised that there would be a clear focus on national and local planning, high quality learning, development and leadership for social care staff.

2.3. NES Ministerial Annual Review

a) NES Annual Review – 15 November 2024

The NES Ministerial Annual Review was led by Ms Maree Todd MSP, Minister for Social Care, Mental Wellbeing, and Sport. NES Chair Dr David Garbutt and Chief Executive Professor Karen Reid presented an overview of performance, key developments, and upcoming plans. The review served as a platform to highlight the organisation's significant achievements from the past year and to discuss the future priorities for NES.

You can view [NES's Annual Review Presentation](#) along with a [background briefing](#) here.

2.4. Announcements

a) NES Board Room Apprentice

We are delighted to welcome Louise Harker, Board Room Apprentice. Louise joined NES on 1 January 2025 and will remain with us until 31 December 2025.

Louise joins the Board as part of the Boardroom Apprentice Programme, a 12-month

learning, development, and placement programme that enables a diversity of new people to come forward to learn how to give their time and share their skills with third— and public-sector boards.

b) New Board Appointment

I am delighted to welcome George Valiotis to the NES Board as a Non Executive Director. George joined NES on 6 January 2025 and brings over 25 years of leadership experience in health, education, and human rights at national and international levels.

c) Retirement of Board Secretary

I would like to extend my heartfelt thanks to Della Thomas, our Board Secretary & Principal Lead - Corporate Governance. Della will be retiring from her role in April. Della joined NES in April 2020 and has provided exceptional service, dedication, and professionalism to the Chair, myself, the NES Board and Committees, the Executive Team and many more colleagues. She has contributed significantly to our success and NES's achievement of high governance standards. I wish her all the best in her well deserved retirement.

d) New Year Honours list recognises two NES colleagues

I would like to acknowledge and congratulate the well deserved recognition of Ruth Robertson and Dr Pauline Wilson. Both have been recognised in the New Year Honours List 2025. Ruth, former Head of Programme, Health Protection, Nursing Midwifery and Allied Health Profession Directorate, has been awarded a Member of the Order of the British Empire (MBE) for services to Public Health and Health Protection in Scotland.

Pauline Wilson, Consultant Physician, NHS Shetland and NES Associate Postgraduate Dean for Remote and Rural Credentialing, has been awarded an Officer of the Order of the British Empire (OBE) for her outstanding contributions to medicine.

e) Technology honours in OpenUK New Year Honours List

A further acknowledgement and congratulations to Jack Gilmore, Senior Developer with NES Technology Service and co founder of [Open Data Scotland](#) who has been recognised for his contribution to the open technology ecosystem in the [OpenUK New Year Honours List](#). OpenUK is the industry body for the business of open technology in the UK. It spans software, hardware, data, standards and Artificial Intelligence.

f) Retirement of Deputy Director of NMAHP

Maria Pollard, Deputy Director of NMAHP, recently announced that she will be retiring in the summer of 2025.

g) NES Annual Conference 2025

The dates for the NES annual conference have been confirmed. It will be held online over two days on 24 and 25 April 2025. This year's theme is Learning for Change: Tackling Health Inequity through Education and Workplace Learning.

The NES Annual Conference is accessible to professionals across health and social care who are interested in education and training, workforce development, and digital solutions.

Further details can be found here [NES Annual Conference](#) .

h) General Pharmaceutical Council (GPhC), Accreditation of the pharmacy FTY programme

NES are delighted to be accredited by the [General Pharmaceutical Council](#) (GPhC). The NES Pharmacy Foundation Training Year (FTY) programmes must ensure that they meet the required standards. The GPhC is the statutory regulator for pharmacists and pharmacy technicians in Great Britain, and this accreditation underscores the quality and compliance of our programs.

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.



4. Performance - how we are performing as an organisation

a) Since the November Board update, we have continued to perform well in our corporate delivery with 150 (84.5%) deliverables within the 2024/25 Annual Delivery Plan being completed or on target to be completed in line with the milestones set. A further 22 (12%) deliverables are progressing with minor delays and five (3%) are experiencing significant delay. One deliverable has been closed during Quarter 3. Out of the 27 deliverables experiencing delays, four of these are due to funding issues that are outwith NES’s control. The remaining delays are broadly impacted by resourcing or external factors such as changes to or the timeliness of agreeing priorities and the majority of delayed deliverables are projecting an improved position at year-end.

- b) Performance in respect of our strategic key performance indicators has also been positive, with only 6 indicators reporting as red or amber during the quarter. We have continued to perform well in the majority of our performance measures, and have mitigating actions identified to improve our position in respect of benefits realisation from corporate change which will move from amber performance to green. In partnerships, we are continuing to perform well in respect of workforce data and have reported further increases in the numbers of education, research and strategic collaborations as well as innovation initiatives invested in, in collaboration with other stakeholder organisations. Our net promoter score remains red at –15 however mitigating actions are progressing in line with the actions approved by Board at the November 2024 meeting.
- c) In People we continue to perform well in respect of sickness absence, pay equality, staff retention and staff experience. The percentage of NES staff who report having a disability continues to be below the target set. The majority of our learner KPIs continue to report as green with the exception of the Medical Funded Trainee Placements – Vacancy Rate which is reporting as red for the first time with concerns highlighted regarding recruitment to geriatric care, medical and clinical oncology.
- d) Overall, there have been a number of achievements during Q3 that support the delivery of the [NES 2023-26 Strategy](#) and align directly with our strategic themes ([People, Partnerships and Performance](#)), many of which are highlighted within this report.
- e) Further details on organisational performance are provided in the Delivery and SKPI Reports for this reporting period.

4.1. Climate Change Emergency and Sustainability (CES)

- a) The Audit and Risk Committee recently received a report on the Climate Emergency and Sustainability work that has been taking place recently. In particular, the Action Plan that has been produced and updated was again presented to the Committee in detail. This Action Plan will continue to be updated going forward, with a particular focus on the work to embed awareness of this policy area in the education and training programmes that NES delivers. The report also noted that there have been no queries back from the Scottish Government Sustainable Scotland Network on the Annual Report and the Public Bodies Climate Change Duties Report that were submitted to those respective bodies at the end of November 2024.

Finally the report noted the formation of the NES Ambassador Network for Climate Emergency & Sustainability, which has met on two occasions, and which comprises representatives from across all directorates of NES

- b) **Online module on climate change and sustainability for all healthcare staff**
The Deputy Lead Dean/ Director is exploring the development of an online module on climate change and sustainability for all healthcare staff. Initially, the module will be informed by reviewing doctors' curricular needs, but it will be done in conjunction with NES Climate Emergency Sustainability colleagues. This initiative will inform and support future multi-professional offers.

4.3 Planning and Corporate Governance Directorate

a) Communication and Engagement

Work to progress NES's withdrawal from X/Twitter continues and is being supported by the development of a unified branding strategy, criteria and guidance for social media management, and an evaluation framework for monitoring account activity to help us better understand reach and impact. The Corporate Communications team are also taking forward actions approved by the Board when considering the Stakeholder Survey Report at the November 2024 meeting. This includes refreshing the NES Corporate Communication Action Plan, mapping current capacity and capability across the organisation to create a unified approach to communication and marketing and establishing a monitoring and evaluation framework. A further update on progress in these areas will be presented to Board in due course.

b) Planning and Performance Committee

The 26 September 2024 Board approved dissolving the Technology and Information Committee from 31 March 2025 and the creation of the Planning and Performance Committee as of 1 April 2025. The Board received an outline of the proposed role and remit of the Planning and Performance Committee and the membership. Further work has been ongoing to develop draft Terms of Reference for the Committee. The Committee met in developmental form to discuss their role and remit on 20 January 2025.

c) 2025/26 Operational Planning and Annual Delivery Plan development

The 2025/26 operational planning process continues to progress. 2025/26 review meetings were successfully held with all NES directorates during December 2024. Working closely with NES Finance colleagues as part of our integrated 2025/26 operational and financial planning approach, work is now underway to develop the 2025/26 NES Annual Delivery Plan (ADP) in line with Scottish Government (SG) priorities and timelines. The draft ADP must be submitted by 27 January 2025.

SG issued a joint 2025-26 Financial & Delivery commissioning letter and associated guidance to NHS Scotland (NHSS) Health Boards on 28 November 2024. The core aim is to support Boards' Three-Year Delivery Plans with detailed actions for 2025/26 which are aligned to both Boards' Three-Year Financial Plans and ministerial priorities. The commissioning letter highlighted the ongoing financial and operational challenge within NHSS and the importance of NHSS Boards forward planning collaboratively. The letter also referenced the recent publication of a new SG [Directors Letter](#) which sets out a renewed approach to population health based planning across NHS Scotland and associated actions for NHSS Boards to ensure that planning for services is delivered in a collaborative and coherent way.

The SG NHS Board Delivery Planning guidance sets out the 2025/26 planning principles and context and also includes priorities for each territorial and national Board. In relation to NES specifically, the guidance asks that 2025/26 NES ADP includes reference to the following:

- Acting as the lead education and training body and a national health board with

NHS Scotland

- Developing and delivering education and training for the health and social care sector and other public bodies.
- Taking a Scotland-wide role in undergraduate, postgraduate and continuing professional development.

The guidance also asks NES to frame its ADP within the following seven priorities:

- Education and Training
- Workforce Development
- Digital
- Data
- Innovation and Research
- Best Value
- Anchors Institutions

SG have aligned their financial and planning delivery timelines so Boards have been asked to submit both their draft ADPs and Financial Plans by 27 January 2025 and final drafts by 17 March 2025. SG Health Planning colleagues will then meet with Boards individually following their draft ADP submission to provide feedback.

d) **2025/26 Workforce Planning**

As part of the ongoing alignment of workforce, delivery and financial planning processes, SG also issued a [DL](#) regarding 2025/26 workforce planning in December 2024. In recognition of current workload pressures facing the health and social care system, this DL supersedes a previous [DL in 2022](#) setting out a requirement for Three Year Workforce Plans. For 2025/26, SG have asked NHS Boards and Health and Social Care Partnerships to complete a reporting template that will provide an overarching view of workforce planning activity and key messages. Following approval via internal Board governance arrangements, Boards are asked to submit their completed workforce planning templates to SG by 17 March 2025.

e) **Quarter 3 Complaints**

Three complaints and one expression of concern about policy were received in quarter three. Two of these complaints have been resolved (one upheld, one not upheld), and recommendations for improving processes and practice were made in each case. One further complaint and the expression of concern remain under investigation.

The small number of complaints received in quarter 3 is slightly fewer than the average within NES.

f) **Freedom of Information (FOI)**

In quarter 3 of 2024-25, NES received a total of 32 FOI requests in comparison to quarter three of 2023-24, when 25 requests were received. This equates to a 28% increase for the same period. 100% of responses met the statutory timescales of 20 working days.

During this period, two requests for internal reviews were received. The first upheld the original decision, and the second is still under review.

In quarter three, NES Technology Services received the highest number of FOI requests, followed by Planning & Corporate Resources.

A paper on publishing FOI responses on the Intranet/Internet, including further information and signposting for FOI requests, is currently in development.

4.4 Medical Directorate including Health Care Science

a) **MARQA review 2023/24 – published**

The Medical Appraisal and Revalidation Quality Assurance (MARQA) review was undertaken by NES, as sponsored by Scottish Government, looking at appraisal completion and revalidation rates across all designated bodies in Scotland. This is the first review since the pandemic and so a “light touch” approach was adopted. The report was presented to the national stakeholders group (Revalidation Advisory Board Scotland) on 12 November 2024 and the finalised report has been now published on the Medical Appraisal Scotland website: <https://www.appraisal.nes.scot.nhs.uk/our-work/marqa-reports/2023-2024-review/>

Overall, both the review panel and the stakeholders group were pleased at the recommencing of the review and noted that most boards maintained a high level of appraisal completion rate (92%). However, some areas have struggled with appraiser capacity which meant (despite the high completion rate) a number of doctors in Scotland did not have an annual appraisal. The Scottish CMO has since written to all designated bodies supporting the panel’s recommendations of:

- Ensure appraisal completion rate is not lower than 90% for both primary and secondary care (not combined)
- Return to a fuller review following this year’s light touch approach
- Continue to support appraisals for Clinical Fellows
- Continued support for appraisers in Scotland through NES Appraiser training programme

b) **SOAR redesign project**

In the summer of 2022, Scottish Government commissioned a review into Scottish Online Appraisal Resource (SOAR) - an online system developed and maintained by NES used by doctors working in Scotland for their medical appraisal and revalidation purposes to ensure it is still up-to-date and fit for use. An external developer undertook the review through an all user survey and a series of workshops with different user groups (e.g. appraisees, appraisers, Appraisal Leads, Admin teams etc). The review concluded that whilst SOAR was still fit for purpose, improvements to the appraisee user experience was needed.

Scottish Government funding was provided and work commenced in September 2023. We have been working closely with external and internal developers over the past year and the changes, which includes the most recent GMC Good Medical Practice 2024 updates, have now been deployed as of 28 January 2025. A series of lunch time webinar demos have been organised for users to drop in and ask questions about the new setup; and the [SOAR user guides](#) and [Medical Appraisal toolkit](#) have been updated to reflect the changes.

4.5 Nursing, Midwifery & Allied Health Professions (NMAHP)

a) Self-Assessment of Organisational Readiness Tool (SORT)

The NMAHP Directorate successfully trialed the self-assessment of organisational readiness tool (SORT) tool to assess research readiness, identifying areas of excellent practice in the directorate such as robust quality assurance processes, supportive research culture, and embedding evaluation and research into projects from the outset. This trial has provided valuable insights into both our strengths and areas for development, laying a strong foundation for further growth.

Encouraged by these outcomes, the SORT tool will now be rolled out across all NHS Boards in Scotland as a standard measure of research progress and performance for NMAHPs. Our directorate will continue to use this tool as a key measure to drive improvements, build on existing achievements, and ensure alignment with key research performance indicators.

4.6 NES Corporate Improvement Programme (CIP)

- a) **The Ways of Working & Property project** is progressing well having delivered all objectives except for the Glasgow office move due to the contractor administration issue. The project team will continue to meet and report to the Transformation Group until the completion of the Glasgow relocation. Plans are being developed for clear communication with staff about the timelines and their roles in the Glasgow move, supported by line manager information sessions. The Inverness office refurbishment is on track for Autumn completion.

The NHS Lothian team has relocated to the Westport office's second floor, with full staff transition expected by early 2025.

b) Learning & Education Quality System (LEQS)

The Learning & Education Quality System (LEQS) programme is progressing as planned. The Quality Framework for Practice Learning is currently under external consultation, with key policy and framework developments nearing completion. The integration of Strategic Key Performance Indicators (SKPIs) into Quality Management, Assurance, and Enhancement (QMAE) processes is moving into the testing and implementation phase. Operating statements and a structured approach to implementation have been approved and are set to commence in Quarter 4. This implementation underscores NES's commitment to providing high-quality, sustainable education and training, ensuring positive outcomes for learners and trainees.

- c) **The Business Transformation Programme** is advancing with active projects in Meetings Management and Operational & Financial Planning Reform. The Meetings Management project is testing CoPilot usage and refining meeting classification frameworks. Operational and Financial Planning has commenced the 2025/26 cycle, with lessons learned from the current cycle being integrated into ongoing improvements.

- d) **HR Transformation** is making significant progress, with six Standard Operating Procedures signed off and another twelve in development. The Stabilisation &

Recovery workstream has been extended into January 2025, focusing on workflow and SOP clarity. Recent HR Operating Model workshops have informed a revised project plan, aligning short-term practical actions with long-term aspirations.

- e) The newly approved **Digital Capability & Confidence Programme**, launched in October and is currently in the scoping phase. Detailed resource and delivery planning are underway, with initial engagement efforts identifying directorate priorities and quick wins. The programme aims to enhance digital workforce capabilities and build confidence in digital tools and processes across the NES workforce.

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

- a) The **Turas Refresh Programme** which is being renamed as “Digital Learning Infrastructure” continues to navigate financial uncertainties. Although funding from the Scottish Government’s Workforce Directorate is unavailable for the immediate future, the programme is exploring alternative investment cases. Prioritisation work continues to ensure that the programme can progress as much as is feasible until funding solutions are clearer.
- b) **NHS Scotland Academy’s National Ultrasound Training Programme (NUTP)** has been able to expand. The acquisition of an additional temporary scanning room at NHS Golden Jubilee and the recruitment of specialist skilled staff, has enabled ultrasound exams provided to now include a range of musculoskeletal (MSK), head and neck, and trans-vaginal (TV) gynaecology examinations.

4.8 NES Technology Service (NTS)

a) **Digital Front Door**

The [Digital Front Door](#) is a key commitment in the Programme for Government 2024/2025 as part of the Digital Health and Care Strategy to deliver a platform for people to access their health and care information and health and care services, directly. It will allow people to access, self-manage, and contribute to their own health and care information online. The FM announced on 27 January that he is seeking to bring forward delivery of the Digital Front Door Programme to December 2025.

To support progress, NES Technology Service presented a proposed scope for the initial release of Digital Front Door in Lanarkshire to the DFD Programme Board, which was approved. Work is underway to deliver the agreed scope and refine the delivery plan in more detail. The Outline Business Case (OBC) for Digital Front Door is progressing well, with the external partner (BJSS - Business Technology Consultancy). It will be finalised for wider distribution and review, initially to the Digital Front Door Programme Board, by the end of January 2025. Conversations are ongoing with Scottish Government around funding for 2025/2026 to allow full delivery of the agreed initial release.

4.9 Pharmacy

a) **General Pharmaceutical Council Registration Assessment**

In November 2024 64% of trainee pharmacist from Scotland successfully passed the General Pharmaceutical Council (GPhC) Registration Assessment. This compares to a national pass rate of 58%

4.10 Social Care Directorate

a) Scottish Learning and Improvement Framework (SLIF)

The Director of Social Care has been invited to Co-Chair the Scottish Learning and Improvement Framework (SLIF) on behalf of NHS Board Chief Executives. The SLIF has been developed following a recommendation in the Independent Review of Adult Social Care. It sets out the vision and priorities for improvement in Adult Social Care Support, Social Work and Community Health that have been agreed across the system. The SLIF aims to support a move from a predominant focus on scrutiny and measuring performance to an approach that builds improvement and quality management into the system.

b) Joint Social Services Taskforce

The Director of Social Care continues representing NES on the Joint Social Services Taskforce (JSST). The key objective of which is to accelerate progress on workforce improvement activity that will result in positive, tangible changes for the workforces. Having identified a number of different actions and developments that would help address the skills and qualifications deficit impacting on the social care workforce, the Social Care Directorate is developing these into proposals for consideration by the JSST at the end of January.

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

5.1 Chief Executive Update

- a) I enjoy meeting with a range of NES staff to discuss key NES programmes and initiatives or as part of their induction to NES. Since the last Board meeting, I have continued to connect with NES staff to communicate key strategic messages through all-staff webinars.
- b) I was delighted to lead and engage with staff at the most recent staff engagement, the all staff key achievements webinar on 19 December 2024, which 358 colleagues attended. It was lovely for the Chair and I to thank staff and collectively celebrate NES's accomplishments over the year. Colleagues had the opportunity to showcase their directorates and teams' achievements and contributions. The webinar highlighted NES's significant impact in supporting the health and social care workforce, thereby improving lives and outcomes.
- c) I recently made some changes to my Executive Team, which now has the Director of NHS Scotland Academy, Learning and Innovation, and the Director of Planning and Performance reporting directly to me.
- d) There have been some changes to directorates to create a more streamlined NES approach for various internal and external activities. Laura Allison, Associate Director, has moved to the Nursing, Midwifery and Allied Health Professions Directorate .

Meanwhile, Principal Lead for Equality, Diversity, and Human Rights, Katy Herrington has transferred to the Planning and Performance Directorate.

- e) I am pleased to announce the recruitment process for the Director of People and Culture position is underway. The post was advertised on 13 January 2024 and will close on 4 February 2025. The interview process will progress in mid February, with final stage interviews scheduled for 7 March 2025. The Director of People and Culture will play a crucial role in providing executive and strategic leadership from a professional workforce perspective, to the Board, Chief Executive and senior managers of both NES and the broader sector.
- f) I am delighted to announce that following the recent recruitment of the new Associate Director for HR, Laura Liddle, currently Associate Director of HR at Healthcare Improvement Scotland who will join us in March 2025. Laura brings significant in depth knowledge and experience in NHS HR systems and processes.

5.2 Dental, including Optometry

a) Professional Development Award (PDA) in Dental Practice Management (SCQF 8)

The very first cohort of learners from across Scotland have undertaken the 11 month programme and have successfully achieved the PDA in Dental Practice Management, which is awarded by Scottish Qualifications Authority (SQA). The qualification was developed in partnership with key stakeholders in 2023. The programme is delivered online via MS Teams and consists of attending 10 online sessions and completing a range of assessments. Learner feedback has been very positive, with over 80% of the learners rating their overall learning experience of this programme 80% or above (KPI 12)

b) The MINDSET UK

The MINDSET U.K. project has brought together experts in dentistry, research and mental health from the NES Dental Clinical Effectiveness research team and other UK healthcare and university partners to evaluate current levels of burnout, depressed mood, experienced trauma and preparedness to provide quality care in dental teams. Findings from the UK-wide survey conducted with the whole dental team in 2023 are being published as a series of papers in the BDJ under a new online special collection around dentistry and mental health: [New Mental Health Collection launched online | British Dental Journal](#)

The first paper is now available: [Bearing the brunt: an exploration of the mental health and wellbeing of dental practice managers and receptionists in UK dental workplaces | British Dental Journal](#) The first paper has had some coverage in Dental Tribune International [Study shows psychosocial distress among administrative staff](#) and an interview with the authors is coming out in BDJ Team in February. There have been 1579 article accesses of this paper since publication in December 2024.

The study provides a robust UK wide evidence base and baseline data around the levels of psychosocial distress in dental teams, upon which policy makers and dental leaders can develop strategy and interventions. It is also having impact in terms of awareness raising within the members of the dental professions and more widely, with the work being recently presented at the Canmore Trust Wellbeing Conference

(November 2024, Glasgow) and other conferences planned for 2025. Based on the findings the project team recommend that solutions to the issues identified require change not only in support of individual behaviour, but at a system level, identifying and modifying those conditions which create an environment that promotes burnout and depression. In particular the project team stress the urgent need for a UK wide approach to reform the system within which NHS dentistry is delivered to improve the psychological safety of whole dental team.

c) Mobile Skills Unit

The Optometry team saw a very successful catalogue of delivery on the Mobile Skills Unit over two weeks in November, in Inverness. This project saw collaboration across our Postgraduate Qualifications, Support, and Placement & Skills teams, who delivered sessions supporting practitioners working in the National Community Glaucoma Service, those undertaking the NES Glaucoma Award Training or their Independent Prescribing qualification placements, as well as those being onboarded into our Simulation Faculty. The Undergraduate Foundation Training Year team brought in our new partners from the University of Highlands and Islands, demonstrating to them our unique use of simulation equipment for placement delivery.

NES also hosted a visit for staff from the Highland National Treatment Centre. We were joined by colleagues from Scottish Government who attended multiple sessions and were very impressed with our state of the art simulation equipment and implementing this in simulated patient episodes. Optometrists in the area were delighted to have the opportunity for local face to face training. We continue to look for innovative solutions to solve placement provision in the rural and island settings to better support these communities

d) Continuing Professional Development (CPD)

Optometry have a CPD delivery schedule for quarter 4 of 2024/2025. This includes "Prescribing: Confidence, Competence and Care CPD", "Opening your eyes to vascular health CPD" and we are repeating due to popularity the, "Paediatric Skills Day". A suite of complementary webinars, a Return to Work course, as well as several online Peer Discussions are also being delivered as part of the CPD programme. These face-to-face CPD days and online resources support the profession in their non-medical prescribing and clinical decision making in the community, aiming to reduce pressures on other resources such as GP practices and the Hospital Eye Service.

e) Community Glaucoma Service

January 2025 has seen 20 optometrists start cohort 4 of the [NES Glaucoma Award Training](#) (NESGAT). This training is to support practitioners enrolling in the Community Glaucoma Service (CGS), which facilitates movement of care from busy secondary care hospitals into primary care community practices. Ongoing Community Glaucoma Service CPD support, for those delivering the service to the people of Scotland, culminates in our end of year, annual face to face Glaucoma Day in March 2025. This provides opportunities for excellent education and peer support for those delivering the service.

5.3 Medical including Health Care Science

Medical

a) **NES Mobile Skills Unit (MSU)**

The mobile skills unit delivered its first simulation training session for care home staff. Staff and carers at Rubislaw Park care home were the first to experience simulation training aboard the MSU which provided a 3 day learning experience for carers, senior carers and team leaders. This was a collaborative effort between and [NES Clinical Skills Managed Educational Network](#) (CSMEN), [NHS Scotland Academy](#), NHS Grampian, Rubislaw Park Care Home and Aberdeen University. Rubislaw Park Care home recognised the need for staff development in clinical skills to enable staff to deliver safe, patient focussed care. The specific skills sessions covered many topics relevant to care home nursing. Supporting skills development and training helps retain staff and enhances the lives and wellbeing of care home residents.

Training sessions covered:

- Signs of deterioration and the Restore Tool
- Simulated scenarios
- Communication skills – Situation, Background, Assessment, Recommendation, Decision (SBARD)
- Venepuncture and blood sugar
- Cannulation subcutaneous (s/c) injections and intramuscular (IM) injections
- Wound care and dressings
- CPR, Automated External Defibrillator (AED), Basics airway manoeuvres and choking.

Feedback from a participants:

- *“Excellent, informative and immersive training session. Refreshing skills and learning most recent gold standard in practice. Fun and relaxing environment, encouraging informal discussion between professionals. Multidisciplinary working, fantastic to have SAS participation.”*
- *“Fabulous immersive training, allowing me to experience sensory deprivation and tremor, giving a more empathetic understanding to my daily working practice.”*

b) **The Scotland Foundation School**

The Scotland Foundation School is expanding by 23% between 2024 and 2026. This expansion is to accommodate the increased Scotland medical school output as part of the Programme for Government. The Scotland Foundation Team are using this time of expansion to develop, in collaboration with our territorial health board partners, a number of innovative longer placements in the two year Foundation Programme, doubling the length of rotation length from 4 months to 8 months. A first in the UK, the intention aligns with the Medical Education Reform programme and seeks to improve the Foundation experience for these doctors and their trainers, support clinical service continuity at changeover dates bridging F1 and F2, while maintaining curriculum delivery across the 2 year programme. Four models are being piloted and will be evaluated, including pure 3 x 8 month and hybrid rotations, with nearly 12% of the August 2025 Foundation Programme posts subject to this pilot.

c) Rural and Remote Credential

The Credential in Rural and Remote Health (Unscheduled and Urgent Care) addresses healthcare challenges in remote communities by equipping doctors with specialised skills. Developed by NES and GMC-approved, the credential supports flexible career paths via two routes: a supervised learner route and a recognition route for experienced doctors. It ensures consistent, high quality care in remote settings, enhancing workforce stability and career credibility. Seven doctors were awarded the credential in 2024, marking a milestone in rural healthcare. The programme continues to evolve, onboarding new candidates, refining pathways, and evaluating its impact on communities, employers, and workforce planning. Dr Pauline Wilson, Associate Postgraduate Dean, who has been involved in taking the credential through the GMC approvals processes to delivery, was awarded an OBE in the New Year Honours List for 2025.

d) National Centre for Remote and Rural Health and Care

The Community Training Hub Pilot is being developed to support increased multidisciplinary training within rural community practices. Work is progressing at pace in conjunction with stakeholders from GP practices, NES Medicine, NMAHP, and Pharmacy. The online site is currently being reviewed by stakeholders with the aim of the site going live in March 2025.

The Rural GP Dispensing Practices Training Development programme of work is making good progress and will produce priority online training resources to be hosted on TURAS by March 2025. The training package will be for all staff involved in dispensing medicines within Rural GP Practices.

A second cohort of fifteen advanced practitioners has been funded to undertake the unique Rural Advanced Practice (RAP) MSc programme from September 2024. This brings the total number of practitioners being supported through this NES programme to 30.

e) Supporting Medical Appraisers

In 2024/25, we have run 11 new appraiser courses, attended by 74 doctors, and 126 appraisers have attended 15 refresher appraiser sessions. A half day Appraisers conference is scheduled for the afternoon of 3 February. The Scottish Medical Appraisers conference has been organised with the primary goal of supporting the development of our appraiser workforce in Scotland. The conference will serve as an invaluable learning opportunity for the appraisers, enabling them to delve into various situations and approaches through small group case-based discussions. This interactive format aims to enhance their appraisal skills and contribute significantly to their continuous professional development.

Furthermore, the conference will facilitate networking among the attendees, allowing them to share experiences and best practices, thereby fostering a collaborative learning environment. By attending this virtual conference, appraisers will refine their skills and gain insights that will help them perform their roles more effectively.

Healthcare Science

a) Sarah Smith, Associate Director, Health Care Science (HCS)

We are pleased to confirm that Sarah joined NES on 18 November 2024. HCS now sits within the Medical Directorate. This brings several directorate interests together, particularly in the area of Diagnostics, and will facilitate a streamlined NES approach in a number of internal and external-facing activities.

b) Co-funding model

In 2023-2024, six trainee clinical scientists were commissioned utilising a co-funding model with service to maximise the training post numbers. Further career development funds were provided to 27 Postgraduate practitioners and 25 Biomedical Science support worker staff.

c) Train the Trainer

A series of consolidation online workshops were delivered throughout the year including Train the Trainer; Training in Difficulty and Early Years Leadership with 139 attendees. These workshops are underpinned by elearning modules. In addition to this, 3654 learners accessed our CPD resources available on Turas Learn, with 4162 eLearning modules completed.

5.4 NES Technology Service (NTS)

a) Digital Dermatology Pathway.

NES is delighted to be involved in a new national digital dermatology pathway that allows faster diagnosis and assessment of skin conditions. Scottish patients will benefit from the new national digital dermatology pathway. This service is provided through a secure mobile app. The National Digital Dermatology pathway is one of the first innovations to be approved for national rollout through the Accelerated National Innovation Adoption (ANIA). ANIA is a collaborative venture coordinated by the National Centre for Sustainable Delivery (CfSD) and involves NHS National Services Scotland, Healthcare Improvement Scotland, Public Health Scotland, and NHS Education for Scotland.

b) Turas Learning Record Store and MyLearning Integration

The Scottish Social Services Council provides the MyLearning app, which enables learners to log learning activities. Turas Learning Record Store holds the learning records of all learning activities undertaken on Turas Learn and LearnPro. Integrating the MyLearning app with Turas Learning Record Store would allow people to view all their learning activities in one place and help reduce duplication of activities. We have concluded work on a pilot to integrate the SSSC MyLearning app with the Turas Learning Record Store and were able to pull learning records from the Turas Learning Record Store and for this to be displayed in the MyLearning app. This is important in the development of the National Induction Framework that can help reduce the problem of duplicated induction activities.

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

a) Medical Associate Professions (MAPs)

The Medical Associate Professions (MAPs) workstream continues to support both

existing and trainee MAPs within the service. The General Medical Council (GMC) began regulating Physician Associates (PAs) and Anaesthesia Associates (AAs) in December 2024. The UK Government's 'Leng Review', an independent review focusing on PAs and AAs, was announced in November 2024. NES remains active in fulfilling statutory regulatory requirements.

b) Fellowships in Clinical Artificial Intelligence

NES is supporting 2025 recruitment for **Fellowships in Clinical Artificial Intelligence** with candidate assessment processes underway for a 2nd Scottish cohort to join this programme. This programme is best viewed as work based learning, with fellows placed within live Clinical AI projects as they progress through this hybrid twelve month taught programme. Fellows benefit from clinical supervision from a lead clinician immersed in this specialty area, in combination with programme delivery and Networking with peers across UK.

5.6 Nursing, Midwifery & Allied Health Professions (NMAHP)

a) The Neuro Bureau

Following feedback from our neurodivergent doctors and dentists in training to the Senior Specialist Lead for Disability, a peer support network was established in May 2024. Since its inception, the network has held monthly meetings and set up a dedicated MS Teams Channel for sharing information and resources. The group, named 'The Neuro Bureau' by its members, offers a collaborative platform where individuals can share experiences, exchange strategies, and provide mutual encouragement. The network aims to empower its members to build a more understanding and accommodating professional environment. With 63 current members and growing, the group now includes neurodivergent doctors who have recently completed their training but whose network memberships continue to play an important role in acting as allies for those still on their training journey.

5.7 Pharmacy

a) Foundation Training Year 2024-25

213 Funded trainee pharmacists have commenced Foundation training in the 2024-25 cohort. This number will reflect 97% fill of potential places (213 of potential 220). We recognise there is a difference presented in the data between accepted offers and those moving to take up places via active enrolment. There are various reasons why this is the case, one prominent one being the filling of last-minute vacancies

5.8 Planning and Corporate Governance Directorate

a) Consultation on NES's future equality outcomes

Our consultation on our equality outcomes for 2025-2029 recently closed. This was shared with staff, externally on our website, and via our social networks. Over 160 responses were received. These are being considered to finalise our equality outcomes which will be included in NES's Equality, Diversity and Inclusion Strategy, and will be tabled at the Board in March 2025

5.9 Psychology

a) Psychological Therapies for the Workforce

During the COVID pandemic, the Scottish Government funded NHS Education for Scotland (NES) to increase NHS Boards' capacity to deliver psychological therapies for the workforce's mental health and wellbeing. The funding provides access to psychological therapies for health and social care workers, including third sector and independent care staff. The service started in 2020/21 and has a framework for future funding confirmed in late 2024/25.

Service in the Boards

At least 0.5 WTE Clinical Psychologist is included in the skill mix, with 14.72 WTE posts funded across Scotland. These posts complement other local services developed pre-pandemic and additional services set up in response to the pandemic.

NES Support

NES provides quarterly reporting to the Scottish Government on anonymised workforce data, referrals, clinical interventions, training, coaching, and supervision. NES also hosts events to support service development, improve data processes, and share strategic approaches.

Data

The service shows good outcomes and positive feedback, contributing to staff retention and preventing prolonged sickness absence. Most staff presenting are in the moderate to severe range on CORE-10 measures of distress, with 80% showing improvement after more than two sessions.

Examples of qualitative feedback

- *"I wouldn't have stayed in the NHS if it weren't for this therapy service."*
- *"Undertaking therapy has stopped me going off sick and enabled me to continue working and caring for others."*
- *"I questioned if I could stay in general practice, I am now enjoying it and looking forward to the future as a GP again."*
- *"...this support definitely helped me to avoid ending up off sick with stress for a long period."*

5.10 Social Care Directorate

a) Getting It Right for Everyone (GIRFE)

Scottish Government colleagues recently delivered a very informative and helpful presentation on GIRFE to the Executive Team, which was very well-received [Getting it right for everyone \(GIRFE\) - gov.scot](#). GIRFE is a new multi-disciplinary practice model that seeks to ensure that agencies collaborate and communicate effectively to deliver more personalised, preventative and holistic care and support, by putting the person at the centre of all the decisions that affect them. Following the presentation to ET, the Director of Social Care is leading a discussion across NES on our contribution to promoting and supporting the development and implementation of this new practice model. The Executive Team have also agreed to provide a development opportunity for someone to work with the policy team to create learning resources on GIRFE. We are also planning an ELG and a Board Development Event on GIRFE.

5.11 Workforce

a) National Programmes

NES continues to support building quality improvement (QI) capacity for health and social care staff through a number of national QI learning programmes. The QI Team are working with stakeholders to develop new QI learner pathways due for launch 2025/2026. The new pathways will provide health and social care staff flexible and tailored learning opportunities relevant to their role in their organisation.

November 2024 marked the 10th anniversary of the [Scottish Improvement Leader \(ScIL\)](#) programme; the programme is focused on the development of individuals with a key role in leading QI work within their organisations. A celebratory event held on November 5th provided an opportunity to reflect on the impact of ScIL over the past 10 years. The impact stories shared during the celebration event are available on the QI Zone: <https://learn.nes.nhs.scot/79163>

b) Realistic Medicine and Value Based Health and Care

NES continue to work closely with the Scottish Government Realistic Medicine (RM) Policy Team to support the delivery of the [Value Based Health and Care Action Plan \(VBH&C\)](#). This involves NES working in partnership with NHS Boards and Education Providers to inform the education and training of future and existing workforce to practise RM. Most recently, the Shared Decision Making eLearning Module has been refreshed to enhance the suite of resources that are available on the [RM TURAS Pages](#). Work is also ongoing collaborating with Higher Education Institutions (HEIs) to embed RM and VBH&C content within undergraduate and post graduate courses. This has involved providing material and resources that can be added to existing curricula, presenting at an all school webinar for health and care programmes run by Queen Margaret University and, testing content within Midwifery and Integrated Care Courses at University of West of Scotland. NES have an active RM Champions network who are working to embed RM content across existing NES learning resources and programmes where appropriate.

c) The Digital and Data Capability Framework Self-Assessment Tool

Developed by NHS Education for Scotland on behalf of Scottish Government and COSLA, the Digital and Data Capability Framework Self-Assessment Tool was launched in January 2025. It was created to help guide individuals through the Framework and allow users to measure their own digital skills, knowledge, and behaviours.

d) Digital Capabilities & Confidence Programme

Developing strong digital skills and knowledge is vital to delivering our core business and enhancing learners' experience. It is also essential to look ahead to how NES can support new developments and ways of working that make greater use of digital and AI to increase our effectiveness and efficiency.

This programme has been established with our Programme Management Office (PMO) to drive the workforce-wide assessment of digital skills and capabilities. This will enable a stronger and more focused approach to developing, reskilling, building, and supporting the necessary skills, knowledge, and capabilities to work more effectively

digitally. The programme will also consider how we build supportive career pathways and approach job design to enable digital ways of working and a culture to support this.

The programme started in December 2024 and will quickly progress to the first stage of outcomes, which is to assess workforce digital capabilities through self-assessment, identify routes for developing skills, and define as an organisation what we want and need from working in an increased digital environment.

Programme progress will be reported monthly to the Transformation Group.

e) Armed Forces Talent Management Programme

As part of the armed forces talent management programme, NES recruited an Armed Forces intern for three months to test and evaluate the newly developed internship scheme, which aims to launch nationally in May 2025. The intern brings valuable insights and skills from the Armed Forces Community and, in return, gains valuable experience working with the Armed Forces Talent Team. This also supports NES's ongoing commitment to the Armed Forces Covenant.

f) Line Managers Network

Following the launch in September 2024 of the Line Managers' Handbook, the Line Manager Network has been thriving with development and networking opportunities to support our managers at all levels. The Handbook was launched to support line managers to improve their people management skills and knowledge. A range of sessions are offered to familiarise Line Managers with what is expected of them when leading and managing a team. The focus of the sessions ranges from good recruitment through to how to manage a hybrid working team well. Sessions not only focus on what we need managers to do but how we encourage them to behave and lead by example. There is an evaluation for each session, which we use to review sessions and materials. Managers are reporting so far that they have found this resource helpful, and we plan to strengthen this further over the coming 6 months.

g) Learning at Work week 2024

As part of our ongoing commitment to learning a second Learning at Work week was delivered in November 2024. The week's theme focused on recognising and celebrating talent and providing opportunities to attend sessions. The intent behind the second learning at work week was to give more space for the workforce to complete their essential learning and to remind them of the protected learning time they all receive to support a commitment to continuous professional development. The week was received well with positive feedback on a tool we trialled to encourage peer recognition and celebration of talent and good practice. This tool will be rolled out more fully in the coming 6 months as part of a sharper focus on further developing our culture and behaviours to support the delivery of high-quality learning that is in line with our strategy. The Learning at Work week will be evaluated and reported to the Staff Governance Committee.

6. Partnerships - how we are supporting our partners

6.1 Strategic Partnerships

a) NHS Scotland Academy

NHS Scotland Academy (NHSSA) continues to deliver its programmes while exploring several potential new workstreams. The impact of some NHSSA projects is evident in reducing waiting times for a number of diagnostic tests as part of the imaging and endoscopy programmes. The first intake to the new programme for people working at career levels 2-4 in Central Decontamination Units is recruiting now, with a start date of 10 February 2025. We also have recruitment open for our Surgical First Assistant programme with a start date of 5 May 2025, our Foundations in Perioperative Practice Programmes with a start date of 16 June 2025 and our Biomedical Science cohort 2, with a start date of 4 Feb 2025.

b) Learning & Education Collaborative Working Group

NES has facilitated the establishment of a working group of Scottish skills and education strategic partners to collaborate on relevant workstreams in the delivery of health and social care learning and education. The group includes senior colleagues from the following organisations: NES, Scottish Social Service Council (SSSC), Colleges Scotland, College Development Network (CDN), Scottish Qualifications Authority (SQA), Scottish Funding Council (SFC), Skills Development Scotland (SDS) and Universities Scotland.

c) Academy of Medical Sciences

As part of NES's developing partnership work with the Academy of Medical Sciences, NES hosted their *Hospitals at home fit for the future* workshop on 20 January 2025. The [Academy of Medical Sciences' FORUM](#) hosted a workshop in partnership with the [British Geriatrics Society](#) to discuss how to deliver hospitals at home for people who are experiencing, or at risk of, frailty. [FORUM: Hospitals at home fit for the future | The Academy of Medical Sciences](#)

d) Strategic Partnership with Universities

NES's formal partnership activities are continuing to develop with University of Strathclyde, University of Dundee, University of St Andrews, and the Open University in Scotland. Formal partnership agreements with the University of the West of Scotland (UWS) and Glasgow Caledonian University will be finalised in early 2025.

6.2 Chief Executive Update

- a) NES continues to develop new strategic partnerships and build on the already established partnerships. Such collaborations 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) 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.

- c) The NES Executive Team (ET), Transformation Group (TG), and Strategic Implementation Group (SIG) continue to meet formally. Collectively, they focus on strategic matters, strategic scrutiny, cross-organisational leadership, and ensuring the direction of strategy with a focus on our people, partnerships, and performance.
- d) My engagement with a wide range of key stakeholders across health and social care continues. This includes a wide range of colleagues across NHS Scotland, including the Chief Executives and other senior colleagues, NHS National Board Chief Executives (BCEs), NHS BCEs and Scottish Government, NHS Board CE's Private meetings, and Strategy and Business meetings.

As with all Accountable Officers, I meet monthly with Caroline Lamb (Director-General of Health and Social Care and Chief Executive of NHS Scotland).

- e) I am Chairing / co-chairing the Joint Negotiating Committee on contract reform for resident doctors and dentists in training. I am the NHS Chief Executive lead on pay negotiations for consultants, Specialty and /resident doctors and dentists in training. I also continue to lead on behalf of BCEs work on the future of the National Care Service.
- f) 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.

6.3 Dental

a) Two National Oral Health Improvement events

The reducing inequalities/dental workforce development team delivered two national oral health improvement events. In November, NES hosted partners from across the Smile4Life (Homeless) and Mouth Matters (Justice system) programmes to develop community engagement and social participation in improving oral health. Social Worker researchers from Brazil who were visiting the University of Dundee attended the event and shared their experience. In December NES hosted the Caring for Smiles (older people) and Open Wide (people with additional care needs) programmes exploring the use of creating imaginative learning techniques in oral health education.

b) Review of National Occupational Standards: Dental Nursing & Dental Technology

Continued partnership working with Skills for Health in the UK wide review of the National Occupational Standards (NOS) for Dental Nursing and Dental Technology. The Associate Postgraduate Dental Dean (DCP) is the chair of both UK Steering Groups. The Dental Nursing NOS Consultation period closed 23 December 2024. 107 responses received from across all four nations. The NES Dental Care Professional workstream Specialist Leads have made a significant contribution to updating the NOS and authoring a new NOS. The revised NOS now meets the General Dental Council's

Safe Practitioner Framework. Skills for Health launched The Dental Technology NOS consultation on 6th January 2025: <https://www.skillsforhealth.org.uk/resources/review-of-oral-health-national-occupational-standards/>

c) Review of the Modern Apprenticeship in Dental Nursing

Continued partnership working with Skills Development Scotland, Skills for Health and key stakeholders within the Scottish Apprenticeship Development Group (ADG) in the review of the Modern Apprenticeship (MA) in Dental Nursing. The Associate Postgraduate Dental Dean (DCP) is the chair of the Scottish Apprenticeship Development Group (ADG). The SVQ & MA in Dental Nursing consultation will commence end of January 2025.

6.4 Medical including Healthcare science

a) Academic Medicine

The Medical Directorate has undertaken a review of Academic Medicine career pathways and opportunities in Scotland. It identifies challenges and opportunities in Scotland's academic medical workforce. It emphasises inequities based on gender, geography, and specialties, and highlights the need for strategic workforce planning and improved communication across organisations. The ageing academic workforce, underrepresentation of women, limited flexibility, the lack of an educator academic pathway and differential training opportunities in academic medicine compared with other parts of the UK are key concerns. Working with strategic stakeholders, the directorate will be taking forward a number of recommendations to improve clinical academic workforce supply to meet Scotland's population health needs. We will also seek to work across professions to share opportunities and promote equity of opportunity and parity of esteem in access to academic career pathways and opportunities.

b) Emily Test charity

Discussions with Emily Test charity are being undertaken to explore potential development of online educational resource on Gender Based Violence and Suicide prevention for all doctors. This will be done in conjunction with colleagues in the Workforce Directorate.

c) Healthcare Science

HCS has engaged with colleagues within the NHS Scotland Academy on a range of initiatives, including the new Accelerated Institute of Biomedical Science (IBMS) IBMS Registration Training Portfolio Programme. It has also contributed to developing the NES Climate and Sustainability Strategy 2024–27. HCS has also contributed to the Scottish Government's Healthcare Science strategic approach and has been pivotal in the education and training review.

A range of promotional events have been delivered in partnership with HCS colleagues in the regional boards to promote the healthcare science profession, and this has been extended to collaborating with external organisations such as Developing the Young Workforce (DYW) Live, My World of Work, Skills Development Scotland, Glasgow Science Centre, and Scottish Universities Life Sciences Alliance (SULSA).

d) National Centre for Remote and Rural Health and Care

The national centre team working on improving remote and rural recruitment and retention are working closely with the Centre for Workforce Supply (CWS) and Scottish Government Recruitment Teams. As part of this joined-up approach, monthly live stakeholder network sessions are delivered to ensure the sharing of ongoing work and to engage with a wide range of remote and rural health and care stakeholders around this priority area of work. Feedback from these sessions and input from the national centre team is being used to shape the Scottish Government Remote and Rural Recruitment and Retention Strategy due to be published in 2025.

6.5 NES Technology Service (NTS)

a) Accelerated National Innovation Adoption (ANIA)

NES maintains its strategic delivery partner function by informing workforce, education, and training considerations, now including a new aspect: endoscopy Artificial Intelligence (AI) and a more comprehensive evaluation of electrocardiography (ECG) patches.

Following the approval to proceed to the go live at the Digital Dermatology Programme Delivery Board on 24th October 2024 the programme has moved to a rollout phase. As of 8th January, there are now a total of 263 GP practices live with Digital Dermatology and there has been a total of 361 photo sessions using the Consultant Connect app and 163 SCI Gateway referrals to Dermatology with an associated image(s) enabling dermatologists can carry out robust referral triage without the person being physically present.

Continued engagement with remaining Health Boards to confirm go live dates before the end of March 2025.

6.6 Nursing, Midwifery & Allied Health Professions (NMAHP)

a) Masterclasses

The Mental Health and Wellbeing Team have delivered two masterclasses. The first, in partnership with the University of Vienna, focused on supporting children and young people in relation to non-suicidal self-injury. The second, in partnership with the Scottish Women's Autism Network, focused on supporting neurodiverse women in relation to mental health, self-harm and suicide. Both masterclasses included a focus on ensuring effective communication and the need for services to take a person centred, human rights-based approach. Across both masterclasses we had approx. 1000 attendees, and initial feedback has been very positive.

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

a) Pathways and Partnerships

The new Pathways and Partnerships team has completed its planning phase, progressing to analysis of current practices and data sources. Connections with both internal and external stakeholders to align efforts in developing a scalable methodology are being made, fostering a collaborative approach to future-focused learning and career pathways.

b) Knowledge Management and Discovery

The budget for the tender of the digital library resources was approved by NES Executive Team. Award letters and contracts are being prepared to send to suppliers. January-December. Contracts have been prioritised to ensure continuity.

c) Digital Health and Care Innovation (DHI) hub

The next phase of the partnership focuses on skills development in Morayshire, and we plan to expand. Currently, we're exploring XR simulation and mental health initiatives, particularly suicide prevention. Academic and industry leaders are preparing a January submission for the Mindset UK challenge.

d) National Manufacturing Institute Scotland (NMIS)

NES and NMIS are progressing direct engagement with NHS Grampian and NHS Shetland regarding potential collaboration on foresighting, with a focus on Artificial Intelligence (AI). The Medical Schools Council's Youth Academy team is enhancing attraction to undergraduate medicine by updating an online application resource hub. Additionally, the Scottish Government's commission on apprenticeships has recruited a Senior Specialist Lead to advance work on earn-as-you-learn routes, with joint efforts from Skills Development Scotland to provide research support. This project is set to be completed by mid-March 2025.

6.8 Social Care

a) Joint Work with Scottish Social Services (SSSC)

NES continue to progress in our joint work with the SSSC on developing a National Induction Framework (NIF) for Social Care and a Career Opportunities Tool (COT). Extensive stakeholder engagement has informed the identification of core content of the NIF, and we are curating what currently exists to identify gaps where new content may need to be developed. As we move into the second year of this project, we will be exploring the potential for completion of the NIF to be certificated to provide evidence to support individuals working towards their qualifications. In respect of the COT, as well as developing a web-based version of the tool, we are scoping out the potential for an AI version via Co-Pilot to provide a more interactive version that will deliver more personalised information on social care career opportunities, taking into account of individual's circumstances.

b) The Promise

Colleagues in the Scottish Government who lead on 'The Promise' have invited us to meet with *The Promise Scotland* to advise on the work we are doing internally and to consider how NES may be able to promote awareness across the workforce of the ambitions of the [Plan24-30](#). Plan 24-30 has recently been published to provide a route map for 'keeping the promise' and ensuring that the care experienced by young people grows up loved, safe, and respected.

NHS Education for Scotland

NES/25/06

Agenda Item: 08a

Date of Meeting: 6 February 2025

Public Board Paper

1. Title of Paper

1.1. 2024/25 Quarter 3 Delivery Report

2. Author(s) of Paper

2.1. Alison Shiell, Planning & Corporate Governance Manager

3. Lead Director(s)

3.1. Christina Bichan, Director of Planning & Performance

4. Situation / Purpose of paper

4.1. This report provides the Board with a Quarter 3 (Q3) update on NES's delivery performance against the deliverables and milestones set out in the 2024/25 NES Annual Delivery Plan (ADP). The report uses (B)RAG exception reporting to evidence progress and completion status.

4.2. In addition to the cover paper, the report comprises a 2024/25 Q3 summary progress report (Appendix 1) and a full 2024/25 Q3 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 6 February 2025 Board meeting.

5.2. The 2024/25 NES ADP was approved in principle by the NES Board in May 2024. Following planned discussions between NES and Scottish Government (SG) policy colleagues in June and early July 2024 to clarify NES's 2024/25

deliverable and funding position, NES received SG approval for the 2024/25 ADP via a formal letter issued on 10 July 2024.

- 5.3. The 2024/25 NES ADP is available to access via the [Corporate Publications](#) page of the NES website.

6. Assessment / Key Issues

2024/25 Quarter 3 – Summary of Delivery Position

- 6.1. At the end of 2024/25 Q3, 150 out of 178 (84.5%) of deliverables are completed or on target to be completed in line with ADP milestones. 22 (12%) deliverables are progressing with minor delays and five (3%) deliverables are experiencing significant delay. Out of the 28 deliverables experiencing delays, four of these are due to funding issues that are outwith NES's control. This equates to 2% of the overall 2024/25 ADP deliverable total (178).
- 6.2. As per the 2024/25 Quarter 2 (Q2) Delivery Report and in order to provide the Board with as much assurance as possible regarding NES's overall delivery position, the Q3 report provides additional context about any deliverables affected by funding delays and whether these delays are within / outwith NES's control. This information is set out within Section C (page 11).
- 6.3. The Board will wish to note that the Q3 RAG status and updates provided for the eight NHS Scotland Academy (NHSSA) ADP deliverables remain in draft at the time of writing. This is due to joint NHSSA governance arrangements between NES and NHS Golden Jubilee and a slight change in timelines for the approval of the 2024/25 Q3 updates. The final 2024/25 Q3 delivery position will be reported via verbal introductory comments at the 6 February 2025 NES Board meeting.
- 6.4. For the Board's information, as per the enhancements outlined in the the Q2 report, the full 2024/25 Q3 update (Appendix 2), contains a Projected Status column which enables directorates to provide an anticipated (B)RAG rating for the next quarter. Given the proximity to 2024/25 year-end, any deliverables projecting a Red / Amber status for Quarter 4 (Q4) have been noted. NES Planning will monitor ongoing delivery status of all deliverables and proactively engage with directorates during Q4 as required to support deliverable completion. The final 2024/25 delivery position will also be reported via NES Strategic Key Performance Indicator 40 (% of ADP deliverables not on track).

Section A - 2024/25 Quarter 3 – Delivery Performance Overview

- 6.5. Delivery performance at the end of 2024/25 Q3 is summarised in Table 1a. For the Board's information, one deliverable has been closed during Q3. Further information is provided within Table 5 (2024/25 ADP Amendments / page 13).

Table 1a: Summary of deliverable status – 2024/25 Quarter 3

Deliverable Status	Number	Percentage
Blue – complete	1	0.5%
Red – significant delay	5	3%
Amber – minor delay	22	12%
Green – on track	149	84%
Deliverables closed	1	0.5%
Total	178	

6.6. Appendix 1 provides a summary of 2024/25 ADP delivery and an overview of the Q3 delivery position. This is supported by additional context and detail provided in the later sections of the cover paper. An overview of NES directorate (B)RAG status at Q3 is shown below in Table 1b. For the Board’s information, there have been no changes in directorate ownership of deliverables during Q3.

Table 1b: Summary of NES directorate RAG status – 2024/25 Quarter 3

NES Directorate / Business Area	Total 2024-25 ADP Deliverables	Blue	Red	Amber	Green	N/A
Dental	21	-	-	1	20	-
Finance	7	1	-	-	6	-
Healthcare Science	5	-	-	-	5	-
Medical	28	-	-	4	24	-
NHSS Academy, Learning & Innovation	22	-	1	5	15	1
NMAHP	32	-	3	6	23	-
NES Technology Service	10	-	1	3	6	-
Optometry	7	-	-	1	6	-
Planning & Corporate Resources	4	-	-	-	4	-
Pharmacy	11	-	-	-	11	-
Psychology	5	-	-	1	4	-
Social Care	5	-	-	-	5	-
Workforce	20	-	-	1	19	-
Corporate	1	-	-	-	1	-
Totals	178	1	5	22	149	1

Section B - 2024/25 Quarter 3 – Red & Amber Deliverables

6.7. Five deliverables have been reported as Red (experiencing significant delay) at Q3, which is a slight increase in comparison to Q2. Two deliverables that reported Red at Q2 continue to report Red at Q3. Three deliverables that reported Amber at Q2 have been escalated to Red at Q3. Two of these newly Red deliverables projected a Q3 Red status at Q2 as part of our enhanced quarterly reporting process.

6.8. One deliverable reported as Red within the Q2 Delivery Report (4352 / NMAHP - development of an Infection Prevention and Control Education Strategy) was later identified as having been reported Red in error. This deliverable has been de-escalated to Amber at Q2 and retrospective narrative added to the full

2024/25 Q3 update (Appendix 2). For the Board’s information, this deliverable continues to report as Amber at Q3. Further information is presented in Table 3.

6.9. The increase in Red deliverables at Q3 is as a result of changes outwith NES’s control. Further detail, including actions being taken to mitigate delays with the aim of bringing deliverables back on track (and their proposed timelines), is presented in Table 2.

6.10.22 deliverables have been reported as Amber (minor delay) at Q3. Further detail, including the actions being taken to mitigate delays with the aim of bringing deliverables back on track (and their proposed timelines), is presented in Table 3.

Table 2: Impacts and mitigations summary – Red deliverables

2024/25 Quarter 3 – Red Deliverables	
ADP ref	Overview / Impact of Current Delays and Mitigating Actions
NHSS Academy, Learning & Innovation (NHSSA, L & I)	
4807	<p>The deliverable focused on the delivery of Phase 2 of the TURAS Refresh (completion of the Full Business Case / FBC) continues to be delayed by resource constraints and confirmation of any SG funding to support FBC development. Additional resource requirements have been scoped however if this resource is not received the completion of the FBC will be delayed into 2025/26.</p> <p>As a result of the current delivery position, this deliverable is projected to report Red at 2024/25 year-end. If additional resource is confirmed then the projected status of this deliverable will change to either Amber (partial resource available) or Green (full resource available) however at this stage in the 2024/25 year, any de-escalation in projected status will include completion of the FBC in draft rather than full FBC approval. The current status of this programme of work has been escalated to the appropriate NES corporate management groups (TURAS Refresh Programme Board and the NES Transformation Group).</p> <p>Work has progressed in relation to confirming the scope of work to be completed by the Health Economist, with a submission deadline agreed for 2024/25 Q4. Further information will be provided in the 2024/25 Q4 Delivery Report.</p>
Nursing, Midwifery & Allied Health Professions (NMAHP)	
4329	<p>Further to the Q2 Amber update and projected Q3 Amber status, the deliverable focused on the education and training of staff who provide specialist dementia care has been escalated to Red at Q3. Following discussions with SG policy leads, neither the Dementia Champions nor the Dementia Specialist Improvement Leads (DSIL) programmes will be delivered this year as originally planned.</p> <p>NES and SG have agreed a revised NES dementia work programme for the remainder of 2024/25. At the request of SG, this includes</p>

2024/25 Quarter 3 – Red Deliverables	
ADP ref	Overview / Impact of Current Delays and Mitigating Actions
	<p>specific and unplanned activity to support the initial two-year delivery plan of SG’s dementia strategy. As a result of this change in SG priorities, the deliverable milestone for Quarter 4 will be updated to reflect intended activity for the remainder of the 2024/25 year.</p>
4361	<p>Further to the update provided at Q2, the development and delivery of the Transgender Care Knowledge and Skills Framework deliverable has reported Red at Q3 as projected.</p> <p>Although further launch events with stakeholders and the community took place during Q3 and more are planned for Q4, the year-end deliverable milestones will not be met due to the ongoing complexity of developing resources connected to the Transgender Care framework and a shift in the national landscape.</p> <p>Work related to the young people’s annex which was originally planned for delivery during 2024/25 Q3 is aligning to a separate workstream delivering young people’s gender identity services. This is expected to continue until 2025/26 Q3. A steering group to oversee the development of the young people’s annex is in development and during 2024/25 Q3 commenced the process of appointing a Chair. Further information will be provided in the 2024/25 Q4 Delivery Report.</p> <p>As a result of the factors currently affecting the delivery of this deliverable, the Quarter 4 milestone will be updated to reflect intended activity for the remainder of the 2024/25 year.</p>
4705	<p>Further to the update provide at Q2, NES have now received confirmation from SG that priorities relating to palliative care have now changed. Rather than focusing on the implementation of the Recommended Summary Plan for Emergency Care and Treatment (ReSPECT) on the National Digital Platform (NDP), priorities have shifted to focus on the ‘My Future Care Plan’ initiative. As a result of this change in priorities, NES NMAHP will be developing educational materials to support the My Future Care Plan initiative rollout.</p> <p>This deliverable reported Red at Q2 and was projected to remain Red at Q3 due to the original milestones not being met. Now that a confirmed decision has been made regarding the rollout of ‘My Future Care Plan’ (rather than the implementation of ReSPECT), the 2024/25 Q4 milestone will be revised to reflect the amended delivery focus.</p> <p>For the Board’s information, development of a ‘One for Scotland’ palliative care learning site is ongoing and a new palliative care strategy, ‘Palliative Care Matters for All,’ is out for consultation. A review of the ‘Palliative and End of Life Care’ educational framework is also being undertaken and will complement the new strategy. NES has also formed a cross-directorate group to review palliative care education on TURAS and SG has established a multidisciplinary expert group, with its first meeting set for January 2025.</p>

2024/25 Quarter 3 – Red Deliverables	
ADP ref	Overview / Impact of Current Delays and Mitigating Actions
NES Technology Service (NTS)	
4594	<p>Further to the update provided at Q2, confirmation of SG funding to enable NES to provide technology support to the NHS Scotland Digital Prescribing and Dispensing Pathways Programme (DPDP) was received during Q3. However, this funding has arrived too late in the 2024/25 financial year to facilitate recruitment as the confirmation of 2024/25 funding did not include any guarantee of future funding for 2025/26 and 2026/27. Due to the ongoing challenging financial environment it is not possible to extend fixed term contracts into future years without confirmed funding arrangements in place.</p> <p>The current DPDP delivery position continues to impact delivery activity including build-related activity and the potential to backfill engineering resource. Work has continued to progress on security principles, architectural deliverables, the DPDP product backlog and various supporting work.</p> <p>As per the update provided at Q2, SG sponsors have again verbally indicated that funding will be provided for the following two financial years (2025/26 and 2026/27). The DPDP Programme Team is working as a priority to obtain written confirmation so that recruitment to the programme can commence. A further update will be provided at Quarter 4. As a result of the current delivery position this deliverable is projected to report Red at Q4.</p>

Table 3: Impacts and mitigations summary – Amber deliverables

2024/25 Quarter 3 – Amber Deliverables	
ADP Ref	Overview / Impact of Current Delays and Mitigating Actions
Dental	
4511	The deliverable supporting the provision of Dental Additional Costs of Teaching (ACT) funding to three Health Boards and a university has reported Amber at Q3. Confirmations of funding were unable to be issued as planned due to SG budgetary adjustments. The funding confirmations have now been issued however reporting structures are still in the process of being fully embedded across the funding recipients. This deliverable is projected to report Amber at 2024/25 year-end.
Medical	
4308	The deliverable which supports the delivery of the NES (Scotland Deanery) Quality Management (QM) / Quality Improvement Framework for postgraduate medical education in Scotland remains Amber at Q3. Although the number of General Medical Council (GMC) Enhanced Monitoring (EM) sites has now reduced further since Q2, there are still two sites undergoing EM arrangements. In mitigation, an effective QM system is in place and NES has built close working relationships with Health Boards in relation to EM with objective and Action Plan review meetings in place as appropriate.

2024/25 Quarter 3 – Amber Deliverables	
ADP Ref	Overview / Impact of Current Delays and Mitigating Actions
4543	<p>The deliverable supporting the expansion of the clinical and leadership skills and capacity of SAS (Specialist, Associate Specialist and Specialty) Doctors remains Amber at Q3 as the facilitation of both national and regional educational events remains slightly behind schedule. This has been due to delays in the receipt of funding for national courses and staff sickness absence.</p> <p>Funding for the remaining quota of national courses has now been confirmed and delivery during Q4 has been scheduled. The deliverable is now projected to report Green at 2024/25 year-end.</p>
4553	<p>The deliverable supporting the 2024/25 National Centre for Remote and Rural Health and Care Phase 1 delivery plan targets has reported Amber at Q3 after previously reporting Green for Quarters 1 and 2. This is due to time slippage and projected underspend for a number of projects including earlier delays to staff recruitment and establishing some activity at a significantly lower cost than expected. Mitigations to bring workstreams back on track are in place and the deliverable is projected to report Green at 2024/25 year-end.</p>
4556	<p>The development of new resources to support the Continuing Professional Development (CPD) of approved and recognised Postgraduate Medical Trainers has remained Amber at Q3 as two courses were cancelled during Q3 due to a lack of bookings. Delivery of the Advanced Medical Educators Course (AMEC) remains paused whilst the course is re-designed for online delivery, with no courses being delivered during 2024/25. This deliverable is projected to report Amber at Q4. Further information will be provided in the 2024/25 Q4 Delivery Report.</p>
NHSSA, L & I	
4607	<p>Delivery of the Perioperative Workforce programme via the NHSS Academy has reported Amber at Q3 (Green at Q1 and Q2) as while learning as planned has continued with current cohorts, recruitment to the new cohort of the Surgical First Assistant programme has been slower than expected. The Foundations of Perioperative Practice and National Assistant Perioperative Practitioner Programme have also not attracted anticipated learner numbers. A review of how often these programmes should run is currently being undertaken by NHSS Academy colleagues. As a result of this lower than expected learner recruitment, this deliverable is projected to report Amber at 2024/25 year-end.</p>
4801	<p>Work to support the development of a new, consistent methodology for the development of career and learning frameworks / pathways in health and social care in collaboration with partners remains Amber at Q3 as deliverable milestone completion is behind schedule. Discovery work has taken longer than originally planned and the team have also been managing the transition of programmes that support the NHS Scotland Support Workforce into the NHSSA, L & I Pathways and Partnership team.</p> <p>Project initiation documents, including project plans and planned milestones have been completed during Q3 and the analysis of existing practices and identified data sources are in progress. Work is also underway to identify</p>

2024/25 Quarter 3 – Amber Deliverables	
ADP Ref	Overview / Impact of Current Delays and Mitigating Actions
	internal and external representatives for a stakeholder advisory group. The current delivery position of this deliverable has resulted in the deliverable projecting to report at Amber at 2024/25 year-end.
4804	The deliverable focused on the development and implementation of the NES Learning and Education Quality System (LEQS) has reported Amber at Q3 due to some delays in defining LEQS business processes which in turn has delayed the intended sharing of responsibility between the Learning and Education Quality team and NES directorates. This work is also contingent on wider NES transformation / business process transformation therefore this deliverable is projected to report Amber at 2024/25 year-end
4805	<p>The deliverable supporting workforce diversification and Medical Associate Professions (MAPs) has reported Amber at Q3. This is due to the UK Department of Health and Social Care initiating the Leng Review (Independent review of Physician Associate (PA) and Anaesthesia Associate (AA) professions). This has resulted in work within the Q3 deliverable milestone, which focused on the development of a PA / AA Career Development Framework with NHS England, being paused until the review's outcome can be considered.</p> <p>As a result of the current delivery position, which is outwith NES's control, this deliverable is projected to report Amber at 2024/25 year-end.</p>
4806	Work supporting the development of a consistent approach to education and innovation partnerships has reported Amber at Q3. Whilst work to develop strategic partnerships with key partners is increasing, workload pressures have led to a slight delay in the establishment of processes to support the reporting of strategic partnerships at a corporate level. Mitigating actions are in place and the deliverable is projected to report Green at 2024/25 year-end.
NMAHP	
4341	The Allied Health Professions (AHP) aspect of work to support the NMAHP workforce to comply with regulatory bodies' requirements for quality practice education continues to report Amber at Q3. This is specifically in relation to a delay in the development of ePADs (Electronic Practice Assessment Document) for paramedics and physiotherapists. This deliverable is projected to report Amber at 2024/25 year-end.
4350	The Allied Health Professions (AHP) aspect of the development and maintenance of the NMAHP practice learning environment continues to report Amber at Q3 as deliverable milestone completion specifically in relation to the build of an electronic Quality Management System (QMS) for AHPs is behind schedule. Funding initially secured for the procurement of an external QMS for AHPs formed part of NES's contribution to the SG savings exercise earlier in the 2024/25 year as it was hoped that other existing systems could be used for AHP purposes. Following exploratory work this has not proved to be the case. AHP colleagues have now been advised that the QMPLE (Quality Management of the Practice Learning

2024/25 Quarter 3 – Amber Deliverables	
ADP Ref	Overview / Impact of Current Delays and Mitigating Actions
	Environment) system used by Nursing and Midwifery (NM) colleagues has two years remaining on its contract. A joint NM / AHP QMS solution will now be explored. During Q3, AHP colleagues have been focusing on the agreement of descriptors for different practice learning environments to pilot across multiple AHP professions and four different Health Boards. As a result of the current delivery position, this deliverable is projected to report Amber at 2024/25 year-end. Further information will be provided in the 2024/25 Q4 delivery report.
4352	<p>The deliverable supporting the ambitions of the Infection Prevention Workforce (IPC) Strategic Plan 2022-24, continue to report Amber at Q3 as workforce capacity issues are still affecting some aspects of delivery.</p> <p>This deliverable is projected to report Amber at 2024/25 year-end as whilst parts of this deliverable have been completed, the Infection Prevention and Control Education Strategy will not be completed due to extended staff absence.</p>
4356	The deliverable supporting the development and maintenance of education to support the health and social care workforce to transform policy into practice to align with the National Infection Control Prevention and Control Manual and via the delivery of the Healthcare Built Environment strategy remains Amber at Q3. This is again due to the review of Antimicrobial (AM) Resistance and AM Stewardship resources by Subject Matter Experts (SME) proving challenging as a result of SME availability and internal team capacity. As a result of this current delivery position, this deliverable is projected to report Amber at 2024/25 year-end.
4374	Work to enhance NES's NMAHP and Support Workforce TURAS Portfolios has reported Amber at Q3. This is due to deliverable milestones associated with TURAS functionality not being able to be met due to internal digital capacity restraints. As a result of this current delivery position, this deliverable is projected to report Amber at 2024/25 year-end.
4712	Work to support the development of 'earn-as-you-learn' routes for Allied Health Professions (AHP) Healthcare Support Workers has reported Amber at Q3 due to a delay in the agreement of an agreed articulation route with Higher Education Institutions (HEIs). Next steps for the development of 'earn-as-you-learn' routes have however been agreed with Scottish Government, the Scottish Qualifications Authority (SQA) and NES (paramedicine, Speech and Language Therapy and Physiotherapy). In place of an agreed HEI articulation route, NES will continue to contribute to the development of the three AHP educational pathways and aim to have a draft arrangement document in place by the end of Q4. With these mitigating actions in place, this deliverable is projected to report Green at 2024/25 year-end.
NTS	
4442	Information Governance work to support the utilisation of improved data in workforce statistics publication in support of NES's role as a national centre for evidence on the health and social care workforce continues to report Amber at Q3. This continues to be as a result of capacity constraints and

2024/25 Quarter 3 – Amber Deliverables	
ADP Ref	Overview / Impact of Current Delays and Mitigating Actions
	<p>technical complexities linked to this improvement work. Progress has been made during Q3 in relation to engagement with Boards regarding planned data requests however there is no dedicated resource in place to manage the actual transfer of data. A draft proposal for NES’s role and associated funding requirements is currently in development and it is hoped that initial discussions will take place with SG during Q4.</p> <p>Although delays are being experienced in relation to the data improvement work, the deliverable is projected to report Green at 2024/25 year-end as quarterly workforce statistics continue to be published as planned throughout the year.</p>
4669	<p>The deliverable supporting the delivery plan, milestones and overall approach for the provision of NTS technology support to the SG Digital Front Door (DFD) programme remains Amber at Q3 and is projected to report Amber at 2024/25 year-end. This is due to ongoing conversations with SG regarding 2025/26 funding to allow full delivery of the agreed initial DFD release.</p> <p>During Q3, the DFD programme board approved a proposed scope of the initial DFD release to NHS Lanarkshire (by March 2026). Development of the DFD Outline Business Case (OBC) has also progressed well with the contracted external partner and a plan is in place to circulate a draft to the DFD programme board by the end of January 2025.</p>
4683	<p>The newly added ADP deliverable supporting the Medical Device Data Hub (MDDH) project (as part of the Scan for Safety (SfS) programme) has reported Amber at Q3 due to the identification of issues with the performance of associated APIs (Application Programming Interface). This is expected to be resolved during Q4 with the MDDH solution scheduled to go live as planned before 31 March 2025. This deliverable is therefore projected to report Green at 2024/25 year-end.</p>
Optometry	
4623	<p>The deliverable that supports the delivery of mandatory training for optometrists and OMPs (Ophthalmic Medical Practitioners) in Scotland continues to report Amber at Q3 as the development of a module due for publication in 2025 is delayed due to internal capacity issues. A module is now available for internal review however previous delays mean that milestone completion remains behind schedule. This deliverable is therefore projected to report Amber at 2024/25 year-end.</p>
Psychology	
4653	<p>In response to the Mental Health Strategy 2017-27, NES Psychology colleagues are developing a national programme of education and training across a range of multidisciplinary, multi-sectoral areas. As per the update provided at Q2, SG funding was received in July 2024 which has enabled some progress around the development of education and training resources, however some resource development continues to be delayed as a result of resourcing issues (including vacancies) and the delayed receipt</p>

2024/25 Quarter 3 – Amber Deliverables	
ADP Ref	Overview / Impact of Current Delays and Mitigating Actions
	of funding. As a result of this ongoing delivery position, this deliverable is projected to report Amber at 2024/25 year-end.
Workforce	
4407	<p>Work to deliver the NES Human Resources (HR) Proposition model remains Amber at Q3 as planned deliverable milestones are behind schedule. The piloting of a self-service function has not been delivered during Q3 as focus has been on the development of efficient and documented business processes.</p> <p>A new Associate Director for HR within NES has been appointed and they will join NES in late March 2025. Associated HR transformation communications and work that can be delivered without input from the new Associate Director will be taken forward during Q4. As a result of the current delivery position this deliverable is projected to report Amber at 2024/25 year-end.</p>

Section C – Deliverables affected by funding delays at 2024/25 Quarter 3

6.11. Table 4 provides an overview of deliverables affected by funding delays at Quarter 3. For the Board’s information, the number of deliverables affected by funding delays has reduced from five to four during Q3. Deliverable 4435 (SG funding of Medicine Information Resources as part of the national digital library and The Knowledge Network) has been removed from the Table 4 as funding for the national digital library tender has now been agreed and the deliverable is projected to report Green at 2024/25 year-end.

Table 4: Deliverables affected by funding delays at Quarter 3

2024/25 Quarter 3	
ADP ref	Summary of funding situation and next steps (if known)
Dental	
4511	There were delays to the issuing of Dental ACT funding confirmations as a result of SG budgetary adjustments.
NHSSA, L & I	
4807	Delivery of the TURAS Refresh project continues to be affected by resource constraints due to a lack of available funding to support additional recruitment.
NTS	
4594	Although written confirmation of SG funding for NES’s provision of technology support of the NHS Scotland Digital Prescribing and Dispensing Pathways Programme (DPDP) was received during Q3, this confirmation only referenced 2024/25 and did not include any guarantee of future funding for 2024/25 and 2026/27.

2024/25 Quarter 3	
ADP ref	Summary of funding situation and next steps (if known)
	NES are unable to recruit to DPDP posts at this stage of the financial year and cannot commence recruitment to support work during 2025/26 or 2026/27 until future funding confirmation is received. As per the update provided at Q2, SG sponsors have again verbally indicated that funding will be provided for the following two financial years (2025/26 and 2026/27). The DPDP Programme Team is working as a priority to obtain written confirmation so that recruitment to the programme can commence. A further update will be provided at Q4.
4669	Discussions with SG regarding the future funding of the Digital Front Door (DFD) programme into 2025/26 are ongoing. Delivery of the initial DFD release is unable to be agreed until funding confirmation is received.

Section D – Key Achievements during 2024/25 Quarter 3

6.12. There have been a number of achievements during Q3 that support the delivery of the [NES 2023-26 Strategy](#) and align directly with our strategic themes ([People, Partnerships and Performance](#)). Further detail is provided within the paragraphs below.

6.13. To support the delivery of our **People** strategic theme objectives, the following has been achieved during Q3:

- Pharmacy Foundation Training Year (FTY) recruitment for the 2025 intake has concluded with a 100% fill rate.
- NES Associate Postgraduate Dental Dean (Dental Core Professionals) appointed as Chair of a Skills for Health UK-wide group leading the review of National Occupational Standards (NOS) for Dental Nursing.
- The first meeting of the Medical Education Reform Steering Group took place in line with [medical education] reform work being undertaken at 4-nations level.
- Menstrual Health e-Learning Module published on TURAS Learn. This is the first of four core modules supporting the ambitions of SG's [Women's Health Plan](#) (2021). The development of a Menopause e-Learning module is ongoing and is on track to formally launched in March 2025 in collaboration with SG partners.

6.14. To support the delivery of our **Partnerships** strategic theme objectives, the following has been achieved during Q3:

- NES has facilitated a wide range of networking opportunities across local and national carer organisations, national mental health third sector organisations and statutory organisations to support the development of a masterclass to raise awareness of unpaid carers across the mental health and wellbeing workforce. Unpaid carers and service users have also been supported by organisations to contribute to the masterclass development, including identifying key messages and potential speakers.

- As part of NES’s role as SG’s delivery partner for leadership, digital and data, a proposed scope of the initial release of the [Digital Front Door](#) (DFD) programme in NHS Lanarkshire (by March 2026) was approved by the DFD Programme Board.

6.15. To support the delivery of our **Performance** strategic theme objectives, the following has been achieved during Q3:

- The Infection Prevention Control team within NES NMAHP has been collaborating with National Services Scotland (NSS) to develop a national waste management module within the Scottish Infection Prevention and Control Education Pathway (SIPCEP). This initiative aims to integrate sustainable practices into the IPC waste management module, educating health and social care professionals on maintaining rigorous IPC standards whilst minimising environmental impact.
- A celebration event was held in November 2024 to mark 10 years of the Scottish Leaders Improvement Programme (ScIL). Since its inception, the ScIL community has grown to over 1,200 improvement leaders from across Scotland, Northern Ireland, Wales, England and Canada. The celebration event provided an opportunity to connect with current and past ScIL participants and hear about the impact the programme has had.

Section E – 2024/25 ADP Amendments during Quarter 3

6.16. Table 5 sets out changes and refinements to the 2024/25 ADP identified during Q3 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 2024/25 ADP during Q3 and have been reviewed and approved by the NES Executive Team.

Table 5: Amendments to the 2024/25 NES ADP – Quarter 3

2024/25 ADP Deliverable	Amendment Detail
NHSSA, L & I	
4422 4801	<p>As per the update provided at Q2, the team supporting the improvement of access to learning and career development for the NHS Scotland (NHSS) Support Workforce (deliverable 4422) transitioned into the NHSSA, L & I directorate from NES Workforce. The Board were also advised of the intention to submit a change to deliverable 4422 during Q3 subject to the early outcomes of discovery work.</p> <p>Following the completion of discovery work during Q3, including a review in the context of the ongoing challenging financial environment, it has been agreed that deliverable 4422 should be closed with aspects of the work subsumed into deliverable 4801 (supporting the development of a new, consistent methodology for the development of career and learning frameworks / pathways in health and social care in collaboration with partners).</p>

	The underpinning requirements for understanding the needs of the NHSS Support Workforce will be more effectively addressed, and will have wider benefit, by subsuming this into the multi-discipline / occupation methodology outlined within deliverable 4801. The wording of deliverable 4801 has also been amended to reference the development and delivery of this new, multi-discipline methodology.
Finance (including Properties & Facilities Management)	
4406	Following the update provided at Q2 regarding the delayed status of the 177 Bothwell Street (Glasgow) office fit-out as a result of the appointed framework contractor going into administration, revised milestones have been provided for Quarters 3 and 4 of this deliverable.

6.17. As a result of the above changes, 177 deliverables will move forward for delivery and reporting in Q4.

Section F – Risk Management

6.18. The five red deliverables reported at 2024/25 Q3 have been reviewed against the NES Corporate Risk Register. Delays reported at Q3 can be broadly aligned with the impact of ongoing financial pressures (SR9) and staff resourcing (SR13). Mitigating actions continue to be taken and further information in relation to each of these risk areas is provided within the quarterly risk report.

Section G – Equality Impact Assessments (EQIA)

6.19. An EQIA was undertaken collectively for the 2024/25 ADP and Financial Plan.

7. Recommendations

7.1. The Board is asked to approve the Quarter 3 Delivery Report and note the amendments made to the 2024/25 NES ADP during this quarter.

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

AS / CBi
January 2025
NES

Annual Delivery Plan (ADP) Summary Progress Report (2024/25 – Quarter 3)

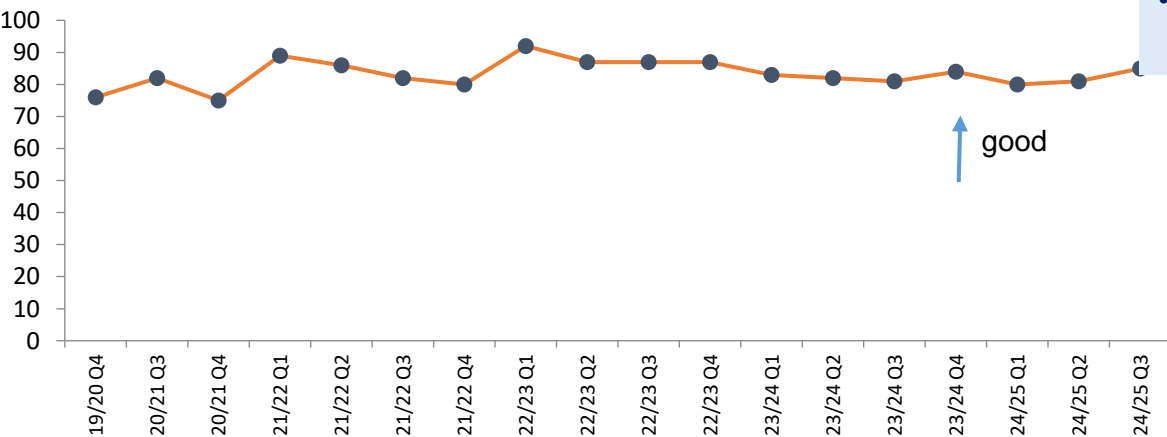
Aim: To provide an overview of progress and highlight key achievements, delays and risks in relation to delivery of the 2024/25 NES ADP.

Delivery Status at 31 December 2024 (Quarter 3)

- 84.5% of deliverables** are completed or on target to be completed in line with ADP milestones at the end of Quarter 3 (Q3). **12%** progressing with minor delays.
- 3% of deliverables** are experiencing significant delay. Mitigating actions are in place to bring deliverables back on track where possible.
- The position at 2024/25 Q3 indicates a slightly higher proportion of red deliverables in comparison to previous years which is mainly due to the challenging public sector financial environment.

Status:	Q1 24/25	Q2 24/25	Q3 24/25	Q4 24/25
Complete	1	1	1	-
On Track	139	142	149	-
Minor Delay	28	29	22	-
Significant Delay	7	3	5	-
Closed	1	-	1	-
Total Deliverables	175 (176)	175	178	-

% of on target / completed deliverables, by Quarter, 2019/20 – 2024/25



Key Achievements (Individual ADP milestone references shown in brackets)

- Networking undertaken with wide range of carer / mental health / statutory organisations and unpaid carers / service users to support development of masterclass to raise awareness of unpaid carers across the mental health and wellbeing workforce. (Ref **4340**)
- NES collaboration with National Services Scotland (NSS) to develop a national waste management module within the Scottish Infection Prevention and Control Education pathway (SIPCEP) supporting the integration of sustainable practices (Ref **4727**)
- NES Mobile Skills Unit skills day (in Inverness) delivered to practitioners working within Community Glaucoma Service (Ref **4576**)
- Digital Dermatology national service offering pathway rolled out as planned across three Health Boards (Ref **4570**)
- 2025 Pharmacy Foundation Training Year recruitment concluded with 100% fill rate (Ref **4271**)
- Strong growth across social media accounts supporting NHS Scotland careers attraction (Ref **4411**)
- Celebration event held to mark 10 years of the Scottish Improvement Leader programme (ScIL) (Ref **4566**)
- Increased strategic partnership / collaboration activity, including at 4-nations level (Refs **4806 / 4802**)
- Reduction in number of Enhanced Monitoring sites continues to reduce (from four to two) (Ref **4257**)
- Menstrual Health eLearning Module launched on TURAS Learn supporting the ambitions of the SG [Women's Health Plan](#) (2021) (Refs **4537 / 4537**)

Delays and associated impact

Of the **5** red and **22** amber deliverables identified at 2024/25 Q3, the majority have mitigating actions in place. Given proximity to 2024/25 year-end, delivery status will be closed monitored and NES Planning will engage with directorates during Quarter 4 as required to support deliverable completion.

Corporate Risks Affecting Delivery

The **5** red deliverables reported have been reviewed against the NES Corporate Risk Register. Delays can be broadly aligned with the impact of ongoing financial pressures (SR9) and staff resourcing (SR13).

5 Red Deliverables

Issues / Mitigating Actions

TURAS Refresh project remains behind schedule as a result of resource constraints and delays associated with the receipt of Scottish Government (SG) funding to support this work.

Progress has been made in some areas of the project however deliverable projected to remain Red at Q4.

The provision of technology support to the NHS Scotland Digital Prescribing and Dispensing Pathways (DPDP) programme has been impacted by a late receipt of funding. Although confirmed funding has been received in Q3 for 2024/25, SG are as yet unable to provide any further confirmation beyond 2024/25.

Recruitment to DPDP posts cannot commence until longer-term funding confirmation received. Deliverable projected to remain Red at Q4.

Planned work within three NMAHP deliverables has been impacted by shifts in SG priorities (supporting the education and training of staff who provide specialist dementia care / development and delivery of the Transgender Care Knowledge and Skills Framework / implementation of ReSPECT on the NDP).

As a result of these decisions being outwith NES's control revised Q4 deliverable milestones for will be provided.

22 Amber Deliverables - overview

Issues / Decisions outwith NES's control

Funding	Delays in confirmation of SG funding which impacts NES's ability to deliver planned milestones e.g. course delivery / provision of funding to key stakeholders
External factors	Other external circumstances / factors e.g. announcement of UK government independent review, faculty / subject matter expert availability, low demand for courses, shift in national landscape
New work	New in-year SG commissions

Issues / Decisions within NES

Capacity	Capacity constraints / internal workforce issues e.g. extended staff absence / workload pressures / team changes / work contingent on other NES processes
Technical issues	Technical complexities associated with individual deliverables
Planning	Individual aspects of a milestone taking longer than originally expected / planned

22 Amber Deliverables - overview

Mitigating actions

Ongoing communication / discussions with SG colleagues to gain clarity re funding delays or changes to commissions

Focused work / planning in Q4 to bring deliverables back on track (within NES and / or with partners and stakeholders as appropriate)

Increased delivery of education and training / Continuing Professional Development (CPD) during Q4

Cross-directorate engagement within NES to ensure internal deliverables remain on track

SG Recovery Driver	2024/25 ADP Deliverable Number	Directorate	Medium-Term Priority	NES Strategic Theme	NES Strategic Theme Detail	NES KPI Reference	2024/25 Deliverable Summary	Q1 Milestones	Q2 Milestones	Q3 Milestones	Q4 Milestones	Q1 RAG Status	Progress in Q1	Q2 RAG Status	Progress in Q2	Projected Q3 status	Q3 RAG Status	Progress in Q3	Projected Q4 (2024/25 Year-End) status		
8. Workforce	4508	Dental	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP122 - Net Promoter Score for stakeholders who rate themselves likely to recommend NES to colleagues and associates	QM (Quality Management) Framework that maintains training delivery to regulatory standards. Provide support to monitor compliance with the conditions of the Dental Undergraduate Bursary Scheme (DUBS) in collaboration with Student Awards Agency Scotland (SAAS) and Scottish Government.	Dental Trainee Survey for 2024 undertaken. Any identified QM activities completed.	Any identified QM activities completed	Data gathering and reporting by Training programme Directors and Health Board Directors of Dentistry. Scoping of any QM activities identified for remainder of Q1 2024 and Q1 2025	Delivery of any identified QM activities	Green	Undergraduate placement and postgraduate training reviews undertaken. Postgraduate dental trainee survey currently live.	Green	Routine Quality Management Reviews organised as planned.	Green	Green	Routine Quality Management Reviews organised as planned.	Green		
1. Primary and Community Care	4509	Dental	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP150 - Employee Engagement Index - Dentists in Training	Provision of educational opportunities for undergraduate students and free dental healthcare services to the general public. Outreach Programme supports BDS (Bachelor of Dental Surgery) students from the Glasgow, Dundee and Aberdeen universities and BDS students from the University of Highlands and Islands (UHI) and Glasgow Caledonian University (GCU) in placements across Scotland.	Periodic Performance Reporting to ensure delivery of requirements and within budget.	Periodic Performance Reporting to ensure delivery of requirements and within budget.	Periodic Performance Reporting to ensure delivery of requirements and within budget.	Periodic Performance Reporting to ensure delivery of requirements and within budget.	Green	Tripartite work between NES, Universities, and Health Boards who take undergraduate students on placement ongoing. Various centres where these students undertake their placements have been reviewed by General Dental Council (GDC) Standards for Education and have met the regulator's requirements.	Green	Meetings with Universities held and plans for Quarter 3 and Quarter 4 agreed in terms of relevant Quality Management activities to be undertaken.	Green	Green	Planning completed and Quality Management work (QM) activities for Quarter 4 prepared. Dates agreed with relevant Boards for QM reviews and reporting during February/March 2025.	Green		
8. Workforce	4511	Dental	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP130 - Dental Funded trainee placements - Fill rate	Provision of Dental Additional Costs of Training (ACT) funding to three Health Boards (NHS Greater Glasgow & Clyde, NHS Grampian and NHS Tayside), as well as funding undergraduate dental provision in the Aberdeen Dental School (University of Aberdeen).	Periodic Performance Reporting to ensure delivery of requirements and within budget.	Periodic Performance Reporting to ensure delivery of requirements and within budget.	Periodic Performance Reporting to ensure delivery of requirements and within budget.	Distribute Dental ACT to 3 Health Boards.	Green	Recipient Health Boards have been advised of initial indicative funding for 2024-25, based on previous year funding levels. Based on the experience of previous years, actual funding for 2024-25 is not likely to be confirmed by Scottish Government until later in the 2024-25 year.	Green	Periodic meetings with funding recipients undertaken during Quarter 2. Final funding positions will be confirmed - as per the Quarter 3 update, Scottish Government confirmations of funding continue to be awaited.	Green	Amber	Funding confirmations were delayed due to budgetary adjustments being made / confirmed by Scottish Government Health Teams. Required reporting structures still to be fully embedded across all of the funding recipient Health Boards and Universities.	Amber		
8. Workforce	4513	Dental	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP136 - Projected variance of budgeting within 0.5% at year end	Subject to funding - Dental Additional Costs of Teaching (ACT) Levy. Collection of overseas student income from the universities of Dundee & Glasgow. Scottish Government approved expenditure funded by levy income.	N/A	Identify relevant numbers of overseas students at the three BDS provider universities who are required to pay the annual ACT Levy and advise NES Finance to enable them to invoice universities for payment.	N/A	N/A	Green	Student numbers, including the split for those overseas who are subject to the ACT Levy will be formally confirmed in August / September 2024 once university matriculation processes are completed.	Green	University student numbers for 2024-25 have now been formally confirmed to NES.	Green	Green	University student numbers for 2024-25 have now been formally confirmed to NES.	Green		
1. Primary and Community Care	4514	Dental	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP140 - Dental Funded trainee placements - Completion rate	Up to 90 Dental Core and up to 40 Specialty post Certificate of Completion of Specialist Training (CCST) trainees achieving the learning outcomes of the relevant curricula to the GDC (General Dental Council) standards per annum.	Undertake Review of Competence Progression (RCP) for all current Dental Core Trainees and Specialty Trainees and issue appropriate outcomes to trainees for 2023/2024 training year. Undertake national and local recruitment for posts commencing in September 2024.	Monitor progress of all trainees and review and monitor any outcomes of recruitment processes to try and fill any vacancies.	No formal review for Dental Core Trainees will take place. Continue RCP for Specialty Trainees.	Deliver up to 90 dental core and up to 40 specialty certifications of completion to dental trainees.	Green	96.15% of Dental Core Trainees (DCTs) received satisfactory outcomes to date with others' progress being reviewed in July 2024. The current 2023/24 DCT posts have filled at 87% via National recruitment and commenced in September 2023. National recruitment for 2024/25 posts commencing in September 2024 took place in May 2024, with local Dental Post Core Fellowship recruitment taking place in June 2024. Overall 86% of posts are currently accepted.	Amber	84% of the Dental Core Training (DCT) posts have been filled in September 2024 via National recruitment for DCT 1-3 posts and local recruitment to Post Core Fellowship posts for the 2024/25 training year. Local recruitment to training is taking place in some Health Board areas to try and fill some of these vacancies.	Green	Green	Local recruitment to fill vacancies at Dental Core Training levels has continued with a further three posts planned to be filled pending pre-employment checks - this would increase the fill rate to 87%. Further local recruitment may take place in Quarter 4 to fill unfilled posts. No formal review took place in Quarter 3 for Dental Core Trainees. 100% of Specialty Training posts were filled in Quarter 3. Reviews of Competence Progression (RCPs) for three dental specialties were reviewed in Quarter 3 with three Specialty Trainees signed off as having completed post CCST (Certificate of Completion of Specialist Training) training.	Amber		
1. Primary and Community Care	4515	Dental	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP120 - Range of workforce accessing learning products	Deliver oral health improvement training through 6 module Childsmile courses. Provide a range of Childsmile development sessions to meet the training needs of Childsmile staff in Health Boards to support oral health improvement programmes and reduce health inequalities including the provision of 2 Special Smiles sessions for up to 20 learners. For older people health improvement programmes support the delivery of Caring for Smiles training. For other Adult oral health improvement programmes deliver training events twice per year. All oral health improvement programmes will include the provision of Open Badges for use as continuing learning and development for health and social care staff.	Deliver 1 cohort of the 6 module Childsmile course, 2 cohorts of 2 module update and 2 development session.	Deliver one cohort of the 6-module Childsmile course, 1 cohort of the 2 module update, 1 cohort of 2 module update and 1 cohort of 2 module update.	Deliver 1 cohort of the 6 module Childsmile course, 1 cohort of the 2 module update, 1 cohort of 2 module update and 1 cohort of 2 module update. Deliver 1 training event for Adult Oral Health in conjunction with partners. Deliver 24/25 have Delivered: 4 cohorts of Childsmile 6 module courses, 5 cohorts of the 2 module updates, 2 Special Smiles training and 6 development sessions. Two training events delivered for Adult oral health in conjunction with partners.	Green	One cohort of the 6-module Childsmile course took place with eight Dental Nurses (DN) and five Dental Health Support Workers (DHSWs) attending. Two cohorts of fluoride varnish training took place with 17 DNs attending. No 2 module update took place due to low demand during this quarter. 135 learners attended the foundation level training for Caring for Smiles with 78 completing the foundation level qualification. Two learners attended the intermediate training for Caring for Smiles with one completing the intermediate level qualification. 218 learners have completed Open Badges during Quarter 2.	Green	Green	Two cohorts of the 6-module Childsmile course took place with 13 Dental Nurses (DN) and two Dental Health Support Workers (DHSWs) attending. Two cohorts of fluoride varnish training took place with 17 DNs attending. No 2 module update took place due to low demand during this quarter. 135 learners attended the foundation level training for Caring for Smiles with 78 completing the foundation level qualification. Two learners attended the intermediate training for Caring for Smiles with one completing the intermediate level qualification. 218 learners have completed Open Badges during Quarter 3.	Green	Green	Two cohorts of the 6-module Childsmile course took place with 21 Dental Nurses (DN) and six Dental Health Support Workers (DHSWs) attending. Two development sessions took place with 20 DNs and two DHSWs attending. 16 DNs also completed the in-person fluoride varnish training over two cohorts. 83 learners attended the foundation level training for Caring for Smiles with 114 completing the foundation level qualification in Quarter 3. Two in-person events were held for Smiles for Life / Mouth Matters and Caring for Smiles / Open Wide with a total of 68 attendees. 166 learners have completed Open Badges during Quarter 3.	Green		
8. Workforce	4517	Dental	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP110 - Range of workforce accessing learning products	Provide places for General Dental Practitioners (GDPs): up to four cohorts of 15 in Adults with Incapacity; up to two cohorts of 20 in Enhanced Skills Practitioner Domiciliary care.	Deliver 1 Adults with Incapacity course for up to 15 learners.	Deliver 1 Adults with Incapacity course for up to 15 learners.	Deliver 1 Adults with Incapacity course for up to 15 learners; 1 Enhanced Skills Practitioner Domiciliary Care Course for up to 20.	Provided places for up to 4 cohorts of 15 in Adults with Incapacity, 2 cohorts of 20 in Enhanced Skills Practitioner.	Amber	From 2023/24 courses, two learners have successfully completed all elements of the training to be able to sign Section 47 (prepared when a patient requires health care and is unable to consent) certificates in Quarter 1.	Green	17 learners attended the Adults with Incapacity training with presentations for the assessed element taking place in October 2024 (Quarter 3). The Enhanced Skills Practitioner course is planned to take place during November and December 2024 (Q4) with participants identified and meeting Health Board demand.	Green	Green	16 learners attended the Adults with Incapacity case presentations in Quarter 3 with 13 receiving completion certificates to allow signing of section 47 certificates (required when patient requires health care and is unable to consent). The Enhanced Skills Practitioner - Domiciliary Care course commenced in Quarter 3, with six General Dental Practitioners (GDPs) taking part which met Health Board demand. The remaining session will be delivered in Quarter 4. This has so far resulted in a further two GDPs being able to sign Section 47 certificates with others to complete assessed elements. Additional opportunities for personal development exist in the form of the Public Dental Service with a further three learners attending some Domiciliary Care sessions.	Green		
1. Primary and Community Care	4518	Dental	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP110 - Range of workforce accessing learning products	Provide educational activities for Vocational Dental Practitioners for academic year, equivalent to minimum 25 study days for each of the 15 schemes of approx 10-12 Vocational Trainees. 100% of Vocational Dental Practitioners to be assessed throughout training and considered for satisfactory completion at National Review Panels in June/July each year, or through pre-screening processes.	Delivery of at least 25 study days for each Vocational Dental Practitioner (VDP) for 2023-24 Vocational Dental Practitioner (VDP) for 2023-24 training year before National Review Panel. National Review Panel to take place on 12th June 2024 to consider 100% of DVs for satisfactory completion from 2023-24 training year. Allocate all matched Dental Vocational Trainees and Trainer pairs to schemes. All Trainees invited to attend local induction days. Advisers to complete study day programmes for VDPs commencing on 1st August 2024.	Complete training year for 2023-24 Vocational Dental Practitioner (VDPs) who have obtained satisfactory completion following National Review Panel in June 2024. 100% of 2024-25 training year VDPs to undertake induction.	Maintain attendance of Educational activities by Vocational Dental Practitioners for each of the 15 schemes to ensure on target to be completed for each of the 15 schemes by the National Review Panel (NRP) date in June 2025. 100% of DVs in post to be considered for satisfactory completion of training in June 2025.	Educational activities for Vocational Dental Practitioners (VDPs) to continue with at least 25 study days on target to be completed for each of the 15 schemes by the National Review Panel (NRP) date in June 2025. 100% of DVs in post to be considered for satisfactory completion of training in June 2025.	Green	At least 25 study days have been delivered for each Vocational Dental Practitioner (VDP) for the 2023/24 training year. The national review panel (NRP) took place in June 2024 with 146 (96.7%) of VDPs gaining satisfactory completion of training. Additional NRP will take place in July 2024 to review 2 VDPs who had outstanding conditions to meet. One VDP was not reviewed due to sickness leave. 2 VDPs were offered additional training time from August 2024 from between 6 and 12 months.	Green	Green	96.7% of Vocational Dental Practitioner (VDPs) for the training year 2023/24 received satisfactory completion of the training year with two VDPs being offered additional training time and one remaining on maternity leave. For the 2024/25 training year, induction has taken place and study days have commenced.	Green	Green	Study days are on target to ensure all trainees in post complete 25 study days by June 2025. From the 2023/24 training year, one Vocational Dental Practitioner (VDP) received satisfactory completion in Quarter 3 having undertaken three months of additional training. A further National Review Panel will take place in January 2025 to review another trainee's progress. One VDP returned to training following maternity leave.	Green	
1. Primary and Community Care	4519	Dental	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP110 - Range of workforce accessing learning products	Subject to funding - sessional fees to provide a preparatory Train the Trainer programme (START) for 100% of new Dental Vocational Trainers appointed for 'training' year 2024-25. Remuneration (see payroll) Dental Vocational Trainers working in remote areas with the recruitment and retention allowance in line with Determination XIII in the Statement of Dental Remuneration.	Delivery days 1 & 2 of the START course in April and June 2024 to all new Dental Vocational Trainers and ensure applications for the sessional fees are submitted within a 3 month period.	Deliver day 3 of the START course in July 2024 for all new Dental Vocational Trainers and ensure applications for the sessional fees are submitted within a 3 month period.	Deliver day 4 of the START course in October 2024 for all new Dental Vocational Trainers and ensure applications for the sessional fees are submitted within a 3 month period.	Ensure all sessional fees are submitted from new Dental Vocational Trainers for START course.	Amber	Two cohorts of days 1, 2 and 3 of the START course have been delivered for all new Dental Vocational Trainers for the 2024/25 training year with 47 participants attending.	Green	Day 3 of the START training for new trainees took place with all attendees submitting their claims for sessional fees within the 3 month period.	Green	Green	Day 4 of START training for new trainees took place in Quarter 3 with 100% of submitted claims to date now processed by NES Finance for sessions delivered to date.	Green		
1. Primary and Community Care	4520	Dental	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP130 - Dental Funded trainee placements - Fill rate	Administration of Dental Vocational Training (DVT) recruitment process and standardised training programme to recruit qualified dentists make the transition from under-graduate teaching to independent practice. Recruitment to at least match Scottish Dental School output for 2024.	Recruited Trainees to more than match the Scottish Dental School output. Visitation and match to posts will take place May-June 2024.	Invite applications from Dental graduates and others for 2025-26 training.	Open trainee applications to recruit sufficient trainees for the 2025-26 Scottish Dental School training output.	Recruit to Dental Vocational Training in Scotland to match Scottish Dental School output. Trainer review and school output for 2025-26 cohort.	Green	Trainee recruitment took place with 242 applications received and 166 applicants progressing to the visitation process. This matched the Scottish Dental School output for 2024. 144 trainees were successful in matching with a Vocational Dental Practitioner (VDP). 22 training posts remain unfilled for 2024/25 due to a number of VDP applicants from Scottish Dental Schools choosing not to take up a training post in Scotland.	Green	142 (86% of the 166 target) Vocational Dental Practitioner (VDPs) were matched to training posts in October 2024. Applications have now opened for Vocational Dental Training commencing in 2025/26.	Green	Green	Trainee applications opened in Quarter 2 for Vocational Training commencing in 2025/26. 162 trainees applied to training in 2025/26 by the end of Quarter 3. New trainee applications have not closed with 53 trainee applications made for 51.5 training posts. Existing and returning applications due to close on 27 January 2025 for the 2025/26 training year.	Green		
1. Primary and Community Care	4522	Dental	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP120 - Range of workforce accessing learning products	Deliver Continuing Professional Development (CPD) designed to improve access to and the quality of dental care across Scotland. Develop partnerships to proactively identify service and workforce development needs prior to developing future focused learner pathways.	Offer up to 15,000 hours Q1 and Q2 increasing Q3 and Q4. Identify and engage appropriate partners to recognise and prioritise services, population and workforce needs in Q1 and Q2.	Offer up to 15,000 hours Q1 and Q2 increasing Q3 and Q4. Identify and engage appropriate partners to recognise and prioritise services, population and workforce needs in Q1 and Q2.	Offer up to 15,000 hours Q1 and Q2 increasing Q3 and Q4. Agree strategy and operational plan to meet needs identified in Q3 and Q4.	Offer up to 15,000 hours Q1 and Q2 increasing Q3 and Q4. Agree strategy and operational plan to meet needs identified in Q3 and Q4.	Green	We have delivered multi-format CPD (130,038 hours made available) to the dental workforce across Scotland. We have identified and engaged with relevant partners (Directors of Dentistry), to help us understand workforce and population needs.	Green	The total hours offered for both webinars and Face to Face CPD delivery during Quarter 2 is 22,880.5 hours.	Green	Green	The total hours offered for both webinars and Face to Face CPD delivery during Quarter 3 is 25,591 hours.	Green		
1. Primary and Community Care	4523	Dental	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP11 - Nage learners reporting that learning will improve practice	Continue to refine the current model for the NES New to Scotland Education Support Training programme - a flexible and adaptive programme for remediation and bespoke training and support. Including a modular Mandatory Training programme to be run four times per year. Continue to support registrants with PDPs (Personal Development Plans) using the expertise from a pool of trained Mentors. Continue to provide support and advice to registrants to enable them to safely return to the workforce after a career break.	Deliver Mandatory training quarterly with a minimum of 30 places. Review quality framework for NESI in collaboration with other directorates. Deliver mentoring/refresher course for NESI mentors and continue to provide advice and support to registrants returning to work on a supply and demand basis.	Deliver Mandatory training quarterly with a minimum of 30 places. Review quality framework for NESI in collaboration with other directorates. Deliver mentoring/refresher course for NESI mentors and continue to provide advice and support to registrants returning to work on a supply and demand basis.	Deliver Mandatory training quarterly with a minimum of 30 places. Review quality framework for NESI in collaboration with other directorates. Deliver mentoring/refresher course for NESI mentors and continue to provide advice and support to registrants returning to work on a supply and demand basis.	Green	Mandatory training course scheduled for 2024/25 Quarter 1 ran on 9 & 30 May 2024 with 56 participants.	Green	Mandatory training course ran in November 2024 with 34 candidates registered - all completed the Test Of Knowledge assessment successfully within the 6-week time frame. The NESI remediation programme is supporting eight registrants in Quarter 3 (two from Public Dental Service / PDS and six from General Dental Services / GDS) with one registrant seeing a reduction in their practicing conditions due to the support received.	Green	Green	Mandatory training course ran in November 2024 with 34 candidates registered - all completed the Test Of Knowledge assessment successfully within the 6-week time frame. The NESI remediation programme is supporting eight registrants in Quarter 3 (two from Public Dental Service / PDS and six from General Dental Services / GDS) with one registrant seeing a reduction in their practicing conditions due to the support received.	Green			
1. Primary and Community Care	4524	Dental	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP11 - Nage learners reporting that learning will improve practice	Collaborate with Scottish Government to develop, deliver and certify the statutory requirements for the Quality Improvement (QI) Cycle 22/25. QI 22/25. Quality Assurance of QI projects submitted to the QI Hub for statutory requirements in Vocational Training and Mandatory Training and any other areas which may be added including previous QI cycle catch up. To drive internal efficiency, sustainability and affordability we will apply QI Methodology to the Dental Workforce Development (DWD) workstreams to deliver on the NES strategy.	Q1 and Q2 we will deliver the resource for the QI Cycle 22-25 Q1 and Q2 we will identify areas to improve internal efficiencies across the workforce. Q1-Q4 QA standard of QI projects as they are submitted.	Q1 and Q2 we will identify areas to improve internal efficiencies across the workforce. Q1-Q4 QA standard of QI projects as they are submitted.	Q1 and Q2 we will identify areas to improve internal efficiencies across the workforce. Q1-Q4 QA standard of QI projects as they are submitted.	Green	During 2024/25 Quarter 1, we hosted the latest QI Cycle on the TURAS platform, supporting dental teams to meet their statutory requirements. The Quality Assurance of QI projects remains ongoing throughout this quarter. Potential interim QI projects have been identified and are currently at the prioritisation stage.	Green	QI projects that assist overseas registrants to gain vocational training equivalence and enable them to be independently listed as NHS practitioners continue to be processed as practitioners submit individual projects.	Green	Green	QI projects that assist overseas registrants to gain vocational training equivalence and enable them to be independently listed as NHS practitioners continue to be processed as practitioners submit individual projects.	Green			
1. Primary and Community Care	4525	Dental	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP130 - Number of NES programmes of education and training which are SCOF credit rated	Lead and manage the Scottish Qualifications Authority (SQA) Centre Approval status held by NES in line with SQA Quality Assurance criteria. As appointed Head of Centre, provide leadership within the organisation towards a collaborative 'One for NES' approach in all SQA provision, with consistent internal high quality processes aligned to SQA Quality Assurance criteria. This will enable NES to provide a wide range of SQA accredited education and training provision that meets the needs of the health and care workforce.	Lead and manage the SQA Centre in line with SQA Quality Assurance criteria and provide support and guidance to colleagues in the preparation for External Verification QA visits.	Lead and manage the SQA Centre in line with SQA Quality Assurance criteria and provide support and guidance to colleagues in the preparation for External Verification QA visits.	Lead and manage the SQA Centre in line with SQA Quality Assurance criteria and provide support to colleagues. Undertake the Customised Award Monitoring Process for Assessors and Internal Verifiers of Customised Awards (NMAHP, Optometry and Psychology).	Green	External Verification Quality Assurance conducted by SQA during Quarter 1 sampling a total of 7 SQA qualification programmes delivered by NES directorates: Dental (D), NMAHP (Family Nurse Partnership) (F), Optometry (O) and Psychology (P). All QA outcomes RAG rated Green across all programmes and a total of 13 areas of Good Practice were identified across the programmes.	Green	External Verification Quality Assurance (QA) conducted by SQA during Quarter 2 sampling a total of 1 SQA qualification programme delivered by NES Directorate. Programme RAG rated Green - High Confidence against all QA criteria sampled and one area of Good Practice identified.	Green	Green	SQA Systems Verification QA visit took place during September 2024. This QA process ensures the NES SQA Approved Centre is effectively managing all assessment and quality assurance processes and that our candidates are supported effectively. RAG rated Green - High Confidence against all QA criteria sampled and one area of Good Practice identified.	Green	Green	Received notifications from SQA for External Verification - Qualification Verification activities for 2025. Dental has currently received requests to conduct qualification verification of 10 SQA awards in 2025. Customised Award Monitoring Meeting for four Customised Awards being planned for early 2025. Delivery of an Assessor Induction for Optometry programme team planned for January 2025. Involvement in the re-writing of the NES (National Occupational Standards) for Dental Nursing, and the review of the NQD (Dentistry National Qualification) and PDS (Professional Development Award) qualifications to meet the General Dental Council (GDC) Safe Practitioner Framework by August 2025.	Green
1. Primary and Community Care	4526	Dental	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP11 - Nage learners reporting that learning will improve practice	Provide access for up to eight registered Dental Care Professionals (DCPs) to upskill and be registered as an Orthodontic Therapist (OT) and support high quality frontline care.	Complete recruitment and commence OT programme that begins with the four week core programme and provide an induction programme for Trainees on Educational Supervision.	Delivery and assessment of programme via online and in-person study days. Review and monitor trainee progression. Participation in GDC QA inspection of the RCSEd Diploma in OT.	Delivery and assessment of programme via online and in-person study days. Review and monitor trainee progression. Facilitation of internal gateway examination to determine access for RCSEd Diploma in OT summative assessment.	Green	10 trainees completed the 2024-25 Orthodontic Therapist programme in Q1 and 100% successfully completed the initial four week core programme. This cohort includes four trainees employed in rural NHS Scotland Boards on an extended training period.	Green	The 2024-25 Orthodontic Therapist cohort are progressing well, monitoring progression through attendance online and in-person study days, portfolio development and mock examinations. Remote Supervision completed of all trainees and supervisors conducted during Quarter 3.	Green	Green	The 2024-25 Orthodontic Therapist cohort are progressing well, monitoring progression through attendance online and in-person study days, portfolio development and mock examinations. Remote Supervision completed of all trainees and supervisors conducted during Quarter 3.	Green			
1. Primary and Community Care	4527	Dental	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP11 - Nage learners reporting that learning will improve practice	Provide educational resources to support new trainee dental nurses to undertake the NES Dental Nurse Induction online learning programme via TURAS. This includes four modules and a knowledge check that will complement a trainee's workplace induction and provide access to flexible learning resources to support and equip trainees with knowledge and skills to work safely within the team to provide high quality patient care and support professionalisation in education health and social care, with a particular focus on digitally enabled learning.	Provide educational resources to support new trainee dental nurses through access to an online Dental nurse induction learning programme to inform safe working practices.	Provide educational resources to support new trainee dental nurses through access to an online Dental nurse induction learning programme to inform safe working practices.	Provide educational resources to support new trainee dental nurses through access to an online Dental nurse induction learning programme to inform safe working practices.	Green	43 individuals accessed the TURAS Dental Nurse Induction online learning programme during Quarter 1, with 37 trainees completed to date.	Green	36 learners accessed the TURAS Dental Nurse Induction online learning programme during Quarter 2, of which 29 have completed to date. 2024-26 cohort: 62 trainee Dental Nurses completed the Modern Apprenticeship in Dental Nursing in Quarter 2. It is in progress towards completion during 2024-25.	Green	Green	30 individuals accessed the TURAS Dental Nurse Induction online learning programme during Quarter 3 of which 25 have completed to date.	Green			

SG Recovery Driver	2024/25 ADP Deliverable Number	Directorate	Medium-Term Priority	NES Strategic Theme	NES Strategic Theme Detail	NES KPI Reference	2024/25 Deliverable Summary	Q1 Milestones	Q2 Milestones	Q3 Milestones	Q4 Milestones	Q1 RAG Status	Progress in Q1	Q2 RAG Status	Progress in Q2	Projected Q3 Status	Q3 RAG Status	Progress in Q3	Projected Q4 (2024/25 Year-End) Status	
8. Workforce	4258	Medical	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP13a - Medical Funded	Deliver training administration for 6,700 doctors in training across 300 training programmes ensuring allocation, progression and completion of training is managed using Annual Review of Competency Progression (ARCP) outcomes to measure performance, ensure trainees are performance managed and recommended for revalidation.	Reporting on ARCP outcomes for all trainees with a review in Q1. MDQSG to review data and trends to identify any areas of concern and best practice.	Reporting on ARCP outcomes for all trainees with a review in Q2. MDQSG to review data and trends to identify any areas of concern and best practice.	Reporting on ARCP outcomes for all trainees with a review in Q3. MDQSG to review data and trends to identify any areas of concern and best practice.	Reporting on ARCP outcomes for all trainees with a review in Q4. MDQSG to review data and trends to identify any areas of concern and best practice.	Green	ARCP outcomes reviewed and discussed at Medical Directorate Quality and Safety Group (MDQSG) meetings during 2024/25 Quarter 1.	Green	ARCP outcomes reviewed and discussed at Medical Directorate Quality and Safety Group (MDQSG) meetings during 2024/25 Quarter 2. Early indicators show similar outcomes to previous year. Feedback data will be available in Quarter 3. Review of appeal outcomes planned for Quarters 4 and 5.	Green	Green	ARCP Progression report discussed at Medical Directorate Quality and Safety Group (MDQSG) meetings during Quarter 3 and submitted to the NES Education & Quality Committee for further discussion. Results showed that the majority of trainees are meeting curricula requirements and progressing satisfactorily. Around 6% of trainees required additional competencies to meet curricula requirements and around half of these needed an extension to training.	Green	
8. Workforce	4260	Medical	Education, training & workforce development	Partnerships	Build capability around training and workforce development	SKP13a - Medical Funded	Recruitment, training and support of doctors in training to meet current and projected workforce requirements.	TBC	TBC	TBC	TBC	Green	Active involvement in moving Medical Education Reform process forward in line with work being undertaken at a national level, regular reporting being provided to the NES Executive Team and NES Board.	Green	Stakeholder meetings have been held with Directors of Medical Education (DME) and Medical Education Reform Steering Group (MESRG) and a final list of requested expansion posts has been drafted to go to SG for sign off.	Green	Green	Project governance and management structures have been established. The first meeting of the Medical Education Reform Steering Group took place on 30 October 2024 and will occur quarterly moving forward. The Terms of Reference for the group are to be reviewed and additional representation will be identified as needed.	Green	
8. Workforce	Deliverable Closed 4267	Medical	Education, training & workforce development	Partnerships	Deliver health care research, development and innovation	Operational	This deliverable was closed during 2024/25 Quarter 2. Please see the Quarter 2 narrative update (column P) for further detail.					Amber	SMERK (Scottish Medical Education Research Consortium) funding reduced as part of 2024/25 Scottish Government savings exercise. The group is still operational and has agreed the objectives for the coming year with the NES Medical Director. Milestones for this deliverable will be provided at Quarter 2.	N/A	The NES Executive Team agreed that this deliverable (4267) should be closed as a result of the 2024/25 Scottish Government savings exercise - there is no longer funding available to support this work.	N/A	N/A	Deliverable closed during 2024/25 Quarter 2.	N/A	
8. Workforce	4287	Medical	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP13a - Medical Funded	Deliver training of agreed expansion of medical workforce by using effective financial and data resource to monitor establishment and trends. Ensure 680 Scottish Government (SG) funded training grade payments are made to Boards timely and accurately reflecting the allocation of doctors according to financial policies. Manage and monitor trainee rotations to ensure specific financial rules are applied to pay for expansion posts funded by SG.	Note fill rates for all specialties where expansion has occurred and report data to SG	All expansion posts added to Turas so payments can be made to Health Boards correctly from August 2024. Audit of new post establishment.	Planning for 2025/26 including projection of number of agreed expansion posts and number of placements required for extension to Turas 2024/25.	Confirmation of expansion posts for 25/26 from SG.	Green	Scottish Government have received provisional data around fill rates, including expansion posts, during Quarter 1.	Green	Expansion posts have been added to TURAS (Training Programme Management / TPM) to ensure Health Board are aware correctly. Posts where additional baseline funding has been provided have been identified and the funding will be added to posts during Quarter 3.	Green	Green	Operational planning for 2025/26 completed - to include projection of number of agreed expansion posts. Baseline funding added to an additional 551 training posts in Quarter 3.	Green	
8. Workforce	4288	Medical	Education, training & workforce development	Partnerships	Build capability around training and workforce development	SKP16 - TBC	Administer, oversee and record Targeted Enhanced Recruitment Scheme (TERS) grants of up to £1m across agreed programmes to increase GP recruitment to hard to fill locations including GP Training Grants + 90, and any other infrastructure provided as part of secondary care specialty expansions for 2024-25, Foundation placement expansions and Foundation Overseas/Overseas.	TBC	TBC	TBC	TBC	Green	All posts with a Targeted Enhanced Recruitment Scheme (TERS) bursary attached have been filled. Discussions have commenced with Scottish Government in relation to 2025 bursaries.	Green	Payments made to trainees as planned. Advised Scottish Government that funding for Targeted Enhanced Recruitment Scheme (TERS) bursaries for 2025 could be ceased to assist with cost savings.	Green	Green	Continue to monitor Targeted Enhanced Recruitment Scheme (TERS) trainees who resign from the programme. No further action required in terms of planning as scheme removed for 2025/26.	Green	
8. Workforce	4289	Medical	Education, training & workforce development	Partnerships	Build capability around training and workforce development	SKP13a - Medical Funded	Recruit with at least 95% fill of the medical training grade establishment headcount against agreed national standards and statutory requirements by the end of Round 3 for up to 301 training programmes across Scotland. Report on programmes in all regions to 95% minimum and manage establishment including resignations, early Certificate of Completion of Training (CCT) and Less than Full Time (LTFT) trends to support effective WTE (Whole Time Equivalent) recruitment where possible.	Have provisional fill rates for rounds 1 and 2 of recruitment (August start dates). Communicate trainee information to Health Boards in line with Code of Practice.	Recruitment activity for round 3 (February start dates)	Confirm UK fill rate data to SG for round 1 and 2 of recruitment. Have provisional fill rates for Round 3 (February start) and communicate trainee details to Health Boards in line with Code of Practice.	Recruit to at least 95% fill of the medical training grade establishment headcount. Work with SG and MSG to ensure accurate and rapid transfer of information to boards for effective onboarding and to reduce late starts	Green	Provisional fill rates are known and currently sit at 94% overall for rounds 1 and 2 of Medical Training Grade recruitment. All data has been communicated to Health Boards in line with Code of Practice deadlines.	Green	Overall Scottish fill rate for August 2024 stands at 94.4% which is a slight improvement on last year's 93.0% (East Region fill rate 93% (improvement from 89% last year) - North Region fill rate 85% (slight improvement from 84% last year) - South East region fill rate 95% (improvement from 93% last year) - West region fill rate 98% (slight improvement from 97% last year)	Green	Green	Confirmation of UK fill rate data to Scottish Government for Round 1 and 2 recruitment. Provisional fill rates now available for Round 3 (February 2025 start) and trainee detail has been communicated to Health Boards in line with Code of Practice.	Green	
8. Workforce	4293	Medical	Education, training & workforce development	Performance	Deliver national leadership and CP programmes	SKP10 - Sage of workforce	Provision of Clinical Fellows across multiple specialties and areas of interest (including leadership) to provide educational development to doctors and build specialist and leadership capacity within the medical workforce.	Recruit up to 10 Remote & Rural Fellow, interviews for Medical Education and Health Inequality fellows paediatric fellows, 12 Scottish Clinical Leadership Fellow (SCLF) for Aug 24 start, allocation of SCLFs and Histopath fellows.	Receive agreed additional TIG Fellow and Remote & Rural Fellows for 2025	Q3 begin recruitment cases for SCLF and Remote & Rural Fellows for 2025	Recruit: 12 Scottish Clinical Leadership Fellow (SCLF) and Remote & Rural Fellows for 2025	Green	During Quarter 1, recruitment for Remote and Rural Fellows has completed with seven confirmed posts, two awaiting confirmation and one vacancy. Medical Education and Health Inequality Fellows have been fully recruited. Scottish Clinical Leadership Fellows have been recruited and matched to placements. Paediatric fellows were not recruited in line with agreed SCG cost savings for 2024/25. Scottish Clinical Research Excellence Development Scheme (SCREDS) and Histopath fellows have been recruited.	Green	Fellows commenced in post as per Quarter 2 milestone.	Green	Green	Business case raised for reduced number of SCLF (Scottish Clinical Leadership Fellowship) posts for 2025/26. Agreed number of clinical fellows in operational plan for 2025/26 make.	Green	
8. Workforce	4295	Medical	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP15a - Employee Engagement Index - Doctors in Training	Provision of sustainable equitable support for all postgraduate medical doctors in training via the Trainee Development and Wellbeing Service. Ensure that appropriate staffing levels and contracts are in place to provide service in line with best practice and Good Guide guidance providing trainees access to careers advice, wellbeing support and management of LTFT (Less than Full Time) training. Development of oversight of activities relating to Equality & Diversity.	TBC	Implementation of new resignation process	TBC	TBC	Green	New resignation process implemented with the first of data to be reported at Medical Directorate Quality and Safety Group (MDQSG) meeting in August 2024.	Green	As per Quarter 2 milestone, resignation process now fully implemented to ensure exit interviews for aspirants. Quarterly monitoring report to Medical Directorate Quality and Safety Group due in Quarter 3.	Green	Green	As per Quarter 3 milestone, resignation process now fully implemented to ensure exit interviews for aspirants. Quarterly monitoring report discussed at Medical Directorate Quality and Safety Group in Quarter 3.	Green	
8. Workforce	4308	Medical	Education, training & workforce development	Performance	Deliver national leadership and CP programmes	Operational	Delivery of the NES (Scotland Deans) Quality Management - Quality Improvement Framework to manage and improve postgraduate medical education in Scotland to ensure all training posts meet General Medical Council's (GMC) standards.	First quarterly update for Annual Deans Report (ADR) to GMC. Visit schedule for GMC Priority visits finalised	Second quarterly ADR update, visits and reports according to plan, data plan for medicine to Medical Directorate Senior Team (MDST)	Annual report to Educational Governance Group. Third ADR update, visits and reports to schedule	Delivery of NES Scotland Deans Quality Management framework to GMC standards.	Amber	Effective Quality Management (QM) system in place - now have closer working relationship with Health Boards following triggered visits with SMART objective meetings and Action Plan Review Meetings. The number of sites on Enhanced Monitoring has reduced from 10 to 5.	Amber	Effective Quality Management (QM) system in place - now have closer working relationship with Health Boards following triggered visits with SMART objective meetings and Action Plan Review Meetings. The number of sites on Enhanced Monitoring has reduced to four from five in Quarter 1).	Amber	Amber	Effective Quality Management (QM) system in place - now have closer working relationship with Health Boards following triggered visits with SMART objective meetings and Action Plan Review Meetings. The number of sites on Enhanced Monitoring has reduced to two from four in Quarter 2).	Amber	
8. Workforce	4310	Medical	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP16 - TBC	Distribution of agreed Medical Additional Costs of Teaching (MACT) funding to 19 NHS Boards across Scotland. Performance management Boards in their use of Medical ACT funding to secure efficient and effective use of funds for clinical training of medical undergraduates (approximately 6,000 over seven Medical Programmes) within healthcare settings in Scotland.	Allocation Letter should be issued to Health Boards outlining their recurrent and non recurrent additional allocation for the year. Hold drop-in sessions for stakeholders to allow an opportunity to discuss this years allocations.	Health boards to submit bids for their funding, using the Medical ACT App. NES will review bids and update status accordingly by the 28 th of the month. Boards, Medical ACT colleagues to attend Regional ACT Working Groups (RAWGs). 2023/24 accountability reports to be received from Boards and reviewed by NES.	National unutilised funds position established. Health Boards to submit bids, for national funding using the Medical ACT App. NES will review bids and update status accordingly by the 28 th of the month. NES to attend RAWGs. 2023/24 accountability reports to be received from Boards and reviewed by NES.	Data for 2023/24 allocation model collated and reviewed and Model completed. Medical ACT Annual Report 21/24 published.	There have been nine Regional ACT Working Group (RAWG) meetings within this period, with representation from the NES Medical ACT Team present at all. As of 20 September 2024, the Medical ACT Team had approved 86 bids and declined two. Total funding allocated was £2,826,425. The deadline for Boards to submit bids was moved to the end of October 2024 due to the delay in allocations confirmation earlier in the year by Scottish Government.	Green	Allocation letters were issued to Health Boards on 26 June 2024. This was later than usual (early April) due to a delay in receiving final written confirmation from Scottish Government in relation to 2024/25 funding arrangements. NES Medical provided regular written updates to stakeholders during this period and moved swiftly to issue the letters as soon as possible after the funding position was confirmed.	Green	There have been nine Regional ACT Working Group (RAWG) meetings within this period, with representation from the NES Medical ACT Team present at all. As of 20 September 2024, the Medical ACT Team had approved 86 bids and declined two. Total funding allocated was £2,826,425. The deadline for Boards to submit bids was moved to the end of October 2024 due to the delay in allocations confirmation earlier in the year by Scottish Government.	Green	Green	There have been four Regional ACT Working Group (RAWG) meetings within this quarter, with representation from the Medical ACT team at them all. Final local bids were received in October 2024 with national slippage bids received in November and December 2024. Following review and approval there is approximately £1m remaining of Medical ACT funding for 2024/25. Boards have been asked to submit final bids by 7 February 2025. Medical ACT administrator the ScotCOM (Scottish Community Oriented Medical programme) enabling infrastructure meetings and have provided funding support towards set up of this new programme. A further Medical ACT Stakeholder Engagement event took place on 5 November 2024 to promote collaborative working and discussion of common goals for Medical ACT.	Green
8. Workforce	4312	Medical	Education, training & workforce development	Partnerships	Scope & develop a remote & rural centre for health & social care	SKP16 - TBC	Subject to funding - provide infrastructure to support the UK wide Rural and Remote Credential Programme	Onboard first cohort of Recognition Doctors to programme	Run first credential panel and identify doctors eligible for consideration by GMC for the award of rural and remote credential	Onboard second cohort of Recognition Doctors to programme	Run second credential panel and identify doctors eligible for consideration by GMC for the award of rural and remote credential	Amber	2024/25 Scottish Government funding for the Remote and Rural Credential programme was not confirmed on 24 June 2024. This delay has meant that the onboarding of the first cohort of Recognition Doctors has moved to September 2024 (Quarter 2). The Remote and Rural Credential programme. The panel commenced on the robustness of the doctors presented and the depth of experience and dedication these doctors have to high quality healthcare in rural Scotland. They also commented on the innovative way the credential has looked at capabilities in practice and ensuring that doctors are equipped for their role in underserved patient care provision. The first cohort of doctors undertaking the recognition route is commencing over October/November 2024 and the first cohort of the learner route has been postponed to January 2025 as the team have agreed to undertake a learner champion route with three learner doctors commencing in October 2024. This will allow the team to test out this route as they did with the recognition champions - this process was highly beneficial to the team allowing processes and systems to be tested in advance of official launches. The team are due to meet with the recognition champion doctors during Q1 - Nov 2024 at which they will ask if they would be willing to be Educational Supervisors (a few have already indicated willingness). We have had meetings with two of the learner champions Educational Supervisors to go over the credential and the requirements of their role. Closer working with NES Medical colleagues to develop an e-module for Educational Supervisors.	Amber	The team are delighted to report that all seven doctors that were presented to the panel achieved the competencies outlined in the Remote and Rural (R&R) credential curriculum and have been recommended to the General Medical Council (GMC) as having completed the credential programme. The panel commenced on the robustness of the doctors presented and the depth of experience and dedication these doctors have to high quality healthcare in rural Scotland. They also commented on the innovative way the credential has looked at capabilities in practice and ensuring that doctors are equipped for their role in underserved patient care provision. The first cohort of doctors undertaking the recognition route is commencing over October/November 2024 and the first cohort of the learner route has been postponed to January 2025 as the team have agreed to undertake a learner champion route with three learner doctors commencing in October 2024. This will allow the team to test out this route as they did with the recognition champions - this process was highly beneficial to the team allowing processes and systems to be tested in advance of official launches. The team are due to meet with the recognition champion doctors during Q1 - Nov 2024 at which they will ask if they would be willing to be Educational Supervisors (a few have already indicated willingness). We have had meetings with two of the learner champions Educational Supervisors to go over the credential and the requirements of their role. Closer working with NES Medical colleagues to develop an e-module for Educational Supervisors.	Green	Green	Currently onboarding its recognition doctors to our next cohort and onboarding three learner champions doctors who will require educational supervisors to support them through the learner route. We have also spoken with each of our recognition champion doctors who are willing to provide educational supervision for the programme going forward. Work underway to establish a module for our educational supervisors. Due to the NES digital prioritisation process, digital work to finalise learner route forms (for use by educational supervisors supporting learner doctors) will not be able to be completed by 2024/25 year end however it is hoped that this outstanding work will be finalised in Q1 of 2025/26 as per the Medical Operational Plan submission. We will develop a workarounds for this in the portfolio until available with the aim of a fully functional portfolio for our educational supervisors in place at year end.	Amber	
1. Primary and Community Care	4537	Medical	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP10 - Sage of workforce	Delivery of Continuing Professional Development (CPD) Connect educational activities for General Practice to improve patient care in NHS Scotland.	Planning programme of events for 24-25 based on learning needs of General Practice (multidisciplinary team) MDI, face to face, online and e-learning. PBSSG module development. Planning and delivery of simulation-based learning programme.	Begin delivery of programme of events. Subject to funding, begin review of impact of resources for General Practice Nurses (GPN). Development and ongoing support for e-learning resources. PBSSG module development. Delivery and evaluation of simulation-based learning programme.	Development and ongoing support of e-learning resources. Delivery of programme of education. PBSSG module development. Delivery of A Day in the Life of a Busy General Practice webinar series.	Deliver CPD Connect educational activities to General Practice and embed new skills based programme. Review of impact of training of GPNs will be completed subject to funding. Delivery of simulation-based learning programme.	Green	The 2024/25 SG funding award for General Practice Nurses (GPN) CPD and First5 GP CPD is still to be formally agreed as at the end of 2024/25 Quarter 1.	Green	Further to the update provided on 2024/25 Quarter 1, the 2024/25 Scottish Government funding award for General Practice Nurses (GPN) Continuing Professional Development (CPD) and First5 GP CPD is confirmed.	Green	Green	Clinical version of 'A Day in the Life of a Busy General Practice' webinar series for 2024-25 has 953 delegates registered to date. Simulation-based learning sessions for First5 GPs have continued during Quarter 3 with three courses delivered. Palliative & End of Life Care, Joint Injections and First5 GP Introduction to Leadership courses ran this quarter. No Practice Based Small Group Learning (PBSSG) modules published in Quarter 3 due to some minor delays in production, however writing and development is ongoing with three planned for publication in Quarter 4. PBSSG has 2,726 active members as of end Quarter 3.	Green	
1. Primary and Community Care	4538	Medical	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP16 - TBC	Delivery of Continuing Professional Development (CPD) Connect educational activities for General Practice to improve patient care in NHS Scotland.	Planning programme of events for 24-25 based on learning needs of General Practice (multidisciplinary team) MDI, face to face, online and e-learning. PBSSG module development. Planning and delivery of simulation-based learning programme.	Begin delivery of programme of events. Subject to funding, begin review of impact of resources for General Practice Nurses (GPN). Development and ongoing support for e-learning resources. PBSSG module development. Delivery of A Day in the Life of a Busy General Practice webinar series.	Development and ongoing support of e-learning resources. Delivery of programme of education. PBSSG module development. Delivery of A Day in the Life of a Busy General Practice webinar series.	Deliver CPD Connect educational activities to General Practice and embed new skills based programme. Review of impact of training of GPNs will be completed subject to funding. Delivery of simulation-based learning programme.	Green	The 2024/25 SG funding award for General Practice Nurses (GPN) CPD and First5 GP CPD is still to be formally agreed as at the end of 2024/25 Quarter 1.	Green	Further to the update provided on 2024/25 Quarter 1, the 2024/25 Scottish Government funding award for General Practice Nurses (GPN) Continuing Professional Development (CPD) and First5 GP CPD is confirmed.	Green	Green	Clinical version of 'A Day in the Life of a Busy General Practice' webinar series for 2024-25 has 953 delegates registered to date. Simulation-based learning sessions for First5 GPs have continued during Quarter 3 with three courses delivered. Palliative & End of Life Care, Joint Injections and First5 GP Introduction to Leadership courses ran this quarter. No Practice Based Small Group Learning (PBSSG) modules published in Quarter 3 due to some minor delays in production, however writing and development is ongoing with three planned for publication in Quarter 4. PBSSG has 2,726 active members as of end Quarter 3.	Green	
1. Primary and Community Care	4539	Medical	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP10 - Sage of workforce	Delivery of training and learning materials for Continuing Professional Development (CPD) of General Practice	Progression of Cohort 2 and full review of Cohort 1 and lessons implemented	Likely implementation of Cohort 3	Delivery of Cohort 3.	Deliver General practice Nurse education pathway to at least 80 learners over 2 cohorts. Preparation for Cohort 4	Amber	Discussions ongoing with Scottish Government in relation to future funding for the General Practice Nurse (GPN) Education Pathway therefore there has been delay in advertising the next cohort. Cohort 2 is well underway with 36 learners just over halfway through.	Amber	Slight delay due to waiting on confirmation of funding for Cohort 3, however this has now been achieved and Cohort 3 is well underway with 36 learners just over halfway through.	Green	Green	Cohort 2 completed in December 2024, with marking and final evaluations being completed in 2024/25 Quarter 4. Cohort 3 commenced October 2024 and is on track. Cohort 4 has been confirmed to progress to planning stages with a view to commencing in the Spring of 2025 (2025-26). National Coordinator post is currently vacant due to resignation in December 2024, so this may impact future delivery however this is being managed internally at present.	Green	
1. Primary and Community Care	4540	Medical	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP10 - Sage of workforce	Delivery of training and learning materials for Continuing Professional Development (CPD) of Practice Managers	Deliver Practice Managers conference and continue to deliver Cohort 19 of PMVTS.	Continue to deliver Cohort 19 of PMVTS	Continue to deliver Cohort 19 of PMVTS	Deliver the Practice Managers Vocational Training Scheme (Cohort 19) to 22 trainees.	Green	Contributed to NES Conference in April 2024. 22 learners currently going through Cohort 19 of the NES Practice Managers Vocational Training Scheme (PMVTS). Discussions ongoing with Scottish Government in relation to the receipt of ongoing funding for the PMVTS and Network so there may be a delay in Quarter 2 to advertising the next cohort unless the situation is resolved by the end of July 2024.	Green	22 learners currently going through Cohort 19 of the NES Practice Managers Vocational Training Scheme (PMVTS). We have received funding approval during 2024/25 Quarter 2 however discussions ongoing with Scottish Government in relation to the receipt of ongoing funding in 2025/26 and Network so there may be a delay to advertising the next cohort.	Green	Green	Cohort 19 of the Practice Managers Vocational Training Scheme (PMVTS) continues with 22 learners this is due to complete in February 2025. Discussions ongoing with Scottish Government in relation to the receipt of ongoing funding and delivery model for 2025/26 hence a delay to advertising the next cohort.	Green	

SG Recovery Driver	2024/25 ADP Deliverable Number	Directorate	Medium-Term Priority	NES Strategic Theme	NES Strategic Theme Detail	NES KPI Reference	2024/25 Deliverable Summary	Q1 Milestones	Q2 Milestones	Q3 Milestones	Q4 Milestones	Q1 RAG Status	Progress in Q1	Q2 RAG Status	Progress in Q2	Projected Q3 Status	Q3 RAG Status	Progress in Q3	Projected Q4 (2024/25 Year-End) Status
Urgent and Unscheduled surge	4542	Medical	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP16 – TBC	Delivery of clinical skills and simulation training by the NES Clinical Skills Managed Educational Network (CSMEN) to improve patient safety and clinical outcomes by supporting access to high quality, multi-professional skills training and clinical simulation across all geographical areas of Scotland (via the Mobile Skills Unit).	Deliver 18 remote and rural courses; provide 30 spaces for surgical skills training and support 12 simulation based educational training courses. Visit by MSU to 6 venues training with 400 participants	Deliver 18 remote and rural courses; provide 30 spaces for surgical skills training and support 12 simulation based educational training courses. Visit by MSU to 6 venues training with 400 participants. Update and evaluation of an existing online resource	Deliver 18 remote and rural courses; provide 30 spaces for surgical skills training and support 12 simulation based educational training courses. Visit by MSU to 6 venues training with 400 participants. Update and evaluation of an existing online resource	Deliver clinical skills and simulation training; 70 remote & rural courses; 3 online emergency care programmes; surgical skills for 125 learners; and 50 simulation based educational training courses. Update and evaluation of an existing online resource. Delivery of 6 faculty development course on the MSU, one at a R&R venue	Green	In partnership with BASICS Scotland (British Association for Immediate Care), delivered 18 days of pre-hospital emergency care training for remote and rural practitioners and provided 16 spaces for surgical skills training. Supported the delivery of 16 simulation based educational training courses. The Mobile Skills Unit (MSU) visited 7 locations including a week trip from Mull to Barra, Benbecula and the Western Isles and trained 104 participants. Two visits were cancelled due to frontline workforce pressures.	Green	In partnership with BASICS Scotland (British Association for Immediate Care), delivered 18 days of pre-hospital emergency care training for remote and rural practitioners and, in partnership with Dundee Institute for Healthcare Simulation, provided 24 spaces for surgical skills training. Supported the delivery of 12 simulation based educational training courses at SCCHM (Scottish Centre for Simulation and Clinical Human Factors), NHS Forth Valley.	Green	Green	In partnership with BASICS Scotland (British Association for Immediate Care), delivered 18 days of pre-hospital emergency care training for remote and rural practitioners. Supported the delivery of 13 simulation based educational training courses at SCCHM (Scottish Centre for Simulation and Clinical Human Factors), NHS Forth Valley.	Green
B. Workforce	4543	Medical	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP16 – TBC	Support expansion of the clinical skills, leadership skills and capacity of SAS doctors and dentists by delivering a SAS (Specialist, Associate Specialist and Specialty Doctors) Development Programme to peers across all partners (NHS Scotland (NHS) Health Boards).	Run first SAS Programme Board meeting to assign funding for development activity. Facilitate approximately 2 regional educational events and 3 national courses/workshops over this period.	Run second SAS Programme Board meeting to assign funding for development activity. Facilitate approximately 2 regional educational events and 3 national courses/workshops over this period. Launch a training needs survey of the SAS workforce needs in Scotland.	Run third SAS Programme Board meeting to assign funding for development activity. Facilitate approximately 2 regional educational events and 4 national courses/workshops over this period, as well as one national conference for SAS.	Run fourth and final SAS Programme Board meeting to assign funding for development activity. Facilitate approximately 2 regional educational events and 4 national courses/workshops over this period.	Green	The Quarter 1 SAS (Specialist, Associate and Specialty Doctors) Programme Board meeting was held in August 2024, and considered bespoke applications to support the further development of SAS in Scotland. Three national courses / workshops and four local SAS events were held during Quarter 1, slightly ahead of planned schedule / workshops.	Amber	The Quarter 2 SAS (Specialist, Associate and Specialty Doctors) Programme Board meeting was held in August 2024, and considered bespoke applications to support the further development of SAS in Scotland. A further two national courses / workshops were held during Quarter 2. Local events are in planning stages and should be on track by the end of the year. The Training Needs survey is currently being finalised for launch during Quarter 3.	Amber	Amber	During Quarter 3 the SAS (Specialist, Associate and Specialty Doctors) Programme Board met as planned to consider bespoke applications for the award of development funding for SAS, which will improve patient care. During Quarter 3 we delivered two national training courses (remaining slightly behind schedule, while we awaited the required funding to be approved to deliver more courses). Funding for the remaining quota of national courses has now been confirmed and these are scheduled for delivery by the end of Quarter 4. Two local events were hosted in regional areas, as planned, although this remains slightly behind schedule, due to delays resulting from ill health of relevant SAS team. The SAS national conference has been scheduled in Quarter 4, to take place on 21 March 2025. The plans for a SAS Training Needs Analysis (TNA) survey have been amended to mirror the national training survey, which is currently undergoing approval before being launched, hopefully in Quarter 4.	Green
B. Workforce	4544	Medical	Education, training & workforce development	Performance	Deliver national leadership and CPD programmes	SKP10 – Sage of workforce accessing training products	Delivery of entry-level leadership and management training for postgraduate medical and dental trainees and doctors and dentists in non-training grades.	9 x trainee LaMP and 2 x non-trainee LaMP	7 x trainee LaMP and 1 non-trainee LaMP	9x trainee LaMP and 1 non-trainee LaMP	9 x trainee LaMP and 2 x non-trainee LaMP	Amber	During 2024/25 Quarter 1 we have delivered eight trainee Leadership and Management (LaMP) courses and 2 non-trainee LaMP courses. Course delivery has been limited by faculty availability however a new member of faculty has been recruited to the end of Quarter 1 and other new members of faculty are now starting to deliver courses for NES.	Amber	During Quarter 2 we have delivered six trainee Leadership and Management (LaMP) courses and three non-trainee courses. Faculty numbers and availability remains an issue and has limited our capacity to deliver this training. During Quarter 2, we delivered two additional non-trainee courses at demand for this course is high.	Amber	Green	During Quarter 3 we have delivered eight trainee Leadership and Management (LaMP) courses and two non-trainee courses (one of which was delivered face-to-face). Two further courses have had to be cancelled due to facilitator illness. We have recently appointed a new Band 5 Senior Officer and this will increase our facilitator capacity going forward.	Green
B. Workforce	4545	Medical	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP10 – Sage of workforce accessing training products	Improve the retention of GPs through career advice, induction and returner programmes by enabling UK trained GPs to return to the workforce following a career break and GPs trained overseas to join the GP workforce.	7 current GPs with 6 more joining the GP Returner and Enhanced Induction scheme in April 24	Supervisor reports and assessments will be electronic using the Fourteen Fish e-portals	7 more preparing to join the returner scheme and 4 further enquiries. This should hopefully be incorporated within the plans.	An e-portfolio was commissioned from JAHN (2023) and pilot review events in April 2024. This requires some further development to improve the user experience in the e-portfolio on the Returner and EI schemes and the South East and the West. Ongoing work during Quarter 2 - Fourteenfish (GP appraisal) platform updates, nomenclature change to Portfolio pathway and international induction programme and access to Practice Based Small Group Learning (PBSGL) reduction.	Amber	During Quarter 1, we have received 14 enquiries for the GP returner scheme of which 8 are eligible to be appointed. We are still awaiting confirmation from Scottish Government for approval of funding to support the work of this deliverable during 2024/25.	Green	Funding has now been secured from Scottish Government allowing us to complete onboarding of all applications on the waiting list. Since 2 April 2024, 10 returners have completed the scheme (three within the North region, four in the South East / East and three in the West). Currently seven on the scheme with an additional four having completed onboarding (One in the North region, five in the South East / East and the West). Ongoing work during Quarter 2 - Fourteenfish (GP appraisal) platform updates, nomenclature change to Portfolio pathway and international induction programme and access to Practice Based Small Group Learning (PBSGL) reduction.	Green	Green	There are currently eight doctors on the GP returner scheme, one having joined in Quarter 3. We have 10 enquiries for doctors to join at the start of January 2025 and two positive enquiries which is in line with projections.	Green
B. Workforce	4546	Medical	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP16 – TBC	Ensure all doctors working in Scotland continue to have access to a national single approach to Medical Appraisal and Revalidation by continuous provision of Medical Appraisal training events, SOAR (Scottish Online Appraisal Revalidation) appropriate user support, and any associated quality assurance activities in line with General Medical Council (GMC) standards.	Deliver v4 New Appraisers and v4 Refresher courses, v3 Refresher courses and v2 workshops scheduled, plus the planning of our annual conference (tbc) and relevant workshops and review feedback. Initiate MARQA review processes.	In addition to Q1, deliver v2 New Appraisers and v3 Refresher courses and v2 workshops scheduled and review feedback; draft and present MARQA review report. Schedule workshops (tbc) pending SOAR updates.	In addition to Q1 and Q2, deliver v5 New Appraisers courses, v3 Refresher courses and v2 workshops scheduled and review feedback; draft and present MARQA review report. Schedule workshops (tbc) pending SOAR updates.	TBC	Green	During Quarter 1, v4 New Appraiser and v4 Refresher Appraiser courses have been delivered along with a half-day Tutor development event. Planning of annual appraisal conference is on hold until a new Clinical Lead is appointed.	Green	During Quarter 2 we delivered v2 New Appraiser and v5 Refresher Appraiser courses, as well as v2 workshops. Recruitment of Clinical Lead is on hold due to ongoing challenging financial environment. Interim escalation points for support have been established via Medical Directorate Appraisal Group (MDAG) and ATSG (Appraiser and Trainee Strategy Group). Planning for a scaled back conference this year, currently exploring potential themes.	Green	Green	During Quarter 3 we delivered v5 New Appraiser and v3 Refresher Appraiser courses, as well as v1 workshop. Recruitment of Clinical Lead is on hold and to be revisited in 2025/26. A scaled back half day conference for this year has been scheduled for the afternoon of 3 February 2025 (Quarter 4). There was not sufficient retrials from our pool of appraiser course takers this year so we have opted not to recruit in Quarter 4 as per previous years.	Green
B. Health Inequalities and Population Health	4547	Medical	Education, training & workforce development	People	Develop education, training and tools to support delivery of realistic medicine and value based health and care	SKP11 – Sage learners reporting that training will improve practice	Enhance health and social care professionals' preparedness for effective communication and practice aligned to death, dying and bereavement care through the delivery of training and learning materials.	Extend the Band BA secondment to lead on newly commissioned Scottish Government (SG) work until March 2025. Sopping of new SG commission re the development of bereavement resources. Launch new Bereavement Leads Film. Continue monthly podcast and quarterly webinar programme throughout the year. Host quarterly national meetings of Bereavement Leads Network throughout the year. Create most e-learning modules to support staff with the death of a colleague in the workplace. Launch new (FAD) resource for non medical staff re death certification.	Work with the Scottish Government Bereavement Subgroup and Education Subgroup of the Palliative and End of Life Care Framework to develop a package of national e-learning resources. Launch new Bereavement Leads Film. Continue monthly podcast and quarterly webinar programme throughout the year. Host quarterly national meetings of Bereavement Leads Network throughout the year. Create most e-learning modules to support staff with the death of a colleague in the workplace. Launch new (FAD) resource for non medical staff re death certification.	Test the new SG commissioned modules with TEL. Ongoing programme of work plus host annual bereavement conference. Present at national COPMed meeting for support and wellbeing unit leads. Launch new mini modules re Bereavement in the workplace.	Launch SG commissioned work. Launch new death certification tool.	Green	The Band BA secondment extension will no longer be required as the staff member has resigned. Therefore, a Business Case has been submitted to upgrade the current Band 7 post to a Band BA 10 (SNET) instead. A meeting has been scheduled with NES HR to review the other posts in the team.	Green	One revised / new death certification e-module is almost completed and the other has started to be edited with expert reviewers. The new Scottish Government e-modules re 'bereavement basics' are approved. The final revised e-learning guidance is being final design updates and is aiming to launch in November 2024. Further to the update provided at Quarter 1, the procurement process has been completed for the set of Bereavement resources which will result in the publication of five animations and two films by March 2025. There have been five more bereavement podcasts with over 440 listeners.	Green	Green	1,000 delegates attended the NES annual Bereavement Conference. Nine new podcasts launched with 740 downloads. 1 new film launched on Vimeo. 1 e-learning module is now with the NES Technology Enhanced Learning (TEL) team for testing and is due to launch late January 2025.	Green
B. Workforce	4548	Medical	Education, training & workforce development	People	Support wider workforce to be trauma informed	SKP10 – Sage of workforce accessing training products	Development and delivery of education and training for Approved Medical Practitioners (AMPs).	This will be a rolling programme of courses with 1 initial training course delivered per month and 18 AMP Update training courses.	There will be a rolling programme of initial AMP training courses with 1 course delivered per month. Three AMP Update courses will be delivered in this Quarter with additional course provided should there be demand.	There will be a rolling programme of initial AMP training courses with 1 course delivered per month. Three AMP Update courses will be delivered in this Quarter with additional course provided should there be demand.	There will be a rolling programme of initial AMP training courses with 1 course delivered per month. Three AMP Update courses will be delivered in this Quarter with additional course provided should there be demand.	Green	Approved Medical Practitioners (AMP) Update training needs to be completed by Psychiatrists on a 5 yearly basis. To try and avoid a sudden increase in demand for courses in 2024 (based on those completing Update training in 2023) we have actively engaged with health board administration teams to complete this financial year. Work with the Death Certification Review Service to update existing e-learning and create new e-modules to launch this financial year. Annual conference prep & planning. Launch new fatal cardiac resource once received back from NES Design	Green	Initial Approved Medical Practitioners (AMP) training delivery continues as planned with one course delivered each month. As per the table above, there has been a significant downturn in demand for AMP Update training courses since the beginning of 2024; the main reason being AMPs have been proactive and completing their 5 yearly training requirement ahead of time. In Quarter 1 we delivered 14 Update Training courses and cancelled four due to a lack of demand. As a result of these changes to course delivery, it has been agreed that the remaining 2024/25 milestones should be amended. The amended milestones are shown within this document.	Green	Green	During Q3 our delivery of AMP Initial Training has continued as planned with 3 courses being delivered and 3 Update training courses delivered which meets current Health Board requirements. However 3 Update training courses were offered but cancelled due to low bookings.	Green
B. Workforce	4549	Medical	Education, training & workforce development	People	Support wider workforce to be trauma informed	SKP11 – Sage learners reporting that training will improve practice	Delivery of specific role development training for Sexual Offences Examiners (SOE) and nurses working in forensic medical services in Scotland.	Recruitment of SPA of Associate Postgraduate Dean. Agreeing deliverables with Scottish Government.	Induction of APGD. Planning for course delivery and conference. Liaison with other agencies regarding Training Needs Analysis.	Delivery of 'Essentials' course for Doctors and Nurses.	Conference planning and delivery. Possible 2 cohort of 'Essentials'.	Green	A preferred candidate has been identified for the vacant Associate Postgraduate Dean post. Deliverables have been agreed with Scottish Government during June 2024 with a view to funding allocation being made in July 2024. Further information will be provided at Quarter 2.	Green	New Associate Postgraduate Dean commenced August 2024 and is currently being inducted. Planning underway during Quarter 2 for the Doctors 'Essentials' course scheduled for the end of October 2024, however 'low uptake so viability is being assessed.	Green	Green	Doctors 'Essentials' course scheduled for the end of October 2024 had to be postponed due to low demand, however this has now been rescheduled for early February 2025 with four confirmed delegates.	Green
B. Health Inequalities and Population Health	4553	Medical	National Centre for Remote & Rural	Partnerships	Scope & develop a remote & rural centre for health & social care	SKP10 – Sage of workforce accessing training products	Delivery of agreed 2024-25 National Centre for Remote and Rural Health and Social Care Phase 1 Delivery Plan Targets across four Recruitment and Retention pillars and Supporting Structures for Remote and Rural Primary Care and Community services: Recruitment & Retention / Leadership & Good Practice / Research & Evaluation / Education & Training.	Deliver Q1 projects across R&R recruitment, Retention/Research & Evaluation/Leadership & Good Practice / Education & Training and Supporting Structures.	Deliver Q2 projects across R&R recruitment, Retention/Research & Evaluation/Leadership & Good Practice / Education & Training and Supporting Structures.	Deliver Q3 projects across R&R recruitment, Retention/Research & Evaluation/Leadership & Good Practice / Education & Training and Supporting Structures.	Deliver Q4 projects across R&R recruitment, Retention/Research & Evaluation/Leadership & Good Practice / Education & Training and Supporting Structures.	Green	All targets across four pillars of National Centre for Remote and Rural Health and Social Care are on track and within budget. 15 projects are underway. New stakeholder engagement network for recruitment and retention up and running and subject expert input has been provided to the Scottish Government Remote and Rural Recruitment and Retention Strategy 2024 development. DSH Advisory Group and the Scottish Ambulance Service (SAS) Advisory Group. Knowledge exchange partnership workshops in July 2024 held with Public Health Scotland, SAS and Healthcare Improvement Scotland (HIS). Further 11 Rural Advanced Practice MSU places funded for cohort 2.	Green	Wide range of stakeholder engagement completed and more planned for Quarter 3.	Green	Amber	Significant progress in delivery of most of the 36 projects across the four National Centre for Remote and Rural Health and Social Care workstreams during Quarter 3 however the deliverable is reported as Amber as a result of time slippage and projected underspend for a number of projects. This is related to delays in recruiting staff earlier in year, unplanned reduction in team capacity and establishing some activity at significantly lower cost within organisation than expected.	Green
B. Workforce	4554	Medical	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP10 – Sage of workforce accessing training products	Delivery of Patient Safety Education for the health and social care workforce including research, development and evaluation.	Development and introduction of a Brilliant Basics Teaching Pack for NES/NSC educators.	Updating of a revamped NES Human Factors Online Hub	Development and introduction of an improved curriculum for safety learning reviewers in HSC.	Evaluation of previous TBQR (Team Based Quality Review) work activity; Update national TBQR guidance to incorporate Human Factors theory and practice; Development of a generic e-learning TBQR storybook for HSC; Creation of a dedicated TBQR online presence.	Green	1. Brilliant Basics teaching pack - first draft near completion; 2. Updating of Human Factors Online Hub with new design and learning resources has commenced; 3. Draft improved curriculum is developed with NHS Forth Valley looking to test from September 2024 and other Boards also considering; 4. Team Based Quality Reviews (TBQR): awaiting confirmation from Scottish Government in relation to the continuation of funding for TBQR Clinical Lead.	Green	1. Brilliant Basics teaching pack being 'road tested' at national Human Factors meeting on 25 October 2024. 2. Online Hub re-development going smoothly, with learning materials being realigned with the NHS Learning and Skills (NLS) framework, similar to other NES professional groups. 3. First draft of Team Based Quality Reviews (TBQR) good practice guide is complete and has been circulated for feedback; TBQR evaluation report (2021-24) completed. TBQR online taught courses (beyond of content underway); Build of dedicated TBQR hub underway; TBQR e-learning storybook completed and technical build of module underway.	Green	Green	Quarters 1 and 2 deliverables are either completed or near completion. Additionally, the pilot Human Factors online courses are being delivered in January 2025 to Scotland's QI Community and the NES/NHS Scotland clinical skills and simulation community (and will undergo evaluation). Three patient safety articles have undergone peer review and have been accepted for journal publication. Career strategy and operational collaboration working has been agreed between the Clinical Skills / Simulation and the Human Factors / Patient Safety teams within NES - meetings are taking place in January 2025 to plan relevant programmes of joint working which are aligned with priority NES and Scottish Government policies and strategic ambitions.	Green
B. Workforce	4555	Medical	Research in Educational Innovation	Partnerships	Deliver health care research, development and innovation	SKP10 – Sage of workforce accessing training products	Development, delivery and evaluation of a hybrid educational programme for organisational safety investigators and learning reviewers across Health Boards / Scottish Social Services Council (SSSC).	Delivery of 4 Q1 training workshops; Development of enhanced SEA training programme; complete design of Quality Improvement Activity (QIA) resources for GP teams; feasibility testing of GP workload analysis tool; complete 2 Acute Kidney Injury (AKI) system thinking workshops.	Delivery of 8 Q2 training workshops; Testing of enhanced SEA training programme with at least 2 groups of GPs; publication of GP team QIA resources; analyse AKI qualitative data to refine and delivery of further AKI system thinking workshop.	Delivery of 12 Q3 training workshops; Deliver enhanced SEA training to 2 groups of GPs; commence evaluation of GP team QIA resources; Commence pilot of GP workload analysis tool; Delivery of further AKI system thinking workshop.	Delivery of GP specific introductory Q1 training workshops (12 x 30 participants initially); enhanced SEA training to GP teams and GP trainees (6 x 30 participants); design, test and evaluate and evaluate a Workload Analysis method for GP trainees and GP team members; and analyse data and design workshops using systems thinking methods.	Amber	Quality Improvement training workshops delivered as planned during Quarter 1 and evaluated positively. eSEA (Enhanced Significant Learning) training programme delivered for 57s and 65s. QIA resources completed for GP Teams.	Green	Agreement that workload analysis tool is not a priority and therefore should not be part of the milestones. Other aspects of milestone delivered as planned.	Green	Green	Agreement that workload analysis tool is not a priority and therefore should not be part of the milestones (Quarter 4 deliverable milestone to be amended in advance of Q4 window). Other aspects of milestone delivered as planned.	Green
B. Workforce	4556	Medical	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP11 – Sage learners reporting that training will improve practice	Development of new resources to support the Continuing Professional Development (CPD) of approved and recognised postgraduate medical trainees.	This will be a rolling programme of courses delivered across the country dependent of faculty availability with at least 12 Trainer Workshops (TWs) 3 entry-level training courses for GP and 5 CPD courses for trainees	This is a rolling programme of course delivery with at least 22 TWs, 6 GP TEC and 28 CPD courses for trainees	This is a rolling of course delivery with at least 32 TWs and 9 GP entry-level training courses and 20 CPD courses for trainees	45 Trainer workshops 12 GP TEC courses and 28 CPD courses for trainees	Amber	During Quarter 1, we delivered three entry-level GP TECs (Trainers Entry Course), 14 Trainer Workshops and five CPD courses for trainees.	Amber	During Quarter 2, we have delivered 18 Trainer Workshops, 6 GP TEC (Trainers Entry Course) courses and eight Continuing Professional Development (CPD) courses for trainees. Four CPD courses for trainees were offered but cancelled as a result of either faculty issues or lack of bookings. The Advanced Medical Educators Course (AMEC) course is currently paused as it is redesigned for online delivery. No AMEC courses have been delivered in this financial year (might would normally be offered).	Green	Amber	In Quarter 3 we have delivered 13 Trainer Workshops, 10 GP TEC (Trainers Entry Course) courses and 14 Continuing Professional Development (CPD) courses for trainees. Two CPD courses were cancelled due to low bookings. Our AMEC (Advanced Medical Educators Course) remains paused, with no courses being delivered in this financial year.	Amber
B. Workforce	4561	Medical	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP11 – Sage learners reporting that training will improve practice	Lead, develop, evaluate and review medical simulation programmes for: Core Surgical Training (CST) Anaesthetic, Acute Care Common Stem (ACCS), Emergency Medicine, Diagnostics, Intensive Care Medicine (ICM), Acute Care Common Stem (ACCS), Emergency Medicine, Diagnostics, Intensive Care Medicine (ICM), Anaesthesia, Intensive Care & Emergency Medicine, two courses for 32 trainees. In total, 246 training spaces for medical simulation.	Delivery skills and simulation training to approx. 100 CST trainees (CT 1 and CT2) according to the CST strategy; a maximum of 50 IMT 1 and IMT 2 trainees; maximum of 70 HST trainees up to 12 CT1 Core Psych trainees	Delivery skills and simulation training to approx. 100 CST trainees (CT 1 and CT2) a minimum of 30 IMT 1 and IMT 2 trainees; up to 18 HST trainees and up to 24 CT1 Core Psych trainees	Deliver medical simulation programmes for: 13 medical specialties (CST, IMT, HST, ICM, ACCS, EM, Anaesthetics, Paediatrics, Ophthalmology, Trauma and Orthopaedics, Vascular and Core Psychiatry) to provide the highest quality of care.	Green	In relation to surgical training courses, seven courses were run covering four specialties (Core: Ophthalmology; Vascular and Trauma & Orthopaedics) to 80 trainees; three IMT courses to 46 trainees; mental health courses for seven trainees and in ACCEM (Anaesthesia, Intensive Care & Emergency Medicine), two courses for 32 trainees. In total, 246 training spaces for medical simulation.	Green	In relation to the delivery of surgical training courses during Quarter 2, seven courses were run covering two specialties (Core: Ophthalmology;) to 70 trainees; four IMT courses to 64 trainees; one mental health course for five trainees; a Microbiology bootcamp for 11 trainees and in ACCEM (Anaesthesia, Intensive Care & Emergency Medicine), two courses for 32 trainees. In total, 479 training spaces for medical simulation.	Green	Green	In relation to the delivery of surgical training courses during Quarter 3, 13 courses were run covering three specialties (Core: Higher; Vascular;) to 140 trainees plus 11 Monthly training days for 11 participants; 8 IMT courses to 136 trainees; six mental health courses for 29 trainees, and in ACCEM (Anaesthesia, Intensive Care & Emergency Medicine), 13 courses for 163 trainees. In total, 479 training spaces for medical simulation.	Green	

SG Recovery Driver	2024/25 ADP Deliverable Number	Directorate	Medium-Term Priority	NES Strategic Theme	NES Strategic Theme Detail	NES KPI Reference	2024/25 Deliverable Summary	Q1 Milestones	Q2 Milestones	Q3 Milestones	Q4 Milestones	Q1 RAG Status	Progress in Q1	Q2 RAG Status	Progress in Q2	Projected Q3 Status	Q3 RAG Status	Progress in Q3	Projected Q4 (2024/25 Year-End) Status
8. Workforce	4338	NMAHP	Education, training & workforce development	People	Develop education, training and tools to support delivery of realistic medicine and value based health care	SKP10 – Sage of workforce accessing learning products	Support the development of the specialist health care chaplaincy / spiritual care workforce and the wider health and social care workforce, in line with the recommendations in the 'Discovering meaning, purpose and hope through person centred wellbeing and spiritual care framework'	To review the findings of the spiritual care supervision survey and conduct follow up focus groups/interviews	To deliver 1 supervision related activity, 1 webinar (logic to be decided) and awareness raising sessions around new spiritual care resources for the wider workforce.	To deliver 2 VBRP and 1 CCL education activities and a webinar on spiritual care leadership	To deliver 1 VBRP and 1 CCL education activities	Green	One VBRP CPO session has been delivered. Discussions underway with NMAHP colleagues re the existing supervision modules and their suitability for the spiritual care workforce (linked to the findings in the survey). Plan for workshop/event in Quarter 2 or 3 depending on feedback from service.	Green	A spiritual care supervision position statement has been drafted with stakeholders and is on course for completion in Quarter 3. Spiritual care learning resources have been designed and built and are now available to the wider health and social care workforce on TURAS. One Spiritual Care Research Network meeting has been hosted, and ways of progressing the work of the network are being developed. Seven spiritual care / Values Based Reflective Practice (VBRP) related workshops / training sessions have been delivered to a variety of people including health and social care staff, carers and student nurses. Work has commenced to deliver an education programme to future leaders in spiritual care.	Green	Green	Continuing to contribute to the ambitions of the spiritual care framework through engagement across NES and with wider partners / initiatives (e.g. Advice Events National Framework, AHP / NMAHP Values Based Supervision, linking with Scottish Prison Service and HES).	Green
8. Workforce	4341	NMAHP	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP24 – no of innovation initiatives with NES investment	Utilising the network of Allied Health Professions (AHPs) Practice Education Leads (PELs), the Nursing & Midwifery Practice Educators, Practice Education Facilitators (PEFs), Care Home Education Facilitators (CHEFs), facilitate contemporary, diverse and sustainable learning environments across all health and social care sectors that will enable the NMAHP workforce to comply with regulatory bodies (Nursing & Midwifery Council and Health & Care Professions Council) requirements for quality practice education.	"NMAHP: Progress and report continued capacity to increase, modernise and diversify placement capacity through innovative and sustainable models of delivery. Gather examples via a minimum of 8 practice education annual board visits. NM: Develop Year 3 assessment documentation for NMB ePAD and work with one additional university to plan implementation. AHP: Explore electronic solutions to assessment documentation for Year 3 in ePAD and work with 1 additional university to plan implementation process. AHP: Test e-pad prototype for two professions. Host event to consider the advantages, challenges and potential solutions of Paramedic Placement Weeks"	"NMAHP: Progress and report continued capacity to increase, modernise and diversify placement capacity through innovative and sustainable models of delivery. Inform operational planning process for priority areas of NES practice education support gained via report of delivery. Celebrate and share the key achievements of the pre-registration and practice education programme to enhance the capacity of placement and the quality of the learning environment. NM: Implement year 3 assessment documentation for the University of Dundee and implement ePAD in Year 1 of one additional university. AHP: Go live with equal for two professions with approx 3 HEIs and test equal prototype for third profession. Devise action plan based on outcomes from the Paramedic Placement Week"	"NMAHP: Progress and report continued capacity to increase, modernise and diversify placement capacity through innovative and sustainable models of delivery. Inform operational planning process for priority areas of NES practice education support gained via report of delivery. Celebrate and share the key achievements of the pre-registration and practice education programme to enhance the capacity of placement and the quality of the learning environment. NM: Plan onboarding of new academic documentation for the University of Dundee and implement ePAD in Year 1 of one additional university. AHP: Go live with equal for two professions with approx 3 HEIs and test equal prototype for third profession. Devise action plan based on outcomes from the Paramedic Placement Week"	"NMAHP: Progress and report continued capacity to increase, modernise and diversify placement capacity through innovative and sustainable models of delivery. Inform operational planning process for priority areas of NES practice education support gained via report of delivery. Celebrate and share the key achievements of the pre-registration and practice education programme to enhance the capacity of placement and the quality of the learning environment. NM: Plan onboarding of new academic documentation for the University of Dundee and implement ePAD in Year 1 of one additional university. AHP: Go live with equal for two professions with approx 3 HEIs and test equal prototype for third profession. Devise action plan based on outcomes from the Paramedic Placement Week"	Amber	NM update: Options appraisal completed last year currently with the NES NMAHP senior team. Awaiting funding confirmation to continue this vital work with additional senior educator capacity required to undertake scoping work for practice educators. AHP update: Options appraisal completed last year currently with the NES NMAHP senior team. Awaiting funding confirmation to continue this vital work with additional senior educator capacity required to undertake scoping work for practice educators. AHP update: Options appraisal completed last year currently with the NES NMAHP senior team. Awaiting funding confirmation to continue this vital work with additional senior educator capacity required to undertake scoping work for practice educators.	Amber	NM update: All 12 HEI performance enhancement reviews are complete along with 16 NHS Board annual reviews. Overall student feedback indicates students are satisfied with the quality of their learning experience and the support they receive from the Practice Education and Quality Improvement network. AHP update: Options appraisal completed last year currently with the NES NMAHP senior team. Awaiting funding confirmation to continue this vital work with additional senior educator capacity required to undertake scoping work for practice educators. AHP update: Options appraisal completed last year currently with the NES NMAHP senior team. Awaiting funding confirmation to continue this vital work with additional senior educator capacity required to undertake scoping work for practice educators.	Amber	Amber	NM update: Practice Based Learning (PBL) projects are progressing and meeting anticipated project milestones. Information form a HEI built up progressed into electronic, system and system live. Paramedic e-pad remains in per the Quarter 2 update and awaiting NES digital prioritisation. No action plan as event was not updated. Discussion in partnership in relation to what a performance enhancement process needs to include for paramedics.	Amber
8. Workforce	4350	NMAHP	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP11 – Sage learners reporting that learning will improve practice	Subject to funding, the quality of the NMAHP practice learning environment will be developed and maintained by the PEF/CHEF/PEL/PE. Evidence based developments and improvements will be made to provide quality assurance of the NMAHP practice learning experience for NMAHP students and learners. Ongoing quality assurance of commissioned NM and Paramedic Programmes.	NM (Nursing & Midwifery): Work with key stakeholders to qualify assure the learning environment and student experience. Subject to funding, annual maintenance and improvements of the Quality Management system (QMPE - NMB) are agreed in response to user feedback. AHP: Conclude options appraisal to consider best approach regarding procurement of suitable QMS system - whether internal, external, inter-professional and/or AHP specific. Updating and confirming the minimum specification of the AHP QMS system required. Scoping the information required regarding numbers and attributes of AHP Practice PEs and Practice Educators and define the methods to be used to gather this information robustly. NMAHP: Work in partnership with NES Directorates to develop MDT approach to quality management of a learning environment.	NM: In response to system user feedback, continue to support and maintain the practice education infrastructure and QMPE system and deliver on agreed actions. AHP: Develop procurement documentation and processes required. Set up a test site with one health board and/or profession to test and gather data required re PEs and Practice Educators. NMAHP: Continue to work in partnership with NES Directorates to develop MDT approach to quality management of a learning environment.	NM: In response to system user feedback, continue to support and maintain the practice education infrastructure and QMPE system and deliver on agreed actions. AHP: Develop procurement documentation and processes required. Set up a test site with one health board and/or profession to test and gather data required re PEs and Practice Educators. NMAHP: Continue to work in partnership with NES Directorates to develop MDT approach to quality management of a learning environment.	NM: To have maintained and further enhanced the quality of the learning environment. AHP: Respond to feedback from pilot testing ensuring compatibility with QMS build underway. Extended test sites to include a further 2-3 pilot areas (approximately 6 areas in total). Working closely with build team for the QMS, progress details of implementation plan. NMAHP: Continue to work in partnership with NES Directorates to develop MDT approach to quality management of a learning environment.	Amber	NM update: Ongoing maintenance and system developments for the QMPE system continues as planned. Verbal feedback from NHS Boards during NHS Board annual reviews indicate that students are satisfied with the quality of their learning experience and the support they receive from the Practice Education and Quality Improvement network. AHP update: Options appraisal completed last year currently with the NES NMAHP senior team. Awaiting funding confirmation to continue this vital work with additional senior educator capacity required to undertake scoping work for practice educators. AHP update: Options appraisal completed last year currently with the NES NMAHP senior team. Awaiting funding confirmation to continue this vital work with additional senior educator capacity required to undertake scoping work for practice educators.	Amber	NM update: All 12 HEI performance enhancement reviews are complete along with 16 NHS Board annual reviews. Overall student feedback indicates students are satisfied with the quality of their learning experience and the support they receive from the Practice Education and Quality Improvement network. AHP update: Options appraisal completed last year currently with the NES NMAHP senior team. Awaiting funding confirmation to continue this vital work with additional senior educator capacity required to undertake scoping work for practice educators. AHP update: Options appraisal completed last year currently with the NES NMAHP senior team. Awaiting funding confirmation to continue this vital work with additional senior educator capacity required to undertake scoping work for practice educators.	Green	Amber	NM update: Definitive meeting to review learning from the 2024 performance review activity is now complete and work is underway to prepare for 2025. AHP update: Options appraisal completed last year currently with the NES NMAHP senior team. Awaiting funding confirmation to continue this vital work with additional senior educator capacity required to undertake scoping work for practice educators. AHP update: Options appraisal completed last year currently with the NES NMAHP senior team. Awaiting funding confirmation to continue this vital work with additional senior educator capacity required to undertake scoping work for practice educators.	Amber
8. Workforce	4352	NMAHP	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP11 – Sage learners reporting that learning will improve practice	Support the ambitions of The Infection Prevention Workforce Strategic Plan 2023-2024 and the National Learning and Development Strategy for the Specialist Healthcare Built Environment Workforce (2023-2026) by developing an Infection Prevention and Control Education Strategy which identifies and identifies the Infection Prevention Control (IPC) / Antimicrobial Stewardship (AMS) workforce and their learning requirements based on their role.	Undertake a literature review of existing infection prevention and control and antimicrobial stewardship strategies.	We will develop an Infection Prevention and Control Education Strategy by collaborating with stakeholders.	Draft the development of early-stage general infection prevention and control educational curriculum that supports infection prevention and control in the varying roles within the Infection Prevention and Control/Antimicrobial Stewardship workforce.	Red	Development of both Infection Prevention Control (IPC) Specialist and Antimicrobial Stewardship (AMS) Generalist Education Frameworks currently still in progress. This has delayed the gap analysis stage of the workshop.	Amber	A wider consultation on the draft AMS generalist framework is open during September 2024. Results will be used to create the final framework, to be published later in autumn 2024. The commissioning of a gap analysis will commence in October 2024. A full literature review of existing infection prevention and control educational curricula and strategies has not been undertaken yet to extended staff absences. However, the new World Health Organization (WHO) 'Infection prevention and control in service education and training curriculum' has been analysed and a paper for Scottish Government has been created to inform the development of an Infection Prevention Control (IPC) Education strategy.	Amber	Amber	Strategy Meetings held with stakeholders to discuss the development of an Infection Prevention Control (IPC) Curriculum. Due to the overlap with the Protected Learning Time (PLT) Project - which aims to create a new mandatory IPC module for the first level of the curriculum, which would be for all staff. Established link with PLT project to align timelines. Currently trying to clarify the role of the IPC Workforce Education Development Advisory Group in providing subject matter expertise for the PLT Project. The curriculum will be part of the strategy, however due to extended staff absence, the strategy has not been developed as yet. An analysis of the impact of a new mandatory module on established products, processes and SKP/CP (Scottish Infection Prevention and Control Education Pathway) needs to now be carried out. Opportunities for increased stakeholder engagement are currently being explored.	Amber	
8. Workforce	4356	NMAHP	Education, training & workforce development	People	Workforce development to increase capacity & capability across social care workforce	SKP11 – Sage learners reporting that learning will improve practice	Develop and maintain education to support the health and care workforce to transform policy into practice that will align with the National Infection Control Prevention and Control Manual, including the National Infection Prevention and Control Care Home Manual, the UK national action plan for Antimicrobial Resistance and aligning Standard Infection Control Precautions, Transmission Based Precautions, Outbreaks and Incident Management, and delivering the Healthcare Built Environment learning and development strategy.	We will manage and maintain the educational governance of the existing product estate through educational governance activities and will progress a phased approach to reduce our product estate by up to 50% in 2024 - 2025.	create the structure for a new Antimicrobial Stewardship Zone on Turas Learn.	We will map existing Antimicrobial Stewardship resources against the new framework.	We will design and implement educational solutions to meet the learning needs that cater to different learning styles, including 3 animations, 3 training events/workshops and 2 recorded sessions, either presentation or podcasting to support transmission-based precautions, outbreaks and incident management and the deliverables of the Healthcare Built Environment learning and development strategy.	Green	We have now updated all nine modules of the Decontamination for Reusable Medical Devices Programme. Review of Antimicrobial resources is ongoing. A programme of work has commenced to move all 28 Foundation Layer modules and assessments to a new, more accessible authoring tool (Articulate Rise). Key reasons for delays are team capacity and lack of availability of subject matter expert reviewers. Training Initiatives and Collaborative Efforts: *Initiated collaboration with AHAH Scotland to support a Gram-Negative Bacteremia IPCN session and develop a Transmission Based Precautions e-learning module. This module will be integrated into the foundation layer of SKP/CP. *Working in partnership with AHAH Scotland as strategic partners to strengthen synergy around educational governance for IPC learning resources and National Infection Prevention & Control Manual and Care Home IPC Manual updates. Consultative Engagements: *Provided feedback on NHS National Services Scotland consultations that impact IPC guidelines, including, Headwear, Healthcare Water Systems, and Patient Placement, Isolation, and Cohorting.	Amber	Educational Governance The review of resources by subject matter experts remains challenging. We have introduced RAG templates to be completed by stakeholders to confirm that resources are green or amber and can remain on TURAS Learn until a full review is carried out. We have now received RAG status templates for the NMAHP and SCAIP programmes and the programme on the safe management of pressure ulcers. We are collaborating with NHS Shetland who have used one of our modules to create their own health and safety module, and will review our resource once their learning records have been transferred. AMS Zone structure A blank new TURAS Learn Zone Antimicrobial Resistance and Stewardship has been created. A workshop to discuss and design the structure for the zone was held on 30 September 2024 with internal and external colleagues. Actions and next steps were agreed and will be implemented in the next quarter. The AHAH/AMS Zone will host the new educational framework. Consultative Engagements: *Provided feedback on NHS National Services Scotland consultations that impact IPC guidelines, including Personal Protective Equipment (PPE) for High Consequence Infectious Diseases and Safe Disposal of Waste. Educational Initiatives and Collaborative Efforts: *Continued collaboration with AHAH Scotland through the National Policy Guidance and Evidence Working Group meetings, making progress in developing a Risk Assessment and Transmission Based Precautions SKP/CP Foundation Layer e-learning modules. *Successfully launched the Winter Preparedness campaign on 7 October 2024. Ongoing support for the campaign continues through relevant communication channels to ensure effective outreach and information dissemination. *A new Principles of Aseptic Technique e-learning module is currently being developed with a projected launch timeline of spring 2025 (or potentially sooner). AMR Gap Analysis A Gap Analysis to assess gaps in the current AMR/AMS education provision has been commissioned and a content review is in place. Educational product reviews for AMR resources remain challenging and some products will now be withdrawn, as RAG templates are overdue.	Amber	Amber	Consultative Engagements: *Provided feedback on NHS National Services Scotland consultations that impact Infection Prevention Control (IPC) guidelines, including Safe Management of Linen and Cough Etiquette. Educational Initiatives and Collaborative Efforts: *Continued collaboration with AHAH Scotland through the National Policy Guidance and Evidence Working Group meetings, making progress in developing a Risk Assessment and Transmission Based Precautions SKP/CP Foundation Layer e-learning modules. *Successfully launched the Winter Preparedness campaign on 7 October 2024. Ongoing support for the campaign continues through relevant communication channels to ensure effective outreach and information dissemination. *A new Principles of Aseptic Technique e-learning module is currently being developed with a projected launch timeline of spring 2025 (or potentially sooner). AMR Gap Analysis A Gap Analysis to assess gaps in the current AMR/AMS education provision has been commissioned and a content review is in place. Educational product reviews for AMR resources remain challenging and some products will now be withdrawn, as RAG templates are overdue.	Amber
6. Health Inequalities and Population Health	4361	NMAHP	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP27 – no of NES programmes demonstrating active engagement of people with lived experience	Develop a Transgender Care Knowledge and Skills Framework which will be accessible for the NHS workforce in Scotland with relevant learning resources to support best care of trans people accessing services in the NHS.	Sign off final framework and handover to design. To be launched as Umliraco website by end of May. Public launch with strategic partners for mid June. Complete scoping report and map gaps for training materials.	Support boards with implementation plan and prove delivery strategy. Complete work on KSF for young people. Launch event to support workforce development from skilled to enhanced levels. Commence work on Young People's Framework.	Continue to develop training materials and prove delivery strategy. Complete work on KSF for young people. Launch event to support workforce development from skilled to enhanced levels.	Continue to deliver training at all levels. Evaluate progress and tune materials as appropriate. Identify and report on work still outstanding.	Red	Launch of main Knowledge and Skills Framework (KSF) related to launch on 3 September 2024 alongside related materials to be completed by stakeholders to confirm that resources are green or amber and can remain on TURAS Learn until a full review is carried out. We have now received RAG status templates for the NMAHP and SCAIP programmes and the programme on the safe management of pressure ulcers. We are collaborating with NHS Shetland who have used one of our modules to create their own health and safety module, and will review our resource once their learning records have been transferred. AMS Zone structure A blank new TURAS Learn Zone Antimicrobial Resistance and Stewardship has been created. A workshop to discuss and design the structure for the zone was held on 30 September 2024 with internal and external colleagues. Actions and next steps were agreed and will be implemented in the next quarter. The AHAH/AMS Zone will host the new educational framework. Consultative Engagements: *Provided feedback on NHS National Services Scotland consultations that impact IPC guidelines, including Personal Protective Equipment (PPE) for High Consequence Infectious Diseases and Safe Disposal of Waste. Educational Initiatives and Collaborative Efforts: *Continued collaboration with AHAH Scotland through the National Policy Guidance and Evidence Working Group meetings, making progress in developing a Risk Assessment and Transmission Based Precautions SKP/CP Foundation Layer e-learning modules. *Successfully launched the Winter Preparedness campaign on 7 October 2024. 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Educational Initiatives and Collaborative Efforts: *Continued collaboration with AHAH Scotland through the National Policy Guidance and Evidence Working Group meetings, making progress in developing a Risk Assessment and Transmission Based Precautions SKP/CP Foundation Layer e-learning modules. *Successfully launched the Winter Preparedness campaign on 7 October 2024. Ongoing support for the campaign continues through relevant communication channels to ensure effective outreach and information dissemination. *A new Principles of Aseptic Technique e-learning module is currently being developed with a projected launch timeline of spring 2025 (or potentially sooner). AMR Gap Analysis A Gap Analysis to assess gaps in the current AMR/AMS education provision has been commissioned and a content review is in place. Educational product reviews for AMR resources remain challenging and some products will now be withdrawn, as RAG templates are overdue.	Amber		
8. Workforce	4364	NMAHP	Workforce data	Workforce data	Support role redesign and service transformation across health & social care	SKP28 – Sage of technology, data and digital developments which are shaped by staff, learner and partner feedback	Continue to develop a robust and consistent approach to classifying and gathering Allied Health Professions (AHP) workforce data throughout 2024/2025. This activity will support implementation of recommendations in the Scottish Government AHP Workforce and Education review.	Pilot sites and Professions identified and Overweight Group established	Pilot data capture and reporting. Host one workshop to support use of tool and educational resources that support AHP workforce planning	Draft Guidance and governing framework to support robust and consistent AHP workforce planning	Evaluate progress and produce report on the pilot of 2 professions and lessons learned to support roll out to other AHP professions	Green	National approach involving all boards developed for Orthotics and being signed off by 3 Boards (Lothian, Greater Glasgow and Clyde and Grampian) have completed deep dives of data for Dietetics and NHS Boarders in progress. Currently in introductory stage and negotiation with Radiography, Occupational Therapy and Prosthetics. It has been agreed that governance and oversight for this workstream will be through the Scottish Government (SG) Transforming Roles Steering Group. Test Site for educational resources to support NMAHP workforce planning under development. Continue to promote work at strategic level with presentation to EWR, Transforming Roles Steering Group, Data Intelligence Group and the Allied Health Professions Federation Scotland (AHPFS). Continue to make connections and links with other ongoing work in Public Health Scotland, Healthcare Improvement Scotland, Scottish Radiology Transformation Programme (SRTP) and Neurology SG Clinical priorities lead	Green	Three Boards (NHS Lothian, Greater Glasgow & Clyde / GGC, and Grampian) have completed deep dives of data for Dietetics and have uploaded to NHS (Employee Self Service) system. Comparison with NES dashboard in progress. Classification of dietetic workforce in NHS Borders & NHS Ayrshire and Arran complete, awaiting upload. GGC workforce delivered. Ongoing engagement with stakeholders and mapping learning resources and tools available while progressing with development of TURAS age for collation of resources.	Green	Green	Unanticipated lack of access to board level data operational ability to undertake process mapping and public guidance and governance frameworks to support robust AHP workforce planning in relation to implementation and rolling out of the occupational classifications.	Green
8. Workforce	4368	NMAHP	National Digital Platform	People	Lead and deliver education, training and CPD across health & social care workforce	SKP11 – Sage learners reporting that learning will improve practice	Ensure that the Flying Start programme will be fit for purpose and have a demonstrable impact on the development and retention of newly qualified NMAHP practitioners in their first year of practice, linking to apprenticeship.	Launch refreshed content	Publish leads' and managers' page on learning hub.	Collate initial feedback on refreshed content and learning hub.	Work with leads to respond to feedback and ongoing refinement.	Green	Continue to promote and embed action plan for the implementation of the recommendations from the external review of programme. Working with FLYING START (FS) Leads Group we have recruited members to three short life working groups: 1. Publicity Group to promote and highlight new content in the learning units, guidance documentation and the learning hub. 2. Content Group to continue to refine and develop new content in relation to evolving priorities and promote EQIA action plan. 3. Impact Group to review data and KPIs needed to demonstrate the impact of the FS programme for 2024, 2025 and 2026.	Green	Continue to promote and embed action plan for the implementation of the recommendations from the external review of programme. Hosted second meeting for the Content Development, Publicity and the Impact Sub-groups. Hosted second Leads Group meeting in September 2024 where subgroup presented their proposed action plans for feedback from Leads. On-going development and improvements to Manager's page on Learning Hub. Newly Qualified Practitioner shared the positive contribution that Flying Start makes to a learner's journey via national AHP Blog, scottish https://ajournal.wordpress.com/2024/08/22/the-flying-start-journey-as-a-newly-qualified-allied-health-professional-by-megan-cunningham-megan@icr-northern-ahp-ajournal-flyingstart/	Green	Green	Hosted national Flying Start Leads meeting which was well attended by all Boards. Content refreshed for two of the four learning units (Clinical Pillar and Facilitation of Learning). Sub Groups and Leads groups have led back on proposed refreshed content ahead of final edit. Managers and Leads pages live on learning hub, EQIA published and Content Estate review completed.	Green
9. Digital Services Innovation Adoption	4374	NMAHP	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP2 – Sage with time to support learning	Work to enhance NES's NMAHP and Support Workforce TURAS Portfolios, with improved access, greater functionality and better analytics, to support appraisal and professional body revalidation, and re-registration and communication and engagement strategy. Link with TURAS refresh team regarding impact this may have in relation to portfolio re-refresh.	Sign off final draft of external evaluation. Engagement of stakeholder forum events 2 months regarding external evaluation recommendations and communication and engagement strategy. Link with TURAS refresh team regarding impact this may have in relation to portfolio re-refresh.	Continue engagement of stakeholder forum regarding evaluation recommendations and communication and engagement strategy. Robust impact measurement strategy will include development of digital resources.	Work with digital team regarding frameworks to support robust and consistent AHP workforce planning	Digital to have updated the portfolios and communication of the TURAS refresh. Continue engagement with stakeholder forums.	Green	Final review and sign off relating to the external evaluation of the professional portfolios by Harlow Consulting has been completed and we are awaiting the final designed report which we can then be published on TURAS. There is ongoing engagement with the three user forums (nursing and midwifery, AHP support workforce) with regards to working on recommendations from the evaluation in relation to the Technology Functionality and communication and engagement plan. Links to the TURAS Refresh project team have been made which imply no significant impact on the portfolio review project.	Green	The external evaluation of the professional portfolios by Harlow Consulting has been shared with stakeholders and has been published on TURAS. There is ongoing two-monthly engagement with the three user forums (nursing and midwifery, AHP support workforce) who are now focused on reviewing and being involved in the development of supporting resources, as well as looking at the functionality of the portfolios. Meeting held with NES Technology Functionality and they have reviewed the changes suggested and reported back on feasibility to make changes. Due to lack of digital capacity some changes will need to go into next operational plan subject to digital prioritisation. To support the development of supporting resources an expression of interest has been advertised, awarded and is now delivering an action plan to respond to recommendations of review and user group feedback. The communication and engagement strategy has been updated and shared with stakeholders. Links with the TURAS Refresh team have been established and will be maintained over this year. EQIA published.	Green	Amber	There is ongoing two-monthly engagement with the user forums which has stakeholders from nursing and midwifery, AHP, support workforce and HEIs, who are inputting around the supporting resources which are being developed through an expression of interest. The project team have had with NES digital around updating aspects of the portfolio, however they are unable to support this due to capacity constraints. It will be added for prioritisation for 2025/26 as aspects around functionality require updating.	Amber

SG Recovery Driver	2024/25 ADP Deliverable Number	Directorate	Medium-Term Priority	NES Strategic Theme	NES Strategic Theme Detail	NES KPI Reference	2024/25 Deliverable Summary	Q1 Milestones	Q2 Milestones	Q3 Milestones	Q4 Milestones	Q1 RAG Status	Progress in Q1	Q2 RAG Status	Progress in Q2	Projected Q3 Status	Q3 RAG Status	Progress in Q3	Projected Q4 (2024/25 Year-End) Status
1. Primary and Community Care	4376	NMAHP	Workforce data	People	Support role redesign and service transformation across health & social care	SKP11 – Sage learners reporting that learning will improve practice	Ensure commissioned education will be available for nurses in the community to progress through the NES integrated community nursing development pathway to support delivery of community nursing services.	Host national Stakeholder group to support commissioned HEIs to recruit to 60 nurses for the PG Certificate for September 2024. Begin to work with stakeholders to review the impact of the integrated community nursing pathway and discuss potential education options for this workforce for the future.	Continue to work with stakeholders and agree education requirements for this workforce. Commence the Graduate Diploma in September 2023 to continue onto second/final year of course in September 2024.	Refresh content of the digital resource to support the integrated community nursing workforce. Commence work in 2023/24 to support the pathway in response to stakeholder review, workforce requirements and availability of funding from Scottish Government.	Host National Stakeholder group to monitor and evaluate progress and plan for 2024/25 year.	Green	Baseline funding has been secured and a communication has been sent out to employers (NHS Health Boards, Prison Healthcare, Care Homes) writing instructions for the Postgraduate Certificate courses commencing September 2024. Returns were due to NES by 17 June and successful nominees have been informed and provided with nominations for applying to their HEI for a place on the course. National Stakeholder Group meeting took place on 14 May 2024, and we are now planning the work with stakeholders, to commence September 2024.	Green	Recruitment has successfully taken place for a September 2024 cohort at UWS (University of the West of Scotland) and QMU (Queen Margaret University). Numbers of those commencing the postgraduate certificate courses commencing in September 2024 are 21 at UWS and 22 at QMU. The purpose of the group is to support high quality delivery of the CDP-GA programme, which is consistent and equitable across NHS Scotland.	Green	Green	Courses are underway and nurses commenced studies in September 2024 as follows: Queen Margaret University (QMU) postgraduate certificate - 21 QMU Graduate Diploma 2nd year - 22 University of West of Scotland (UWS) postgraduate certificate - 21 UWS Graduate Diploma 2nd year - 28	Green
8. Workforce	4377	NMAHP	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP10 – Sage of workforce exceeding learning products	Ensure the Healthcare Support Worker workforce is provided with high quality learning, education, succession and career planning pathways to support delivery of new and emerging models of care.	Continue to action Scottish Government Healthcare Support Worker (HCSW) commission objectives in respect of career pathways and articulation routes. Commence development of HCSW learning survey questions to explore and understand workforce learning and development needs and develop communication plan. Deliver support workforce learning on the GO online events.	Undertake HCSW learning survey. Evaluate the pilot of the PDA (Education, Training and Assessment and recourses learned for future roles). Deliver support workforce learning on the GO online events.	Commence data analysis from HCSW learning survey. Continue to deliver support workforce learning on the GO online events, analyse event evaluation and build in lessons learned and recommendations into planning for support workforce learning week 2025. Progress actions from Scottish Government Healthcare Support Worker (HCSW) commission.	Conclude data analysis from HCSW learning survey and produce national report with recommendations. Continue planning for support workforce learning week 2025. Progress actions from Scottish Government Healthcare Support Worker (HCSW) commission.	Green	Discussions underway with Scottish Government regarding future direction and next steps in respect of Healthcare Support Worker (HCSW) commission. Hosted a workshop on 09.05.24 on nursing HCSW roles providing an opportunity for boards to discuss work currently being undertaken, share good practices, learn the impact these roles are having on services and patient care. HCSW national learning survey has been developed along with communications plan and goes live 03.07.24. Delivered a session on 04.06.24 on SCDF or equivalency what does this mean for you as part of the Support Workforce Learning on the GO event series and planning underway for two sessions in Q2.	Green	National Healthcare Support Worker learning survey has been open since 3 July 2024 and closes on 31 October 2024. The Professional Development Award (PDA) Education, Training and Assessment has completed cohort one of the pilot and evaluated well with all six learners completing and achieving the PDA. A second pilot cohort will be advertised and will commence on 2 October 2024. Delivered two support workforce learning on the GO online events, one on 21 August 2024 around the four pillars of practice and how they can support learning and development which also featured the launch of a four pillars of practice toolkit resource and a session on 14 September 2024 on neurodiversity, our voices.	Green	Green	Data analysis from HCSW (Healthcare Support Worker) learning survey underway with health board reports prepared to support local action planning. High level national key messages presented to HCSW Commission Steering Group on 9 December 2024. Hosted a follow up workshop on 19 November 2024 on nursing HCSW roles providing a forum for sharing of good practice and networking. Launched the revised Making Delegation Safe and Effective resource during an online event on 5 December with over 200 NMAHP attendees. Delivered two support workforce learning on the GO online events - 31 October 2024 around TURAS Professional Portfolio and 11 December 2024 on Self Confidence: Silence your inner Critic. Due to infrastructure changes within NES around those involved in supporting the wider support workforce staff group the decision was taken not to progress with support workforce learning week 2025 but instead continue to offer regular support workforce learning on the GO online events.	Green
8. Workforce	4380	NMAHP	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP9 – No of times learning products accessed	In line with the Health and Social Care National Workforce Strategy, we will support development of a high-quality, skilled and sustainable NMAHP acute workforce with education and training aligned to workforce requirements, to meet service need as data informed and evidence-based approaches.	Explore feasibility of a self/alternatively funded Non-medical gastroenterology (GI) endoscopy cohort. Complete data gathering phase of non-medical endoscopy pilot evaluation. Plan engagement for national Peroperative event and promote refreshed Peroperative Career Development Framework. Pilot of CDP work-based degree programme – communications to support boards to recruit to new programme. Continue to support promotion for adoption of STN framework	Confirm final feasibility of a self/alternatively funded GI endoscopy cohort. Data analysis and write up for non-medical endoscopy pilot evaluation. Review the Career Development Framework for Peroperative Practitioners to determine alignment with revised NMAHP & HCSW Development Framework. Activity for STN dependent upon emerging outcomes of strategic national discussion	Final publication of non-medical endoscopy pilot evaluation and recommendations for future delivery. Plan national non-medical endoscopy education event. Review the Career Development Framework for Peroperative Practitioners to determine alignment with revised NMAHP & HCSW Development Framework. Activity for STN dependent upon emerging outcomes of strategic national discussion	Hold national event for non-medical endoscopy pilot evaluation and development action plan for future educational needs. Evaluate the Core Competency Framework for Anaesthetists. Practitioners revised in Feb 2024	Green	Endoscopy cohort feasibility - SBAR distributed to all relevant stakeholders exploring potential for a follow year and need for alternative funding options. Agreement secured with HEI that the programme can run, should sufficient regional self-funding interest develop (minimum 8 places required). Flexibility agreed to deliver at any stage within financial year 2024/25, to mitigate later recruitment. Rapid scoping exercise performed with all regional service leads which has identified interest for 8 of 8 places therefore cohort identified as feasible.	Green	Decision to progress to a self-funded GI (gastrointestinal) endoscopy cohort deemed feasible and agreed. Course launch scheduled for January 2025. Of the minimum six place requirement there have been recruited and three are confirmed out to recruitment at the time of report. Data analysis and write up now complete for non-medical endoscopy. Evaluation has progressed to the final write up / edit stage for completion by end of Quarter 3.	Green	Green	All six self funding endoscopy places have been successfully recruited and have applied to the course. January 2025 cohort remains on schedule. Endoscopy evaluation draft now complete and undergoing internal review. On track to publish in January 2025. Operating Department Practitioner (ODP) Graduate Apprenticeship handbook is also complete. First overnight meeting held on 26 January 2024 with goal stakeholder engagement. Peroperative career development framework has now been agreed and published. The Annual non-medical endoscopy event has been integrated with the peroperative careers and workforce events to be held in Quarter 4.	Green
8. Workforce	4387	NMAHP	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP11 – Sage learners reporting that learning will improve practice	Award Allied Health Professions (AHP) Careers Fellowships to Health and Social Care workforce and enhance the infrastructure that supports delivery of the interprofessional and cross sector scheme.	New cohort of AHP Fellows for 2024/25 will commence. Deliver three online workshops to 2024/2025 cohort of AHP Fellows. Deliver celebration/having learning event for previous cohort (2023/2024).	Deliver series of online workshops, trial mentorship session and peer learning set session to 2024/2025 cohort.	Consider feasibility of recruitment to AHP Fellowships for next cohort (2025/2026). Deliver series of online workshops, trial mentorship session and peer learning group session to 2024/25 cohort. Deliver an online CPD session for Alumni members.	Deliver series of online workshops, trial mentorship session and peer learning set session to 2024/2025 cohort. Host the 2024/25 cohort for AHP Careers Fellowship Scheme commenced on 27.05.24 with 14 fellows and profile Sway completed to introduce and promote the fellow and their work-based projects. This is a delayed start due to the fiscal situation and the programme is 10 months instead of 12. Delivered three online sessions to fellow cohort on 3 September 2024 to provide support and guidance and discuss the role and members of the AHP Fellowship Alumni. Fellows are completing self-directed induction. Delivered final celebration/having learning online event for previous cohort (2023/2024) on 13.06.24.	Green	Delivered six online sessions to 14 fellows to date. Fellows completed their Personal Development Plan and Project Charter. Held the first of the trial mentorship sessions with fellows, prepared Peer Learning Group (PLG) Facilitators and first PLG delivered. Delivered an online session for Fellows / Managers on 3 September 2024 to provide support and guidance and discuss the role and members of the AHP Fellowship Alumni. Fellows are completing self-directed induction. Delivered final celebration/having learning online event for previous cohort (2023/2024) on 13.06.24.	Green	Delivered six online sessions to 14 fellows to date. Fellows completed their Personal Development Plan and Project Charter. Held the first of the trial mentorship sessions with fellows, prepared Peer Learning Group (PLG) Facilitators and first PLG delivered. Delivered an online session for Fellows / Managers on 3 September 2024 to provide support and guidance and discuss the role and members of the AHP Fellowship Alumni. Fellows are completing self-directed induction. Delivered final celebration/having learning online event for previous cohort (2023/2024) on 13.06.24.	Green	Green	Recruitment for AHP Fellowships cohort 2025-26 concluded on 6 November 2024 with 32 applications received across seven professions and four career levels. Review Panel meeting held on 9 December 2024 to discuss applications and agree those who will be offered the Fellowship. Delivered eight online sessions to 14 fellows to date including the self-directed review / project day. Held the second of the trial mentorship sessions with Fellows and the second Peer Learning Group session. Delivered a Continuing Professional Development (CPD) session on change management for alumni members on 10 December 2024.	Green
8. Workforce	4390	NMAHP	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP10 – Sage of workforce exceeding learning products	Commission prescribing programmes for NMAHPs according to criteria set for priority areas, as identified by Scottish Government.	Work with NHS Boards/employers to allocate funding for the VMD Prescribing course, according to Scottish Government criteria.	Work with NHS Boards/employers to allocate funding for the VMD Prescribing course, according to Scottish Government criteria.	Work with NHS Boards/employers to allocate funding for the VMD Prescribing course, according to Scottish Government criteria.	Work with NHS Boards/employers to allocate funding for the VMD Prescribing course, according to Scottish Government criteria and confirm numbers enrolled for September 2024 and February 2025 intakes.	Amber	Discussions are planned with Scottish Government to confirm criteria and funding for Non-Medical Prescribing to 2024/25.	Green	Funding has been confirmed by Scottish Government and nominations have been received from NHS Boards and are being reviewed to ensure criteria is met also allocation of funding.	Green	Green	Funding has been allocated to NHS Boards according to Scottish Government criteria, and Purchase Orders raised and sent to Boards for studies commencing studies in September 2024.	Green
8. Workforce	4392	NMAHP	Education, training & workforce development	People	Support role redesign and service transformation across health & social care	SKP11 – Sage learners reporting that learning will improve practice	Fund up to 100 General Practice nurses per year to complete commissioned and funded Higher Education Institution (HEI) modules in line with Transforming Roles programme.	Liaise with Scottish Government primary care colleagues and National General Practice Nurse leads to determine the current education and training requirements of the GPN workforce in line with GPN Transforming roles.	Advertise funding opportunities, review applications, liaise with commissioned universities and allocate funding for education as agreed in Q1.	Advertise funding opportunities, review applications and allocate funding for education as agreed in Q1.	Monitor progress and completion and report to sponsors	Green	Discussions are taking place with Scottish Government to confirm criteria and funding for General Practice Nursing for 2024/25.	Green	Funding has been approved and funded education opportunities advertised on the General Practice Nurses (GPN) pages of the NES website and around the GPN networks. Funding is available for non-graduate nurses undertaking the Superior Education and Mentoring Programme. The University of Dundee for Minor Illness and Long Term Conditions. Nurses may also apply for funding for individual modules in Prescribing, Research, Leadership and Advanced Clinical Assessment. Applications are currently open and being collated, reviewed, and responded to on a weekly basis. Purchase orders are being raised on an ongoing basis once nurses confirm they have secured a place on a course.	Green	Green	Applications are still open for funding for modules in Prescribing, Leadership, Research and Clinical Assessment and are being collated, reviewed, and responded to on a weekly basis. Purchase orders are being raised on an ongoing basis once nurses confirm they have secured a place on a course. Nurses are enrolling on the January 2025 commissioned courses at the University of Highlands and Islands and the University of Dundee for Minor Illness and Minor Injuries.	Green
8. Workforce	4394	NMAHP	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP11 – Sage learners reporting that learning will improve practice	Deliver a minimum of 350 Scottish Multiprofessional Maternity Development Programme (SMADPP) courses for approximately 4100 maternity and relevant pre-hospital health and care staff by March 2027. For the year ending March 2025, this will include a minimum of 110 courses for approximately 1,300 staff.	Deliver a minimum of 30 courses for approximately 900 staff, with 50% of course provision prioritised for neonatal resuscitation and obstetric emergencies (core mandatory training).	Deliver a minimum of 60 courses for approximately 600 staff, with 50% of course provision prioritised for neonatal resuscitation and obstetric emergencies (core mandatory training).	Deliver a minimum of 90 courses for approximately 1,800 staff, with 50% of course provision prioritised for neonatal resuscitation and obstetric emergencies (core mandatory training).	Deliver a minimum of 110 courses for approximately 2,200 staff, with 50% of course provision prioritised for neonatal resuscitation and obstetric emergencies (core mandatory training).	Green	In total, 36 courses have been delivered to 373 staff, with 72% of course provision prioritised for neonatal resuscitation and obstetric emergencies (core mandatory training). In addition to core delivery, three learning sessions specifically for neonatal staff on maternal factors, jaundice and recognition of the unwell infant, were facilitated in Quarter 1 with 146 participants in total. A webinar with ScotSoc was provided to 83 participants focused on stabilisation of babies, with or without the need for them to be transported.	Green	In total, 68 courses have been delivered to 687 staff, with 71% of course provision prioritised for neonatal resuscitation and obstetric emergencies (core mandatory training).	Green	Green	In total, 124 courses have been delivered to 1,113 staff, with 76% of course provision prioritised for neonatal resuscitation and obstetric emergencies (core mandatory training).	Green
8. Workforce	4395	NMAHP	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP11 – Sage learners reporting that learning will improve practice	By employing the principles of the Family Nurse Partnership (FNP) Education Strategy provide the core FNP Education Programme, including access to the Professional Diploma in Family Nursing, and the Continuing Professional Development (CPD) Programme for Family Nurses and Family Supervisors.	Deliver education to 54 family nurses and 18 supervisors (including cohorts from previous years) as part of the core and supervisor education programme during quarter 1. The CPD programme will be offered to 31 family nurses and supervisors. The Professional Diploma will be offered during quarter 2.	Q2 Deliver education to 48 family nurses and 5 supervisors (including cohorts from previous years) as part of the core and supervisor education programme during quarter 2. The CPD programme will be offered to 25 family nurses and supervisors. The Professional Diploma will be offered during quarter 2.	Deliver education to 40 family nurses and 5 supervisors (including cohorts from previous years) as part of the core and supervisor education programme during quarter 3. The CPD programme will be offered to 25 family nurses and supervisors. The Professional Diploma will be offered during quarter 4.	Green	Governance assurance for the Professional Diploma in Family Nursing following the successful external verification visit from Scottish Qualifications Authority (SQA). In Quarter 1 17 family nurses were engaged on the Professional Diploma in Family Nursing programme. The core programme facilitated education for a total of 79 family nurses (this includes those undertaking the diploma). Supervised education was required for a lower than anticipated number, there are currently five nurses in education and this fulfils 100% of service requirements. 43 family nurses and supervisors engaged in CPD during this quarter.	Green	In Quarter 2, there are four cohorts, totalling 72 family nurses progressing through the education programme. Of these 72, 24 are undertaking the Professional Diploma in Family Nursing. There remains five supervisors undertaking the Supervisor Education and Mentoring Programme. The Continuing Professional Development (CPD) programme has been facilitated for 102 Family Nurse Practitioner supervisors and family nurses.	Green	Green	In Quarter 3, four cohorts totalling 72 family nurses were in core Family Nurse Partnership (FNP) education. 25 (of 72) completed core education and 13 (of 25) family nurses successfully completed the Professional Diploma in Family Nursing. In Quarter 3, seven FNP supervisors continue through the Supervisor Education and Mentoring programme. The continuing professional development programme has facilitated education for 65 family nurses and supervisors. A podcast series is now fully published with eight episodes aiming to support different aspects of FNP practice as short educational resources. There are 380 downloads to date.	Green	
7. Women and Children's Health	4397	NMAHP	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP11 – Sage learners reporting that learning will improve practice	Provide educational activities, training and/or resources to support the continuing 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 and reflect the policy and strategic landscape (Setting it Right for Every Child, United Nations Convention on the Rights of the Child, Keeping the Promise, The Best Start: A five year plan for maternity and neonatal care in Scotland, Best Start Bright Futures: tackling child poverty delivery plan 2022-2026, Mental Health strategy 2017 -2027).	A minimum of 2 of 10 activities, sessions or resources will be provided. This will include an e-learning module development for GIRFEC	A minimum of 7 of 10 activities, sessions or resources will be provided.	A minimum of 7 of 10 activities, sessions or resources will be provided.	A minimum of 10 of 10 activities, sessions or resources will be provided.	Green	An event for Allied Health Professionals (AHP) working with children and young people (CYP) shared improvement projects linked to better outcomes for CYP. In addition, an evaluation of the AHP community of practice was shared a conference seminar. 400 attended a webinar on 'ask and every child' with 27% (110) evaluation reports who reported a high level of confidence applying learning in practice and 100% agreed their learning objectives were met. Two e-learning modules for Getting it Right for every child (GIRFEC) are content ready with the informed level module at build stage with NES digital and skilled level module at final review with stakeholders.	Green	A health inequalities webinar focused on child poverty was delivered in Quarter 2 with over 800 colleagues joining. Resources from the event and supplementary information via a Microsoft 'Sway' presentation was made available to delegates. Online infant feeding mentor training was facilitated with 25 colleagues to support their confidence and skills with infant feeding supervised clinical practice. The Allied Health Professionals (AHP) community of practice continues and currently has 756 members. So far this year, six activities, sessions or resources have been provided, inclusive of one event, one conference seminar, two webinars, one training session, one Sway resource.	Green	Green	During Quarter 3, 275 colleagues joined our webinar reflecting on the Saving Lives, Improving Mother's Care report. Two webinars were provided about our trauma-informed maternity services project with 165 colleagues joining and more sessions planned during Quarter 4. There were two learning sessions for the Allied Health Professionals community of practice, one focused on quality improvement (50 participants) and another facilitated by Down Syndrome Scotland (50 participants). Two multi-professional e-learning modules were published on 'Setting it right for every child' at informed and skilled levels, with 200 already completing the modules. A range of training on infant feeding was provided during Quarter 3, project management for accreditation (15 participants), infant feeding mentor training (49 participants), breastfeeding and relationship building (15 participants), and a breastfeeding masterclass for student health visitors (28 participants). So far this year, 11 activities, sessions or resources have been provided - achieving and exceeding our target for this year.	Green
8. Workforce	4686	NMAHP	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP12 – Sage learners reporting that learning will improve practice	Implement, evaluate, facilitate and use assessment methods to monitor the effectiveness of the work derived from the Infection Prevention and Control (IPC) Education Strategy to ensure continuous learning for optimal standardised infection prevention and control outcomes while ensuring the availability of high-quality learning resources, opportunities and pathways that are equitable and can be easily accessed by the workforce. This will involve moving our current product estate to the new authoring tool Rise.	We will update the Infection Prevention and Control Zone on Turas Learn to make this more user-friendly improving metadata information to allow users to find more easily educational materials. We will enhance mechanisms for gathering feedback from users to continuously refine the educational content and delivery methods	We will evaluate the epidemiology and surveillance for IPC and outbreak simulation training to demonstrate the effectiveness of both users systematically, with a specific focus on measuring Level 4 Kirkpatrick model impact results	We will work with our stakeholders and identify subject matter experts to improve our process for educational content. We will use analytics to track engagement, completion and update of educational materials and produce a year-end report for 2024/25.	We will have 4 meetings of the Oversight Advisory Board and establish an Infection Prevention and Control Workforce Education Advisory Group which will meet 4 times during 2024/25 and we will hold 4 meetings of the healthcare Built Environment Learning and Development Steering Group	Amber	Metadata on TURAS Learn for almost all products now updated. Long-term staff absence reduced team capacity. Project will be completed in Q2. SPCP Resources Quick Finder was launched to make it easier for staff to find resources on the IPC Zone. Good feedback received. Commenced project to revise user feedback questionnaires. This has been delayed due to a directors wide project to create core evaluation questions, which fits in with our revision of questionnaires. Project will be completed in Q2.	Green	We continue work to move the SPCP (Scottish Infection Prevention and Control Education Pathways) Foundation Layer modules the Articulate Rise authoring tool. The first two modules and assessments have been published and work on another five modules has commenced. Feedback forms are now integrated in the modules to increase user feedback. The project to update all metadata is almost complete. Work has commenced to update all video transcripts in line with new accessibility requirements.	Green	Green	Publications and Conferences: Our ongoing partnership with AHAH Scotland in the 'Advancing Outbreak Simulation Training' programme continues to receive significant recognition across multiple professional platforms: •Poster Presentation: NHS Scotland Event, June 10, 2024. •Webinar Presentation: Scottish Sim Safety Summit, July 12, 2024. •IPSC Scotland Branch Conference, August 29, 2024. •IPSC Conference, September 23-25, 2024. •Abstracts Accepted: ASPH Conference, November 3-5, 2024. •Speaker Invitations: HSC IPC Leadership Course on "Investing in the Future: Quality Improvement and Education", December 3, 2024. Outbreak Simulation Training: •We have completed the tender specification for a medium / long-term Level 4 evaluation of our outbreak simulation training. A contract has been finalized with Harlow Consulting, with the evaluation set to commence in October 2024 and conclude in February 2025.	Green
8. Workforce	4687	NMAHP	Education, training & workforce development	People	Support role redesign and service transformation across health & social care	SKP11 – Sage learners reporting that learning will improve practice	Develop two educational pathways for Allied Health Professions (AHP) Advancing Practice in priority areas identified by SDAMP (Scottish Directors of AHP) in 2024/2025. The work will directly support the Progressive Career Models and Workforce Enhancement recommendations of the Scottish Government AHP Workforce and Education Review.	work with SDAMP to agree national definition of AHP advanced practice and develop 2 priority areas to scope the need for Advanced Practitioners	Develop Service Needs and Learning Needs analysis for scoping. Host one on-line workshop on advancing practice prior to scope	Revised milestone - Successfully recruit Senior Educator and Specialist Lead to support deliverables of Scottish Government Commission - Transforming Roles AHP Advanced Practice. Identify key stakeholders and develop robust consultation methods to progress agreement across all AHP professions on a national definition of AHP advanced practice, titles to describe the role and titles of levels of practice.	Revised milestone - Working with key stakeholders draft the content for AHP specific Transforming Roles paper which sets out the vision for AHP advanced practice in Scotland. Liaising closely with Health and Care Professions Council and Chief Allied Health Professions Officer (CAHPO) - a nation group to ensure alignment with definitions of Advanced Practice used across the 14 professions and four UK countries. Continue to ensure work contributes to the development of knowledge and skills frameworks in priority areas and that align with Transforming Roles methodology.	Amber	NMAHP team, chair of Scottish Directors of AHPs (SDAMP) and CNO and policy officers due to meet 11 August 2024 to discuss potential commission for SDAMP. NES and key stakeholders to establish specific Transforming Roles paper which sets out the vision for AHP advanced practice in Scotland. Liaising closely with Health and Care Professions Council and Chief Allied Health Professions Officer (CAHPO) - a nation group to ensure alignment with definitions of Advanced Practice used across the 14 professions and four UK countries. Continue to ensure work contributes to the development of knowledge and skills frameworks in priority areas and that align with Transforming Roles methodology.	Amber	Further to the update provided at Quarter 1, the content of the new Transforming Roles AHP Advanced Practice commission has now been agreed with Scottish Government (SG) policy leads and funding confirmed. Revised milestones for Quarters 3 and 4 of this deliverable have now been agreed with Scottish Government (SG) and approved by the NES Executive Team.	Green	Green	Successful recruitment to Senior Educator and Specialist Lead positions commencing week of 6 January 2025. Preparatory work undertaken by Expressions of Interest including 12 presentations to strategic groups and four newsletter articles to raise awareness of aims of forthcoming commission. Terms of reference and membership of Steering Group, Stakeholder Group and Reference Group agreed with Policy Leads and SDAMP (Scottish Directors of AHPs) governance, reporting and methods of engagement agreed by delivery of the four outcomes of the commission.	Green
8. Workforce	4684	NMAHP	Education, training & workforce development	People	Support role redesign and service transformation across health & social care	SKP11 – Sage learners reporting that learning will improve practice	Transforming Roles - identify priority service areas and roles where reshaping the multiprofessional health and care workforce will significantly impact on care needs and take forward actions from the Transforming Roles programme workplan.	Develop content for knowledge and skills frameworks for neurological, general practice and prison health care nursing.	Review previous Transforming Roles content and make recommendations for action to the Transforming Roles Steering Group to inform the programme workplan. Finalise content for neurological, general practice and prison health care nursing knowledge and skills frameworks and work with design and digital to publish these on Turas.	Undertake activities to promote and embed the knowledge and skills frameworks in practice and continue progress specified work according to the timelines set out within the workplan.	Continue to progress specified work according to timelines set out within the workplan.	Green	Content for the frameworks is being developed by subject specific subgroups and progress was reported to the Transforming Roles Steering Group at its meeting in May 2024.	Green	Content completed for Neurological competencies framework and endorsed by National neurology forum during September 2024. Content for GP and Prison nursing being finalised for TURAS publication.	Green	Green	Neurology / GPN / Specialist Cardiology nurse frameworks endorsed by the Transforming Roles (TR) Steering Group in November 2024. Neurology and Cardiology framework work has been published on frameworks web page. Prison nursing framework will be reviewed by TR Review sub committee by January 2025 and presented to the TR Steering Group, also in January 2025.	Green

SG Recovery Driver	2024/25 ADP Deliverable Number	Directorate	Medium-Term Priority	NES Strategic Theme	NES Strategic Theme Detail	NES KPI Reference	2024/25 Deliverable Summary	Q1 Milestones	Q2 Milestones	Q3 Milestones	Q4 Milestones	Q1 RAG Status	Progress in Q1	Q2 RAG Status	Progress in Q2	Projected Q3 Status	Q3 RAG Status	Progress in Q3	Projected Q4 (2024/25 Year-End) Status
7. Women and Children's experience	4698	Corporate	Education, training & workforce development	Partnerships	Implement engagement with people with lived experience to inform our work	SKP127 - no of NES programmes demonstrating active engagement of people with lived experience	Advance NES' approach to Children's Rights, The Promise and United Nations Convention on the Rights of the Child (UNCRC). NES provides a range of evidence which recognises, respects and promotes the human rights of children which are integrated and considered in relevant education and resources. NES will evidence that children's rights are recognised, respected and promoted as an integral part of relevant activity, education and resources for the health and social care workforce in Scotland. This evidence should be provided in each reporting period and year until March 2027. Activities will include educational solutions to address the policy and legislative agenda relevant to, for example, the United Nations Convention on the Rights of the Child, Getting a Right for Every Child, and The Promise.	Provide a summary of actions and activities of the NES children's rights subgroup. Publish a learning site on children's rights and promote educational resources to the health and social care workforce. Design a project plan to support the extension to the UNCRC incorporation project, hosted in NMAHP and delivered by Scottish Government.	Through the UNCRC incorporation project team, hosted in NMAHP, deliver a minimum of 2 online learning activities during quarter 2 which continue supporting health boards, including the NES workforce, to increase their understanding on children's rights.	Through the UNCRC incorporation project team, hosted in NMAHP, deliver a minimum of 2 online learning activities during quarter 3. In addition, publish two e-learning modules one at informed level and one at skilled level for the multi-sector multi-disciplinary workforce on Getting a Right for Every Child (GREFC).	Produce a summary report of the years activities which will evidence and contribute to children's rights reporting duties (due in 2026). Approval of approach/framework.	Green	NES responded to the United Nations Convention on the Rights of the Child (UNCRC) statutory guidance consultation. The commissioned UNCRC project to support health boards with implementation is extended until March 2025. Awareness raising is a priority and 148 colleagues attended a short online session during quarter 1, with 5 sessions planned in quarter 2. NES facilitate the UNCRC leads network with active representation nationally, a poll revealed 90% of members feel their knowledge and awareness has increased since NES support commenced. In addition, we have undertaken 15 individual board discussions in supporting four boards with learning session development and three boards with resource development. A children's rights based approach is promoted through the NES children's rights subgroup, with actions and activities identified across each directorate in addition to aligning to new guidance on complaints and discussing child-rights budgeting.	Green	Awareness raising of the United Nations Convention on the Rights of the Child (Incorporation) (Scotland) Act 2024 remains a priority - both within NES and in the support provided to health boards. 30-minute online awareness sessions are now complete with over 900 colleagues joining the sessions since June 2024. A recorded version has been made available as a reusable resource. An online session was facilitated about adult services and children's rights for health board members in November 2024 steering group meeting to support and direct ongoing Level 5-9 activity. However, looking to align this with the NMAHP Level 5-6 Development Framework refresh anticipated in 2025/26.	Green	Green	Level 2-4 Framework presented to the HCSW (Healthcare Support Workers) Commission Steering Group for review and approval, with approval given. Planning a formal launch in Quarter 4 and ongoing work on the refresh of the associated skills passport. Transforming Roles paper approved at November 2024 steering group meeting to support and direct ongoing Level 5-9 activity. However, looking to align this with the NMAHP Level 5-6 Development Framework refresh anticipated in 2025/26.	Green
8. Workforce	4699	NMAHP	Education, training & workforce development	Partnerships	SG delivery partner for leadership, digital and data	SKP11 - Sage learners reporting that learning will improve practice	Co-produce and publish a midwifery development framework and coordinate development activities for perinatal health and care support workers and advanced clinical practitioners in midwifery by March 2025.	Engagement with stakeholders for scoping.	Analysis of scoping findings.	Co-production of development framework and associated activities	Launch of development framework and programme of development activities	Green	Level 2-4 HCSW Framework completed and work recommenced on Level 5-9 Midwifery Development Framework with steering group meeting held.	Green	Level 5-9 activity has been refocused into a Transforming Roles proposal for ongoing completion following analysis of preliminary scoping to understand the parameters of this work. A further service needs analysis is being designed for completion in Quarter 3. The exact NMAHP development framework is being refreshed so midwifery contribution to this work is also planned to avoid duplication of effort.	Green	Green	Level 2-4 Framework presented to the HCSW (Healthcare Support Worker) Commission Steering Group for review and approval, with approval given. Planning a formal launch in Quarter 4 and ongoing work on the refresh of the associated skills passport. Transforming Roles paper approved at November 2024 steering group meeting to support and direct ongoing Level 5-9 activity. However, looking to align this with the NMAHP Level 5-8 Development Framework refresh anticipated in 2025/26.	Green
9. Mental Health	4700	NMAHP	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP11 - Sage learners reporting that learning will improve practice	Work jointly with the Mental Wellbeing Commission to enable the development and delivery of a range of education and training opportunities to support workforce understanding of legislation aimed at protecting rights and application of the Adults with Incapacity (Scotland) Act (2000) in health, social care and social work practice across Scotland through the development and delivery of educational resources.	Begin development of education resource/opportunities for those staff who are dealing with more complex situations or those making the 'specialised' level of practice	Conduct scoping/consultation exercise with care and other stakeholders to review and inform plans	Post 1x education resource	Deliver education resource	Amber	Delay in confirmation of funding to progress project to phase 2. Confirmation received late in Quarter 1. Re-establishment of partnership working and project plan revised and project resuming. Commencement of educational solutions for specialist level of practice now in progress.	Amber	The content development of the second e-learning module (Education resource) has been completed and is now with the digital team to be built. Plans for posting back on delayed discharge from hospital are progressing. Due to unforeseen circumstances the capacity from the MHC has been severely limited during this quarter which has resulted in delay to expected progress.	Green	Green	Adults with Incapacity (AWI) e-learning module 1 - Over 1,500 learners have accessed module. AWI e-learning module 1 - Review of feedback from 500 learners developed a detailed report to be reviewed to reflect the amended delivery focus. AWI e-learning module 2 - Developed and built, final iteration pilot testing about to be undertaken.	Green
9. Digital Services Innovation Adoption	4705	NMAHP	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP11 - Sage learners reporting that learning will improve practice	Support implementation of the Recommended Summary Plan for Emergency Care and Treatment (RSEPECT) on the National Digital Platform (NDP).	Scope resources and report on findings	In collaboration with NTS and stakeholder group develop a training plan	Develop implementation plan and commence delivery	Assess and monitor progress and feedback	Amber	Through the scoping exercise it became evident that the RSEPECT form did not meet the needs of the Scottish population. Significant overlap with other care plans including the newly designed one for Scotland, Treatment Escalation Plan and Future Care Planning work. Within the group responsible for RSEPECT, a decision has been taken to design a new digital form that is bespoke to meet the needs of the Scottish population.	Red	While a decision is pending on whether the Recommended Summary Plan for Emergency Care and Treatment (RSEPECT) will be rolled out in its current form, replaced, or supplemented by the My Future Care Plan, no further progress has been made on supporting its implementation within the NDP. Instead, efforts are now focused on consolidating all palliative care resources, which will be hosted on the TURAS Learn platform. To maintain clear communication between NES and the Scottish Government (SG), monthly meetings have been established to track progress and set timescales for key milestones. SG expects the rollout of the My Future Care Plan to be completed by March 2026.	Red	Red	Scottish Government (SG) priorities have shifted to focus on the 'My Future Care Plan' initiative. Working alongside the NES Technology Service, the work includes informing content and developing educational materials for its rollout. Stand-ups occur three times weekly, with fortnightly SG meetings to review progress and content. RSEPECT continues to be used within several NES boards, however national progression is not planned at this time. Development of a 'Once for Scotland' palliative care learning site is ongoing. The new palliative care strategy, 'Palliative Care Matters for All' is out for consultation, alongside the review of the 'Palliative and End of Life Care' educational framework, which will complement the strategy. NES has formed a group to review palliative care education on TURAS, and SG has established a multidisciplinary expert group, with its first meeting set for January 2025.	Red
8. Workforce	4709	NMAHP	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP11 - Sage learners reporting that learning will improve practice	Deliver the Assessment of Capacity programme to cohorts of approx 60 Advanced Nurse Practitioners (ANP) per year.	Complete assessment of cohort 2, 2024, work with HES to integrate the programme into ANP training	Advertise and recruit to the programme and continue to work with HES	Commence delivery of the programme to cohort 3	Continue to deliver the programme to cohort 3	Green	Communications sent out to Advanced Nurse Practitioner (ANP) Leads in the Health Boards. Applications to undertake the course to be managed and collated locally by ANP leads and to be sent to NES for approval for the next cohort commencing August 2024.	Green	Recruitment to cohort 3 has been successful and the cohort is now underway, with 60 Advanced Nurse Practitioners (ANP) having commenced the course on 20 August 2024. An online information session was held on 15 August, and an on-line drop in session on 19 September to help new cohort members and their supervisors with the application process.	Green	Green	Advanced Nurse Practitioners continue to work their way through the online element of the course and are submitting their documentation for the practice element. A second drop-in session was held in September for nurses / supervisors to ask any questions they may have as they work their way through the course.	Green
8. Workforce	4712	NMAHP	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP11 - Sage learners reporting that learning will improve practice	Develop earn as-you-learn routes for two Allied Health Professions Healthcare Support Worker (HCSW) priority areas identified in 2022/24 scoping work and as required by the AHP Education and Workforce review linking with the Gen Gen of NH (Higher National) framework and interprofessional opportunities arising.	Establish specific stakeholder group for each of the priority areas. Work with SG to contribute to development of the earn as you learn routes and link with the Next Gen NH qualifications and draw on previously developed AHP units in AHP Group award. Establish potential delivery partners.	Host a minimum of 2 online workshops to engage with AHPs on the development of the earn as you learn routes and link with the Next Gen NH qualifications. Explore the financial implications for eligibility criteria for prospective candidates. Development of learning materials	Host one face to face stakeholder event to showcase developments. Identify steps / step-off points.	Validation of 2 educational pathways for AHP HCSWs, and relevant others, and register potential routes to registration.	Green	Contributing to SQA Next Generation NMAHP group and to the AHP core module group. Three areas are being explored for development: Paramedic, Physiotherapy and Speech and Language Therapy profession specific module design groups being established. Potential articulation routes being explored with HEP partners.	Green	Work continuing with the Quality Development Scotland (QDS) involving Scottish Qualifications Authority, Scottish Government, NES, HES and HIC providers. Options paper by SQA being prepared for HES Next Gen steering group on 1 October 2024. Options include, earn as you learn routes, widening access routes, more generic framework routes. Taking into account lack of placement provision for widening access and direct entry routes and also distance learning options. While options are being explored, progress continues with the core and three profession specific pathways.	Green	Amber	Review meeting held with Scottish Government, Scottish Qualifications Authority (SQA) and HES to agree next steps following options paper. Focus for Quarter 4 will be on Earn as you learn routes and widening access routes. A decision on the next steps will be made by the end of Quarter 4. NES will continue to contribute to the development of the three AHP educational pathways and aim to have a draft arrangement document by the end of Quarter 4.	Green
9. Digital Services Innovation Adoption	4427	NTS	National Digital Platform	Performance	SG delivery partner for leadership, digital and data	SKP18 - Availability of NES systems (internal and external) SKP18	National Digital Platform (NDP) provides cloud infrastructure, common services (such as identity and access management, structured and unstructured data services) and standards upon which NHS Boards, Social Care and other organisations can use to build products and services on to improve Health and Social Care in Scotland.	Mature services to support internal workloads	Mature services to support DFD & DDPD	Mature services to support other external workloads	Mature services to self-service	Green	Progress delivering authentication services and unstructured data service. Delivery in progress and moving into end of testing for initial live site (digital dermatology).	Green	Authentication service and data storage service deployed to production ahead of Digital Dermatology go-live on 29 October 2024. Demographics service integrated with third party application to support the same use cases.	Green	Green	Support of go-live and rollout of Digital Dermatology solution (which uses National Digital Platform / NDP Authentication Service, NDP Data Storage Service, and NDP Demographics Service). Discovery work and initial development for Digital Front Door (DFD) progressed. Progress continues in maturing and generational NDP services.	Green
9. Digital Services Innovation Adoption	4429	NTS	Realistic Medicine & Value Based Health & Care	Partnerships	SG delivery partner for leadership, digital and data	SKP18 - Availability of NES systems (internal and external) SKP18	Delivery of products / services within the Health and Social Care domain as agreed with relevant Scottish Government stakeholders. This includes: TURAS Vaccination Management, SG Diabetes, Weight Management, TURAS Real Time Staffing, Family Nurse Partnership, OpenEye Optometry Electronic Patient Record and TURAS Care Management application.	TBC	TBC	TBC	TBC	Green	Business as usual works has been carried out on all products, confirmation of strategic objectives is still awaited from Scottish Government, these were tied to the funding confirmation which was not received by end Quarter 1.	Amber	Business as usual work has been carried out on all products, confirmation of strategic objectives were not confirmed by Scottish Government, these were tied to the funding confirmation which was not received until end Quarter 2. Progress has been made with the national implementation plan for Eyecare and the Cataracts pathway is due to go live in October 2024.	Green	Green	Business as usual work has been carried out on all products. Progress has been made with the national implementation plan for Eyecare. The Cataracts pathway is due to go live in October 2024.	Green
9. Digital Services Innovation Adoption	4440	NTS	Internal efficiency, sustainability & affordability	Performance	Maximise NES's efficiency and demonstrate best value	SKP41 - Adverse events: no of category 1 Information Governance events	Continuous improvement in ability and capability to evidence NES compliance to legislative obligations under information law, such as adherence to Data Protection, NES Regulations, FOISA, Public Records Scotland, including national information standards (e.g. Referenced Public Sector Cyber Resilience Framework), and broader regulatory compliance that NES is required to adhere to.	Achieved 92% compliance rate for NES Progress Review Audit	Develop action plan to manage outstanding NES Audit recommendations.	TBC	TBC	Green	NES Audit results received and very positive scores across all measures. Assurance dashboards continue to be utilised within NTS to assess compliance, and View Goals being piloted to enable overall tracking of Information Governance 1 Assurance team work across NES.	Green	Action plan in place to address outstanding NES audit recommendations. Monitored by the NES Assurance Forum on a quarterly basis.	Green	Green	Action reported to NES Assurance Forum on quarterly basis. Third year audit of the three year cycle will be held on 29 May 2025, with evidence submitted by 23 April 2025.	Green
9. Digital Services Innovation Adoption	4442	NTS	Workforce data	Partnerships	Improve all aspects of workforce data	SKP18 - Availability of NES systems (internal and external) SKP18	NES will consolidate its position as a national centre for evidence on the health and social care workforce. To provide an evidence base to support workforce planning in health and social care through the acquisition, linkage, analysis and reporting of data. This includes quarterly publication of Official Statistics for the NHS Scotland Workforce.	Publish quarterly statistics in Q1 for the NHS Scotland Workforce	Publish quarterly statistics in Q2 for the NHS Scotland Workforce	Publish quarterly statistics in Q3 for the NHS Scotland Workforce	Publish quarterly statistics in Q4 for the NHS Scotland Workforce	Amber	Workforce publication for this quarter had to be released in phases due to data quality issues from the SWISS feed not providing WTE (Whole-Time Equivalent). Therefore initial release of workforce information focused on headcount and a second update will follow once WTE data is generated. Progress on securing eRoasting data has stalled due to lack of resource, but utilising improved eSS data as a securing.	Amber	Workforce publications issued to the normal process. Work to consolidate the improved eSS data continues, as well as work to secure the eRoasting data set, with detailed Information Governance (IG) resource now in place. However, capacity constraints and technical complexities in relation to IG and eSS data mean that the overall improved workforce data work is behind schedule.	Amber	Amber	Securing the eRoasting data continues to be dependent on agreeing the necessary Information Governance (IG) controls. A Data Protection Impact Assessment (DPIA) has been drafted though it quite complex to work on going to the right place and then signed off. Boards will have to provide approval for NES to receive the data - this is also in hand. Once we have this we can then progress the actual transfer of the data for further assessment, though there is currently no dedicated resource to do this. There is also a draft proposal underway regarding the service that NES will provide for National Rostering Reporting and the funding requirement for this. This requirement is assumed to be met via the new national eRoasting Operational Group - initial informal discussion to take place with SG Chief Nursing Officer (CNO) representatives to assess likelihood of being able to meet this. NES (Employee Self Service) data update - In final stages of development and testing to make use of the more timely eSS data for Workforce Planning, need to assess when to switch usage to this and away from existing SWISS (Scottish workforce information standard system) feed (though we still have access to both for a period). Workforce Data Observatory - Initial discussions to take place regarding the intent and outcomes required to enable further assessment.	Green
9. Digital Services Innovation Adoption	4570	NTS	National Digital Platform	Partnerships	SG delivery partner for leadership, digital and data	SKP24 - no of innovation projects with NES investment	Delivery of support to the Accelerated National Innovation Adoption (ANIA) programme. This will predominantly focus on Digital Dermatology in 2024/25, however there will be other engagement and potential sales of the NES Technology Service (NTS) as the ANIA Technology Delivery partner.	ANIA Programme Q1 Deliver a Media Store for Digital Dermatology	ANIA Programme Q2 Support rollout of digital dermatology solution Q3 Discovery around Heart Failure programme Q4 Support design of system for heart failure and procurement	ANIA Programme Q3 Discovery around Heart Failure programme Support design of system for heart failure and procurement	ANIA Programme Q4 Support design of system for heart failure and procurement	Green	The National Digital Platform (NDP) Data Storage Services team delivered a solution in Quarter 1 that is ready for delivery partners to integrate with, in a staging environment, that meets the requirements of the Digital Dermatology project. Quarter 2 will focus on production readiness and addressing any outcomes of the end-to-end testing of the integrations in staging.	Green	Following successful end to end (E2E) User Acceptance Testing (UAT) of the Digital Dermatology national service offering, with three launch Health Boards (NHS Dumfries and Galloway, NHS Greater Glasgow and Clyde / GGC & NHS Lothian), the programme received approval to proceed to go live at the Digital Dermatology Programme Delivery Board on 24 October 2024.	Green	Green	Following approval to go live at the October 2024 Digital Dermatology Programme Delivery Board the programme commenced rollout with three launch Health Boards as planned in November 2024. As of 31 December 2024: NHS Dumfries & Galloway - Service live across the health board NHS Greater Glasgow & Clyde - Service live in all but one sector - Glasgow City South scheduled January 2025 NHS Lothian - Service live in a few practices - board-wide rollout scheduled January 2025	Green
9. Digital Services Innovation Adoption	4573	NTS	Internal efficiency, sustainability & affordability	Partnerships	SG delivery partner for leadership, digital and data	SKP41 - Adverse events: no of category 1 Information Governance events	Work in partnership with Scottish Government Digital Health & Care Directorate to provide support in the delivery of the National Information Governance Programme.	Work closely with Scottish Government Digital Health and Care Directorate (DHAC) colleagues in support of the National Information Governance (IG) Programme.	Plan development day for the strategic direction of the NHS Information Governance (IG) Forum to support and promote national IG across NHS.	TBC	TBC	Green	NES continue to engage with this programme as best as possible, but there is ongoing consideration at Scottish Government as to the approach to this work. The resource NES provided to the programme has left due to ongoing uncertainty of the work, with no intention to provide as things stand. The NES Data Protection Officer is the current Chair of the National Information Governance Forum and so will be involved through that link.	Green	NES Information Governance (IG) & Assurance Lead continuing to chair NHS Scotland (NHSS) IG Forum. Planning of development day for the strategic direction of the NHS IG Forum to support and promote national IG across NHS is ongoing.	Green	Green	Information Governance (IG) Leads Development day hosted and facilitated by the Data Protection Officer (DPO). Outcomes report to be drafted for January 2025. Working closely with Scottish Government Digital Health and Care (DHAC) communications to improve national IG across NHS Scotland. Discussion with DHAC, NES Director of Technology Services, and NES DPO to be held in February 2025 to understand how NES can provide additional support to the national IG programme.	Green
9. Digital Services Innovation Adoption	4584	NTS	National Digital Platform	Performance	SG delivery partner for leadership, digital and data	SKP210 - Sage of workforce accessing learning products	Technology support of the NHS Scotland Digital Prescribing and Dispensing Pathways Programme (DPPDP) which will see the significant reduction of paper prescriptions across Scotland and efficiencies through the use of the National Digital Platform reusable service and components.	Complete the design of the end-to-end DPPDP Minimum Viable Product (MVP) Solution Architecture	Support the build of the agreed end-to-end DPPDP Minimum Viable Product (MVP) Solution Architecture	Respond to emerging requirements of NDP services as build progresses Q4	Continue to operate services in support of DPPDP programme.	Amber	Funding allocation letter not received in Quarter 2, which has impacted some activities, including build planning, recruitment and reforming the programme Technical Design Authority (TDA). Work on AHP Manager decision paused as engineering resource was reallocated to backlog for absence elsewhere. DPPDP internal reference architecture produced. Architectural approach and MVP architecture presented to Scottish Government Digital Health and Care (DHAC) TDA, which was positively received.	Amber	Funding allocation letter not received in Quarter 2, which has impacted some activities, including build planning, recruitment and reforming the programme Technical Design Authority (TDA). Work on AHP Manager decision remains paused as engineering resource was not available to be allocated to DPPDP in Quarter 2. Work has progressed on security principles and requirements, the DPPDP target operating model, an implementation business case and refinement of the DPPDP business architecture and state machine.	Amber	Red	DPPDP funding for financial year 2024/25 received in Quarter 3. However, this has arrived too late in the financial year to allow recruitment as a guarantee of funding for financial years 2025/26 or 2026/27 was received, and contracts that extend into 2025/26 cannot be underwritten by NES. This has continued to adversely impact build related activity. Work on the AHP Manager decision remains paused as recruitment to backlog engineering resource (allowing resource to be allocated to DPPDP) was not possible in Quarter 3. Work has continued to progress on security principles, architectural deliverables, the DPPDP product backlog and various supporting artefacts, such as message definitions and interaction maps.	Red
9. Digital Services Innovation Adoption	4671	NTS	Education, training & workforce development	Performance	Maximise NES's efficiency and demonstrate best value	SKP18 - Availability of NES systems (internal and external) SKP18	Continue to deliver a TURAS Platform that meets stakeholder needs, delivering priorities as agreed by NES via a Digital Prioritisation process. Also deliver the requirements of the TURAS Refresh programme as agreed with the defined governance bodies.	TBC	TBC	TBC	TBC	Amber	Work continues to deliver to previously agreed priorities, discovery work for key expected items for 2024/25 and removal of risk highlighted in the Cap Gemini report. Digital Prioritisation is ongoing to agree the TURAS roadmap for the rest of the 2024/25, hence the Amber RAG rating.	Green	Priority items for 2024/25 agreed and delivery plan for Education, Training & Workforce Domain developed. Those items identified for delivery during Quarter 2 / Quarter 3 starting to be investigated in order to plan how each will be delivered.	Green	Green	Priority items for 2024/25 agreed and delivery plan for Education, Training & Workforce Domain developed. Those items identified for delivery during Quarter 3 / Quarter 4 starting to be investigated in order to plan how each will be delivered.	Green
9. Digital Services Innovation Adoption	4669	NTS	Realistic Medicine & Value Based Health & Care	Partnerships	SG delivery partner for leadership, digital and data	SKP210 - Sage of workforce accessing learning products	Delivery of Digital Front Door (DFD) and Integrated Health and Social Care Record in line with outcomes as agreed with the relevant governance bodies.	DFD Technology support to the Digital Front Door programme to support the public of Scotland in better awareness and access to Health and Social Care services and access to their own healthcare data NDP service offering	TBC	TBC	TBC	Amber	Ongoing discussions with Scottish Government (SG) regarding the delivery plan and milestones for Digital Front Door (DFD), and also the overall approach to delivery of DFD. Current SG preference is to support the DFD for DFD in progressing with the external partner (BSS - Business Technology Consultancy) onboarded and work on the DFD has now commenced.	Amber	Successful procurement of an external partner to deliver an Outline Business Case (OBC) for Digital Front Door (DFD) has concluded with the external partner (BSS - Business Technology Consultancy) onboarded and work on the DFD has now commenced.	Amber	Amber	During Quarter 3, the NES Technology Service presented a proposed scope of the initial release of Digital Front Door (DFD) into NHS Lanarkshire by March 2026 to the DFD Programme Board and this was approved. Outline Business Case (OBC) for DFD is progressing well with the external partner (BSS - Business Technology Consultancy) finalising for wider distribution and review, initially to the DFD Programme Board by the end of January 2025. Consultations are ongoing with Scottish Government around funding for 2025/26 to allow full delivery of the agreed initial release.	Amber

SG Recovery Driver	2024/25 ADP Deliverable Number	Directorate	Medium-Term Priority	NES Strategic Theme	NES Strategic Theme Detail	NES KPI Reference	2024/25 Deliverable Summary Brief summary of the deliverable, outlining the intended action and what this will achieve in 2024/25.	Q1 Milestones What you intend to have achieved by Q1	Q2 Milestones What you intend to have achieved by Q2	Q3 Milestones What you intend to have achieved by Q3	Q4 Milestones What you intend to have achieved by Q4	Q1 RAG Status	Progress in Q1	Q2 RAG Status	Progress in Q2	Projected Q3 status	Q3 RAG Status	Progress in Q3	Projected Q4 (2024/25 Year-End) status
9. Digital Services Innovation Adoption	4683	NTS	National Digital Platform	Performance	Deliver National Digital Platform, Digital Front Door, and Digitally Enabled Workforce Programme	SKP18 – Availability of NHS systems (internal and external) SKP128	Provide deliverables and services to support the objectives for the Medical Device Data Hub (MDDH) project, as part of the Scan for Safety (SFS) programme, in order to meet forthcoming legislation which requests health providers to store the unique Device Identifier (UDI) for Class III and IV devices.	The data store and accompanying API (Application Programming Interface) contain all the necessary features for the MDDH programme to use. Infrastructure for the data store has been deployed into production and is ready for the programme to use. The MDDH programme is supported with their go-live for launch in healthboards.	The MDDH programme is supported with rollout to further healthboards. Technical support and responses to change requests are provided. The MDDH programme is supported in their delivery of integrating the data store with Scer Deer is a Data and Analytical platform, that is of strategic importance to Scottish Government, and the Scan for Safety Programme requires Scer integration with the Data Storage Service for MDDH. Alongside the programme, we will look to define a clear mechanism for integrating with Scer and gather requirements ahead of development in 2025/26.	N/A	N/A	Deliverable added at the end of 2024/25 Quarter 2 reporting window - reporting to commence from Quarter 3.	N/A	Deliverable added at the end of 2024/25 Quarter 2 reporting window - reporting to commence from Quarter 3.	N/A	Amber	The data store and accompanying APIs (Application Programming Interface) now contain all the necessary features. Go-live of the end-to-end MDDH (Medical Device Data Hub) solution has been delayed as we work to fix issues with performance of our APIs - we expect to resolve this during Quarter 4 and go live as planned before 31 March 2025. Work to define SIER integration has commenced with our support.	Green	
1. Primary and Community Care	4576	Optometry	Education, training & workforce development	People	Support role redesign and service transformation across health & social care	SKP11 – Sage learners reporting that learning will improve practice	Deliver a catalogue of Continuing Professional Development (CPD) to support practitioners qualified to work within the Community Glaucoma Service: this will respond to user feedback and needs analysis exercises throughout the year. However, it is expected to include minimal five online lectures, five peer discussion events as a fall conference day on glaucoma management topic.	To review and action appropriately around feedback from 23/24 deliverables. To outline a CPD plan for 24/25. To deliver min 2 online training/support events	Q2-4 dependent on SG and service requirements.	Q 2-4 dependent on SG and service requirements.	Green	Three sessions have been delivered: Two sessions for Glaucoma peer discussion treatment choices in May and June 2024 - six in attendance at each (capacity eight) One session for Glaucoma journal club (2ap) in May 2024 - four in attendance (capacity eight)	Green	Delivery of two online Glaucoma peer discussion sessions around cases with concurrent narrow angles and /or vascular issues. Face to face skills day on Mobile Skills Unit in Inverness. This day involved a session where delegates could practice gross skills using the perfk simulator. We had three interactive simulation scenarios that used prepared OpenEye records, a simulated patient and the EyeE to work through three simulated Community Glaucoma Service (CGS) scenarios. The day also included peer discussion, WESS visual recognition and interpretation of clinical signs, a short lecture on gonioscopy and a quiz to consolidate learning.	Green	Green	Delivery of two online Glaucoma peer discussion sessions around cases with concurrent narrow angles and /or vascular issues. Face to face skills day on Mobile Skills Unit in Inverness. This day involved a session where delegates could practice gross skills using the perfk simulator. We had three interactive simulation scenarios that used prepared OpenEye records, a simulated patient and the EyeE to work through three simulated Community Glaucoma Service (CGS) scenarios. The day also included peer discussion, WESS visual recognition and interpretation of clinical signs, a short lecture on gonioscopy and a quiz to consolidate learning.	Green	
8. Workforce	4577	Optometry	Education, training & workforce development	People	Support role redesign and service transformation across health & social care	SKP11 – Sage learners reporting that learning will improve practice	MDDH will link key clinical patient data to information around the medical devices used in their care. This will enable rapid national traceability of patients who have received specific devices, as well as provide a timely electronic record for patients about devices used during their procedure.	50 optometrists to attend at least one teach and treat session.	Green	68 Teach and Treat (T&T) sessions delivered. 146 T&T attendees to date. 19 different optometrists have attended T&T sessions to date. Mobile Skills Unit (MSU) booked for Inverness delivery of simulation-based Independent Prescribing clinical placements during November 2024. Procurement tender process for multi-year multi-discipline simulation actor supplier underway. Awaiting data Protection Impact Assessment (DPIA) and loan of Virtual Reality (VR) headsets to allow pilot of online simulation IP clinical placements to support Remote and Rural (RR&R) delivery. Funding reduced for WOSGOTT (West of Scotland Teach and Treat Clinic) and LOTT (Lothian Optometry Teach and Treat Clinic) for 2024/25.	Green	18 new simulation facilitators engaged on a seasonal basis including those from Rural and Island areas. Bespoke 'Introduction to Simulation' course created for 10 new simulation facilitators to be delivered in Inverness on 18/19 November 2024. Remaining new facilitators booked for training in Larbert in February and April 2025. Simulation sessions on Mobile Skills Unit (MSU) in Inverness (20 - 29 November 2023) for trainee Independent Prescribers (IPs), IPs and optometrists will be well supported. Simulation sessions at Stobhill Hospital, Glasgow running on Friday, Saturdays and Sundays. Stobhill simulation sessions fully booked until end of November 2024 with future dates to end of February 2025 due to release by the end of Quarter 2. Actor procurement process / framework still underway however waiver issued in the interim. Uncertainty around LOTT (Lothian Optometry Teach and Treat Clinic) due to emergency closure of PAEP however contingency plans under consideration. Plan simulation session at LOTT cancelled due to PAEP (Princess Alexandra Eye Pavilion) closure. Teach and Treat (T&T) sessions delivered in ABI (Aberdeen Royal Infirmary), LOTT and WOSGOTT (West of Scotland Teach and Treat Clinic). Over 50 different optometrists have attended at least one T&T session to date.	Green	Green	On track to support a minimum of 50 optometrists attending teach and treat clinics. Bespoke Introduction to Simulation course created for 10 new simulation facilitators delivered in Inverness in November 2024. Pending delivery of remaining faculty training in Larbert. Simulation sessions on Mobile Skills Unit in Inverness (November 2024) for trainee Independent Prescribers (IPs), IPs and optometrists delivered. Simulation sessions at Stobhill Hospital, Glasgow running on Friday, Saturdays and Sundays. Stobhill simulation sessions fully booked until 2 February 2025 with future dates to end of February 2025 due to release in early Quarter 4. Actor procurement process / framework awaiting NHS-wide tender agreement but waiver issued in the interim. Uncertainty around LOTT (Lothian Optometry Teach and Treat Clinic) due to emergency closure of PAEP however contingency plans under consideration. Plan simulation session at LOTT cancelled due to PAEP (Princess Alexandra Eye Pavilion) closure. Teach and Treat (T&T) sessions delivered in ABI (Aberdeen Royal Infirmary), LOTT and WOSGOTT (West of Scotland Teach and Treat Clinic).	Green			
1. Primary and Community Care	4578	Optometry	Education, training & workforce development	People	Support role redesign and service transformation across health & social care	SKP10 – Sage of workforce accessing training products	Support a minimum of 40 optometrists through the Ocular Therapeutics course at Glasgow Caledonian University (GCU) beginning in Q2. Measured by enrolment in September 2024 Module 1 and a continuing support to complete Modules 2 and 3 by Q4.	Scope and deliver outline for 2025 MT. Q3-Q4 update NPCCD system on fortnightly basis with Mandatory Training completion data.	Green	Working with Glasgow Caledonian University (GCU) to establish how many practitioners can begin training in September 2024.	Green	Working with Glasgow Caledonian University (GCU) - we are currently supporting 48 places.	Green	Green	Working with Glasgow Caledonian University (GCU) - we are currently supporting 48 places.	Green	Working with Glasgow Caledonian University (GCU) - we are currently supporting 48 places.	Green	
1. Primary and Community Care	4623	Optometry	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP10 – Sage of workforce accessing training products	Maintain annual delivery of mandatory training for all optometrists and OMPs (ophthalmic medical practitioners) in Scotland, by publishing a module for 2025 release, while maintaining completion and reporting against the 2024 version.	Generate learn material for 2025 module.	External review and testing of module updates.	Publication and initial user feedback with academic elements, so senior tutor now closely supporting and this will ensure time schedules are met.	Amber	Further to the update provided at Quarter 1, we do not yet have a module to review internally or externally. Delays caused by internal workforce / capacity issues which are in the process of being worked through.	Amber	Amber	Further to the update provided at Quarter 2, the module is now in review internally however this deliverable remains behind schedule due to previous delays caused by workforce issues.	Amber			
1. Primary and Community Care	4624	Optometry	New Workforce Models: Identification & implementation	People	Support role redesign and service transformation across health & social care	SKP13 – No of education, research & strategic collaborations	Support enhanced service delivery by developing an undergraduate training programme for optometry, with potential for Independent Prescribing status as outcome, in partnership with the Scottish Higher Education Institutions (SHEI).	Initialise design and development of ePortfolio. Development of all supervisor training and plans. Launch of training. Await confirmation of funding for 2024/25 to commence pilot. Prep content for optometry FYT Tutorials Learn page, inc. comms page. Initial discussions around development of assessment strategy. Continued engagement with stakeholder and Special Interest (SIG) groups.	Prep for launch of GCU Moptom (IP) inc. release of collaborative comms and development of training programme. Finalise placement structure and design. Sign off of MoU(s) with GCU and UHI. Initial design and development of ePortfolio. Commence development of training programme. Development of assessment strategy. Continued engagement with stakeholder and SIG groups.	Commence use of ePortfolio during year 1 of Moptom at GCU. Continue development of training programme. Finalise placement structure and design. Sign off of MoU(s) with GCU and UHI. Continued engagement with stakeholder and SIG groups.	Completion of supervisor training modules pilot, inc. feedback. Finalise assessment strategy and plans. Launch of ePortfolio for use in GCU years 1-4. Continued engagement with stakeholder and SIG groups.	Green	Currently working on supervisor models. Have highlighted ePortfolio as digital priority. Working on MOAs with HEI. Currently waiting the outcome of Lead Employer status from Scottish Government. SIG group and stakeholder groups ongoing.	Green	Still awaiting outcome from Scottish Government (SG) regarding Lead Employer status. Glasgow Caledonian University (GCU) launched Moptom (Integrated Masters degree in Optometry) course. Working with GCU and UHI - shared by NES with individual comms released. Commenced development of ePortfolio. Engaged supervisors with national supervisor survey. Report written and shared internally and with SG. Assessment strategy discussion held. HEIs will take forward. Placement site approval process reviewed and SG issued for support. Progression of placement allocation process discussion. Initiated discussion around information governance (IG) and data sharing with HEIs (including representatives from IG from each institution).	Green	Use of ePortfolio has been upgraded. Changes to coursework focus has meant delaying some key elements including the design of ePortfolio (including placement placements). Issues with recruitment portal Oriel has meant significant reconsideration around recruitment processes. These discussions will continue into Quarter 4 and beyond into 2025. Issues relating to approval process reviewed and SG issued for support. Progression of placement allocation process discussion. Initiated discussion around information governance (IG) and data sharing with HEIs (including representatives from IG from each institution).	Green	
8. Workforce	4625	Optometry	Education, training & workforce development	People	Support role redesign and service transformation across health & social care	SKP10 – Sage of workforce accessing training products	Maintain a team capable and ready to deliver a 4th cohort of optometrists through NESAT (NES Glaucoma Award Training) to increase workforce capacity around the Community Glaucoma Service - with expectation that the cohort will be enrolled in quarter 3.	To review and action appropriately around feedback from cohort 3 delivery.	Q2- Q4 dependent on SG requirements.	Q2- Q4 dependent on SG requirements.	Amber	Lead still not had contract issued despite securing of Scottish Government (SG) baseline funding for the role. It is hoped that this will progress shortly and we will then be able to deliver on the agreement with SG to deliver a 4th cohort of NESAT starting January 2025.	Green	Onboarding commenced for cohort 4, starting January 2025 delivery. Course overall complete. Recruitment to faculty for use with educational supervision, assessment etc, all now progressing well.	Green	Green	Cohort is now live and running. From 6 January 2025 start date 20 trainees are currently 'live'. Some fragility exists around the NES placement in a small number of boards as not all have signed and required the Service Level Agreements (SLAs). We are delivering a suite of additional webinars to support the learners in their studies alongside the introduction of a new face to face pre-NE placement practical day. A degree of content review and refresh is underway in parallel.	Green	
1. Primary and Community Care	4715	Optometry	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP9 – No of times training products accessed	Support Continuing Professional Development (CPD) for eyecare professionals working in community optometry practice, by delivering an appropriately scoped catalogue of online and face-to-face courses.	CPD delivered via both internally designed and delivered resources, as well as deliverables achieved with external stakeholders, such as DOCTI, dispensing optician CPD provider. Internally deliverables include: Q1 two online or face to face events for min 8 delegates each.	Two online or face to face events for min 8 delegates each	Two online or face to face events for min 8 delegates each. Capacity maintained to support targeted CPD attached to practitioners engaged with the SPTI (Specialist Practitioner). Ongoing training and those requiring additional support to achieve their competency certificate.	Amber	Delayed recruitment due to delayed agreement of Scottish Government funding means we have had to prioritise elsewhere in delivery. We will look to ramp up delivery as soon as capacity allows.	Amber	Planning for a significant catalogue of Continuing Professional Development (CPD) delivery in Quarter 3 / Quarter 4 to support the eyecare workforce. This includes: 2 face to face skills days in Binocular Vision / Paediatric management; Paediatric courses and significant online delivery for Dispensing Opticians; Cataract clinic CPD experience; An ocular CPD day; A webinar series; Peer discussions; 2 Leadership and Management courses	Green	Green	Planning for a significant catalogue of Continuing Professional Development (CPD) delivery during Quarter 3 and 4 to support the eyecare workforce. This includes: 2 face to face skills days in Binocular Vision / Paediatric management; Paediatric courses and significant online delivery for Dispensing Opticians; Cataract clinic CPD experience; An ocular CPD day; A webinar series; Peer discussions; 2 Leadership and Management courses	Green	
4.309	Planning & Corporate Resources	Internal efficiency, sustainability & affordability	Performance	Maximize NES' efficiency and demonstrate best value	SKP40 – NES RAG status for delivery against ADP	Deliver the Mit/actor replacement project as part of implementing a new model of integrated operational planning within NES which meets the needs of both the organisation and SG Health Planning, Finance and Workforce.	Develop Project Plan	Delivery of milestones set out in Project Plan	Delivery of milestones set out in Project Plan	Delivery of milestones set out in Project Plan	Delivery of milestones set out in Project Plan	Green	Project being progressed as part of the Business Transformation Programme. Project scope agreed and progress missing work held.	Green	Testing of changes to increase integration of approach through operational planning for 2025/26.	Green	Green	Worked closely with NES Finance colleagues to deliver integrated 2025/26 operational and financial planning approach including production of enhanced template and supporting documentation. 2025/26 review meetings successfully held with all directors. Feedback on 2025/26 operational planning process being sought via Learning Log and engagement with colleagues via internal corporate management groups. Options for replacement financial planning solution being developed with support of NES Technology Service and presented to Business Transformation Programme Board in January 2025.	Green
4.609	Planning & Corporate Resources	Internal efficiency, sustainability & affordability	Performance	Maximize NES' efficiency and demonstrate best value	SKP40 – NES RAG status for delivery against ADP	Development and delivery of NES Annual Delivery Plan (ADP) and other key corporate documents such as the Annual Strategic Plan, supporting the implementation of the Board's Corporate Strategy and Medium Term Plan.	Approval of ADP	Delivery of ADP milestones	Delivery of ADP milestones	Delivery of ADP milestones	Delivery of ADP milestones	Green	NES Annual Delivery Plan (ADP) approved by NES Board in May 2024. Delivery and reporting of Quarter 1 milestones underway.	Green	NES Annual Delivery Plan (ADP) delivery progressing with quarterly reporting in place. Change control and corporate radar processes fully embedded to support in year commissions and amendments.	Green	Green	2024/25 NES Annual Delivery Plan (ADP) delivery and quarterly reporting continues to progress. The quarterly ADP Delivery Reports to the Board have been enhanced in response to Board feedback including prevention of deliverables affected by issues with NES control and the reporting of projected deliverable status. The integration of ADP and Strategic Key Performance Indicator (SKPI) quarterly reporting deadlines has helped to streamline business processes and strengthen relationships with directorate General / Business Managers.	Green
4.611	Planning & Corporate Resources	Internal efficiency, sustainability & affordability	Performance	Maximize NES' efficiency and demonstrate best value	SKP13 – Benefits realisation/ROI from innovation change activities	Implementation of approved NES Communication and Engagement Strategy for the period 2023-26, supporting delivery through action planning and coordination of the activities across Business As Usual (BAU) as well as corporate change and improvement.	Development and implementation of plan	Delivery of activities set out in the Comms and Engagement Plan	Delivery of activities set out in the Comms and Engagement Plan	Delivery of activities set out in the Comms and Engagement Plan	Delivery of activities set out in the Comms and Engagement Plan	Green	In support of the development and implementation of the Comms and Engagement plan, the Stakeholder Survey for 2024 has been launched to gather intelligence on customer satisfaction and areas of future focus for NES. Analysis will be completed in September 2024 and disseminated to teams thereafter, with a report being submitted to the NES Board in November 2024.	Green	Comms and engagement activities to support transformation updated as part of refreshed NES Transformation Roadmap. In excess of 1,300 responses to Stakeholder Survey - analysis being undertaken and reporting to Board scheduled for November 2024. Options paper presented to NES Executive Team in relation to NES presence on X / Twitter - approval obtained to move to increasing social 31 December 2024.	Green	Green	Actions agreed with Board in response to Stakeholder Survey being progressed. Discussions with Scottish Government sponsors underway regarding potential rebranding to 'Deacon'. X/Twitter withdrawal progressing with alternative branding being subject to information security approval prior to becoming operational. Collaborative working across NES Communications, Organisational Development, Leadership and Learning (ODLL) and Programme Management Office (PMO) teams ongoing to support change management.	Green
4.612	Planning & Corporate Resources	Internal efficiency, sustainability & affordability	Performance	Maximize NES' efficiency and demonstrate best value	SKP40 – NES RAG status for delivery against ADP	Further development of the performance delivery against NES which aligns with the new NES Strategy and enables the Board to monitor progress in the management of its strategic intent and enhances corporate oversight and management of performance at all levels.	Develop and implement operational KPIs to sit beneath strategic KPIs and support operational management of delivery.	Delivery of improvements identified during review and signified by internal audit.	Continued development and implementation of operational KPIs to sit beneath strategic KPIs and support operational management of delivery.	Continued development and implementation of operational KPIs to sit beneath strategic KPIs and support operational management of delivery.	Continued development and implementation of operational KPIs to sit beneath strategic KPIs and support operational management of delivery.	Green	Review of Strategic Key Performance Indicators (SKPIs) undertaken, including internal audit. Investigation of short term data collection ongoing. Work on integrating SKPIs and Annual Delivery Plan through Performance Management Framework is underway.	Green	Integration of reporting of NES Strategic Key Performance Indicators (SKPIs) and Annual Delivery Plan (ADP) quarterly updates by Directorates introduced for Quarter 2. Progress in reporting NES Education & Quality Committee metrics although reporting remains limited in areas where NES approaches are in development as part of broader corporate improvement activities such as the Learning & Education Quality System (LEQS) and TURAS Refresh programme.	Green	Green	Integration of reporting of NES Strategic Key Performance Indicators (SKPIs) and Annual Delivery Plan (ADP) quarterly updates by Directorates has continued. SKPI reporting is moving towards becoming business as usual via Biocultural ADP reporting. Plans for the realignment of reporting to take account of changes in governance structure and Board Committees progressing in line with timescale for formation of new Planning and Performance Committee.	Green
1. Primary and Community Care	4259	Pharmacy	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP14 - Funded trainee placements - completion rate	Provide qualified Pharmacists for workforce of NHS and Community Practice in Scotland, in line with General Pharmaceutical Council (GPC) standards for Initial Education & Training. This will be via national coordination of 4-year undergraduate Experiential Learning (up to 9 weeks for 2024/25 on a glideway to reaching 11 weeks), delivery of Preparation for Experiential Learning for new facilitators, and wider development/delivery of the Quality Management systems for the IET (Initial Education and Training) stages (including Foundational Training Year).	Final activity of Experiential Learning (EL) from academic year 2022/24. National coordination complete.	Up to 4 Preparation for Experiential Learning (PEFL) sessions planned.	Experiential Learning for academic year 2024/25 starts October/Up to 2 Preparation for Experiential Learning (PEFL) sessions planned.	Final delivery of Experiential Learning (EL) for students pharmacists. 9 maintained to support targeted CPD attached to practitioners engaged with the SPTI (Specialist Practitioner). Ongoing training and those requiring additional support to achieve their competency certificate.	Green	All planned catch up Experiential Learning (EL) activity completed by the end of June 2024 to be communicated to providers.	Green	Four Preparation for Experiential Learning (PEFL) training sessions completed, with 88 new facilitators trained.	Green	Green	All planned semester 1 Experiential Learning activity complete. Five Preparation for Experiential Learning (PEFL) training sessions have now been completed, with 127 new facilitators trained.	Green
1. Primary and Community Care	4271	Pharmacy	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP14 - Funded trainee placements - completion rate	Prepare for the recruitment (Gid w/e) of up to 200 Foundation Training Year (FTY) intake for 2025 via Chief recruitment portal. Continue to support the final 2023 intake cohort preparation for assessment. Final preparation following selection in 2023 for the 2024 intake (up to 220).	Recruitment stage for 2025 intake via completion of delivery FTY online assessments in conjunction with Health Education England (HEE) and HEW - testing window Sept/Oct. Training end dates begin from this quarter for the completed 2023 intake cohort. 2024 intake start dates commence for up to 220 trainees.	Recruitment stage for 2025 intake via completion of delivery FTY online assessments in conjunction with HEW and HEW - testing window Sept/Oct. Training end dates begin from this quarter for the completed 2023 intake cohort. 2024 intake start dates commence for up to 220 trainees.	Finalise recruitment of up to 200 Pharmacy Trainees to commence in 2025. 2024 Programme fully delivered. Preparation for 2026 recruitment engagement commenced.	Green	2025 intake - Recruitment underway for up to 220 trainees in the 2025 intake. Applications closed in June 2024. 2024 intake - Final preparations are underway for the 2024 intake with 217 funded trainees expected to start training. Currently expecting 189 trainees to start at July 2024 start date and 28 trainees at November 2024 start date. 2023 intake - (currently in training) Continue to support the 2023 intake as they progress through training. 100 of this cohort are expected to sit the June 2024 General Pharmaceutical Council (GPC) common registration Assessment. 33 previous cohort trainees are also expected to sit for their 2nd/3rd attempt.	Green	2025 intake - Recruitment underway for up to 220 trainees in the 2025 intake. Delivery of assessments 19 September - 2 October 2024 proceeding without issue via Pearson VUE test centres. 2024 intake - 185 trainees commenced training in the July 2024 cohort and we are expecting a further 31 to commence in November 2024. Totaling 216 funded trainees. 2023 intake - 186 trainees sat the General Pharmaceutical Council (GPC) registration assessment (RA) with 151 (81%) passing. 30 further trainees expected to sit the RA for first sitting in November 2024.	Green	Green	2025 intake - 185 trainees commenced training in the July cohort and 28 trainees commenced in the November cohort. Totaling 213 funded trainees. 2023 intake - 59 trainees sat Nov 24 GPHC Registration Assessment for 1st (n=28) or 2nd (n=31) attempt. Total 39 trainees passing giving 66% pass rate. 28 trainees will be eligible for June 25 sitting.	Green	
1. Primary and Community Care	4272	Pharmacy	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP14 - Funded trainee placements - completion rate	Develop a multi-tier pharmacy simulation facility to design and deliver simulation-based training for trainee pharmacists, postgraduate pharmacists and interprofessional training. Train 36 pharmacists as tier 1 simulation-based educators (SimStart course) and 28 pharmacists as tier 2 simulation-based educators (Introduction to Simulation course) by March 2025. Offer simulation-based training opportunities to all FTY (Foundation Training Year) trainees (cites 220 for 24/25) and GP Practice pharmacists undertaking Pathway to Advance Practice (cite 20 for 24/25). Scope out interprofessional simulation opportunities for post-registration foundation pharmacists and foundation doctors.	Deliver initial interprofessional simulation training for trainee pharmacists (up to 220 by end of 2024/25 year) and continue development of the pharmacy simulation facility.	Ensure Faculty developing and functioning as required. Deliver initial stages of the post-registration Pharmacy programme pilot. SimStart training and introduction to Simulation Training commenced.	Ensure Faculty developing and functioning as required. GPC simulation programme delivery commenced.	Ensure Faculty developing and functioning as required. Community pharmacy simulation delivery for trainee pharmacists commenced (up to 220 FTY Trainees).	Green	78 trainee pharmacists attended interprofessional simulation programmes. 14 new tier 2 Faculty trained.	Green	Good engagement from simulation facility across Scotland. Further facility developed via local SimStart courses (including pharmacy technicians) and by funding introduction to Sim course, on track for forecast. Post-registration pilot programme requires some re-design following separation from foundation doctors simulation programme development.	Green	Green	Good engagement from simulation facility across Scotland. Fully staffed for upcoming FTY simulation delivery. Funded 8 more pharmacists' training to Tier 2 level. Pathway to Advanced Practice Simulation Programme (PASP) delivered to vast majority of cohort 12 (n=27), with outstanding training (for 2 pharmacists) being targeted and supported by NES simulation team.	Green
1. Primary and Community Care	4273	Pharmacy	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP14 - Funded trainee placements - completion rate	50 pharmacy technicians trained to complete and register as simulation-based assessor support in place.	50 pharmacy technicians trained to complete and register as simulation-based assessor support in place.	Finalising of programme due from October 2024. Final monitoring of any using SCS process.	Finalising of programme due from October 2024. Final monitoring of any using SCS process.	Finalising of programme due from October 2024. Final monitoring of any using SCS process.	Green	50 trainee pharmacy technicians remain on target to complete with full support from workbased assessors. No Scottish Government funding to continue with national scheme in current delivery model.	Green	49 trainee pharmacy technicians remain on target to complete and register as Pharmacy Technicians by the end of October 2024, with full support from workbased assessors. 1 trainee left programme since last update.	Blue	Green	48 trainee pharmacy technicians completed and registered as Pharmacy Technicians. 3 remain including 2 previously not met level) and are due to complete in Q4 with apprenticeship funding available. Final evaluation of two year national scheme, now underway.	Blue
8. Workforce	4274	Pharmacy	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP9 – No of times training products accessed	Delivery of the education for Post Registration Pharmacists for up to 180 new registrants (cite 420 learners in progress), across all three settings (Hospital, Primary Care and Community) by end of March 2025, with progression to Royal Pharmaceutical Society (RPS) Assessment. This programme includes the commission and completion of an independent Prescribing qualification and runs for a minimum two years.	We continue with the delivery of the programme to over 400 learners (post registration pharmacists) in a rolling cycle to the 2 year programme, with this programme complete. First RPS assessment expected in June 2024.	We continue with the new programme while preparing for registration process Q3.	We continue with the new programme. New cohort registration now active (numbers expected 100).	Continued delivery of the programme for up to 400 learners with preparation for assessment nominations going forward for April 2025.	Green	422 currently in training across the rolling two years with 381 of those newly registered learners. 12 submitted for Royal Pharmaceutical Society (RPS) Assessment April to June 2024.	Green	507 currently in training, with 102 of those newly registered in this quarter. 27 submitting for assessment alongside two re-submissions (29 total).	Green	Green	506 currently in training across the rolling 2 years. 10 learners submitted for RPS assessment, with 5 passing.	Green
1. Primary and Community Care	4276	Pharmacy	Education, training & workforce development	People	Lead and deliver education, training and CPD across health & social care workforce	SKP9 – No of times training products accessed	Deliver ongoing post registration programme to support newly qualified pharmacy technicians to ensure the skills of the pharmacy workforce are optimised to contribute to improved patient care and clinical capacity in all sectors with up to 80 new, 100 ongoing and up to 10 expected completions in 2024/25. An interim review of the programme is planned within this financial year.	Ongoing delivery to 100 pharmacy technicians and enrollment of up to 20 new practitioners to the programme. Commence review of programme with partners and learners	Ongoing delivery to 120 pharmacy technicians and enrollment of up to 20 new practitioners to the programme. Continue review process.	Ongoing delivery to 140 pharmacy technicians and enrollment of up to 20 new practitioners to the programme. Consult on reviewed of programme.	Ongoing delivery to 160 pharmacy technicians and enrollment of up to 20 new practitioners to the programme. Consult on reviewed of programme.	Green	Ongoing delivery to 152 registered pharmacy technicians. One pharmacy technician submitted for assessment and passed all competencies. Plan in place for early engagement with stakeholders on interim review approach.	Green	Ongoing delivery to 145 registered pharmacy technicians. Enrollment open for January 2025 (cohort 3). Three pharmacy technicians have indicated they wish to submit for assessment. SBAR under development to engage with stakeholders on interim review.	Green	Green	Ongoing delivery and support to 145 trainee pharmacy technicians. Enrollment for January 25 now closed and induction planned for 33 new learners to the programme. SLWG to be formed and interim review of programme to begin early 2025.	Green

SG Record Driver	2024/25 ADP Deliverable Number	Directorate	Medium-Term Priority	NES Strategic Theme	NES Strategic Theme Detail	NES KPI Reference	2024/25 Deliverable Summary	Q1 Milestones	Q2 Milestones	Q3 Milestones	Q4 Milestones	Q1 RAG Status	Progress in Q1	Q2 RAG Status	Progress in Q2	Projected Q3 Status	Q3 RAG Status	Progress in Q3	Projected Q4 (2024/25 Year-End) status
8. Workforce	4407	Workforce	Internal efficiency, sustainability & affordability	Performance	Maximise NES's efficiency and demonstrate best value	SKP11 – Employee Engagement Index	Deliver NES Human Resources (HR) Proposition and Model, employment status project; recruitment; and new ways of working (NWW) programme to ensure HR delivery is efficient, accurate, reliable and customer focused	Year 1 - Create end to end process improvement delivery plan, including simplifying process, maintaining the utilisation of technology, self service and metrics. Develop an interim structure to deliver an HR service model built on three key elements including centres of expertise, business partnering and operations with a focus on process improvement, setting operational KPIs, improvement of data accuracy and reporting, and clear roles and responsibilities, establish action plan to embed interim structure and new ways of working, establish action plan for transformation activity aligned to embedding self service function	Interim structure embedded and development of ways of working with review and refresh of all SOPs for HR processes, training and development of staff on SOPs	Pilot of self service to test and evaluate risk/benefit	Review the colleague and line manager journey to provide greater control of their HR data and delivery a change management approach for Managers Dashboard	Green	Rapid Improvement Plan established April 2024 as part of Stabilisation workstream of wider HR Transformation Programme. The following priority activities achieved: Stabilisation & Recovery Deliverables: - HR Operating Model - Interim structure established April 2024 with a Senior Specialist Leads in post and Employee Relations, Policy and Reward, established as a centre of expertise; arrangements are going to be finalised by March 2025. Future Operating Model: Conclusion of engagement with NHS Lothian, NHS and NHS24 on 27/1/24 as part of discovery phase of options appraisal to develop future HR model and exploration of employee and manager self service. Systems: Operational Key Performance Indicators with measurement plan produced end of May 2024 to support management of activity and reporting of metrics for Workforce Service Desk as part of HR Operations. Process: Extensive work undertaken to review and refresh Standard Operating Procedures (SOPs); NES QI (Quality Improvement) team instrumental in working with the teams to develop 14 workflows. Of these, 9 have been passed for a governance review. SOP rationalisation and work workflows for the Lead Employee work have been held and more have been scheduled to progress this part of the programme; an action plan from VPMG Internal audit has been developed for completion during November 2024-March 2025. Acceleration of recruitment has commenced with implementation of phase 1 from September 2024 enabling hiring managers to readily access necessary resources to recruit to posts and facilitate directly with East Region Recruitment Services team to progress advert and associated recruitment campaign; activities will continue to be progressed for phase 2 to conclude by the end of October 2024. Transformation Workstream: First four groups have taken place during October 2024 with emergent themes being written up; Knowledge Management Group established and are focused on identifying immediate activity which will support the stabilisation and development of professional HR team knowledge hub; Scoping commenced to stand up at pace the culture and internal development workstream.	Amber	Interim structure embedded April 2024 as reported in Q1 update. HR Transformation Programme Board continues to progress key activities through three workstreams. Stabilisation & Recovery Deliverables: HR Operating Model (HR OM) delivery timetable continues to be based upon a risk assessment approach. Priority Lists of SOPs have been completed, an issue has been identified with SOP production in terms of the need to clarify the interaction between Teams within a process/SOP and this will be progressed to confirm the clarity required; the technical review of the Establishment Control workflow has commenced with one SOP being approved that operates within this workflow; two SOPs have been formally agreed (Case Management and Accessing CJD Advice); these will now move to be implemented with communication to the HR Team. Process: Refresh of Job Evaluation guidance, resources and process is being progressed in Partnership; refresh training for existing panelists is scheduled for 23/10/2024; discussion is being held via regular support to provide training for new panel members in the most effective way. Two workflows for the Lead Employee work have been held and more have been scheduled to progress this part of the programme; an action plan from VPMG Internal audit has been developed for completion during November 2024-March 2025. Acceleration of recruitment has commenced with implementation of phase 1 from September 2024 enabling hiring managers to readily access necessary resources to recruit to posts and facilitate directly with East Region Recruitment Services team to progress advert and associated recruitment campaign; activities will continue to be progressed for phase 2 to conclude by the end of October 2024. Transformation Workstream: First four groups have taken place during October 2024 with emergent themes being written up; Knowledge Management Group established and are focused on identifying immediate activity which will support the stabilisation and development of professional HR team knowledge hub; Scoping commenced to stand up at pace the culture and internal development workstream.	Amber	Amber	Plotting of self-service not progressed as focus has been on development of efficient and documented business processes. Self-service also carries interdependency with future HR service model which is in development but will not be completed until arrival of new associate Director for HR in Late March 2025. Simplification of programme and messaging underway with focus on moving forward work that can be completed without the input of new AD in Q4.	Amber
8. Workforce	4411	Workforce	Centre for Workforce Supply (CWS)	Partnerships	Build capability around workforce supply	SKP10 – %age of workforce across learning products	Support workforce capacity in health across Scotland, ensuring the sector has the right people, in the right place at the right time, by facilitating the development, implementation and spread of workforce initiatives, which help tackle priority workforce challenges, focusing on supply, data and marketing	Refine the workforce planning tool and support to alongside the digital tool and stabilised medical action digital requirements around this health group will determine more about what these are. Scope out the viability of a potential population health project to understand the impact of population health on workforce demand. This project is only a potential ask at this stage, it is still being scoped.	Deliver support around the adoption of innovative supply initiatives including international recruitment of NMAHs and medicals	Increase attention to priority workforce goals via marketing activity which raises the profile of NHS careers and key professions.	Green	NHS Scotland careers social media channels reinstated with daily content and impact monitoring in place, medical insights paper finalised and medical workstream launch agreed; supported recruitment of international NMAHs into Boards aligned to SG targets.	Amber	Scoped options for international recruitment in collaboration with Scottish Government and Health Boards and have taken feedback to inform the best way forward regarding international recruitment of psychiatrists. Alongside this the Centre for Workforce Supply (CWS) is progressing work to underpin this including working with the NES Medical Directorate exploring Pathways and General Medical Council (GMC) sponsorship. This deliverable has been named Amber as there is a significant amount of engagement and facilitation work to be completed to ensure successful delivery. During Quarter 2, we met with NHS Grampian and the Aberdeen Health and Care Partnership to understand the service transformation they have planned in a very specific part of Aberdeen, to understand how population demand data could be used alongside workforce supply data to innovate workforce planning. NES is now in the process of defining its role in this work.	Amber	Green	Continued discussions with boards and associate Workforce culminating in a meeting to be held in Edinburgh with boards with a significant interest in medical international recruitment to establish a board level and articulate CWS role within this. Began work to draw together all of the activity around marketing and attraction internally within NES, with a view to underpinning a theory of change to ensure all activity aligning with NES internal ambitions around marketing. Two new social media channels (youtube and pinterest) were agreed for NHS Scotland and they will come online in Q4. NHS Scotland Digital accounts continue to grow: 13.5k followers across all platforms +3% LinkedIn continuing to grow +402 new followers +29k Instagram	Amber	
6. Health Inequalities and Population Health	4412	Workforce	Education, training & workforce development	Partnerships	Provide equality & human rights education	SKP08 - % of staff who experience NES as an inclusive organisation	Produce education and training resources, working with partners, for health and social care staff on equality, diversity, inclusion and human rights, whilst internally enabling NES to embed equality and human rights across its functions.	Quarter 1: Development of learning resources in progress with relevant reports and stakeholder feedback; action digital resource produced and refreshed E&D Turas Zone is launched. Evidence and stakeholder involvement is informing the development of refreshed NES equality Outcomes and action plan. New data for Q1 on inclusion available	Quarter 2: New learning resources available on Turas Learn. Engagement, activities, and governance in place to meet statutory Equality Duty requirements and improvements to underpin KPIs.	Quarter 3: New learning products available on E&D Turas Learn (Neurodiversity). Inclusion Survey issued for KPI. Draft ED Plan for NES for consultation with staff, relevant corporate groups and Board governance structures.	Green	Anti-racism digital resource is being drafted for launch by end of June 2024. We are reliant on support from another team for this due to long term sick leave in the team. Engagement with Directorates, Equality Steering Group and NHS Scotland Equality leads is informing NES's Equality, Diversity and Inclusion (EDI) plan for April 2025. Work groups now established and training in place for approach. Revised E&D Zone is ready for launch at end of June 2024. Two scoping meetings have taken place to identify learning needs for a new neurodiversity learning resource. NHS has been accepted onto the Equality Safe at Work accreditation programme. Analysis has taken place on first NES inclusion survey to inform a new KPI for August 2024 Staff Governance Committee and to inform NES's EDI and wellbeing work.	Green	Anti-racism digital resource published and disseminated to partners; Revised Equality & Diversity (E&D) Zone on Turas developed and promoted; Anti-racism action plan and Equality, Diversity, and Inclusion (EDI) Strategy in development with engagement across all Directorates, NES Partnership Forum, key groups and NES Equality Safe at Work group now established and training in place for approach; Neurodiversity learning resource now scoped out and live experience in informing learning outcomes and content with engagement with board staff networks taking place. Mid year reports to NES Committee and Board in progress for Quarter 3.	Green	Green	Anti-racism digital resource published and disseminated to partners; Revised Equality & Diversity (E&D) Zone on Turas developed and promoted; Anti-racism action plan and Equality, Diversity, and Inclusion (EDI) Strategy in development with engagement across all Directorates, NES Partnership Forum, key groups and NES Equality Safe at Work group now established and training in place for approach; Neurodiversity learning resource now scoped out and live experience in informing learning outcomes and content with engagement with board staff networks taking place. Mid year reports to NES Committee and Board in progress for Quarter 3.	Green	
9. Digital Services Innovation Adoption	4417	Workforce	Workforce Wellbeing	Partnerships	SG delivery partner for leadership, digital and data	SKP11 – Employee Engagement Index	Subject to funding - design and deliver the digital infrastructure, content and user experience to support the policies delivering a publicly accessible national digital platform to deliver the vision for the 'Once for Scotland' Workforce Program.	Phase 2.2 Embedding Equality, Diversity & Human Rights. Gender-based Violence. All Phase 2.2 policies will be launched in March 2025	Facilities Arrangements for Trade Unions & Professional Organisations, Personal Development Planning and Review (PDRP)	Use of Fixed Term Contracts, Safer pay & post-employment.	Secondment, Redeployment. All Phase 2.2 policies will be launched in March 2025.	Green	The Once for Scotland policy program has begun Phase 2.2 which includes policies such as Embedding Equality, Diversity & Human Rights, Gender-based Violence, the Policy Development Group have been working closely with the Digital Development Group to host these new set of policies	Green	The soft launch of Phase 2.2 of the Once for Scotland policy programme will go into soft launch by 31 October 2024. Work is underway in updating the staging website in preparation for soft launch.	Green	Green	The test site for Phase 2.2 of the Once for Scotland (OFS) policy programme was developed and successfully underwent a soft launch during Q3. Full go-live is planned for Q4. Additionally, planning for Phase 3 of the ongoing continued program is progressing.	Green
9. Digital Services Innovation Adoption	4418	Workforce	Education, training & workforce development	Performance	Deliver national digital platform, Digital Front Door, and Digitally Enabled Workforce Programme	SKP12 – %age of workforce across digital developments which are shaped by staff, learner and partner feedback	Deliver a national programme to improve the digital leadership, digital skills and data skills of the health and social care workforce across Scotland to address key priorities in relation to workforce digital capability.	Delivered of the workstream actions across Scotland to address key priorities in relation to workforce digital capability. The commissioned work from the Scottish Government (SG) Digital Health and Care Strategy, Data Strategy and Care in a Digital Age Delivery Plan.	Delivered of the workstream actions and milestones aligned to the commissioned work from the Scottish Government (SG) Digital Health and Care Strategy, Data Strategy and Care in a Digital Age Delivery Plan.	Delivered of the workstream actions and milestones aligned to the commissioned work from the Scottish Government (SG) Digital Health and Care Strategy, Data Strategy and Care in a Digital Age Delivery Plan.	Green	The Leading Digital Transformation in Health and Care for Scotland MSc - "Pilot Year for cohort 1 completed at the end of March 2024. A total of 108 Board Members have attended a Digital Mindset Session. The first single board exclusive session took place on 7 May 2024. Cohort 2.3 of the Digital Health and Care Leadership Programme commenced in May 2024 with 80 participants. By the end of June 2024, the Knowledge Information and Data Learning Network had grown with over 2,000 members from across the sector, including delivery of pre-beginner, beginner, intermediate and expert sessions in Power BI, R and Shiny and the launch of a new mentoring initiative. The Digital and Data Resource Hub completed its pilot phase in April 2024 where over 100 colleagues from across health and social care registered to help test and evaluate resources, with further action items open across all. All following resources that are already available and mapping out exactly what is required the Digital and Data Skills Capabilities Framework for health and social care was drafted in May and will be hosted on TURAS (open access). As at the end of May 2024, the M&S Skills Hub had attracted 48,273 site visits from NHS, Local Authorities and Capability Scotland staff over the last 90 days. The initial pilots with five local authorities to share the hub was successful. Professional Development Award (PDA) in Technology Enabled Care NES and the SG completed the design of online bite size learning resources as an introduction to the subjects covered in the PDA as part of creating a learning pathway for Technology Enabled Care and are free open access.	Green	Following the work to develop and design, the Digital and Data Capability framework launched on 24 July 2024. The Digital and Data Resource Hub completed its pilot phase in April 2024 where over 100 colleagues from across health and social care registered to help test and evaluate resources, with further action items open across all. All following resources that are already available and mapping out exactly what is required the Digital and Data Skills Capabilities Framework for health and social care was drafted in May and will be hosted on TURAS (open access). As at the end of May 2024, the M&S Skills Hub had attracted 48,273 site visits from NHS, Local Authorities and Capability Scotland staff over the last 90 days. The initial pilots with five local authorities to share the hub was successful. Professional Development Award (PDA) in Technology Enabled Care NES and the SG completed the design of online bite size learning resources as an introduction to the subjects covered in the PDA as part of creating a learning pathway for Technology Enabled Care and are free open access.	Green	Green	Creation of the Catalogue of learning for staff with increased offerings for Managers staff including: - Digital and Data Learning Network: A network with managers and leaders for a range of managers and leaders across the organisation.	Green	
8. Workforce	4419	Workforce	Education, training & workforce development	People	Deliver the NES Workforce Plan and Organisational Development (OD) Plan	SKP11 – Employee Engagement Index	Design and deliver programme of internal Learning and Development opportunities for the NES workforce. Line manager network is already in place and implementation of a new wellbeing framework with associated staff support and development opportunities.	Design and deliver programme of internal Learning and Development opportunities for the NES workforce. Line manager network is already in place and implementation of a new wellbeing framework with associated staff support and development opportunities.	Review of NES Our Way and development of behaviours reflecting NES strategy	Design and develop an annual building capabilities plan to inform yearly development funding needs for NES staff development	Creation of a Catalogue of learning for staff with increased offerings for Managers staff including: - Digital and Data Learning Network: A network with managers and leaders for a range of managers and leaders across the organisation.	Green	We have delivered a number of outcomes and actions aligned to the OD Plan including the launch of the Wellbeing Hub, the Hybrid working policy which is due to be approved by the NES Executive Team in July 2024 and the line manager handbook which is also due for launch mid July 2024. The line manager network is already in place and implementation of a full programme of supportive development sessions to support the line manager handbook. Other successes include a very successful Learning at Work week and the capabilities plan is in draft for launch end of July 2024. This will also coincide with the roll out of a new digital capabilities framework and supporting resources.	Green	Wellbeing Matters (WM) Project: Phase one of the WM project is now complete, with the 'Healthy Workplace, Mind, Body & Life' pillars added. Hybrid Working Policy: The NES Hybrid Working policy was launched on 18 September 2024. The policy provides the conditions for flexible working arrangements in line with the Once for Scotland Flexible Work Location Policy. Line Managers Network & Handbook: The line managers handbook has been launched and an online launch session delivered that was attended by 87 Managers from across NES. A recording of the event is available and the handbook accessible online and in PDF format.	Green	Green	NES Wellbeing Coaching launched Sept 2023 open to all NES staff. Internal Coaching continues to offer development coaching and new shorter interventions e.g. Interview Coaching, 360 Facilitation, Career Conversation Live.	Green
8. Workforce	4420	Workforce	National leadership and OD programmes	Partnerships	SG delivery partner for leadership, digital and data	SKP10 – %age of workforce across learning products	Design and deliver national succession planning, infrastructure and governance aligned to local processes and succession planning and onboarding processes for NHS Board Chief Executive Officer (CEO) and Executive Director roles.	Launch of Phase 2 of Chief Executive Succession Planning and onboarding processes for NHS Board Chief Executive Officer (CEO) and Executive Director roles.	Continued delivery of the workstream actions and milestones for executive cohort development, succession planning and values based recruitment	Continued delivery of the workstream actions and milestones for executive cohort development, succession planning and values based recruitment	Continued delivery of the workstream actions and milestones for executive cohort development, succession planning and values based recruitment	Green	Senior Leadership Gateway app launched in April 2024 with tools and resources to support succession planning and development for CEO and Executive Director roles. Key stakeholder (CE, CHs, HRD) engagement complete and committees issued setting up requirements of new phase of talent identification for CE and Director roles. Network of Succession Planning in all 22 Boards established. Initial plans developed for senior leader mentoring service. New assessment process for CE recruitment designed and piloted with two NHS Boards	Green	Further support has been provided to Board for Chief Executive recruitment processes. A Director's Office and onboarding and development for CEO and Executive Director roles. A sustainable model for Director-level recruitment is being planned. Preparatory work for a senior leader mentoring programme has been completed and mentors and mentees are currently being matched at Chair, Chief Executive and Director level. Liaison with Scottish Leaders Forum has been established to extend the pool of mentors to include other public services leaders. The NES Boards Succession Planning Leads network has been established and work is ongoing with this group to support local succession planning and national data collection processes. Recently appointed Chief Executives have all taken up offers of executive coaching support and we are working with colleagues in Scottish Government to identify any other development support that might be needed. A programme of Adaptive Learning Sets has been developed for aspiring directors and will take place in Quarter 3 and Quarter 4.	Green	Green	Data collection from Boards has taken place for signing Board Chief Executives and Directors. Data collection and development for CEO and Executive Director roles. A sustainable model for Director-level recruitment is being planned. Preparatory work for a senior leader mentoring programme has been completed and mentors and mentees are currently being matched at Chair, Chief Executive and Director level. Liaison with Scottish Leaders Forum has been established to extend the pool of mentors to include other public services leaders. The NES Boards Succession Planning Leads network has been established and work is ongoing with this group to support local succession planning and national data collection processes. Recently appointed Chief Executives have all taken up offers of executive coaching support and we are working with colleagues in Scottish Government to identify any other development support that might be needed. A programme of Adaptive Learning Sets has been developed for aspiring directors and will take place in Quarter 3 and Quarter 4.	Green
8. Workforce	4423	Workforce	National leadership and OD programmes	Performance	Deliver national leadership and OD programmes	SKP10 – %age of workforce across learning products	Design and deliver a national programme of development and peer learning opportunities to develop leadership skills, knowledge and behaviours needed to create a culture of collaborative working across health, social care and social work. Leading to Change, You as a Collaborator, New Horizons, Peer Thinking, Leading for the Future, Scottish Clinical Leadership Followup, Management Training Scheme.	Delivered Developing Senior Systems (DSS) - Programme delivery completed in July 2024 - final evaluation outcome report pending. DPM - Programme delivery concluded in December 2023, evaluation concluded with report available in June. Events and Engagement - 8 virtual events and 1 in-person event delivered April to June across leadership and equalities topics with the in-person event specifically around leading with confidence. Event resources uploaded to L2C website and continued content and marketing across social media platforms. Two sub-groups were released in May. Continued user engagement with L2C App. Social Care and Social Work Sub-Group (PDRF) continues to meet with membership from across various social care and social work organisations. Alyship Hub (Virtual resource) launched on L2C website in April. L2C involvement in delivery of Module 1 LFTF - Delivery of Modules 1 and 2 and Skills Development session and securing / planning facilitator commitments for Cohort 15 MTS - Recruitment planning continues for cohort 2025 moving regional model	Delivered events, webinars, website content and blogs on variety of leadership topics. Shape and deliver social care/social work offers and deliver alyship and diversity leadership at all level programme. SCLF - Delivery of Leadership and Management Development Sessions to Cohort 13 and input to the selection of cohort 14. SCLF - Leadership and Human Factors input to the Cohort Peer Thinking. Recruitment for the latest cohort New Horizons. Delivery of Module 1 LFTF - Delivery of Modules 1 and 2 and Skills Development session and securing / planning facilitator commitments for Cohort 15 MTS - Recruitment planning continues for cohort 2025 moving regional model	Delivered events, webinars, website content and blogs on variety of leadership topics. Shape and deliver social care/social work offers and deliver alyship and diversity leadership at all level programme. SCLF - Delivery of Leadership and Management Development Sessions to Cohort 13 and input to the selection of cohort 14. SCLF - Leadership and Human Factors input to the Cohort Peer Thinking. Recruitment for the latest cohort New Horizons. Delivery of Module 1 LFTF - Delivery of Modules 1 and 2 and Skills Development session and securing / planning facilitator commitments for Cohort 15 MTS - Recruitment planning continues for cohort 2025 moving regional model	Delivered events, webinars, website content and blogs on variety of leadership topics. Shape and deliver social care/social work offers and deliver alyship and diversity leadership at all level programme. SCLF - Delivery of Leadership and Management Development Sessions to Cohort 13 and input to the selection of cohort 14. SCLF - Leadership and Human Factors input to the Cohort Peer Thinking. Recruitment for the latest cohort New Horizons. Delivery of Module 1 LFTF - Delivery of Modules 1 and 2 and Skills Development session and securing / planning facilitator commitments for Cohort 15 MTS - Recruitment planning continues for cohort 2025 moving regional model	Green	Funding: awaiting confirmation of Scottish Government funding for 2024/25. DSSA: Programme delivery concluded in July 2024 - final evaluation outcome report pending. DPM: Programme delivery concluded in December 2023, evaluation concluded with report available in June. Events and Engagement: 8 virtual events and 1 in-person event delivered April to June across leadership and equalities topics with the in-person event specifically around leading with confidence. Event resources uploaded to L2C website and continued content and marketing across social media platforms. Two sub-groups were released in May. Continued user engagement with L2C App. Social Care and Social Work Sub-Group (PDRF) continues to meet with membership from across various social care and social work organisations. Alyship Hub (Virtual resource) launched on L2C website in April. L2C involvement in delivery of Module 1 LFTF - Delivery of Modules 1 and 2 and Skills Development session and securing / planning facilitator commitments for Cohort 15 MTS - Recruitment planning continues for cohort 2025 moving regional model	Green	National Leadership Programme: SCLF - Programme delivery completed in July 2024 - final evaluation outcome report pending. DPM: Programme delivery concluded in December 2023, evaluation concluded with report available in June. Events and Engagement: 8 virtual events and 1 in-person event delivered April to June across leadership and equalities topics with the in-person event specifically around leading with confidence. Event resources uploaded to L2C website and continued content and marketing across social media platforms. Two sub-groups were released in May. Continued user engagement with L2C App. Social Care and Social Work Sub-Group (PDRF) continues to meet with membership from across various social care and social work organisations. Alyship Hub (Virtual resource) launched on L2C website in April. L2C involvement in delivery of Module 1 LFTF - Delivery of Modules 1 and 2 and Skills Development session and securing / planning facilitator commitments for Cohort 15 MTS - Recruitment planning continues for cohort 2025 moving regional model	Green	Green	Leading and Engaging: - Continuing to deliver events and offers with 823 attendees from health, social care and social work, across 24 events between April and December 2024. Inquiry exercise and planning underway for 25/26. DPM: Programme delivery concluded in December 2023, evaluation concluded with report available in June. Events and Engagement: 8 virtual events and 1 in-person event delivered April to June across leadership and equalities topics with the in-person event specifically around leading with confidence. Event resources uploaded to L2C website and continued content and marketing across social media platforms. Two sub-groups were released in May. Continued user engagement with L2C App. Social Care and Social Work Sub-Group (PDRF) continues to meet with membership from across various social care and social work organisations. Alyship Hub (Virtual resource) launched on L2C website in April. L2C involvement in delivery of Module 1 LFTF - Delivery of Modules 1 and 2 and Skills Development session and securing / planning facilitator commitments for Cohort 15 MTS - Recruitment planning continues for cohort 2025 moving regional model	Green
8. Workforce	4453	Workforce	Realistic Medicine & Value Based Health & Care	People	Develop education, training and tools to support delivery of realistic medicine and value based health and care	SKP11 – %age learners reporting that learning will improve practice	Workforce Support future and current health and care workforce to practice Realistic Medicine (RM) and deliver Value Based Health & Care (VBHC) through the development and dissemination of education, training and resources.	Identification of HE early adopter sites for development of content for testing with undergraduate programmes	Measurement framework to analyse and evaluate training offerings. Development of HE content.	Postgraduate training needs analysis. Testing of Undergrad content in early adopter sites.	Content creation of education, training and resources for postgraduate and continued testing of Undergrad content	Green	Linking with NHS24, Learning and Innovation Directorate to work with NES agreed partnerships with HEs. Early adopter sites have been identified and workshop discussions are underway. Scoping of existing HE RM and VBHC curriculum.	Green	Green	Launch of updated Shared Decision Making learning module development of Managing Risk learning resource - in progress Development of VBHC Finance toolkit - in progress RM & VBHC content being embedded and tested within a number of HEI courses	Green		
8. Workforce	4454	Workforce	Internal efficiency, sustainability & affordability	Performance	Maximise NES's efficiency and demonstrate best value	SKP13 - Benefits realisation/ROI from corporate data activities	Manage and report progress on NES Corporate Improvement Transformation Plan (CIP) and prioritised PMO projects and programmes; maintain Project Manager Community of Practice and NES QI Alumni; support delivery of continuous improvement across the organisation.	Delivery of all activity aligned to PMO and continuous improvement, including management of Bright Ideas. Establish Inaugural Project Management Community of Practice meeting.	Delivery of all activity aligned to PMO and continuous improvement, including management of Bright Ideas. Establish Inaugural Project Management Community of Practice meeting.	Delivery of all activity aligned to PMO and continuous improvement, including management of Bright Ideas. Establish Inaugural Project Management Community of Practice meeting.	Delivery of all activity aligned to PMO and continuous improvement, including management of Bright Ideas. Establish Inaugural Project Management Community of Practice meeting.	Green	Delivery of all activity aligned to PMO and continuous improvement, both teams working collaboratively to gain value from complementary methodologies. Management of Bright Ideas taken on by Planning but linked in to Business Transformation Programme (CIP Tier 1). Establishment of Project Management Partner offering varying roles. Capacity to be reviewed and matched against workload pressures.	Green	Green	Delivery of all activity aligned to PMO and continuous improvement, both teams working collaboratively to gain value from complementary methodologies. Management of Bright Ideas taken on by Planning but linked in to Business Transformation Programme (CIP Tier 1). Establishment of Project Management Partner offering varying roles. Capacity to be reviewed and matched against workload pressures.	Green		
8. Workforce	4456	Workforce	National Leadership and OD programmes	Performance	Deliver national leadership and OD programmes	SKP11 – %age learners reporting that learning will improve practice	Build Quality Improvement (QI) capacity and capability across public sector services by delivery of Scottish Improvement Leadership Programme (SCLIP), Scottish Coaching & Leading for Improvement Programme (SCLIP) Managing Quality in Complex Systems (MQCS), and delivery of the Scottish Quality & Safety Fellowship.	Commence 2nd cohort of SCLIP and 1st cohort of MQCS	Commence 3rd cohort of SCLIP. 1 cohort of SCL, 1 cohort of SQSF and 2nd cohort of MQCS.	Completion of 2 further cohorts of MQCS	Conclusion of Aspiring Chairs Programme. Delivery of Board Development programmes in line with Board Development Plan.	Green	The training programmes commenced as scheduled. Recruitment has also commenced for the Scottish Improvement Leader programme in Q1 to support the planned commencement in Q3.	Green	Green	All cohorts of the different training programmes commenced as planned in cohort 1 of SCL, 2 cohorts of SCLIP, 1 cohort of SQSF and 2 cohorts of MQCS. In addition a SCL 10-year event was held in November, recognising the impact of SCL over the past 10 years.	Green		
8. Workforce	4452	Workforce	National Leadership and OD programmes	Performance	Deliver national leadership and OD programmes	SKP11 – %age learners reporting that learning will improve practice	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-appointments through to Aspire Board Chair; Deliver an Aspiring Chairs programme and national induction; Facilitate peer to peer learning through Board Chair Action Learning Sets, Cross Board Mentoring, Networking events; Design education and training to address individual and whole Board development training needs; Develop and refresh recommendations in the Blueprint for Good Governance as commissioned by Scottish Government.	Launch of Aspiring Chair programme. Plan for revised Board development approach in place	Delivery of board development programmes in line with Board Development Plan.	Conclusion of Aspiring Chairs Programme. Delivery of Board Development programmes in line with Board Development Plan.	Green	Launched the second year of the Aspiring Chairs Programme, positive feedback from all involved. Held sessions with Ministers and several NHS Board Chairs. Launch of Blueprint for Good Governance Part 2 Module. Very positive feedback from board members across Scotland who are currently completing this. Succession Planning module completed and in testing. Ongoing Board Development team including routine checks in with new board members and support to various Non-Exec networks. Still awaiting final commission for next year from Scottish Government but have had written assurances.	Green	Green	Facilitated a whole Board session on NHS Forth Valley on Active Governance which was very well received. delivered a whole Board session on Governance at NHS Highland as part of implementing the Blueprint for Good Governance which was also very positively received and reviewed by Board members. Delivered the 4th in person Aspiring Chairs Programme session, involving John Struthwick, CE, the Chairs of NHS Highland and PHs, the Ethical Standards Commissioner and David Garrook, NHS Forth Valley and NHS Highland. Working with Employee Directors and Area Clinical Forum Chairs to support them with succession planning, induction and ongoing development in their role. Continuation of mentoring, building and Action Learning Set support to Chairs, Non-Executives and Board Secretaries.	Green			

SG Recovery Driver	2024/25 ADP Deliverable Number	Directorate	Medium-Term Priority	NES Strategic Theme	NES Strategic Theme Detail	NES KPI Reference	2024/25 Deliverable Summary Brief summary of the deliverable, outlining the intended action and what this will achieve in 2024/25.	Q1 Milestones What you intend to have achieved by Q1	Q2 Milestones What you intend to have achieved by Q2	Q3 Milestones What you intend to have achieved by Q3	Q4 Milestones What you intend to have achieved by Q4	Q1 RAG Status	Progress in Q1	Q2 RAG Status	Progress in Q2	Projected Q3 status	Q3 RAG Status	Progress in Q3	Projected Q4 (2024/25 Year-End) status
B. Workforce	4596	Workforce	Centre for Workforce Supply Social (CWSS)	People	Workforce development to increase capacity & capability across social care workforce	SKP11 - %age learners reporting that learning will improve practice	Subject to funding we will deliver: 2024/25 Grow the internationally recruited adult social care workforce in Scotland through a centre for excellence model. Embedding international recruitment as an ethical and sustainable workforce pipeline for adult social care to meet current and future demand. Enables providers to expedite their recruitment processes through improving recruitment and retention processes whilst removing risk and supporting the system; and Support the delivery of the Scottish Government health and social care workforce strategy	Q1 of 2024/25 will be delivering the final outputs of the feasibility study and closing the first iteration of the project.	Iteration 2 launch webinar LAUNCH CH Codes for learners Set up Modern Slavery Advisory Group Scope policy and data work PCQA Developed	Develop closure strategy. Resource Refresh Open Badge Development Modern Slavery Data work begun interventions scoped	Policy and data work delivered interventions designed Open Badge Launched PCQA Launched Suite of attraction tools launched	Red	Scottish Government have not yet confirmed funding or configuration of the Centre for Workforce Supply project. The main deliberations for Quarter 1 were a learning report and webinar both of which have been delivered but any future work is on hold until an agreement is reached.	Green	Scottish Government have confirmed funding for two posts: a Senior Specialist Lead for International Recruitment and a Project Officer. Recruitment is now complete and both are now in post. The team will deliver a national infrastructure to the adult social care sector to embed ethical and sustainable international recruitment, including master classes, a monthly community of practice, maintain TURAS site and direct support / mentoring to providers finding International Recruitment significantly challenging.	Green	Green	The team have delivered the agreed 3 x Lunch and Learn Master Classes and 3 x Communities of Practice with a cumulative attendance of 46 and 82 respectively. The team have also continued to grow the LinkedIn Network to 344 members (from 209 at the end of August). SG requested a review of deliverables and a change in scope, which was agreed by the NES Corporate Radar and will be completed in Q4.	Green
B. Workforce	4597	Workforce	Education, training & workforce development	People	Workforce development to increase capacity & capability across social care workforce	SKP10 - %age of workforce increasing learning products	Define, design and deliver a Once for Scotland approach for recruitment of Armed Forces (AF) service leavers, veterans and the wider military community.	Implement Annual Delivery Plan; deliver educational package to NHS Boards.	Deliver national NHS Armed Forces event (conference).	Scope and commission career pathways for Armed Forces community	AFTP linked to strategic employment workstreams with measurable impact.	Green	Continued engagement with NHS boards; development and launch of a revised site page on the NHS Careers website; engagement sessions with key MDG groups; development of RCN and NHS partnerships programme.	Amber	Whilst the Armed Forces Talent Programme (AFTP) has had consistent presence at our external partner's regional and national events, the team is yet to host and deliver an NHS Scotland AFTP in person event. Online sessions continue to be delivered, with data being tracked. The number of monthly sessions has increased, and content has been adjusted based on participant feedback. The team is still in discussions with boards that are interested in hosting face-to-face events to be run in Quarter 4.	Green	Green	The AFTP scoped and implemented career pathways for Armed Forces community in the form of paid internships. Six internships were created across four boards with 81 individuals registering their interest. The internships are to run throughout Q4 which has been a good use of a lare underspend in staff costs that have accumulated throughout the year due to gapped positions.	Amber
B. Workforce	4598	Workforce	National Leadership and QI programmes	Partnerships	SG delivery partner for leadership, digital and data	SKP10 - %age of workforce increasing learning products	Provide a national programme of development and peer learning opportunities to support and develop the leadership skills, knowledge and behaviours needed to create and support a culture of collaborative working across health, social care and social work.	Delivery of the workstream actions and milestones aligned to the commissioned work from the Improving Wellbeing and Workforce Culture Framework and Action Plan	Delivery of the workstream actions and milestones aligned to the commissioned work from the Improving Wellbeing and Workforce Culture Framework and Action Plan	Delivery of the workstream actions and milestones aligned to the commissioned work from the Improving Wellbeing and Workforce Culture Framework and Action Plan	Delivery of the workstream actions and milestones aligned to the commissioned work from the Improving Wellbeing and Workforce Culture Framework and Action Plan	Green	Discussions under way between NES and SG on 2024/25 commissioning of national leadership development and succession planning.	Green	Commissioning Document drafted and submitted to Scottish Government for discussion. Discussions to refine governance for both Leadership Development and Succession Planning workstreams are ongoing.	Green	Green	Commissioning Document in place and progress is in progress against all parts of the commission. A programme board held on 13/12/25 considered the highlight report, risk and budget update and reported that it was satisfied with the progress being achieved. Notable progress has included establishing 2 cohorts of Adaptive Learning sets for senior leaders, a series of online webinars and events centred around leadership development, use of Leadership Success Profiles in the recruitment of Board Chief Executives and building on the allyship has supporting inclusive leadership and solid progress in developing compassionate leadership across social care workforce through a variety of in person and online events.	Green
B. Digital Services Innovation Adoption	Deliverable Closed 4599	Workforce	Education, training & workforce development	Partnerships	SG delivery partner for leadership, digital and data	SKP28 - %age of digital developments which are shaped by staff, learner and partner feedback	This deliverable was closed during 2024/25 Quarter 1. Please see the Quarter 1 narrative update (column N) for further detail. Digitally Enabled Workforce team in NES in collaboration with partner organisations across the Health and Social Care sector will work to successfully deliver a national programme as sponsored by Scottish Government and in alignment with the commitments within the Digital Health and Care Strategy, Data Strategy, Care in the Digital Age Delivery Plan to address key priorities to improve workforce digital capability.	Delivery of the commissioned workstreams	Delivery of the commissioned workstreams	Delivery of the commissioned workstreams	Delivery of the commissioned workstreams	N/A	The NES Executive Team agreed that this deliverable (4599) should be closed as it is a duplicate of 4418. Quarterly updates relating to the national programme of work supporting the improvement of digital leadership, digital and data skills of the health and social care workforce in Scotland are provided via deliverable 4418.						
B. Workforce	4615	Workforce	Internal efficiency, sustainability & affordability	Performance	Maximise NES's efficiency and demonstrate best value	Operational	Delivery of eRoosting Project within NES.	Initiation Call- Operational Practice Workshop - Signed PID - Benefits Realization workshop- Data collection- Impact Assessment - Reduced working week implementation. Hand over to HR BAU team	Sickness absence reporting migration from JIRA to eRoosting.	Project Sign Off and Handover To Support & CIA	Benefits realisation.	Green	Allocate eRoosting has been implemented in April 2024, with 100% of the staff now using the system for annual leave. The system requires updates due to the reduced working week, which is taking place in July 2024.	Green	The Quarter 2 milestone achieved as planned.	Green	Green	System is fully operational for annual leave. In Q4 the Adoption workshop will take place with the suppliers RL data after which this project will come to a close.	Blue
B. Workforce	4681	Workforce	National Leadership and QI programmes	Partnerships	SG delivery partner for leadership, digital and data	SKP11 - %age learners reporting that learning will improve practice	Act as the Scottish Government delivery partner for coaching interventions to support wellbeing through GP Coaching (if commissioned).	Executive Coaching - Opening for professional coaching tender.	Work with programme leads and provider to bring programmes onto the NCMF in a staged approach GP Coaching - Subject to confirmation of SG funding begin marketing coaching offer	Profession Coaching - Tenders evaluated and awarded. New coaches onboarded to National Coaching and Mentoring Platform. The Executive Coaching tender opens. GP Coaching - Subject to funding Application panel and onboarding to the initial wave and subsequent mini wave depending on utilisation / update of offered sessions	GP Coaching - Funding bid to SG and evaluation of 2024/25 Executive Coaching Tender evaluated and awarded.	Green	Funding - awaiting confirmation of Scottish Government funding for 2024/25. Coaching for wellbeing - fiscal position unknown, plans put in place to wind down the service in anticipation. Subsequent confirmation that Coaching for Wellbeing would not be continued received on 30th March and notice period invoked with platform provider. GP Coaching - Funding now confirmed and offer advertised, places offered and coaching being delivered. Evaluation of both services being together on both services.	Green	NCMF (National Coaching and Mentoring Platform) - Scottish Government confirmed funding at Year 1 level so developments limited to sustaining current platform work and piloting with Mentor and Coaching Matters. GP Coaching - Funding now confirmed and offer advertised, places offered and coaching being delivered.	Green	Green	NCMF onboarded new projects: National Boards Coaching Matters and Management Training Scheme Coaching. Funding anticipated on a minimum level contracted on the final year of the 3-year contract (FY 2025/26) enabling the current level of work. GP Coaching: 100+ matches facilitated through NCMF to manage forecasted budget through to actual spend by end of financial year.	Green
B. Workforce	4682	Workforce	Realistic Medicine & Value Based Health & Care	People	Develop education, training and tools to support delivery of realistic medicine and value based health and care	SKP11 - %age learners reporting that learning will improve practice	Subject to funding, Development and delivery of person-centred care education and training	To deliver 6th cohort of compassionate communication training and 1 openness and learning webinar.	Pilot 1st cohort of train the trainer for compassionate communication and deliver CIM leaders training.	To deliver 2 cohorts of compassionate communication training and refresh existing person-centred care online resources in consultation with service users.	To deliver 2nd cohort of train the trainers compassionate communication training and prepare for publication evidence of impact of person-centred care education resources	Green	The person-centred care CIM (Care Experience Improvement Model) leadership training was delivered as scheduled	Green	Two cohorts of Compassionate Communication Skills (CCS) training delivered as scheduled, reflective practice assignments currently being submitted.	Green	Green	Filming Duty of Candour Health and Social Care Scenarios completed as planned. Cohort 4 of CIM leaders completed as planned, recruitment for cohort 5 commenced. Educational resources for PCC and HS deliverable framework delivered as planned. Slight delay with train the trainers for CCS training and dates now scheduled for Feb 2025 due to board winter pressures.	Green
B. Workforce	4684	Workforce	Education, training & workforce development	Partnerships	Provide equality & human rights education	SKP08 - % of staff who experience NES as an inclusive organisation	NES will produce an anti-racism action plan by March 2025. This will set out the organisation's vision and mission on anti-racism and the actions that NES will progress over 2025-2026. It will be informed by the SG guidance issued to all Boards on developing the plan and will be involve the NES under-represented ethnic minority staff network, wider organisation and working with NHS will engage with service users to inform priorities for national board action plans.	Executive Coaching - Opening for professional coaching tender.	Draft action plan for engagement with staff network. Awareness sessions across Directorates via team meetings and town halls and with the Equality and Human Rights Steering Group to gain input to the action plan	Feedback from engagement informing the plan.	Plan signed off by NES Board by March 2025 for publication in April 2025.	Green	Deliverable added at the end of 2024/25 Quarter 2 reporting window - reporting to commence from Quarter 2.	Green	Quarter 2 milestone achieved.	Green	Green	Draft plan has been developed and staff consultation activities have taken place, including two sessions with resident doctors. The Plan has been taken to the Executive Team and the Partnership Forum and is scheduled for relevant Committees and the Board for final sign off in March 2025.	Green
B. Workforce	4685	Workforce	Education, training & workforce development	Partnerships	Provide equality & human rights education	SKP08 - % of staff who experience NES as an inclusive organisation	NES will achieve 'Developmental Employer' accreditation as part of the Equally Safe at Work (ESAW) employer accreditation programme by March 2026. This programme is designed to support employers in Scotland prevent violence against women and support gender equality at work.	Expression of interest submitted and NES Executive Team support for ESAW programme.	ESAW working group established.	Public and staff statements issued about ESAW.	Survey sent out to staff. Staff experience panels taken place. Policy development - relationship and sexual misconduct. Working group members have attended the training.	Green	Quarter 1 milestone achieved - Equally Safe at Work accreditation application submitted.	Green	Quarter 2 milestone achieved.	Green	Green	The Equally Safe at Work Working Group has continued to meet and oversee progress with the actions to meet relevant milestones. This includes participating in the training and developing communication to all staff and on our website. Guidance has been developed and shared with the group including on 'Relationships at Work' for NES staff. This has been approved by the ET and the Partnership Forum in December 2025. Activities on track for staff survey and focus groups in early 2025.	Green

NHS Education for Scotland

NES/25/07

Agenda Item: 8b

Date of meeting: 06 February 2025

Public Board Meeting

1. Title of Paper

- 1.1. Strategic Key Performance Indicators: Board Performance Report 2024-25, Q2

2. Author(s) of Paper

- 2.1. Simon Williams, Principal Educator – Planning & Corporate Governance

3. Lead Director(s)

- 3.1. Christina Bichan, Director of Planning and Performance

4. Situation/Purpose of paper

- 4.1. This second quarterly performance report to the Board for 2024-2025 presents the data available in the current phase of implementation of the Board's new balanced scorecard approach.
- 4.2. The Board is asked to review and approve this report.

5. Background and Governance Route to Meeting

- 5.1. This paper represents the sixth time the Board has received a report on performance against the strategic KPIs approved alongside the NES Corporate Strategy in May 2023.
- 5.2. The current report has been scrutinised in detail by the appropriate standing Committees of the Board. This is the second time that Committees have had the opportunity to scrutinise the report before it is presented to the Board. Details of comments made by Committees can be found in section 6.1.

6. Assessment/Key Issues

- 6.1. Feedback from Board Committees
 - 6.1.1. **Audit and Risk Committee 03 October 2024**
(From unapproved minutes): The Committee confirmed the report provides them with adequate assurance.
 - 6.1.2. **Staff Governance Committee 07 November 2024**
(From unapproved minutes): The Committee noted the performance reported in [...] the Delegated SGC Strategic Key Performance Indicator Report and confirmed it provided assurance.
 - 6.1.3. **Technology and Innovation Committee 02 December 2024**
(From unapproved minutes): The Committee acknowledged the five SKPIs delegated to it and that they are all rated green. The Committee confirmed the report provided them with satisfactory assurance.
 - 6.1.4. **Education and Quality Committee 13 December 2024**
(From unapproved minutes): The Committee approved the SKPI report.

The report presented to Committee proposed an additional measure to give a complete understanding of the range of dental trainees. The further measure would be 14d Dental Funded trainee placements – Non-completion rate (Dental Specialty Training). The Committee approved this proposal and agreed that it should go forward to the Board as a recommendation from the Education and Quality Committee.

The Board is therefore asked to consider and approve the addition of a new strategic KPI at 14d covering Dental Funded trainee placements – Non-completion rate (Dental Specialty Training).

- 6.2. **Overall findings**
This 2024-25 Quarter 2 report gives data on 45 strategic KPIs. In summary, RAG status is as follows:

Green	Amber	Red	Blue (complete)	Currently no RAG parameters
24	3	3	1	14

- 6.2.1. **Red**

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

In respect of the red RAG ratings:

- 07a – This is an annual measure, with no change to report from previous update.
- 13a - This data includes round 1 and round 2 recruitment. This year there were a total of 67 programmes recruited to. 19 of the 67 programmes had

a fill rate of <85% of which 7 of the programmes were very small with only 1 or 2 posts. It is noted that this may skew the data. The areas of recruitment which remain concerning are geriatrics, medical and clinical oncology. Intensive Care Medicine has had a lower recruitment rate than in previous years which we will need to understand. We will continue to monitor.

- 22 – This is a six-monthly measure, with no change from previous update.

6.2.2. **Amber**

SKPI04	Vacancy rate
SKPI33	Benefits realisation/ ROI from corporate change activities
SKPI37	Number of complaints or concerns upheld and partially upheld

In respect of the amber RAG ratings:

- 04 - In Q2 2024/25, the number of vacancies advertised increased by 55%, rising from 51 in Q1 to 79. This notable growth indicates a recovery in recruitment activity, potentially reflecting more stable or confirmed funding for 2024/25. However, the number of vacancies remains influenced by financial uncertainties, as seen in the fluctuations over the past quarters.
- 33 – Small but recoverable delays in one programme for Schedule Adherence and Benefits management adherence. Another programme is in early scoping which, when complete, will bring KPI related measures back to green.
- 37 - Over the last 10 quarters, the number of (partially) upheld Stage 2 complaints has remained stable between 0 and 2. The Complaints Team and the EQC will continue to monitor.

6.2.3. **Measures not yet reported**

A number of strategic KPIs have not yet been reported. The majority of these have been allocated to the Education and Quality Committee and focus on the quality of the education being offered by NES.

- SKPI11 (improvement in practice)
- SKPI12 (learning experience)
- SKPI16 (clinical learning environment)
- SKPI18 (uptake of learning products by sector)
- SKPI19 (SIMD)
- SKPI20 (protected characteristics)
- SKPI21a (% of learning products which include sustainability)
- SKPI27 (lived experience).

6.2.4. NES continues to pursue development of SKPI data collection and reporting capabilities in the short-term while simultaneously addressing some of the structural challenges that continue to impact on the scope and consistency of data collection, data quality and comprehensive reporting. This is primarily through the implementation of the NES Learning and Education Strategy, associated Corporate Improvement Programmes and TURAS Refresh, and is therefore a longer-term approach.

6.2.5. Work is also ongoing on the data collection and analysis for the remaining three SKPIs.

- SKPI09 (accesses to learning products)
- SKPI10 (staff accessing learning products)
- SKPI26 (learner confidence)

7. Changes to Committee responsibilities

7.1. Following the last meeting of the Technology and Information Committee on 27 January, the SKPIs which were previously reported to this Committee will need to be scrutinised by an alternative group.

7.2. It is proposed that all measures previously reported to TIC should be scrutinised by the new Planning and Performance Committee from May 2025:

SKPI26	% of health and social care workforce who report being confident in using digital ways of working
SKPI28	% of technology, data and digital developments which are shaped by staff, learner and partners feedback
SKPI38	Number of unplanned outages to NES systems (internal and external)
SKPI39	% NIS Audit Compliance Score for Cybersecurity
SKPI41	Adverse events: Number of Category 1 Information Governance events and events requiring reporting under RIDDOR

7.3. In addition, given the Committee's role and remit, it is proposed that the following measures also be scrutinised by the Planning and Performance Committee prior to being reported to the Board (previous reporting group in brackets):

SKPI22	Net Promoter Score for stakeholders who rate themselves likely to recommend NES to colleagues and associates	(Board)
SKPI33	Benefits realisation/ ROI from corporate change activities	(Board)
SKPI37	Number of complaints or concerns upheld and partially upheld	(EQC)
SKPI40	% RAG status for delivery against Annual Delivery Plan	(Board)

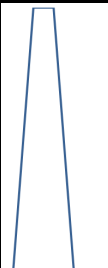







8. Recommendations

- 8.1. Measures in this report have been scrutinised by the appropriate Committees and the Board is asked to review and approve this report.
- 8.2. The Board is asked to approve the proposed changes to the responsibilities of Committees.
-

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

Author name: Simon Williams
Date: January 2025
NES

PEOPLE - KEY PERFORMANCE INDICATORS

Measure ID	Measure Name	Most recent performance	Previous reported performance	Most recent reported period	Trend Line	Desired Direction	Frequency	Data Narrative	Insights and Action	Governance Committee	Responsible Director/Lead	RAG Scores		
												<75%	75-81%	82%+
SKPI01	Employee Engagement Index	84	85	Qtr 1 - 2024/25		↔	Annually	The overall iMatter survey Employee Engagement Index in 2024 was 84. This is a reduction of 1 index point from 2023 when the EEI was 85.	The EEI score has reduced in 2024 by 1 point from 2023. There has been an increase in the number of staff being sent the survey (up by 20) and overall, 4 more surveys were completed in 2024. Considering the fiscal climate this year and decisions that had to be made staff engagement within NES has remained high. National data will be available in November when the national iMatter report is published.	Staff Governance Committee	Karen Reid	<75%	75-81%	82%+
SKPI02	Proportion of staff who report having the time and resources to support their learning and growth	81	83	Qtr 1 - 2024/25		↑	Annually	The proportion of staff reporting sufficient time and resources for their learning and growth reduced in the iMatter 2024 survey to 81 (vs 83 in 2023)	This is an annual measure extracted from the iMatter survey. All staff have a personal objective to complete their essential learning and all managers have a personal objective to ensure the essential learning of their staff is complete. In addition, development opportunities for staff are regularly communicated and they can apply for funding from the Capabilities Fund. A Protected Learning Time policy is in development within NES to ensure that staff are given time to undertake learning for their role.	Staff Governance Committee	Karen Reid	<70%	70-79%	80%+
SKPI03	Staff retention rate (voluntary leavers)	96.4%	94.5%	Qtr 2 - 2024/25		↔	Quarterly	The staff retention rate remains similar, with the most recent performance at 96.4% (as of Q2 2024/25) This data excludes Fixed-Term contracts.	Year-to-date voluntary leavers' exit questionnaires cite the main reasons for leaving NES as new employment within NHS, Other and retirement.	Staff Governance Committee	Karen Reid	<80%	80-84%	85%+
SKPI04	Vacancy Rate	79	51	Qtr 2 - 2024/25		↓	Quarterly	This metric provides the number of vacancies advertised in the period. In Q2 2024/25, 79 vacancies were advertised compared to 51 during Q1 2024/25.	In Q2 2024/25, the number of vacancies advertised increased by 55%, rising from 51 in Q1 to 79. This notable growth indicates a recovery in recruitment activity, potentially reflecting more stable or confirmed funding for 2024/25. However, the number of vacancies remains influenced by financial uncertainties, as seen in the fluctuations over the past quarters.	Staff Governance Committee	Karen Reid	>100	100-30	<30
SKPI05	Sickness Absence Rate	2.54%	2.48%	Qtr 2 - 2024/25		↔	Quarterly	The sickness absence rate data indicates a slight increase to 2.54% (as at Q2 2024/25) compared to 2.48% (as at Q1 2024/25).	In Q1, the top three reasons for absences were recorded as anxiety/stress/depression, cold/cough/ flu and Other unknown causes. As of July 2024, NHS Scotland comparator boards such as NSS, HIS and PHS have an average sickness absence rate of 4.43%, higher than the NES rate. NES sickness absence will continue to be monitored, with managers encouraged to record absences.	Staff Governance Committee	Karen Reid	>4.0%	3.1-4.0%	<=3%
SKPI06a	Gender pay equality	4.30%	2.70%	Qtr 4 - 2023/24		↓	Annually	The updated pay gap calculations include all NES staff, including Core Staff and Doctors and Dentists in training, as of March 2024. - The gender pay gap is 4.30%, an increase from 2.70% in 2023 but lower than in 2022 at 5.4%.	The gender pay gap has increased from 2023 while the disability and ethnicity pay gap has a decreasing trajectory. The data suggests this is due to male appointments into senior roles on AFC pay scales in NTS and Learning and Innovation Directorate. The full employment equality monitoring report was approved for publication by the Staff Governance Committee in August and is published on NES's website.	Staff Governance Committee	Christina Bichan/Karen Wilson	>10%	5-10%	<5%
SKPI06b	Disability pay equality	6.36%	9.19%	Qtr 4 - 2023/24		↓	Annually	- The pay gap for disabled staff is 6.36% which is lower than 2023 and 2022.	As above	Staff Governance Committee	Christina Bichan/Karen Wilson	>16%	10-16%	<10%
SKPI06c	Ethnicity pay equality	9.50%	11.11%	Qtr 4 - 2023/24		↓	Annually	- The pay gap for minority ethnic staff is 9.50%, lower than in 2023 and similar to the 2022 figure (9.50%)	As above	Staff Governance Committee	Christina Bichan/Karen Wilson	>12%	10-12%	<10%
SKPI07a	% of disabled staff	3.8%	3.7%	Qtr 4 - 2023/24		↑	Annually	This data is based on NES Core Staff up to March 2024. The data in relation to disability and staff from a minority ethnic background is relatively stable. There has been an increase in LGB staff.	Staff will be asked to update their equality and diversity information in 2024 but NES (and other Boards) are waiting on the national system being amended to allow individuals to amend their personal details. This will hopefully improve the accuracy of our data, particularly around disability where our disclosure is low compared to national statistics. The ONS estimate of working age disabled population is 24%. It is proposed that the RAG status is changed to reflect that.	Staff Governance Committee	Christina Bichan	<5%	5-10%	>10%
SKPI07b	% of Minority Ethnic staff	5.3%	5.4%	Qtr 4 - 2023/24		↑	Annually	This data is based on NES Core Staff up to March 2024. The data in relation to disability and staff from a minority ethnic background is relatively stable. There has been an increase in LGB staff.	Staff will be asked to update their equality and diversity information in 2024 but NES (and other Boards) are waiting on the national system being amended to allow individuals to amend their personal details. This will hopefully improve the accuracy of our data, particularly around disability where our disclosure is low compared to national statistics.	Staff Governance Committee	Christina Bichan	<2%	2-4%	>4%
SKPI07c	% of LGB staff	5.4%	4.6%	Qtr 4 - 2023/24		<->	Annually	This data is based on NES Core Staff up to March 2024. The data in relation to disability and staff from a minority ethnic background is relatively stable. There has been an increase in LGB staff.	Staff will be asked to update their equality and diversity information in 2024 but NES (and other Boards) are waiting on the national system being amended to allow individuals to amend their personal details. This will hopefully improve the accuracy of our data, particularly around disability where our disclosure is low compared to national statistics.	Staff Governance Committee	Christina Bichan	<2%	2-3%	>3%
SKPI08	Staff Inclusion Score (WAS: % of staff who experience NES as an inclusive organisation)	3.82	No Data	Qtr 1 - 2024/25		↑	Biannually	This is a new NES Staff survey based on 7 statements (1=Strongly Disagree to 5=Strongly Agree) as indicators for inclusion. 417 staff responded to the survey and demographic information was requested in order to identify any differences in responses across characteristics in the workforce.	The average score from the survey is 3.8. The lowest score was on 'I feel welcome to express my true feelings at work (3.67) and the highest was 'I am treated as a valuable member of NES' at 3.94. As well as responding to statements, staff could provide any further comments on inclusion in NES. One of the main themes was the issue of uncertainty over FTC and the impact this has on staff. The findings have been shared with staff networks and the next survey will be issued in November.	Staff Governance Committee	Christina Bichan	<2	2.5-3.5	>3.5

LEARNERS / TRAINEES - KEY PERFORMANCE INDICATORS

Measure ID	Measure Name	Most recent performance	Previous reported performance	Most recent reported period	Trend Line	Desired Direction	Frequency	Data Narrative	Insights and Action	Governance Committee	Responsible Director/Lead	RAG Scores		
SKPI09	Total number of accesses to NES learning products	873202	708022	Qtr 4 - 2023/24		-	Annually	No metric currently available across all NES products. Current reporting is on e-learning products and, given quarterly fluctuation, on an annual basis.	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 Committee	Kevin Kelman	Red	Yellow	Green
SKPI10	Number of health and social care staff accessing NES learning products as a % of the health and social care workforce	40%	31%	Qtr 4 - 2023/24		-	Annually	No metric currently available across all NES products. Current reporting is on e-learning products only.	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 Committee	Kevin Kelman	Red	Yellow	Green
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 existing sources. Initial (partial) data will be reported in Q2 24/25.	Education & Quality Committee	Kevin Kelman	Red	Yellow	Green
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 existing sources. Initial (partial) data will be reported in Q2 24/25.	Education & Quality Committee	Karen Wilson	Red	Yellow	Green
SKPI13a	Medical Funded trainee placements - Vacancy Rate (WAS Fill rate)	28%	28%	Qtr 2 - 2024/25		↓	Quarterly	This data includes round 1 and round 2 recruitment and is the same as Q1. This year there were a total of 67 programmes recruited to. In Q2 - 19 of the 67 programmes had a fill rate of <85% of which 7 of the programmes are very small with only 1 or 2 posts which may skew the data.	The areas of recruitment which remain concerning are geriatrics, medical and clinical oncology. Intensive Care Medicine has had a lower recruitment rate than in previous years which we will need to understand. We will continue to monitor.	Education & Quality Committee	Emma Watson	>20	10 - 20	< 10
SKPI13b	Dental Funded trainee placements - Vacancy Rate (WAS Fill rate)	2%	26%	Qtr 2 - 2024/25		↔	Quarterly	Dental Core training is the only programme filled at less than 85%	Continue to monitor	Education & Quality Committee	David Felix	>20	10 - 20	< 10
SKPI14a	Medical Funded trainee placements - Completion rate	0.0%	5%	Qtr 1 - 2024/25		↓	Annually	Annual data. First presented Q1 2023-24. Number of developmental outcomes by region and speciality	Continue to monitor	Education & Quality Committee	Emma Watson	>10	5 - 10	< 5
SKPI14b	Dental Funded trainee placements - Completion rate (Vocational Training)	3.7%	No Data	Qtr 1 - 2024/25		↔	Annually	Percentage of developmental outcomes or lack of completion.	Continue to monitor	Education & Quality Committee	David Felix	>10	5 - 10	< 5
SKPI14c	Dental Funded trainee placements - Completion rate (Core Training)	3.9%	9.0%	Qtr 1 - 2024/25		↔	Annually	Percentage of developmental outcomes or lack of completion.	Continue to monitor	Education & Quality Committee	David Felix	>10	5 - 10	< 5
SKPI15a	Employee Engagement Index – Doctors in Training	79.3%	78.6%	Qtr 1 - 2024/25		↑	Annually	Annual data. First presented Q1 2023-24. Overall satisfaction of Doctors in Training as measured by GMC NTS data	NES Collaboration with Health Boards to improve overall experience of training for trainees. Scottish Training Survey data now available for overall satisfaction by board to aid discussions and action planning.	Education & Quality Committee	Emma Watson	<60	60 - 70	> 70
SKPI15b	Employee Engagement Index - Dentists in Training	84%	90%	Qtr 2 - 2024/25		↔	Annually	Reporting on Vocational Training and Core/Speciality Training.	Investigate possibility of reporting other cohorts.	Education & Quality 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 Committee	Karen Wilson	Red	Yellow	Green
SKPI17	Total accesses of the NHS Scotland Careers Website	140076	174999	Qtr 2 - 2024/25		↑	Quarterly	The number of engaged sessions in Q2 24/25 is 140,076. This is a decrease of 20% from Q1 (174,999).	Despite a decrease this quarter, the current figure is 20% higher than the Q2 23/24 figure of 117,158. The top 3 pages visited, excluding the website home page, were the "Explore careers" page, the "International recruitment" landing page, and the application process blog post.	Staff Governance Committee	Karen Reid	<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 Committee	Karen Wilson	Red	Yellow	Green
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.	Current limitations of data collection methods for learners does not allow for reporting of data of this nature. Alternatives such as utilisation of workplace location are feasible but would not fulfil the purpose of this metric in widening access and reducing inequalities. Further consideration will be given to how data collection and reporting can be built into future system developments as part of developing our learning infrastructure.	Education & Quality Committee	Karen Wilson	Red	Yellow	Green
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 Committee	Karen Wilson	Red	Yellow	Green
SKPI21a	% of learning products which include sustainability	No Data	No Data			-			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 Committee	Karen Wilson	Red	Yellow	Green
SKPI21b	% of learning products which include value based health and social care	5	5	Qtr 2 - 2024/25		↑	Quarterly	Total number of NES learning products dedicated to VBH&C currently available on TURAS.	2024-25 Quarters 1 and 2 - reporting number of learning products dedicated to VBH&C. From 2024-25 Quarter 3, number of NES learning resources which include VBH&C over number of resources in the NES prospectus.	Education & Quality Committee	Karen Wilson	Red	Yellow	Green

PARTNERSHIPS - KEY PERFORMANCE INDICATORS

Measure ID	Measure Name	Most recent performance	Previous reported performance	Most recent reporting period	Trend Line	Desired Direction	Frequency	Data Narrative	Insights and Action	Governance Committee	Responsible Director/Lead	RAG Scores		
SKPI22	Net Promoter Score for stakeholders who rate themselves likely to recommend NES to colleagues and associates	-15	-10	Qtr 2 - 2024/25		↑	6 monthly	NES received an average satisfaction score of 6.36 out of 10. Whilst 34% of all respondents rated NES between 8 and 10, using a Net Promoter Score rating, where Promoters are scored by those who rated the organisation between 9 or 10 (171) and Detractors between 1 and 6 (344), NES receives an NPS score of -15.	General awareness of NES remains relatively high across all stakeholder groups, though they are mostly unaware of our strategies. The majority of our stakeholders believe NES is either partly or greatly meeting its purpose as a collaborative, innovative and inclusive learning organisation. A refreshed Communications action plan is in development.	Board	Karen Reid	<5	5 - 7	>=8
SKPI23	Number of education, research and strategic collaborations	18	12	Qtr 2 - 2024/25		-	Quarterly	Collaborations with national partners which support delivery of education for H&SC = 15, collaboration for delivery of learning and education research = 3	Cumulative, consolidated collaborative activity is informing understanding of enhanced opportunity. National partnerships continue to strengthen.	Education & Quality Committee	Kevin Kelman			
SKPI24	Number of innovation initiatives invested in, including in collaboration with other stakeholder organisations	15	14	Qtr 2 - 2024/25		-	Quarterly	Innovation Reference Group activity, complemented by Learning & Education Reference Group activity is informing the evolution of strategic development clusters, sharing intelligence and anticipating productive networking opportunities across all NES directorates and with stakeholders	Cumulative activity increasing NES influence/potential with key partners, growing collaboration. Progressing activity with Digital Health and Care Innovation Centre focus on Extended Reality and immersive simulation in Mental Health education; continue development of the NES Learning and Education Innovation Plan	Education & Quality Committee	Kevin Kelman			
SKPI25	% of Service Providers who report utilising NES provided workforce data	100%	100%	Qtr 2 - 2024/25		-	Quarterly	Our analysis services have informed: <ul style="list-style-type: none"> The allocation of PG medical posts between NHS Boards The allocation of AHP placements between universities and Boards A number of Fols and IRs The nursing and midwifery taskforce A workforce planning framework for the GP workforce The intake into UG dental education The number of International Recruits and their retention in NHS Scotland. 	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 Committee	Karen Reid	<=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 Q4 2024-25	Phase one initial reporting will focus on NES workforce. This will be included as part of the NES Tier 1 digital capabilities programme. Phase two will focus on H&SC wide reporting and is potentially contingent on a data collection solution via Turas or alternative measures.	Technology and Information Committee	Karen Reid			
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			↑		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 Committee	Gordon Paterson			
SKPI28	% of technology, data and digital developments which are shaped by staff, learner and partners feedback	100%	100%	Qtr 2 - 2024/25		↔		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 Information Committee	Christopher Wroath			
SKPI29a	Number of young people participating on a school-based pilot pathway	25	35	Qtr 1 - 2024/25		↔	Quarterly	Skills Development Scotland (SDS) evaluation of the pilot will confirm the number of learners that completed the Pilot Pathway qualification in whole or in part. This evaluation was scheduled to be produced in September, has not yet been received.	Continuing to support work in Fife - and potentially other areas - to deliver the qualification during 2024-25 school year.	Education & Quality Committee	Kevin Kelman	<21	21-40	>=41
SKPI29b	Number of collaborations to support employability and engagement of young people	No Data	No Data			↑	Quarterly	This is a new KPI, still in draft while we agree a numerical measure of collaborations to report against.	Since the last report, new collaborations have been established to support employability and engagement of young people in Midlothian, with university Medical Schools and Medical Schools Council to support recruitment to undergraduate Medicine, and with a eight Primary schools to trial an engagement programme for primary aged children. Data measures will be finalised for the next reporting window.	Education & Quality Committee	Kevin Kelman			
SKPI30	Number of NES programmes of education and training which are SCQF credit rated	40	40	Qtr 2 - 2024/25		↑	Quarterly	Includes 10 programmes 3rd party credit rated and 'owned' by NES; and 30 externally owned and credit rated (by SQA) but delivered by NES.	Will continue to monitor this broader set of measures regarding NES-delivered programmes going forward.	Education & Quality Committee	Kevin Kelman			

PERFORMANCE - KEY PERFORMANCE INDICATORS

Measure ID	Measure Name	Most recent performance	Previous reported performance	Most recent reporting period	Trend Line	Desired Direction	Frequency	Data Narrative	Insights and Action	Governance Committee	Responsible Director/Lead	RAG Scores		
SKPI31	Achievement of agreed savings % against annual budget	53%	23%	Qtr 2 - 2024/25		-	Quarterly	On track to meet full savings target set at operational planning. 53% achieved at Q2.	Boards have also now been instructed to stop discretionary spend in final months of financial year to assist with overall NHS Health & Social Care financial position. This may increase savings achieved.	Audit & Risk Committee	Jim Boyle			
SKPI32	% of audit actions which are completed within agreed timescale	78%	n/a	Qtr 2 - 2024/25		-	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	65%	75%	Qtr 2 - 2024/25		↑	Quarterly	Five programmes in delivery during reporting period. All programmes reporting as Green for Budget adherence, 4 or 5 programmes reporting green for Schedule Adherence and Benefits management adherence. One programme in early scoping which when complete will bring KPI related measures back to green, one programme reporting delays in delivery schedule.	Small but recoverable delays in one programme for Schedule Adherence and Benefits management adherence. Another programme is in early scoping which when complete will bring KPI related measures back to green.	Board	Karen Reid	<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)	13.66	23.98	Qtr 2 - 2024/25		-	Quarterly	Air 7.64 tCO2e; Rail 1.9 tCO2e; Hotel 4.12 tCO2e	Continue to monitor	Audit & Risk Committee	Jim Boyle			
SKPI36	Projected variance of budgeting within 0.5% at year end	0.16%	0.06%	Qtr 2 - 2024/25		-	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	2	0	Qtr 2 - 2024/25		↔	Quarterly	Over the last 10 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	2	Qtr 2 - 2024/25		↓	Quarterly	Minimal outage times, no impact on delivery of service	In line with previous reporting to IS governance groups	Technology and Information Committee	Christopher Wroath	3+	2	0 - 1
SKPI39	% NIS Audit Compliance Score for Cybersecurity	92%	92%	Qtr 2 - 2024/25		↔	Quarterly	Target of 60% set by Scottish Government	NES is performing well in this area. Continue to monitor.	Technology and Information Committee	Christopher Wroath	<60	60-69	>=70
SKPI40	% RAG status for delivery against Annual Delivery Plan	18%	19%	Qtr 2 - 2024/25		↓	Quarterly	% of deliverables which are delayed at Quarter end (% Red and Amber).	2024/25 delivery is currently at 81% completed / on track. Mitigating actions are in place for Red / Amber deliverables and progress will continue to be monitored. Support will be provided to directorates during the Quarter 3 reporting window as required.	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 2 - 2024/25		↓	Quarterly	As defined by SG InfoSecurity impact level descriptors	As per previous reporting to IS governance groups	Board / Technology and Information Committee	Karen Reid	3+	2	0 - 1

NHS Education for Scotland

Agenda Item: 08c

Date of meeting: 6 February 2025

NES PUBLIC BOARD

1. Title of Paper

1.1 2024/25 Quarter 3 Finance Report

2. Author(s) of Paper

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

3. Lead Director(s)

3.1 Jim Boyle, Director of Finance

4. Situation/Purpose of paper

The purpose of this paper is to:

- 4.1 Inform the Board of the financial outturn position at the end of Quarter 3 (Q3) of financial year 2024/25, including the year-end forecast, based on actual performance to the end of Q3 as well as anticipated activity for the remainder of the financial year. The Q3 Year-end Forecast position, as set out in this report is an underspend of £3.8m, however this will go towards reducing the funding gap allocation from SG, which will result in an overall breakeven position. This is dependent on the receipt of all outstanding anticipated funding allocations from Scottish Government.
- 4.2 Report the Scottish Government (SG) in-year funding position and highlight the ongoing work with SG Health Finance and policy teams on outstanding funding.

5. Background and Route to Meeting

- 5.1 The Financial Plan which supports the Annual Delivery Plan was approved by the NES Board on 28 March 2024. This consisted of a baseline budget of £569.5m for NES to conduct its core activities with non-recurring funding of around £178m indicated at that time for additional commissioned work by the SG policy teams.
- 5.2 NES opening baseline budget for financial year 24/25 was initially reduced by 3%. This reflected a £15.7m reduction across the full baseline budget, with SG subsequently confirming that the saving should only be applied to the budgets that would not be passed through to other Boards. NES communicated to SG that this would not be possible.
- 5.3 A three-year savings plan was developed following discussions with SG Sponsor and Finance teams. For 24/25 a savings plan of £3.5m, split £1.3m recurrent and £2.2m non-recurrent, was approved as part of the financial plan at the Board meeting in March. This reflects the ask from SG to not impact on any areas of our budget which we provide funding to other NHS Scotland Boards for deliverables such as training grade salaries or undergraduate teaching. Following discussion with Scottish Government, it was agreed that NES should include an anticipated funding allocation of £12.2m to account for the difference in the submitted savings plan of £3.5m and the original 3% efficiency target of £15.7m.
- 5.4 Throughout the year Scottish Government policy teams ask NES to undertake additional commissions that reflect policy and service need, align to the NES strategy, and are supported by further funding. A total of £236m is currently anticipated for financial year 2024/25. This is an increase of £58m from financial plan, of which £57m is for funding of 24/25 pay awards across Agenda for Change (AfC), Medical & Dental Consultants, Executive and Resident Doctors.

6. Assessment/Key Issues

- 6.1 At the end of Q3 (December), NES remains on track to meet its financial targets. The year-to-date reported position is an underspend of £4.6m, with a **full year forecast underspend of £3.8m.**
- 6.2 SG has asked NES to work towards reducing the £12.2m funding gap wherever possible across the year. Therefore, we now anticipate requiring an £8.5m allocation as the underspend identified within NES will contribute towards this gap, and reduce the funding required to bring NES to a balanced position.
- 6.3 The majority of the underspends are non-recurrent in nature from lower Dental trainee recruitment, additional vacancy lag savings and higher number of current cohort of trainees in Medical and Pharmacy working less than full time. Only £0.2m is on a recurrent basis from stopping paediatric fellowships one year earlier than originally planned. This means many of the savings are one off

in nature and cannot be built into operational plans for 25/26 to reduce the funding gap

- 6.4 Work required on how recruitment can be increased and whether for some areas such as medical a move to recruiting on whole time equivalent basis, rather than headcount, could improve trainee numbers and ensure workforce service needs are met both presently and in the future.

Table 1 – Summary projections 2024/25

Performance Indicator	Forecast Year-End Outturn	Q3 Position (Year to Date)	Q2 Position (Year to Date)	Q1 Position (Year to Date)
Revenue Outturn	£3.8m (underspend)	£4.6m (underspend)	£0.5m (underspend)	£1.7m (underspend)
Funding Gap	£8.5m	£8.5m	£12.1m	£12.1m
Cash Releasing Efficiency Savings	£7.0m	£5.7m	£3.6m	£1.5m

- 6.5 At Q3 NES had received £752m of funding from Scottish Government. This includes 100% of original baseline funding plus those 2023/24 allocations that were due to be baselined in 2024/25, and £195.2m (83%) of additional allocations which includes £125.2m transferred recurrently to the NES baseline. A total of £154.2m was received on the first allocation letter in June which has provided NES with greater clarity and allows teams to plan spending accordingly across the remainder of 2024/25, but also as part of 2025/26 Operational Planning where it has been received recurrently.
- 6.6 We continue to work closely with colleagues in Scottish Government to ensure the remaining 17% of additional allocations are received in a timeframe which enables all agreed deliverables to be achieved. Those outstanding allocations awaiting funding confirmation still represent a financial risk to NES at this stage, although it is expected that this funding will be received. Appendix 2 to the attached detailed financial report provides a risk assessment of the outstanding allocations and indicates that the majority of outstanding funding has been agreed in principle and is rated as **GREEN** or **AMBER**, with no outstanding allocation being graded as **RED** at this stage.
- 6.7 In response to the Cabinet Secretary for Finance’s announcement on the continuing financial pressures across 2024/25, NES Executive Team have instructed all budget holders to review all spending plans which are not already legally committed or essential to the achievement of NES’ deliverables that have been agreed with SG. Careful consideration will be given to whether spending should be incurred at all, if not committing spending would lead to significant detrimental impact on the delivery of the NES Strategy or key deliverables in our Delivery Plan, and whether goods/services/programmes can be procured in an alternative manner to how they may have been previously.

- 6.8 NES received a letter in November advising that SG Health Workforce Directorate did not have the funding available at this time to support further development of the Turas Refresh programme in this financial year or 2025/26. Discussions have since taken place with SG Finance and NES Sponsor Team about the next steps, and options for securing funding to support investment in this area. For 24/25 we have removed the anticipated allocation of £291k and will instead look to absorb those costs within existing NES budget.
- 6.9 The current forecast position includes NES absorbing £0.1m of pay costs for the impact of delaying the introduction of the Reduced Working Week by one month in NES. We await confirmation from SG on when the next reduction in working week will be implemented. The next reduction is likely to prove more challenging, with either reduced deliverables or increased headcount being looked at as options. Early notification from SG of introduction date will be key to how NES can respond to this challenge.

Table 2 - Key Risks to Financial Performance

Risk	Status	Mitigations
Remaining allocations not being confirmed in future allocation letters	GREEN	<ul style="list-style-type: none"> We have already received in principle confirmation that almost all allocations will be coming in future letters (see Appendix 2 of detailed finance report).
Underachievement of savings plan or elements of the plan through implementation issues within NES	GREEN	<ul style="list-style-type: none"> Vacancy lag procurement targets have both been fully met at P9. Additional savings of £0.75m on vacancy lag included in year-end forecast.
Requirement by SG for Boards to further reduce spending in-year (baseline or non-recurrent)	GREEN	<ul style="list-style-type: none"> Completion of monthly FPR returns to keep SG Health Finance apprised of outturn projections Utilising flexibility within the overall NES baseline budget to cover shortfalls across NES directorates Cessation or curtailment of discretionary spending plans
2024/25 pay awards not fully covered by additional funding	GREEN	<ul style="list-style-type: none"> Full funding for AfC, Executive and Medical & Dental Consultants pay awards have been received. Cost of resident doctors pay award has been submitted to SG Finance and confirmed for allocation on January 25.
Medical Training Grades potential funding deficit not underwritten by SG	GREEN	<ul style="list-style-type: none"> Expenditure and allocation of trainees is well-controlled within NES Regular engagement with SG Health Finance and Policy Teams to make sure the funding position is well understood SG have previously honoured this underwriting

7. Recommendations

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

Author to complete **checklist**.

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

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

Author name(s):

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

Date: 21/01/25 NES

FINANCIAL SUMMARY REPORT

AS AT Q3 (January) 2024/25

Contents

1. Executive Summary	Page 2
2. Operational Performance	Page 4
3. Scottish Government Additional In-Year Allocations	Page 7
4. Cash Releasing Efficiency Savings (CRES)	Page 9
5. Staff Costs 2024/25	Page 10
Appendix 1 – Year End Position by Directorate	Page 12
Appendix 2 – SG In Year Outstanding Funding	Page 13

1. Executive Summary

At the end of 2024/25 financial year, NES is on track to meet all its statutory financial targets, provided that Scottish Government funding is received in line with expectations.

Table 1 – Summary Position	Year-End Outturn	Q3 (YTD)	Q2 (YTD)	Q1 (YTD)
Revenue Budget	£3.8m	£4.6m	£0.5m	£1.7m
Funding Gap Allocation	£8.5m	£8.5m	£12.1m	£12.1m
Cash Releasing Savings	£7.3m	£5.7m	£3.6m	£1.5m

A. Revenue Budget

- The NES year end position for financial year 2024/25 is an underspend of £3.8m. This will be allocated towards further reducing the opening funding gap of £12.2m, down to an £8.5m anticipation at period 9. We will continue to identify other savings that could further reduce the gap and contribute towards helping the funding deficit on the NHS Scotland Health & Social Care portfolio.
- There are various overspends and underspends reported across directorates, and these are discussed further in the Operational Performance section on Page 4.
- The revenue forecast position is based on all outstanding anticipated funding being received by SG in a timeframe which allows all deliverables to be achieved.

B. Capital

- Each financial year a revenue to capital allocation is agreed with Scottish Government (SG) as part of the financial plan. At Q3 we anticipate requiring £1.3m capital funding, which is mostly in relation to the fit out of the new Bothwell Street property in Glasgow and is subject to final schedule of work valuations being received from new contractors at year end.

C. Savings

- At the end of Q3 NES has delivered 86% of its Cash-Releasing Efficiency Savings (CRES) savings plans, and the Board is on track to exceed the £6.6m target, by £0.7m by the end of the financial year. Higher number of vacant posts and longer recruitment lead times to fill the vacancies are the main driver behind the forecast increase. These are non-recurrent in year savings so do not reduce the savings targets in later years.

D. Key Risks and Issues

- **Funding** – at the end of Q3 NES have £41.5m of funding allocations outstanding to enable agreed delivery plans to be met. The largest element is £39.1m for Resident Doctors 24/25 pay award which is expected to be funded in full by SG on January allocation letter. There is also the £8.5m funding gap allocation. This will not be allocated until the year end position is known, with expectation that NES will continue to work towards reducing this where possible. Over the previous allocation letters from SG, we have received £4.8m of funding allocated to NES in error. This has been advised to SG and an anticipated return included for correction on future letters processed by SG. We also anticipate receiving £1m of income from universities for Dental ACT levy on overseas students' which NES then return to SG each year or use to support additional dental training as instructed by Chief Dental Office.
- **Pay Awards** – All pay figures within this report now reflect the 24/25 pay scales following confirmation of awards for each pay category. As at period 9 we have received full funding, totalling £18m, for AfC, Medical & Dental Consultants and Executive pay uplifts, all on a recurrent basis. An allocation for £39.1m is anticipated to be received on January letter for Resident Doctors pay uplift, with a further £8.4m confirmed within NES 25/26 opening baseline position to take account of the two stage pay uplift this year (8.5% April-September and a further 2.3% uplift from October-March).

- **Major Programmes** – The Turas refresh business case has been submitted to SG for approval to progress to Phase 2 of the programme. SG have confirmed there is no funding for the programme is available in 2024/25, therefore NES will absorb the costs of £0.3m. Discussions with SG Finance continue on securing funding to progress this work in 25/26.
- **Digital Front Door (DFD) and Digital Prescribing and Dispensing Programme (DPDP)** – Spend plans at period 9 anticipate an underspend of £1m for DFD and £1.9m for DPDP. NES remain in discussions with all stakeholders with a return of funding for both programmes expected in final quarter once final delivery plans are confirmed. The DFD programme is now expected to complete by end of March 2026, with future funding and deliverable timelines to be determined for DPDP.

2. Operational Performance

Revenue Position

- Monthly financial monitoring continues to be undertaken with directorates and a summary of the Q3 position is included by Directorate in Table 2 below. A more detailed breakdown by Directorate can be found at Appendix 1.
- The most significant variance is a £1.3m underspend within Dental and Optometry Directorate, which is predominantly driven by lower fill rates in dental training grades on both core and vocational training, and reduced Dental ACT costs as Grampian have not drawn down funding for posts at Aberdeen Dental School. This is partly offset by higher pay costs relating to re-grade of staff, mainly band 5 to band 6 Dental Nurse Tutors.
- The £0.9m underspend within Medical, Pharmacy and Healthcare Science is mainly lower recruitment to fellowships. Stopping recruitment to paediatric fellowships has been brought in a year earlier than originally planned, delivering an additional £0.2m of savings, while two trainees withdrew at late notice from remote & rural fellowship which has left a gap for the year with £0.1m underspend on pay. Lower costs of £0.1m on simulation training are now forecast following review of delivery plans. Within Pharmacy there are lower costs on Foundation Training Year (FTY) programme as more trainees are working less than full time and lower costs on Pharmacy Act are now expected as lower number of students progressed to next year which has reduced the experiential learning placement costs, as students do not repeat these as part of integrated degree.

- £0.3m underspend in NMAHP is due to a number of small underspends against various programmes including Advanced Nurse Practitioners where all students have received funding required, moving Spiritual Care events and workshops online, withdrawal of one AHP fellow, Integrated Community Nurse course scheduled to deliver over two financial years, only one intake to Return to Practice and higher income generated from more participants on Scottish Multiprofessional Maternity Development Programme.
- Medical Training Grades (MTG) are anticipating a £237k underspend for full year at period 9. Once February recruitment and rotation information is finalised, we will have a clearer picture on full funding requirement for the year. The commitment from SG remains to fund any material overspend at year end and bring this budget to a balanced position, however we do not anticipate this being required for 24/25.
- NHS Scotland Academy show a breakeven position until otherwise directed by Executive Programme Group (EPG). Any underspends in NES, or Golden Jubilee, will first be discussed at an EPG meeting, and only if no further plans are identified will any variance from budget be shown against individual Board financial positions. The P9 position is an anticipated underspend of £75k against current planned work, with business cases for utilising, including capital spend, being taken to next EPG. The Learning & Innovation part of the directorate are showing an overspend of £184k, which is due to no funding for Turas being received in 24/25, partly offset by lower Knowledge & Management Service license costs.
- The vacancy lag target of £2.75m has been achieved at end of period 9. We now anticipate a further £0.75m in the final quarter as a result of higher vacancies and longer recruitment lead times.
- As part of the move to a Reduced Working Week (RWW) of 37 hours for all AfC staff, we have incurred costs of £96k, which are shown as a pressure against directorate budgets. No further costs are anticipated in relation to RWW in 2024/25. There will however be further reductions in future years to final position of 36 hours which will need to be planned, and we await clarification from SG on whether any reduction from April 2025 will be implemented or next reduction will be April 2026.
- New contractors have been appointed to conduct the fit-out work at new Bothwell Street property. Once the new schedule of work is received, we will be able to assess the impact on projected spend plan in 2024/25, and the start of 2025/26. Dilapidation costs

of £0.7m have been included in this year to cover the end of the lease agreement at 2CQ. A short-term lease has been agreed until end of June 2025 to allow extra time for fit out work to be completed and then allow staff to transition.

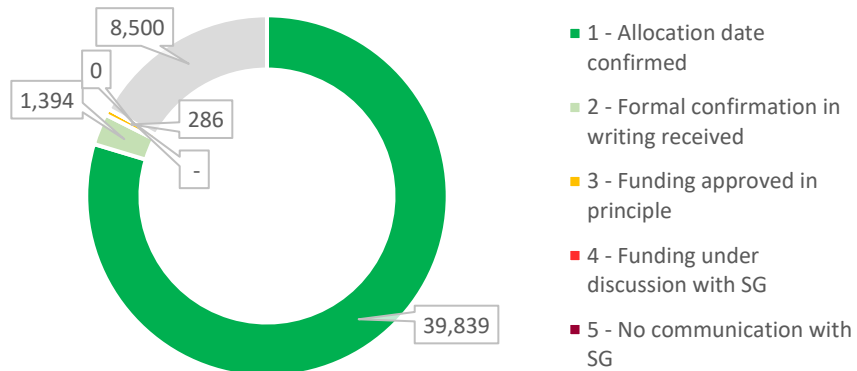
Table 2 - Year End Outturn by Directorate	Full Year Budget £'000	Full Year Forecast £'000	Under/(over) Spend £'000
Medical, Pharmacy, Healthcare Science	205,970	205,076	894
Dental, Optometry	60,648	59,330	1,318
NMAHP	15,932	15,609	323
Psychology	46,797	46,773	24
NHS Scotland Academy, Learning & Innovation	8,822	9,006	(184)
Social Care	1,071	1,051	20
NES Technology	21,231	21,189	42
Workforce, Planning	14,328	13,951	377
Finance, Properties	9,537	9,545	(8)
Provisions	2,298	1,582	716
Total Exc MTG	386,634	383,112	3,522
Medical Training Grades (MTG)	412,782	412,545	237
Total NES	799,416	795,657	3,759

3. Scottish Government Additional In-Year Allocations

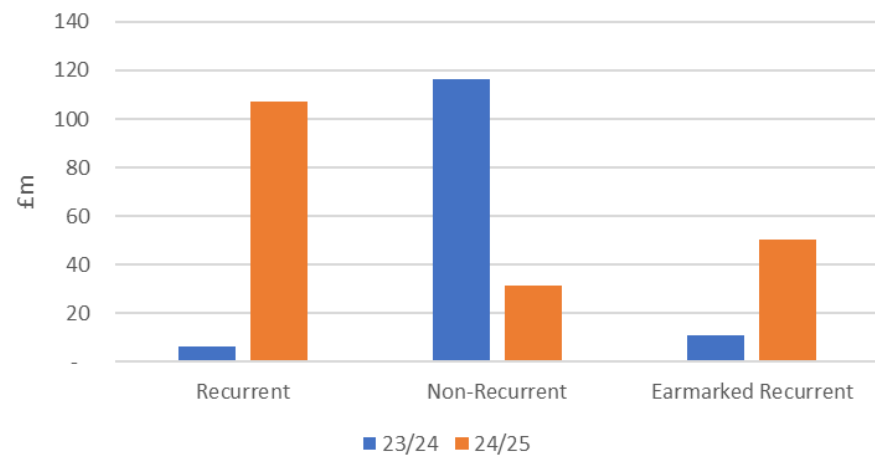
- At the end of Q3 (December) NES anticipate receiving a total of £235.8m in additional in-year allocations. This equates to 31% of the total NES revenue budget.
- At the end of Q3 we have received £195.1m, which is 83% of the total anticipated additional allocations.
- £125.2m has been received recurrently which will be transferred to the NES baseline from 2025/26. This provides NES with greater clarity and increased flexibility as it sets its operational planning deliverables for future financial years, although c£94m of the recurring funding relates to pass-through funding to NHS Territorial Boards.
- Directorates and Finance have worked closely with Scottish Government Sponsorship team, Finance and policy leads to ensure the prompt receipt of allocations and will continue to do so for all outstanding anticipated allocations.
- Some allocations are still outstanding due to information requirements not being known until later in year, therefore they are not anticipated until later in year and have a reduced risk as high-level values are agreed in principle awaiting final confirmation. At period 9 no outstanding allocations are marked as a red risk.
- Excluding the resident doctor pay award of £39.1m, which has been confirmed for January allocation letter, and the £8.5m funding gap, we are awaiting on £2.4m across 11 allocations. This is a considerable improvement from 23/24 Q3 when we were still awaiting £46.3m of funding.
- Table 3 below shows allocations received in 2024/25 and the value and % of the outstanding allocations by Directorate. A more detailed breakdown of outstanding allocations appears in Appendix 2.

Table 3 - Allocation Status by Directorate	Anticipated £'000	Received £'000	Outstanding £'000	Outstanding %
Medical, Pharmacy, Healthcare Sciences	68,781	67,569	1,212	2%
Dental, Optometry	4,639	6,014	(1,374)	-30%
NMAHP	2,898	2,711	187	6%
Psychology	30,780	30,780	-	0%
NHS Scotland Academy, Learning & Innovation	2,929	2,844	85	3%
Social Care	877	429	448	51%
NES Technology	9,999	12,899	(2,900)	-29%
Workforce, Planning	3,144	2,928	216	7%
Finance, Properties	76	76	-	0%
Provisions	73,244	30,465	42,779	58%
Total Exc MTG	197,366	156,713	40,654	21%
Medical Training Grades (MTG)	38,450	38,450	-	0%
Total NES	235,816	195,163	40,654	17%

Outstanding SG Allocation In Status

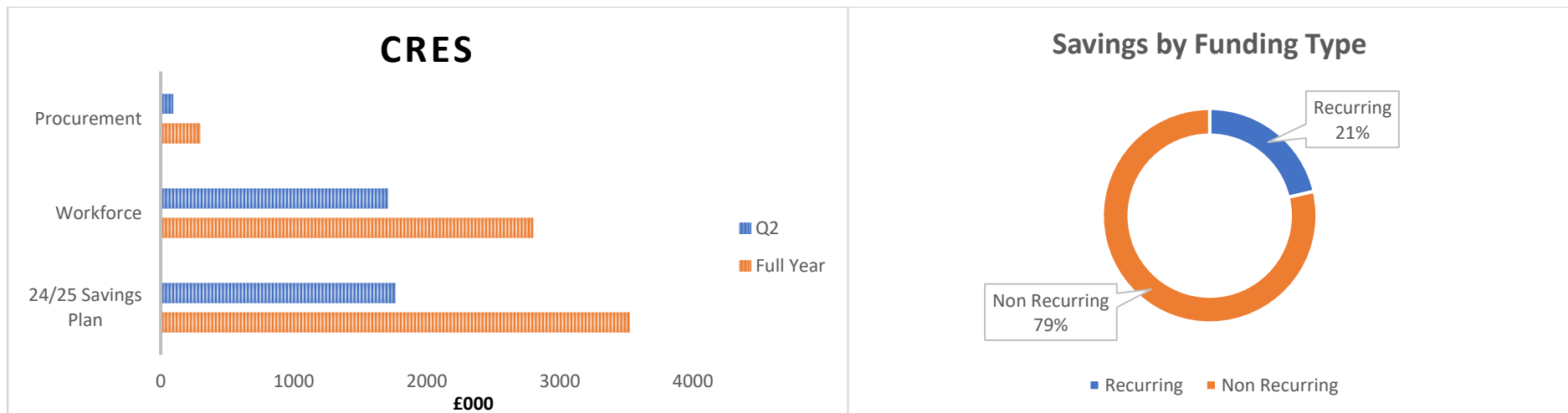


SG In Year Funding Type by Year

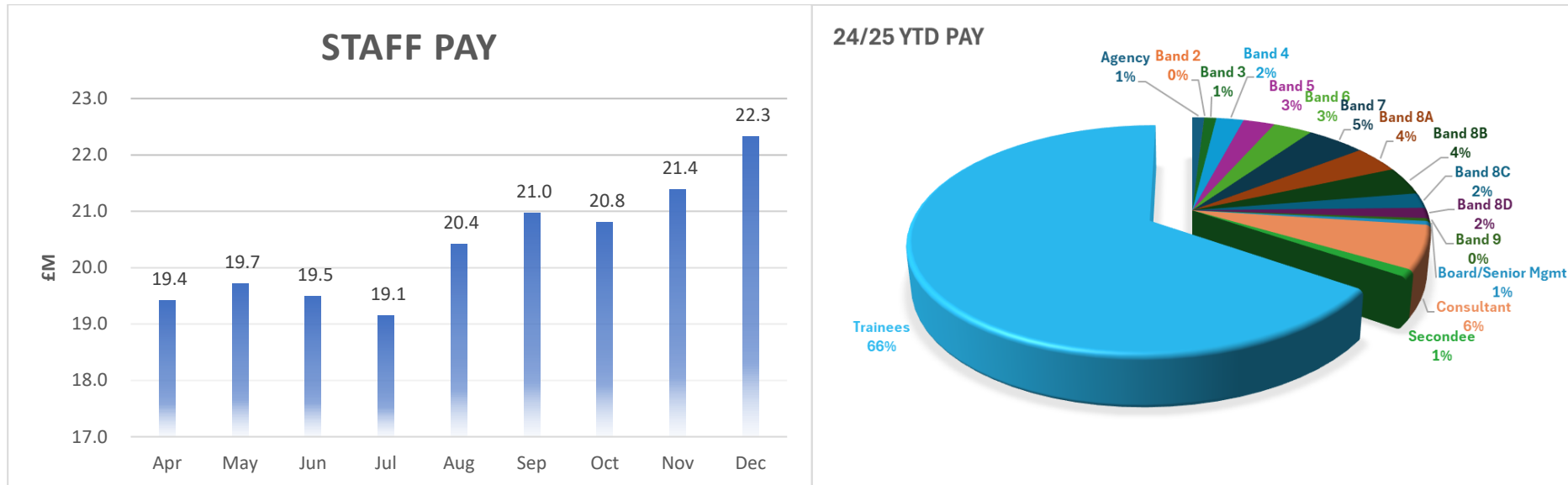


4. Cash Releasing Efficiency Savings (CRES)

- The 2024/25 approved Financial Plan identified a savings plan of £6.6m, 1.2% of the total NES baseline.
- We have achieved 86% of the CRES savings target at the end of Q3 and are on track to achieve £0.7m above the full year target by March 2025. This is driven by higher anticipated workforce savings from longer recruitment lead times and additional vacant posts.
- The Procurement and Workforce savings are fully non-recurrent in nature, with the workforce savings being a result of the time required to recruit to vacant posts.
- The 24/25 Savings Plan consists of £1.4m on a recurrent basis and £2.1m on a non-recurrent basis.



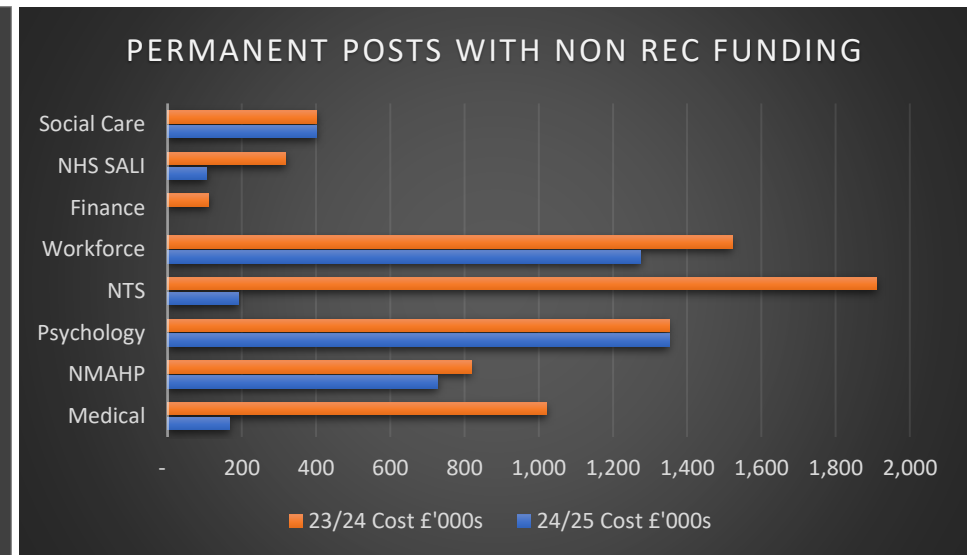
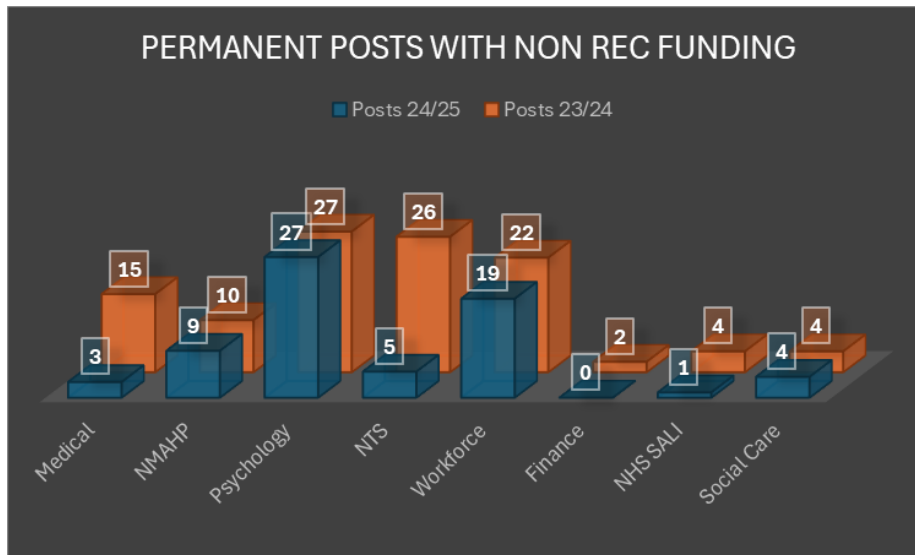
5. Staff Costs 2024/25



- The data on above graph includes all NES staff, agency staff, secondees and lead employer staff.
- The rise in August and again in September is in line with NES major recruitment of trainees, including new expansions funded by SG. The rise in November is for AfC pay award backpay and then in December the pay uplifts were processed through payroll for Resident Doctors and Medical & Dental Consultants.
- Costs are expected to rise in January as the backpay for both Resident Doctors and Medical & Dental Consultants are processed. At this stage we do not expect costs to exceed forecast, with SG confirming the final outstanding pay award allocation will be fully funded in January letter.
- A large part of NES payroll is trainee salaries (66%) which makes it key we receive timely and accurate information from other employing and placement boards to ensure correct payments are processed on a monthly basis. AfC costs account for 26% of payroll costs. Agency costs averaged £152k per month in Q3 compared to £198k in Q2 and £234k in Q1.

Permanent Posts Funded by Non-Recurrent Funding

- There are several posts within NES which have been recruited permanently but are funded via non recurrent in year funding from SG.
- At Q3 in 23/24 there were 110 posts in this category of funding which provided NES with a financial risk of £7.5m.
- Following the increased baselining of funding during the first half of 24/25 there are now only 68 posts with a reduced financial risk of £4.2m.
- The main areas to have received recurrent funding in 24/25 are in NTS via National Digital Platforms funding and in Medical where Pharmacy ACT funding was provided on recurrent basis.
- The remaining high-risk areas are in Psychology & NMAHP for Mental Health posts and in Workforce for Digitally Enabled Workforce (DEW) and Leading to Change posts. Although discussions with sponsor and policy teams are continuing with the expectation some of these posts will receive recurrent funding during 25/26.



Appendix 1 – Year End Position by Directorate

Directorate	Full Year Forecast			Q2 Variance	Movement Q3 v Q2
	Budget	Outturn	Variance Under/(Over)		
	£000s	£000s	£000s		
Quality Management	1,975	1,969	6	3	3
Medical ACT and Academic	139,814	139,800	14	(3)	17
Medical Directorate Support	9,464	9,438	26	43	(17)
Training Programme Management excl. MTG	26,503	26,485	18	(61)	79
Professional Development	9,482	8,963	519	355	164
Pharmacy	16,945	16,608	337	(5)	342
Medical Total	204,183	203,263	920	332	588
Dental	56,104	54,770	1,334	697	637
NMAHP	15,932	15,609	323	206	117
Psychology	46,797	46,773	24	0	24
Healthcare Sciences	4,544	4,560	(16)	(8)	(8)
Optometry	1,787	1,813	(26)	21	(47)
NHS Scotland Academy, Learning & Innovation	8,822	9,006	(184)	42	(226)
Social Care	1,071	1,051	20	(2)	22
NTS	21,231	21,189	42	(22)	64
Workforce	11,451	11,100	351	28	323
Finance	3,628	3,662	(34)	(29)	(5)
Properties & Facilities Management	5,909	5,883	26	18	8
Planning	2,877	2,851	26	(86)	112
Net Provisions	2,298	1,582	716	0	716
NES Total (excl. MTG)	386,634	383,112	3,522	1,197	2,325
MTG Salaries	412,782	412,545	237	0	237
NES Total	799,416	795,657	3,759	1,197	2,562

Appendix 2 – Outstanding In Year SG Allocations P9

NES Directorate	SG Directorate	Allocation Title	Funding Type	Risk	Outstanding £
Provision	Health Finance	Resident Doctos Pay Award	Recurrent	1	39,100,000
Social Care	Social Care	Turas Repurpose and SSSC joint working	Non-Recurrent	1	543,016
NMAHP	Social Care & NCS Development	Dementia Posts & non pay	Earmarked Recurrent	1	110,191
NHS SA	Health Workforce	NHS SA Core funding - correction	Recurrent	1	85,318
Medical Pharmacy	Chief Medical Officer	Non Global sum IP/CS places and Posts	Non-Recurrent	2	555,751
Social Care	Social Care	Turas Repurpose and SSSC joint working	Non-Recurrent	2	448,206
Medical Pharmacy	Chief Medical Officer	Clinical supervision and IP/CS places	Non-Recurrent	2	285,200
NMAHP	Chief Nursing Officer	Adults with Incapacity-MWC	Non-Recurrent	2	76,428
Medical Pharmacy	Chief Medical Officer	Pharmacy SCLF	Non-Recurrent	2	28,349
Workforce	Health Workforce	Centre for Workforce Supply Social Care	Non-Recurrent	3	156,029
Dental	Health workforce	Distinction Awards	Earmarked Recurrent	3	70,417
Workforce	Digital Health & Care	Digital Enabled Workforce	Non-Recurrent	3	60,000
Anticipated Directorate Allocations - Outstanding at P9					41,518,905
Provision	Health Finance	SG Funding Gap	Non-Recurrent	3	8,500,000
Total Anticipated Allocations - Outstanding at P9					50,018,905
Dental	Primary Care Directorate	Dental Vocational Training	Non-Recurrent	2	(414,687)
Provision	Primary Care Directorate	Primary Care Workforce and Rural	Non-Recurrent	1	(777,572)
Dental	Health Finance Directorate	Dental ACT Levy	Non-Recurrent	3	(1,029,816)
Provision	Chief Nursing Officer Directorate	NMAHP Duplicate Allocations	Recurrent	3	(1,091,379)
Provision	Digital Health & Care	NTS Vaccination Duplicate Allocation	Recurrent	3	(1,900,000)
Provision	Mental Health	Mental Health	Earmarked Recurrent	3	(1,051,920)
NTS	Digital Health & Care	Digital Prescribing and Dispensing Programme	Non-Recurrent	3	(1,900,000)
NTS	Digital Health & Care	Digital Front Door	Non-Recurrent	3	(1,000,000)
Medical Professional Dev	Primary Care Directorate	National Centre for Remote & Rural HSC	Non-Recurrent	3	(200,000)
Return of Funding - Outstanding at P9					(9,365,374)
Net Outstanding Funding position at P9					40,653,531

NHS Education for Scotland

NES/25/09

Agenda Item: 8d

Meeting Date: 6 February 2025

NES Public Board

1. Title of Paper

1.1 Q3 Strategic Risk Update

2. Author(s) of Paper

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

3. Lead Director(s)

3.1 Jim Boyle, Director of Finance

4. Situation/Purpose of paper

4.1 The purpose of this report is to present to the Board the quarter three strategic risk update for 24/25 for review and approval.

4.2 At the recommendation of the Chair of the Audit and Risk Committee, an approach to providing assurance on risk controls was developed to strengthen assurance to the NES Board and Governance Committees that all risks are being managed appropriately. Following the implementation of the approach the Audit and Risk Committee asked that the overall control ratings for Strategic Risks be reviewed to ensure that a consistent approach is being applied. The Board is asked to consider and approve the overall control ratings for each of the Strategic Risks as assessed by their owner.

5. Background and Governance Route to Meeting

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

- 5.2 Strategic Risks that relate to individual Board Governance Committees' remitted responsibilities are presented quarterly. This allows for consideration of the degree of assurance that the individual risks are being effectively managed by the mitigating controls and planned actions identified.
- 5.3 In October 2024 the Audit and Risk Committee approved the NES Risk Control Assurance proposal. The proposal was designed to provide enhanced guidance to risk owners on assessing how well individual and collective risk controls are mitigating individual risks. It was also intended to strengthen the NES Board and Governance Committees' assurance that all risks are being managed appropriately. Following the implementation of the proposal, the Audit and Risk Committee asked that the Strategic Risks overall control ratings were reviewed to ensure that a consistent approach was being applied. At their January 2025 meeting the Audit & Risk Committee discussed, reviewed and approved the overall control ratings for each of the Strategic Risks as assessed by their owner.

6. Assessment/Key Issues

6.1 NES Strategic Risk Register

- 6.1.1 The Strategic Risk Register (summary Appendix 1, detail Appendix 2) has been subject to a recent review by the Executive Team and individual risk owners. The new reporting template presents the control assurance assessment for individual controls and highlights actions in green if on schedule and red if overdue. Within the last reporting period there has been movement to the scoring of several risks and a new risk has been escalated to the Strategic Risk Log.
- 6.1.2 Strategic Risk 2 – (relating to the disproportionate amount of non-recurrent funding, without conversion to recurrent funding). The net likelihood rating has been decreased due a reduction in the proportion of NES's budget funded on a non-recurrent basis. Currently only ten percent of the budget has not been converted to baseline funding. This has resulted in a decrease of the net risk rating from 12 to 8. The risk still sits outwith the Boards appetite for risks in the "Finance" category but has resulted in a reduction in the gap from 7 to 3.
- 6.1.3 Strategic Risk 9 - (relating to NES not putting sufficient measures in place to address ongoing cost and funding pressures). The net likelihood rating has been decreased due to the coherent management of the budget that has resulted in NES being consistency close to balance. This has resulted in a decrease of the net risk rating from 16 to 8. The risk continues to sit outwith the Board's appetite for risks in the "Finance" category but has resulted in a reduction in the gap from 11 to 3.

- 6.1.4 Strategic Risk 12 – (relating to insufficient investment in TURAS learn and other NES learning platforms). Following concerns raised by the Executive Team a further review of this risk has been undertaken. This assessment has resulted in the gross and net impact risk score being increased due to the Scottish Government Health Workforce Directorate confirming that they have no money for the TURAS refreshment and the impact this could have on the ability to deliver on NES's strategic objectives. This has resulted in the overall net risk rating being increased from 16 to 20. The risk now sits out with the agreed Board appetite, to support the mitigation of the risk discussions are ongoing with regards to investment with NES's Director of Finance and Scottish Government Health Finance's Director of Finance, who is supportive of the programme.
- 6.1.5 Strategic Risk 13 – (relating to the failure to recruit sufficient number of appropriately skilled and experienced staff). The net likelihood rating has been decreased due to the high numbers of applications that NES have recently received for a large proportion of vacancies advertised. This assessment has resulted in the overall net risk rating being decreased from 12 to 8. The risk continues to sit within the agreed Board appetite. Actions have been identified that will help to further mitigate the risk.
- 6.1.6 Escalated Risk - Strategic Risk 16 - (relating to the inability to meet core responsibilities and objectives due to HR Performance). This risk was approved by the Executive Team for escalation from the Workforce Directorate to the Strategic Risk Log due to it being no longer manageable at a directorate level. The risk is currently scored at a high rating of 15, with additional controls and actions identified to support further mitigation of the risk.
- 6.1.7 Within the next reporting period consideration will be given to the risk ratings of Strategic Risk 3 and 10 following a review of the Scottish Government Budget and any consequences identified that may impact on NES's funding.
- 6.1.8 All other Strategic Risks have been reviewed, and additional controls and actions have been strengthened where appropriate to support with the mitigation of individual risks, with updates on actions recorded.
- 6.1.9 Table 1 in Appendix 3 provides a summary of the current Net risk exposure across each of the categories within the Strategic Risk Register, with Table 2 providing the last reported position for reference. As can be seen there has been an increase to the Net exposure of Strategic Risks sitting with the Very high rating due to the increase of the net risk rating of Strategic Risk 12. In addition, there has been a decrease to the Net risk exposure of Strategic Risks sitting within the High rating and an increase within the Medium rating during this reporting period. This reflects the decrease of the net risk ratings to Strategic Risks 2, 9 and 13. The NES risk profile's highest percentage of risk continues to sit within the Governance and People/Workforce categories.

6.2 NES Board Risk Appetite

6.2.1 Presently 37.5% of Strategic Risks are sitting outwith the Board's risk appetite. This is mainly attributed to the risks within the Financial and Governance categories and reflects the Board's highly risk averse appetite in these areas. Further actions are being taken forward to control these risks and within this reporting period there has been a reduction in the gap above appetite to Strategic Risks 2 and 9. Risks sitting outwith the Board's agreed appetite will continue to be the focus of the Executive Team 'Deep Dive' discussions.

6.3 Strategic Risks Overall Control Rating

6.3.1 As part of the recent Strategic Risks reviews, individual risk owners have applied the new control assurance guidance to assess the effectiveness of the individual controls and the overall control ratings for each Strategic Risk.

6.3.2 The new control assurance guidance provides four options for assessing the overall risk control rating –

- Effective
- Acceptable
- Ineffective
- Not controlled

6.3.3 The current overall risk control ratings for each Strategic Risk is shown in Appendix 4. The risks now scored as 'Effective' are all within Board Appetite and are scored at a medium or low risk rating. The risks scored as 'Acceptable' are either outwith the Board Appetite or scored at a high-risk rating. In these cases, actions to improve the control environment are either underway or planned.

6.3.4 Following the recent assessment of Strategic Risk 12 the overall risk control rating has been re-scored as 'Ineffective' due to it now being scored as a very high risk with the potential of the risk materialising and sitting outwith Board Appetite. The newly escalated Strategic Risk (SR16) has also been scored as 'Ineffective', due to the key mitigation actions to improve the control environment still requiring regular monitoring and significant improvement in some areas required. Following a recommendation at the January 2025 Audit and Risk Committee the overall control rating of SR16 will be considered in line with the scoring of the risk when next reviewed.

6.3.5 The Board are asked to consider if they are content a consistent approach has now been taken on the overall control rating assessments for the Strategic Risks.

6.4 Directorate Risk Reporting

- 6.4.1 The Audit & Risk Committee approved a proposal for reporting directorate risks to Board Governance Committees at its January 2025 meeting. The report will align risks with strategic themes and individual measures and will enable reporting of individual directorates' risks allocated to standing committees.
- 6.4.2 With a view to sharing risk information more effectively with directorates and Board Governance Committees, a quarterly directorate risk report will be incorporated into all Governance Committees Risk Reports and will be applied in the Quarter 4 reporting. It is anticipated that the reports will provide a higher level of transparency, analysis and assurance that NES are managing risks at all levels of the organisation.

7. Recommendations

The NES Board is invited to:

- 7.1 To review and approve NES Strategic Risk Q3 update and provide any feedback as appropriate.
- 7.2 To consider and approve the current assessed overall control ratings for each of the Strategic Risks.

Author to complete **checklist**.

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

a) Have Educational implications been considered?

Yes

No

b) Is there a budget allocated for this work?

Yes

No

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

1. People Objectives and Outcomes

2. Partnership Objectives and Outcomes

3. Performance Objectives and Outcomes

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

Yes

No

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

Yes

No

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

Yes

No

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

Yes

No

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

Yes

No

Author name: Rob Coward, Debbie Lewsley, Jim Boyle

Date: January 2025

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 evolving needs and expectations of stakeholders	19/04/2023	03/03/2025	15	9	Strategic	12-16	
SR2	Disproportionate amount of non-recurrent funding, without conversion to recurrent funding	19/04/2023	10/03/2025	20	8	Finance	1-5	Gap 3
SR3	Failure to recruit and retain sufficiently experienced and knowledgeable people to the Board, Executive Team and senior management establishment	19/04/2023	03/03/2025	16	12	People/Workforce	12-16	
SR4	NES staff become disengaged	19/04/2023	03/03/2025	16	9	People/Workforce	12-16	
SR5	NES does not put in place an adequate corporate infrastructure to support the Transformation Route Map.	19/04/2023	03/03/2025	16	9	People/Workforce	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	04/03/2025	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	04/03/2025	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	04/03/2025	20	8	Operational	12-16	
SR9	NES does not put sufficient measures in place to address ongoing cost and funding pressures leading to misalignment with Scottish Government priorities and expectations.	19/04/2023	10/03/2025	25	8	Finance	1-5	Gap 3
SR10	Failure to adequately anticipate and mitigate the impacts of policy, legislative, economic, technological and societal change	19/04/2023	03/03/2025	12	12	Strategic	12-16	
SR11	Poor learning outcomes and learning experience for our stakeholders	19/04/2023	25/02/2025	16	9	Operational	12-16	
SR12	Insufficient investment in TURAS Learn and other NES learning platforms.	19/04/2023	28/04/2025	20	20	Operational	12-16	Gap 4
SR13	Failure to recruit sufficient number of appropriately skilled and experienced staff within NES.	19/04/2023	03/03/2025	12	8	People/Workforce	12-16	
SR14	Inadequate Board governance, systems, processes and scrutiny of them.	19/04/2023	03/03/2025	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	04/03/2025	12	6	Governance	1-5	Gap 1
SR16	Inability to meet core responsibilities and objectives due to HR Performance.	03/12/2024	03/03/2025	20	15	People/Workforce	12-16	

STRATEGIC RISK 1

Risk no:	SR1					
Risk Short Title:	NES Strategic Plan does not align with the evolving needs and expectations of stakeholders					
Risk Owner:	Karen Reid	Date Added to Register:	19/04/2023			
		Review Date:	03/03/2025			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	NES Board			
Risk Category(s)	Strategic	Reputational				
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
08/04/2024	9	Medium		Open	12-16	
20/06/2024	9	Medium	↔			
12/09/2024	9	Medium	↔			
03/12/2024	9	Medium	↔			
	-					

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

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

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

Existing control rating: Effective

Cause:		Effect:	
NES Strategic Plan does not align with the needs and expectations of stakeholders		This could lead to a failure of the NHS and social care workforce's ability to respond to the existing and changing health and social care needs of Scotland's population	
		Result:	
		This could result in high levels of dissatisfaction with the role of NES and loss of credibility as the statutory education, training, workforce development, data and technology provider in health and social care in Scotland. It could also mean that the health and social care workforce do not have the necessary skills and knowledge to meet the needs of the population.	
Control:	Effectiveness:	Actions:	Due Date:
1. Revised NES Strategic Plan clearly articulates the importance of education and training to a sustainable workforce and has been widely consulted upon	Effective - Consultation report and approval recorded in minutes. Associated Strategic KPIs	1. Executive engagement sessions with Territorial Health Boards, Health & Social Care Partnerships, Scottish Government, Social Care Sector and Academia to develop relationships and understanding of needs.	Ongoing
2. Annual Operating Plan, incorporating desired outcomes, forms the baseline for organisational activities	Effective - Approved by Exec Team and shared with NES Board and recorded in minutes.KPIs	2. ADP 2023/204 submitted to SG - Completed ADP 2024/2025 submitted to SG	Ongoing Yearly Submission
3. Development of focused communications to support management of stakeholder expectation in relation to NES capacity to deliver and support new systems development.	Effective - Communication Strategies and associated Action Plans.	3. Ongoing SG engagement and commissions to NES for social care workforce education and training	Ongoing
4. Work has been undertaken with NHS Boards, statutory education bodies in the four nations, and professional regulators, to mitigate disruption and allow trainees/learners to progress where possible.	Effective - Actively monitor trainees progression through their ARCP process.	4. Stakeholder Survey - stakeholders needs and expectations will be considered and analysed and will be reported to the November Board and will inform a refreshed Communications Plan. Update Dec 2024 - Analysis of the Stakeholder Survey 2024 has identified a number of areas for NES to focus on in order to align with the evolving needs and expectations of stakeholders. Feedback has suggested that whilst awareness of NES is relatively high, actions should go towards improving customer satisfaction. A report was presented to the November NES Board which highlighted the analysis and consequent action plan, including the need to: improve communications, create a consistency and cohesion of branding, develop a once for NES approach to communications and marketing and monitor and evaluate progress.	31/03/2025
5. The implications for NES from the Adult Social Care Review and the establishment of the National Care Service are discussed with our Sponsor Directorate and Mental Health & Social Care Directorate to allow for forward Planning	Effective - Ongoing discussions with sponsorship team and tripartite group meetings minuted.	5. Regular Temperature Checks undertaken to ensure we are meeting the needs of all of our stakeholders. 6. Implementation of the Involving People and Communities Policy	February 2025 January 2025

STRATEGIC RISK 2

Risk no:	SR2					
Risk Short Title:	Disproportionate amount of non-recurrent funding, without conversion to recurrent funding					
Risk Owner:	Jim Boyle	Date Added to Register:	19/04/2023			
		Review Date:	10/03/2025			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	NES Board			
Risk Category(s)	Finance					
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
04/03/2024	16	High		Averse	1-5	
05/06/2024	16	High	↔			
24/09/2024	12	High	↓			
10/12/2024	8	Medium	↓			
	-					

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

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

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

Existing control rating: Acceptable

Cause:		Effect:	
NES continues to experience a disproportionate amount of non-recurrent funding, without conversion to recurrent funding		We will have to rely on a high number of short-term and fixed-term contracts of employment in NES	
Control:		Result:	
1. NES Exec Team maintain strong engagement with relevant leads at Scottish Government, as well as with the Sponsorship Team		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	
Effectiveness:	Actions:	Due Date:	
Effective - Meetings take place fortnightly and quarterly and minuted.	1. Baselining and bundling impact will be assessed when proposals are made available by the Scottish Government, and will be reported to the Board at the earliest opportunity Update Nov 2023 - This is more likely to impact on 2024/25. Update June 2024 - This will be determined following SG deliverable workshops. Update Sept 2024 - Allocation letter received in July 2024 confirmed that £103m of funding will be moved from non-recurrent to baseline during 2024/25. That letter also confirmed 81% of expected allocations for 2024/25. Update Dec 2024 - Allocation letter received in Oct 2024 confirmed £108m will be moved from non-recurrent to baseline in this financial year.	31/03/2025	
2. Quarterly meetings with Scottish Government Health Finance Team and informal adhoc meetings weekly.	2. Any requests by Scottish Government to decommission any work streams will be fully considered by the Executive Team, considering education and training impacts, as well as staffing and financial implications	Ongoing	
3. Maintain clarity in relation to NES's role and influence - through regular engagement with SG sponsor team, and relevant executive director groups, including SAMD, SEND, DoFs and HRDs.	3. NES will be involved in discussions with SG policy teams, the Sponsorship Team and NHS Health. Finance to determine what existing non-recurrent funding can be moved to the NES baseline and how outcomes can be shaped to fit with any revised baseline. Update June 2024 - SG have set up deliverable workshops in May and June with policy and finance teams with NES to discuss the move of non-recurring funding to baseline. Transfers to baseline will be confirmed in our allocation letter during the year. Update August 2024 - Allocation letter received in July 2024 confirmed that £103m of funding will be moved from non-recurrent to baseline during 2024/25. That letter also confirmed 81% of expected allocations for 2024/25. Update Sept 2024 - Letter from Cabinet Secretary to Parliament Finance Committee reviewed to determine any potential implications for NES and these have been assessed as minimal at present. Update Dec 2024 - Further mitigation provided following Deliverable Workshops with SG policy teams, which indicated further conversions to recurrent funding in future years.	31/03/2025	
4. Chief Executive and NES Directors maintain links with other UK organisations	Effective - Outcomes of meetings recorded.		
5. Executive Team actively and regularly consider risk in extending posts and in converting posts to permanent. Funding is carefully considered as part of these decisions	Effective - recorded in minutes.		

STRATEGIC RISK 3

Risk no:	SR3					
Risk Short Title:	Failure to recruit and retain sufficiently experienced and knowledgeable people to the Board, Executive Team and senior management establishment					
Risk Owner:	Karen Reid	Date Added to Register:	19/04/2023			
		Review Date:	03/03/2025			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	Staff Governance Committee			
Risk Category(s)	People/Workforce					
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
08/04/2024	8	Medium		Open	12-16	
18/06/2024	8	Medium	↔			
20/09/2024	12	High	↑			
03/12/2024	12	High	↔			
	-					

Gross Impact (1-5)	Gross Likelihood (1-5)	Net Impact (1-5)	Net Likelihood (1-5)	Board Risk Appetite v Net Total	
4	4	4	3	Open	12-16
Gross Total:	16	Net Total:	12	High	12

Existing control rating: Effective

Cause:		Effect:	
NES fails to recruit and retain sufficiently experienced and knowledgeable people to the Board, Executive Team and senior management establishment due to insufficient recruitment and succession planning		This would impact the continuity of effective leadership, management and governance of NES	
		Result:	
		This would result in a deterioration of NES performance and credibility at all levels and would increase the risk of serious failures in governance	
Control:	Effectiveness:	Actions:	Due Date:
1. NES has access to a wide pool of nationwide talent in terms of non-executive recruitment and has a robust process and a good track record for attracting high quality candidates when Board vacancies occur.	Effective - Process in place including Aspiring Chair Programme.	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. Update June 2024 : The Succession Planning cycle is mid process, which has been aligned with the PDP cycle. Cohort 2 roles identified and agreed by the Executive Team. Cohort 2 launched at the end of March with communications and supporting sessions put in place throughout the first quarter. Managers undertaking career developments conversations which will provide a readiness rating against each of the roles. This will be presented to the ET in mid July. Update Sept 2024 - Been updated to Staff Governance Committee to provide assurance. Update Dec 2024 - Moving into the 2nd year of the process and extending it from Exec Team plus to other senior roles with this round coming to a close in March 25. A paper will be developed to go to ET at the start of Feb 25 to outline how we make it BAU and how we align it to the national succession planning programme.	03/03/2025
2. NES recruits executives and senior managers from across the public and private sectors to ensure a wide spread of skills and experience in its senior leadership.	Effective - Data available from recruitment system dependent on recruitment route.	Update June 2024 : The Succession Planning cycle is mid process, which has been aligned with the PDP cycle. Cohort 2 roles identified and agreed by the Executive Team. Cohort 2 launched at the end of March with communications and supporting sessions put in place throughout the first quarter. Managers undertaking career developments conversations which will provide a readiness rating against each of the roles. This will be presented to the ET in mid July. Update Sept 2024 - Been updated to Staff Governance Committee to provide assurance. Update Dec 2024 - Moving into the 2nd year of the process and extending it from Exec Team plus to other senior roles with this round coming to a close in March 25. A paper will be developed to go to ET at the start of Feb 25 to outline how we make it BAU and how we align it to the national succession planning programme.	
3. A programme of executive and senior manager development and succession planning is in place to make sure that those in post are given the opportunity to develop in the role, and to acquire new professional skills and experience. This includes mapping of key roles; a process to identify potential successors; work with potential successors on individual development plans.	Effective - PDP and Annual Reviews.	2. The Non-Executive Board Skills and Experience Matrix is updated on an annual basis. Update Sept 2024 - This is currently being updated. Update Dec 2024 - Annual Update completed October 2024.	Ongoing
4. Senior leaders are encouraged to participate in a wide range of national professional networking groups to make sure they have access to best practice across the sector.	Effective - Minutes of meetings/events attended.	3. The vacancy for the Co-opted BMA member to the SGC, nominated by the PF is being actively managed. Update Dec 2024 - BMA member was co-opted at the 7th November SGC. Action Closed	Closed
5. The non-executive director membership of the Board and the Co-opted membership of the Board Committees, reflects the correct skills and experience required to govern the organisation.	Effective - The Non-Executive Board Skills and Experience Matrix	4. The second appointment round for the non exec through the Public Appointment Unit (PAU) has commenced. Update Sept 2024 - Advert will be issued 17 September 2024 aiming to fill the current non-executive director vacancy by January 2025 Update Nov 2024 – Shortlisting has been progressed and interviews are scheduled for 14 November aiming to fill the current non-executive director vacancy by January 2025. Update Dec 2024 - Interviews completed and recommendation sent to minister.	31/01/2025
6. Members are Co-Opted annually to cover and any skills and experience gaps on the EQC and the TIC	Effective - ToR's, membership, committee annual reports and minutes of meetings.	5. Successful appointment of Dental Director and Postgraduate Dean, effective from 1st January 2025. Recruitment process for Director of People and Culture Vacancy in progress. Update Dec 2024 - Recruitment process for Director of People and Culture vacancy to commence 13/01/2025.	31/04/2025

STRATEGIC RISK 4

Risk no:	SR4				
Risk Short Title:	NES staff become disengaged				
Risk Owner:	Karen Reid	Date Added to Register:	19/04/2023		
		Review Date:	03/03/2025		
		Frequency of Review:	Quarterly		
		Committee/Group overseeing	Staff Governance Committee		
Risk Category(s)	People/Workforce				
Risk impacts on NES Strategy Key Area of Focus :					
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite	Within Board Appetite
08/03/2024	6	Medium		Open	12-16
18/06/2024	6	Medium	↔		
20/09/2024	9	Medium	↑		
03/12/2024	9	Medium	↔		
	-				

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

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

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

Existing control rating: Effective

Cause:	NES does not adequately engage with its employees, or does not adequately provide for its wellbeing and pastoral care of staff and trainees for whom we have responsibility for.			Effect:	There could be a breakdown in understanding of the roles that employees play and the contributions that are expected of them in the delivery of the Strategic Plan and the individual Directorate Operational Plans		
				Result:	That could result in a significant deterioration in NES' ability to deliver on those plans		
Control:	Effectiveness:	Actions:	Date Due:				
1 - Strong partnership working arrangements in place and maintained through regular contact with the Employee Director and via the Change Management Programme Board.	Effective - Minutes of Partnership Forum and Change Management Programme Board.	1. iMatter action plans by iMatter Teams are completed and submitted annually. Update Sept 2024 - This year our response rate was 87% (88% in 2023) and our Employee Engagement Index (EEI) score was 84 (85 in 2023). There were 213 iMatter teams included this year and 185 also submitted an action plan which is an improvement on last year (172 of 207 teams). Update Dec 2024 - The overall response rate and EEI remained consistently high for NES compared to the 2023 survey results. Our EEI continues to also be the highest across NHS Scotland.	Ongoing Yearly Submission				
2 - Communication plan to be a key focus on all organisational change projects.	Effective - Plan approval route recorded in minutes.	2. Continue to increase attendance at monthly directorate townhalls/webinars. Update Sept 2024 - Attendance figures for last 3 webinars - 468,433,434. Q&A's from all sessions are shared with all NES staff by NES Comms Team. Update Nov 2024 - 83 attended Sept Sustainability Webinar and 126 attended Speak Up Week Oct Webinar.	Ongoing				
3 - Strong focus on communication and visibility, both at a corporate and directorate level through, for example, monthly directorate townhalls and executive led webinars enabling 2 way participation.	Effective - Townhalls, webinars and talking heads.	3. Increase all staff communications via intranet. 4. NES Comm are given the results of the NES biannual inclusion survey to provide feedback and enable appropriate action.	Ongoing Ongoing				
4 - Strong focus on support to line managers through the line managers network.	Effective - Line Managers Handbook - and Line Managers Network	5. Part of Operational and Budget Planning for 25/26, NES develops a plan for the timely communication to temporary staff whose contracts are due to end 31st March 2025.	31/01/2025				
5 - Organisational priority to complete team action plans resulting from annual iMatter NHS Scotland employee survey exercise.	Effective - Action Plans recorded and progress reported to Board and Governance Committees and recorded in minutes.	6. Maintain focus through Operational Planning on reasonable expectations of staff in a constrained fiscal environment.	31/01/2025				
6 - Wellbeing Matters Hub launched on 22 March 2024. This is a one-stop shop for health and wellbeing. The Hub is hosted on TURAS and provides resources offering information, practical tools, and top tips around the four pillars of wellbeing: healthy work, healthy mind, healthy life, and healthy body.	Effective - Monthly all staff communications informing staff of any changes and future events/resources.	7. ET, SIG and SOLG Development Days scheduled for November 2024 and February 2025. Update Dec 2024 - November session taken place, feedback and outcomes of session to be discussed at ET in January 2025.	31/03/2025				
7 - NES biannual inclusion survey to include communication measure.	Effective - Results of survey shared with ET and Staff Governance Committee and action plans implement including the Anti Racism Plan.						

STRATEGIC RISK 5

Risk no:	SR5					
Risk Short Title:	NES does not put in place an adequate corporate infrastructure to support the Transformation Route Map.					
Risk Owner:	Karen Reid	Date Added to Register:	19/04/2023			
		Review Date:	03/03/2025			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	Staff Governance Committee			
Risk Category(s)	People/Workforce	Reputational				
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
08/04/2024	9	Medium		Open	12-16	
18/06/2024	9	Medium	↔			
20/09/2024	9	Medium	↔			
03/12/2024	9	Medium	↔			
	-					

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

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

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

Existing control rating: Effective

Cause: 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 drive improvements in transformation and best value.		Effect: NES might not adequately deliver the aims of its own Strategic Plan or the external commissions agreed with the Scottish Government	
		Result: This could result in NES having insufficient corporate infrastructure staff to support delivery of the AOP, Transformation Activity and potential efficiency savings. Resulting in reputational damage and impact on stakeholder engagement.	
Control:	Effectiveness:	Actions:	Due Date:
1. Worforce Planning takes place alongside AOP processes so that resourcing can be aligned on an annual basis.	Effective - Recorded in AOP documentation.	1. Ongoing Process with Corporate Radar	Ongoing
2. In year changes to resourcing are made in alignment with in year consideration of new projects through the Corporate Radar process.	Effective - Corporate Radar projects considered at ET and recorded in minutes.		
3. Post prioritisation process considers requirements of Transformation Projects.	Effective - Issues associated with funding posts required to deliver the AOP/Corporate Radar projects discussed at ET and outcomes recorded in minutes.	2. Digital Prioritisation Process - ensuring capacity is aligned to requirements.	Ongoing
4. Recruitment authorisation and other recruitment processes strengthened with the aim of achieving a more efficient, risk-based approach reducing time across NES and, all things being equal, reducing the time to recruit new staff.	Effective - ET sub group in place with timely homogeneous and communication of decisions.	3. Implement accelerated recruitment process as approved by ET 13/08/2024 (exception ET roles) In October 2024 and in Jan 2025 carry out a 3 months post implementation evaluation for update to the ET.	31/03/2025
5. Ongoing discussions with Scottish Government regarding commissioned activity and the baselining of non-recurrent allocations where appropriate. Corporate process to ensure centralised view of new commissions and impact on infrastructure in place .	Effective - Corporate Radar in place and deliverable agreements with SG.		
6. Temporary expanded resources to support PMO and corporate improvement through Project Based Development Opportunities.	Effective - Register of all applicants held.		

STRATEGIC RISK 6

Risk no:	SR6					
Risk Short Title:	Failure to develop and maintain adequate Business Continuity arrangements to deal with the risk of adverse events and threats					
Risk Owner:	Christopher Wroath	Date Added to Register:	19/04/2023			
		Review Date:	04/03/2025			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	Technology & Information Governance			
Risk Category(s)	Governance	Operational				
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
13/03/2024	9	Medium		Averse	1-5	
02/07/2024	9	Medium	↔			
20/09/2024	9	Medium	↔			
04/12/2024	9	Medium	↔			
	-					

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

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

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

Existing control rating: Acceptable

Cause: 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		Effect: There may be an inability to deliver normal levels of service, or even an inability to deliver services at all in extreme circumstances.	
		Result: This could result in failure to achieve strategic outcomes.	
Control:	Effectiveness:	Actions:	Due Date:
1. Disaster Recovery Plan and Business Continuity Plans have been approved by the Executive Team.	Effective - approval recorded in minutes.	1. Outside contractors been engaged to complete and close all relevant KMG Audit actions to an agreed timetable with CEO. Update June 2024 - Action completed and this will feed into the September Audit.	Closed
2. The plans were robustly tested in a desktop exercise and recommendations were considered by the ET and incorporated into the current version of the plans.	Effective - Exercise formally documented and recorded in minutes.	2. Participating in KPMG BCP Internal Audit - all documentation has been passed to KPMG for review and Audit Report will be presented to January 2025 Audit & Risk Committee Update Dec 2024 - Audit completed and will be presented at January ARC and actions will be progressed.	31/03/2025
3. NTS have agreed to an internal audit on BCP on an emphasis on disaster recovery on cloud data, audit to commence September 2024.	Effective - Audit presented to ARC and documented in minutes		

STRATEGIC RISK 7

Risk no:	SR7					
Risk Short Title:	Failure to put in place measures to adequately protect against breaches of cyber security					
Risk Owner:	Christopher Wroath	Date Added to Register:	19/04/2023			
		Review Date:	04/03/2025			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	Technology & Information Committee			
Risk Category(s)	Governance	Operational				
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
13/03/2024	15	High		Averse	1-5	
02/07/2024	15	High	↔			
20/09/2024	15	High	↔			
04/12/2024	15	High	↔			
	-					

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

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

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

Existing control rating: **Acceptable**

Cause:		Effect:	
NES does not put in place measures to adequately protect itself against breaches of cyber security		This could lead to unauthorised access to NES digital systems and data	
		Result:	
		This could significantly affect our ability to continue normal business operations and would risk reputational damage and the imposition of punitive financial fines by regulatory authorities	
Control:	Effectiveness:	Actions:	Due Date:
1. Digital team ensures firewall logs, including changes to the firewall rule base, are added to the (Security Information and Event Management) SIEM tool in use and continue to be monitored frequently	Effective - The standard build for end user Windows devices and servers has been documented in the Windows 10 Endpoint Security Standards and in the VMWare tool for servers.	1. Continue to use the NIS Audit framework to manage and build on NES' cyber security posture. - Ongoing	Ongoing
2. Senior Management and Executive level involvement and oversight of Cyber security related risk through updates in the Technology and Information Committee and Audit & Risk Committee meetings and through the NES Assurance Group.	Effective - Minutes of NES Assurance Group shared with TIC and ARC.	2. Review our early adoptor status for the NHSS Security Operations Centre (Dundee). Update Sept 2024 - In progress Update Dec 2024 - In progress	31/03/2025
3. Staff awareness of Cyber security matters is raised through information security webinars provided by the Information Security Manager, which includes phishing emails and security regarding the use of public Wi-fi, reporting security breaches and determining key NES contacts, password guidance, information / data management under GDPR as well as analysing key current trends in Cybercrime.	Effective - Attendance numbers available/ number of security breaches recorded and reported to NES Assurance Group and TIC and minuted.	3. Identifying capacity for Cyber Security support post to join the Infrastructure and Operations Group within NTS. Update June 2024 - Been reviewed as part of the I&O resource plan. Update Sept 2024 - Now have identified resource in the plan that will be progressed in the coming months. Update Dec 2024 - Action Closed resource in place	Closed

STRATEGIC RISK 8

Risk no:	SR8					
Risk Short Title:	Failure to put sufficient employee training and other operational controls in place to minimise the risk of breaches of Information Governance					
Risk Owner:	Christopher Wroath	Date Added to Register:	19/04/2023			
		Review Date:	04/03/2025			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	Technology & Information Committee			
Risk Category(s)	Operational	Reputational	Governance			
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
13/03/2024	8	Medium		Open	12-16	
02/07/2024	8	Medium	↔			
20/09/2024	8	Medium	↔			
04/12/2024	8	Medium	↔			
	-					

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

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

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

Existing control rating: Effective

Cause:		Effect:	
NES does not put sufficient employee training and other operational controls in place to minimise the risk of breaches of Information Governance		There could be instances of significant loss of data	
		Result:	
		This could result in serious reputational damage and the imposition of punitive financial fines by regulatory authorities.	
Control:	Effectiveness:	Actions:	Due Date:
1. Statutory and relevant data security processes in place, with specific reference to the new General Data Protection Regulations.	Effective - Processes approved and recorded in minutes	1. NES' Executive Team to increase all IG/IT security training to mandatory. Update March 2024 - Action Closed Mandatory Training implemented.	Closed
2. Specific additional policies, procedures and practices (based on ISO27001) have been put in place to ensure robust security applies to the TURAS platform and the being developed National Digital Platform.	Effective - Policies and procedures approved and recorded in minutes.		
3. Whistleblowing arrangements are in place with information and resources available to staff via the Intranet including Whistleblowing standards, policy and process. These resources include reference to whistleblowing in relation to loss or misuse of data and are part of the essential learning programme for all NES employees.	Effective - Whistleblowing Annual Report presented to governance committees and board and recorded in minutes.		
4. Safe Information Handling features as an element of the NES essential learning programme.	Effective - Executive Team regularly review compliance which is minuted.		

STRATEGIC RISK 9

Risk no:	SR9					
Risk Short Title:	NES does not put sufficient measures in place to address ongoing cost and funding pressures leading to misalignment with Scottish Government priorities and expectations.					
Risk Owner:	Jim Boyle	Date Added to Register:	19/04/2023			
		Review Date:	10/03/2025			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	NES Board			
Risk Category(s)	Finance					
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
01/02/2024	16	High		Averse	1-5	
01/07/2024	16	High	↔			
24/09/2024	16	High	↔			
10/12/2024	8	Medium	↓			
	-					

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

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

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

Existing control rating: Acceptable

Cause:		Effect:	
NES does not put sufficient measures in place to address ongoing cost and funding pressures as well as a high level of non-recurrent funding from SG		NES will experience financial constraints and will risk the inability to set sustainable financial plans and to take remedial actions necessary to remain in financial balance	
Control:		Result:	
		This could then result in failure to meet the aspirations set out in the Strategic Plan as well as having an increased risk of not being able to control the finances of NES	
Control:	Effectiveness:	Actions:	Due Date:
1. The Annual Operational Planning process within NES gives Directorates indicative budgets to plan their own activities and expenditure and identifies cost pressures and potential savings across NES.	Effective - AOP process in place. Lesson learned logged and actioned. AOP reported to NES Board	1. The financial implications of any requests to decommission specific activities, or to reduce funding generally will be fully explored, with the financial, staffing and service impacts fully set out	Ongoing
2. The Senior Operational Leadership Group, chaired by the Director of Planning reviews budget submissions from across NES to ensure congruence, no duplication and identify opportunities for collaboration and efficiency savings.	Effective - recorded in minutes.	2. The Operational Planning process for 2024/25 will have a significantly sharpened focus on the achievement of savings, as required by the SG's Sustainability & Value programme, and with the increasing likelihood of reductions to baseline funding. Update June 2024 - 2025/26 planning process will have a greater focus on cost reduction and this work is underway. This will tie into the work of the Business Transformation Board.	31/03/2025
3. Prioritisation process in place to deliver a balanced budget to the Board which is based on the impact of the planned activities.	Effective - decisions recorded in ET minutes.	Update Sept 2024 - Operational Planning guidance has now been issued to all Directorates with a sharp focus on identifying spending reduction options for the three year period. Update Dec 2024 - Directorate reviews completed in process of consolidating report to present to December 2024 ET and subsequently to January 2025 ARC.	
4. NES Board considers measures and makes approvals to balance the annual budget, including the measures suggested by the ET to reach a balanced position.	Effective - recorded in Board minutes.	3. NES are working with SG to identify how baseline and additional commission activity can be modelled to match reduced funding availability.	Ongoing
5. Close working with SG to address the underlying deficit resulting from the expansion of TGs and uplifts that have been less than cost pressures in this area. SG have agreed to underwrite the in-year deficit position on MTG's.	Effective - recorded in minutes	4. Implications and risks of reducing activity will be set out for SG to allow decisions to be taken in the full knowledge of their impact to the wider NHS in Scotland. Update June 2024 - Discussions taken place about sharing NES spending reduction plans at an earlier stage with Scottish Government colleagues. Update Dec 2024 - Discussion will take place with SG in January 2025.	31/03/2025
6. Letter been sent to all staff from CEO directing suspension of discretionary spending where possible.	Effective - recorded		

STRATEGIC RISK 10

Risk no:	SR10					
Risk Short Title:	Failure to adequately anticipate and mitigate the impacts of policy, legislative, economic, technological and societal change					
Risk Owner:	Karen Reid	Date Added to Register:	19/04/2023			
		Review Date:	03/03/2025			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	NES Board			
Risk Category(s)	Strategic					
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
08/04/2024	12	High		Open	12-16	
20/06/2024	12	High	↔			
12/09/2024	12	High	↔			
03/12/2024	12	High	↔			
	-					

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

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

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

Existing control rating: Effective

Cause: NES is not able to adequately anticipate and mitigate the impacts of policy, legislative, economic, technological and societal change		Effect: We may be unable to attract, educate and train sufficient workforce supply, across the health and social care workforce, and in particular trainees and employees in specialist professional disciplines	
		Result: This could result in a compromise in our ability to deliver on our Strategic Plan or significant parts of it, or to deliver Directorate Operational Plans	
Control:	Effectiveness:	Actions:	Due Date:
1. There are many regular engagements with a wide range of stakeholders - governmental, professional, peer Boards - to ensure that NES is aware of changes to policy, demographic trends, technological change, which will feed into the NES Strategic Plan	Effective - NES Strategic Plan approval route minuted, minutes of meetings.	1. Significant Engagement with Health Boards, Health & Social Care Partnerships, Scottish Government, Social Care Sector and Academia.	Ongoing
2. Scottish Government Priorities are fully discussed with the NES/SG Sponsorship Team and are then incorporated into the Annual Delivery Plans that drive the core activity of the Board	Effective - Annual Delivery Plans approval route minuted and minutes of meeting	2. Ongoing SG discussions on fiscal impact on NES ADP.	Ongoing
3. Monitoring of Strategic Risk 2 in relation to funding in current fiscal and political environment.	Effective - Review of Strategic Risk Log minuted.	3. Policy Parliamentary Team within NES meets regularly with Scottish Government.	Ongoing
4. Parliamentary Horizon Report - issued to all Executive Team and NES Board.	Effective - Issued weekly and outputs provided to Executive Team and recorded	4. Strengthening financial reporting to be implemented.	Ongoing
5. Engagement with four nations to pick up national issues that may impact NES or the Scottish context.	Effective - Attendance at four nations working groups minuted.	5. Quarterly UK Four Nations Meetings - actions from meetings progressed by NES Chief Executive, Director of NMAHP and Executive Medical Director.	Ongoing

STRATEGIC RISK 11

Risk no:	SR11					
Risk Short Title:	Poor learning outcomes and learning experience for our stakeholders					
Risk Owner:	Karen Wilson	Date Added to Register:	19/04/2023			
		Review Date:	25/02/2025			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	Education & Quality Committee			
Risk Category(s)	Operational	Reputational				
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
05/03/2024	9	Medium		Open	12-16	
03/06/2024	9	Medium	↔			
03/09/2024	9	Medium	↔			
27/11/2024	9	Medium	↔			
	-					

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

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

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

Existing control rating: Effective

Cause:		Effect:	
NES delivers poor learning outcomes or a poor quality learning experience to our stakeholders, or if we are inflexible in evolving the methods of delivery of training and education		This could lead to the Health and Social Care workforce not having the necessary knowledge and skills to deliver good quality care	
		Result:	
		This could result in NES becoming disconnected from the needs of the wider workforce and failing to meet the needs of staff, trainees, learners and stakeholders, leading to serious reputational damage and reassessment of the Board's role in delivering education and training	
Control:	Effectiveness:	Actions:	Due Date:
1. Chief Executive and/or NES Directors maintain open and collaborative relationships/arrangements with counterparts in partner organisations	Effective - Minutes and reports available for meetings and presentations minuted and available.	1. Development of a Learning & Education Strategy. Update March 2024 - Learning & Education Strategy approved by February 2024 Board - moving into implementation.	Closed
2. Ensure Chair is well briefed to manage relationships with other Board/organisational Chairs	Effective - Report presented to every NES Board public meeting.	2. 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. Update June 2024 - Action complete Strategy approved at ELG and Executive Team	Closed
3. Parliamentary monitoring service provides daily briefing to NES Executives and senior managers. Board papers and minutes made available on NES corporate website. Discussions about pressures and national developments at ET are communicated to staff through regular staff video and Intranet updates	Effective - Briefings available, ET minutes and Q&As from webinars and other staff events.	3. Learning and Education Framework being developed. Update June 2024 - Pilot Framework launched May 2024 - action to remain open until feedback received and final version published. Update Sept 2024 - Feedback received and being considered, expected final version to be published Nov 2024. Update Dec 2024 - Framework finalised awaiting implementation.	31/03/2025
4. Widespread evaluation of education programmes, including the use of feedback from learners to effect improvement.	Effective - Reported through Strategic KPIs when fully developed. Feedback received as part of Stakeholder Survey.	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. Update June 2024 - Continuing to progress within project timelines. Update Sept 2024 - Continuing to progress within project timelines and significant improvement in KPI data for reporting. Update Dec 2024 - Moving into implementation stage using a Blueprint approach. Developing set of core questions to ask learners feedback questions that will be applied to all NES products.	31/03/2025
5. Education Governance arrangements in place to ensure quality and performance is monitored and improved where necessary.	Effective - Considered at EQC regularly and minuted.	5. Development of Clinical & Care Governance sub group.	31/01/2025

STRATEGIC RISK 12

Risk no:	SR12					
Risk Short Title:	Insufficient investment in TURAS Learn and other NES learning platforms.					
Risk Owner:	Christopher Wroath	Date Added to Register:	19/04/2023			
		Review Date:	28/04/2025			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	Technology & Information / Education & Quality Committee			
Risk Category(s)	Operational	Reputational				
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
13/03/2024	12	High		Open	12-16	
02/07/2024	12	High	↔			
20/09/2024	12	High	↔			
04/12/2024	16	High	↑			
28/01/2025	20	Very High	↑			

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

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

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

Existing control rating: Ineffective

Cause:		Effect:	
NES do not sufficiently invest in technology that supports learning outcomes including the TURAS learning platform as well as other learning platforms provided by NES.		This would lead to the NES being unable to meet the learning needs and expectations of all stakeholders	
		Result:	
		This could result in NES becoming disconnected from the needs of the wider workforce and failing to meet the needs of staff, trainees, learners and stakeholders, leading to serious reputational damage and reassessment of the Board's role in delivering education and training	
Control:	Effectiveness:	Actions:	Due Date:
1. A significant amount of time and resource is invested to establish the learning needs of a very wide stakeholder group	Effective - Fully documented.	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. Update June 2024 - Action Completed	Closed
2. Strategic case for investment has been prepared for discussion with the Scottish Government	Effective - OBC approval route recorded in minutes.	2. Transformational Group need to agree Phase 2 outcomes of the Turas Refresh Programme. Turas Refresh Programme Full Business Case in development. Update Sept 2024 - Expected date for submission of FBC - February 2025	31/03/2025
3. Turas Refresh Programme as part of Transformation Programme.	Effective - Programme reports progress to LEQS Board and Transformation Group which are minuted.	3. Discussions on going with regards to investment with NES Director of Finance and SG Health Finance Director of Finance who is supportive of the programme.	31/03/2025

STRATEGIC RISK 13

Risk no:	SR13					
Risk Short Title:	Failure to recruit sufficient number of appropriately skilled and experienced staff within NES.					
Risk Owner:	Karen Reid	Date Added to Register:	19/04/2023			
		Review Date:	03/03/2025			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	Staff Governance Committee			
Risk Category(s)	People/Workforce					
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
08/04/2024	12	High		Open	12-16	
18/06/2024	12	High	↔			
20/09/2024	12	High	↔			
03/12/2024	8	Medium	↓			
	-					

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

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

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

Existing control rating: Effective

Cause:		Effect:	
Failure to recruit sufficient number of appropriately skilled and experienced staff within NES.		NES having insufficient staff to support delivery of the AOP, Transformation Route Map and Strategic Plan	
		Result:	
		This could result in reputational damage and impact on stakeholder engagement.	
Control:	Effectiveness:	Actions:	Due Date:
1. Monitoring and continuously improving job packs to ensure they attract an appropriate number of high quality candidates.	Effective - Job packs available on intranet, evaluation scheduled April 2025. Data available from ERRS.	1. Work with Higher/Further Education establishments in Scotland, in addition to targeted Third Sector and related bodies to support greater apprenticeship opportunities and related early career routes.	Ongoing
2. Monitoring and continuously improving recruitment routes eg career sites, social media to ensure they attract an appropriate number of high quality candidates.	Effective - Accelerated Recruitment Programme. Wider use of corporate social media, targeted professional networks, alternative job posting platforms.	2. The Armed Forces Talent Programme (AFTP) team will continue to engage, influence and deliver in support of the territorial and national board efforts to attract more talent from the Armed Forces Community (AFC).	Ongoing
3. Monitoring our workforce data to identify actions to improve the diversity of the workforce.	Effective - Annual workforce E&D report published and presented to Board and Governance Committees and recorded in minutes.	3. The NES Equality & Human Rights Team continue to promote and offer learning opportunities to staff on ED&I, including 'conscious inclusion' sessions, anti-racism, cultural humility, promoting of learning and guidance from the business disability forum and also guidance for mitigating bias during recruitment. New EDI Strategy and action plan being produced for 2025-2029. Team completing work in relation to gender equality as part of the Equally Safe at Work accreditation programme.	31/03/2025
4. Monitor and report on the composition of the NES workforce and sex/gender/ethnicity/disability pay gaps to the Board.	Effective - Annual Workforce Report presented to Board and Governance Committees and recorded in minutes.	4. Development of Talent Attraction Strategy. 5. Workforce planning to be carried out across NES as part of the 25/26 Operational Planning process.	31/03/2025 31/03/2025
5. Risk based decisions regarding termination of temporary staff in the event of uncertainty of funding.	Effective - Decisions recorded in ET minutes.	6. Finance/HR and Planning to advise the CEO on risk based decisions needed during FY 24/25 so that decisions on the retention or termination of staff in temporary contractual arrangements can be made in a timely fashion and be communicated in a planned way to staff.	31/03/2025
6. Workforce planning is integrated in Operational Planning	Effective - Included in AOP documentation.		

STRATEGIC RISK 14

Risk no:	SR14					
Risk Short Title:	Inadequate Board governance, systems, processes and scrutiny of them.					
Risk Owner:	Karen Reid	Date Added to Register:	19/04/2023			
		Review Date:	03/03/2025			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	NES Board			
Risk Category(s)	Governance					
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
08/04/2024	4	Low		Averse	1-5	
20/06/2024	4	Low	↔			
12/09/2024	4	Low	↔			
03/12/2024	4	Low	↔			
	-					

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

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

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

Existing control rating: Effective

Cause:		Effect:	
NES does not put sufficient arrangements in place in relation to Board governance, systems, processes and scrutiny of them		This could lead to corporate non-compliance and failure to comply with statutory, legislative and climate emergency/sustainability requirements	
		Result:	
		This could result in a loss of credibility towards the Board, from the Scottish Government as well as a range of audit and scrutiny bodies, which could pose a threat to the general credibility and future of NES	
Control:	Effectiveness:	Actions:	Due Date:
1. Standing committees responsible for each governance domain supported by Executive Groups.	Effective - Terms of Reference, Schedule of Business. Governance Route Flowchart, Assurance Framework.	1. Development of Blueprint Action Plan to strengthen governance. Update June 2024 - Action Plan submitted to Scottish Government and ongoing actions reported through ARC	Ongoing
2. Individual committees review effectiveness at every committee meeting and provides an annual report to Audit Committee detailing how it has discharged its remit.	Effective - Annual reports and minutes of meetings.	2. ET review outstanding Audit actions - quarterly	Ongoing
3. Comprehensive programme of internal audit.	Effective - Approved and recorded in minutes.	3. Scottish Government sign off of ADP - completed 2023/24 Update June 2024 - Verbal feedback received from Scottish Government awaiting final sign off.	Ongoing
4. Board Governance included as part of Corporate Induction.	Effective - Induction Attendance Records/ Participant Feedback	Update Sept 2024 - Written acceptance of ADP received from Scottish Government and presented to August 2024 Board. Update Dec 2024 - Development of 2025/26 ADP underway.	Yearly Submission
5. An Assurance framework has been developed in line with the 'Blue Print for Governance' and the Assurance and Audit Committee Handbook .	Effective - Approval route recorded and minuted.	4. Board Governance Training at Board Development Events Update June 2024 - Board Governance Development Event completed 19th January 2024.	Ongoing
6. Blueprint Action Plan been submitted to Scottish Government.	Effective - Approval route recorded and minuted.	5. 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. Update June 2024 - Action closed as agreed at ARC and Board that this work would be paused and superseded by Action 6.	Closed
7. Ensure corporate awareness of relevant statutory regulatory oversight, and maintain close working with relevant professional and other regulatory bodies	Effective - Annual report to EQC on compliance with statutory regulations and professional bodies requirements, recorded and minuted.	6. Take forward due diligence review against legislative and public duties. Update Sept - Review undertaken and 1 area of noncompliance identified (reporting of trade union time). Arrangements being put in place within an appropriate schedules of business to secure compliance. Update Dec - Schedule of business of relevant committee has been adapted. Action Closed.	Closed
		7. Internal Audit of Board Governance scheduled for 2025/26.	31/08/2025



STRATEGIC RISK 15

Risk no:	SR15					
Risk Short Title:	NES is not an evidence based data driven organisation, lacking intelligence and insights from its Information Assets.					
Risk Owner:	Christopher Wroath	Date Added to Register:	14/12/2023			
		Review Date:	04/03/2025			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	Technology & Information Committee			
Risk Category(s)	Governance	Reputational	Strategic			
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
13/03/2024	6	Medium		Averse	1-5	
02/07/2024	6	Medium	↔			
20/09/2024	6	Medium	↔			
04/12/2024	6	Medium	↔			
	-					

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

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

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

Existing control rating: Acceptable

Cause:		Effect:	
Lack of strategic application of data quality standards. Lack of outcome focussed in our information gathering and structures.		Inefficiency and waste of resources in all aspects of NESs work in support of our strategic outcomes.	
		Result:	
		This could result in a loss of credibility towards NES, from the Scottish Government and scrutiny bodies, which could pose a threat to the general credibility and future of NES	
Control:	Effectiveness:	Actions:	Due Date:
1. Transformation Programme is now operational. There is a specific focus from the Corporate Improvement Programme on efficiency and effectiveness of data collection, storage and management.	Effective - Meetings minuted and regular reports on progress presented and recorded at Transformation Group.	1. Development of an overt data plan as part of the Corporate Improvement Plan. Update Sept 2024 - In progress	31/03/2025
2. Plans for automation and preparation for artificial intelligence will drive new and improved data collection, storage and management.	Not Tested	2. Planned rollout of CoPilot to all NES staff on completion of the pilot. Update Dec 2024 - Pilot completed and report developed, planned rollout unable to commence until M365 contract renegotiation is completed - expected completion May 2025	31/05/2025
3. Development of the Implementation Plan for the M365 Viva Suite of applications will drive new and improved data collection, storage and management.	Not Tested	3. NTS have agreed to an internal audit on their ability to support a data driven organisation - scheduled for April 2025	30/06/2025
4. Outcome of the pilot of the M365 Copilot Application will drive intelligence and knowledge on required improvements and restructuring of all NES data and information.	Effective - recordings of outcomes minuted.		

STRATEGIC RISK 16

Risk no:	SR16					
Risk Short Title:	Inability to meet core responsibilities and objectives due to HR Performance.					
Risk Owner:	Karen Reid	Date Added to Register:	03/12/2024			
		Review Date:	03/03/2025			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	Staff Governance Committee			
Risk Category(s)	People/Workforce	Reputational	Finance			
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
03/12/2024	15	High		Open	12-16	
	-					
	-					
	-					

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

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

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

Existing control rating: Ineffective

Cause:		Effect:	
HR service not performing effectively.		An ineffective HR function may fail to foster a positive workplace culture or support professional development, leading to a poor experience workplace experience, lack of employee motivation and misalignment with organisational goals. Overall, this underperformance creates a gap in meeting both operational and strategic objectives. Underperformance of the HR function can lead to increased turnover, longer recruitment lead times, lower productivity, decreased employee morale, and legal risks associated with non-compliance with laws and regulations.	
		Result:	
		NES could fail to meet its legal and statutory requirements, as well core responsibilities such as employee engagement, retention, performance management, and wellbeing. This could result in an increased risk of employee relations issues and ultimately increased employment tribunal activity.	
Control:	Effectiveness:	Actions:	Due Date:
1. Internal and external audits completed between Workforce and Finance Directorates that looked at financial and workforce data quality processes across NES. Recommendations and management actions are being reported through the audit and risk committee.	Effective - Reported at Audit & Risk Committee and minuted.	1. Recommendations and management actions from internal and external audit being progressed and reported through the Audit & Risk Committee.	31/03/2025
2. Corporate Improvement Programme on the Lead Employer Model for DDIT in place which ensures operational processes, financial and management information controls and risk management practices across NES, NHS Placement Boards and GP Practices to provide assurance that the programme is operating within the NES risk appetite.	Effective - Process in place and reported to governance groups and committees and minuted.	2. Corporate Improvement Programme on the Lead Employer Model for DDIT in place which ensures operational processes, financial and management information controls and risk management practices across NES, NHS Placement Boards and GP Practices to provide assurance that the programme is operating within the NES risk appetite.	31/03/2025
3. Extensive HR Transformation Programme is underway to address the key aims of recovery, stabilisation and transformation.	Effective - Programme Board reporting to Transformation Group and to NES Board via CEO Report. Reporting to PPC will commence once established.	3. Refresh of the internal job evaluation process to ensure alignment with national job evaluation scheme.	31/03/2025
		4. Organisational change process being developed to redesign the structure of the Workforce Directorate and recruitment to vacant leadership roles (Director and Associate Director) is being progressed.	31/03/2025

Summary of Strategic Risks Exposure

Table 1 - Current Position - January 2025

Current Risk Exposure (Total Score)	Very High	High	Medium	Low	Total	% of Total
Strategic		1	1		2	12.5%
Operational	1		2		3	18.8%
Finance			2		2	12.5%
Reputational					0	0.0%
Governance		1	2	1	4	25.0%
Technology					0	0.0%
People/Workforce		2	3		5	31.3%
Health & Safety					0	0.0%
Enviromental Sustainability					0	0.0%
Transformation/ Innovation					0	0.0%
TOTAL EXPOSURE	1	4	10	1	16	100.0%
% of Total	6.3%	25.0%	62.5%	6.3%		

Table 2 - Last Reported Position - November 2024

Current Risk Exposure (Total Score)	Very High	High	Medium	Low	Total	% of Total
Strategic		1	1		2	13.3%
Operational		1	2		3	20.0%
Finance		2			2	13.3%
Reputational					0	0.0%
Governance		1	2	1	4	26.7%
Technology					0	0.0%
People/Workforce		2	2		4	26.7%
Health & Safety					0	0.0%
Enviromental Sustainability					0	0.0%
Transformation/ Innovation					0	0.0%
TOTAL EXPOSURE		7	7	1	15	100.0%
% of Total	0.0%	46.7%	46.7%	6.7%		

No	Strategic Risk Title	Risk Owner	Gross Rating	Net Rating	Appetite	Updated Dec 2024 Control Rating
SR1	NES Strategic Plan does not align with the evolving needs and expectations of stakeholders.	Karen Reid	15	9		Effective
SR2	Disproportionate amount of non-recurrent funding, without conversion to recurrent funding.	Jim Boyle	20	8	Gap 3	Acceptable
SR3	Failure to recruit and retain sufficiently experienced and knowledgeable people to the Board, Executive Team and senior management establishment.	Karen Reid	16	12		Effective
SR4	NES staff become disengaged.	Karen Reid	16	9		Effective
SR5	NES does not put in place an adequate corporate infrastructure to support the Transformation Route Map.	Karen Reid	16	9		Effective
SR6	Failure to develop and maintain adequate Business Continuity arrangements to deal with the risk of adverse events and threats.	Christopher Wroath	16	9	Gap 4	Acceptable
SR7	Failure to put in place measures to adequately protect against breaches of cyber security.	Christopher Wroath	20	15	Gap 10	Acceptable
SR8	Failure to put sufficient employee training and other operational controls in place to minimise the risk of breaches of Information Governance.	Christopher Wroath	20	8		Effective
SR9	NES does not put sufficient measures in place to address ongoing cost and funding pressures leading to misalignment with Scottish Government priorities and expectations.	Jim Boyle	25	8	Gap 3	Acceptable
SR10	Failure to adequately anticipate and mitigate the impacts of policy, legislative, economic, technological and societal change.	Karen Reid	12	12		Effective
SR11	Poor learning outcomes and learning experience for our stakeholders.	Karen Wilson	16	9		Effective
SR12	Insufficient investment in TURAS Learn and other NES learning platforms.	Christopher Wroath	20	20	Gap 4	Ineffective
SR13	Failure to recruit sufficient number of appropriately skilled and experienced staff within NES.	Karen Reid	12	8		Effective
SR14	Inadequate Board governance, systems, processes and scrutiny of them.	Karen Reid	25	4		Effective
SR15	NES is not an evidence based data driven organisation, lacking intelligence and insights from its Information Assets.	Christopher Wroath	12	6	Gap 1	Acceptable
SR16	Inability to meet core responsibilities and objectives due to HR Performance.	Karen Reid	20	15		Ineffective

NES Risk Matrix, Scoring and Risk Categories

APPENDIX 5

Risk Matrix and Score –

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

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

NES Scoring Definitions – Likelihood -

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

NES Scoring Definitions – Impact/Consequence –

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

NES Risk Categories –

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

NHS Education for Scotland

NES/25/10

Agenda Item: 9a

Meeting Date: 6 February 2025

NES Public Board

1. Title of Paper

1.1 Strategic Risks Annual Review and Risk Appetite

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 Strategic Risk Annual Review for review and approval. In 2024 we have progressively developed our processes and practice in Risk Management and the Board is invited to note the progress that has been made in enhancing NES's risk management approach.
- 4.2 With the dissolution of the Technology & Information Committee and the establishment of the new Planning and Performance Committee, the Board is asked to consider and approve the alignment of eight Strategic Risks to the Planning and Performance Committee.
- 4.3 The Board is also asked to review the NES Board's appetite for risk under each risk category and contemplate if any recommendations need to be considered on the appropriateness and proportionality of the scoring for each risk category.

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, Audit and Risk Committee and the NES Board. Our risk management infrastructure is predominantly in place, including a revised risk log format, a Risk Management Strategy and Manual, Risk Management training and an established group of directorate risk leads.
- 5.2 All Strategic Risks are reviewed regularly by individual risk owners and the Executive Team and are reported quarterly to the Audit and Risk Committee and the NES Board for review and approval.
- 5.3 Reporting of Strategic Risks that relate to individual Board Governance Committees' remitted responsibilities are presented quarterly for consideration. These reports are designed to provide assurance that the individual risks are being effectively managed by the mitigating controls and planned actions identified.
- 5.4 In accordance with the Board's schedule of business, members are asked to conduct the annual review of the NES Risk Appetite.

6. Assessment/Key Issues

6.1 NES Strategic Risks

- 6.1.1 The Strategic Risks (summary Appendix 1) are subject to regular reviews by the Executive Team and individual risk owners and are reported quarterly to the NES Board and the Audit & Risk Committee. Over the last year, no risks were closed or de-escalated. However, one new strategic risk has been identified and added to the Strategic Risk Log. SR16, which relates to the inability to meet core responsibilities and objectives due to HR Performance, has recently been escalated from the Workforce Directorate Risk Log.
- 6.1.2 A number of changes to the strategic risks during the last year are attributed to the development of our processes and practices in Risk Management. Within the last year work has been progressed to enhance NES's approach to risk management and strengthen assurance that the key risks to the achievement of NES's strategic objectives have been identified and are managed effectively.
- 6.1.3 As recommended by the Audit and Risk Committee, a review of the NES Scoring Matrix was undertaken at the beginning of the year. NES's previous Risk Scoring Matrix was made up of up of five levels of risk, Primary 1, Primary 2, Contingency, Housekeeping and Low. When applied, the Contingency and Housekeeping levels enabled a crossover which caused some confusion, as several risks with the same score sat within different levels of the matrix. The new Risk Scoring Matrix has four levels of risk, Very High, High, Medium, and Low which aligns NES's risk scoring matrix with other NHS Scotland Health Boards. This approach has also prevented the apparent anomalies in scoring

and provides a standardised and consistent approach to defining NES's level of risk.

- 6.1.4 As part of the scoring matrix review a detailed guide was developed for impact definitions that identified the different types of risk that could impact on individual categories. This provided a more effective tool for assessing impact which focused on scale, scope and resource implication. The definitions also facilitate an enhanced understanding of the level of risk and assist in prioritising how it should be managed.
- 6.1.5 Four additional risk categories of People/Workforce, Health & Safety, Environmental Sustainability/Climate Change and Transformation/Innovation were added to the NES risk profile this year. These additional risk categories were designed to provide a better understanding of the organisation's overall risk profile. They also strengthened assurance that NES is effectively managing individual categories of risk. An enhanced description of each category was developed to support risk owners in identifying the correct risk category when assessing potential risks.
- 6.1.6 The NES Risk Management Strategy has been revised to include the changes to the NES's scoring matrix and impact definitions, the additional risk categories and the revised NES Risk Appetite Matrix. The updated strategy was reviewed and approved by the Audit and Risk Committee at their January 2025 meeting.
- 6.1.7 A revised Risk Management Manual was published in July 2024, setting out the principles, objectives and processes for the management of risk. It provides a key reference point that sets out NES's approach to risk and risk management and promotes an open and responsive approach that involves all elements of NES. Risk Management training has also been developed, focusing on identifying risks to be managed, escalating risks, risk scoring and using the risk log template. Fifteen training sessions have been delivered to date, including a session at the NES Learning at Work Week 2024.
- 6.1.8 In October 2024 the Audit & Risk Committee approved a proposal to enhance NES's Risk Control Assurance. The proposal provided enhanced guidance to risk owners on identifying how well individual and collective risk controls are working to mitigate individual risks. It is anticipated that, when fully implemented, this will help to make risk control assurance more objective with reference to the assurance criteria and will help bring greater consistency across all risks, both strategic and operational. The risk reporting template has been revised to include the individual control assessments and has been applied for the Q3 Strategic Risk Reports.

6.2 Alignment of Strategic Risks to Governance Committees.

- 6.2.1 At the September 2024 NES Board, the proposal to dissolve the Technology & Information Committee as of 31 March 2025 and to constitute a new Planning and Performance Committee as of 1 April 2025 was approved. All Strategic Risks that relate to the Technology & Information Committee's remitted

responsibilities require to be realigned and the Strategic Risks that relate to the Planning and Performance Committee's remitted responsibilities identified.

- 6.2.2 The Planning and Performance Committee will govern all matters pertaining to planning and delivery including technology, innovation, horizon scanning, information governance, business continuity and will receive assurance on the NES Scottish Government commissions and transformation work.
- 6.2.3 There are currently five strategic risks considered relevant to the Technology and Information Committee. It is proposed (as shown in Appendix 2) that all of these risks are realigned to the new Planning and Performance Committee.
- 6.2.4 In addition Strategic Risk 5, relating to NES not putting in place an adequate corporate infrastructure to support the Transformation Route Map (currently aligned to the Staff Governance Committee). Strategic Risk 1, relating to NES Strategic Plan not aligning with the evolving needs and expectations of stakeholders and Strategic Risk 10 that relates to the failure to adequately anticipate and mitigate the impacts of policy, legislative, economic, technological and societal change (both currently aligned to the NES Board) are realigned to the new Planning and Performance Committee. This is on account of its remit for governance of all matters pertaining to planning and delivery and transformation work.

6.3 NES Risk Appetite

- 6.3.1 A review of strategic and directorate risks indicates that there has been a reduction in the percentage of risks that sit outwith the agreed Board Risk Appetite, after mitigating controls have been applied. Previously 43% of strategic risks were outwith appetite, in the past year this has reduced to 37.5%, while directorate risks have reduced from 29% to 19%. This could be attributed to the implementation of the revised NES Risk Appetite Matrix. It is noticeable that almost all the risks that are assessed as exposing NES to an unacceptable degree of risk relate to the Governance or Financial categories. This reflects the Board's highly risk-averse appetite in these categories.
- 6.3.2 Appendix 1 shows where each strategic risk sits in relation to the current Board Risk Appetite Matrix and indicates the current gap above appetite. Several strategic risks have been outwith the Board's appetite for a considerable period, however within this past year the gap has been reduced in the majority of them.
- 6.3.3 Following the implementation of the new scoring matrix and the additional categories being added to the NES risk profile the revised NES Risk Appetite Matrix (as shown in Appendix 3) was approved at the April 2024 Audit & Risk Committee and the May 2024 NES Board.
- 6.3.4 In January 2025 in accordance with the Committee's schedule of business, the Audit and Risk Committee reviewed and approved the NES Risk Appetite.

7. Recommendations

The NES Board is invited to:

- 7.1 To review and approve the NES Strategic Risks Annual Review and note the progress that has been made in enhancing NES's risk management approach.
- 7.2 To consider and approve the alignment of the eight Strategic Risks to the new Planning and Performance Committee.
- 7.3 To review the NES Board Risk Appetite and agree if any recommendations need to be considered on the appropriateness and proportionality of the scoring for each risk category.

Author to complete **checklist**.

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

a) Have Educational implications been considered?

Yes

No

b) Is there a budget allocated for this work?

Yes

No

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

1. People Objectives and Outcomes

2. Partnership Objectives and Outcomes

3. Performance Objectives and Outcomes

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

Yes

No

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

Yes

No

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

Yes

No

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

Yes

No

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

Yes

No

Author name: Rob Coward, Debbie Lewsley, Jim Boyle

Date: January 2025

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 evolving needs and expectations of stakeholders	19/04/2023	03/03/2025	15	9	Strategic	12-16	
SR2	Disproportionate amount of non-recurrent funding, without conversion to recurrent funding	19/04/2023	10/03/2025	20	8	Finance	1-5	Gap 3
SR3	Failure to recruit and retain sufficiently experienced and knowledgeable people to the Board, Executive Team and senior management establishment	19/04/2023	03/03/2025	16	12	People/Workforce	12-16	
SR4	NES staff become disengaged	19/04/2023	03/03/2025	16	9	People/Workforce	12-16	
SR5	NES does not put in place an adequate corporate infrastructure to support the Transformation Route Map.	19/04/2023	03/03/2025	16	9	People/Workforce	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	04/03/2025	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	04/03/2025	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	04/03/2025	20	8	Operational	12-16	
SR9	NES does not put sufficient measures in place to address ongoing cost and funding pressures leading to misalignment with Scottish Government priorities and expectations.	19/04/2023	10/03/2025	25	8	Finance	1-5	Gap 3
SR10	Failure to adequately anticipate and mitigate the impacts of policy, legislative, economic, technological and societal change	19/04/2023	03/03/2025	12	12	Strategic	12-16	
SR11	Poor learning outcomes and learning experience for our stakeholders	19/04/2023	25/02/2025	16	9	Operational	12-16	
SR12	Insufficient investment in TURAS Learn and other NES learning platforms.	19/04/2023	28/04/2025	20	20	Operational	12-16	Gap 4
SR13	Failure to recruit sufficient number of appropriately skilled and experienced staff within NES.	19/04/2023	03/03/2025	12	8	People/Workforce	12-16	
SR14	Inadequate Board governance, systems, processes and scrutiny of them.	19/04/2023	03/03/2025	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	04/03/2025	12	6	Governance	1-5	Gap 1
SR16	Inability to meet core responsibilities and objectives due to HR Performance.	03/12/2024	03/03/2025	20	15	People/Workforce	12-16	

APPENDIX 2

Risk No	Risk Title	Risk Category	Risk Owner	Current Governance Committee	Proposed Governance Committee
SR1	NES Strategic Plan does not align with the evolving needs and expectations of stakeholders.	Strategic	Karen Reid	NES Board	Planning & Performance Committee
SR5	NES does not put in place an adequate corporate infrastructure to support the Transformation Route Map.	People/Workforce	Karen Reid	Staff Governance Committee	Planning & Performance Committee
SR6	Failure to develop and maintain adequate Business Continuity arrangements to deal with the risk of adverse events and threats.	Governance	Christopher Wroath	Technology & Information Committee	Planning & Performance Committee
SR7	Failure to put in place measures to adequately protect against breaches of cyber security.	Governance	Christopher Wroath	Technology & Information Committee	Planning & Performance Committee
SR8	Failure to put sufficient employee training and other operational controls in place to minimise the risk of breaches of Information Governance.	Operational	Christopher Wroath	Technology & Information Committee	Planning & Performance Committee
SR10	Failure to adequately anticipate and mitigate the impacts of policy, legislative, economic, technological and societal change.	Strategic	Karen Reid	NES Board	Planning & Performance Committee
SR12	Insufficient investment in TURAS Learn and other NES learning platforms.	Operational	Christopher Wroath	Technology & Information Committee / Education & Quality Committee	Planning & Performance Committee
SR15	NES is not an evidence based data driven organisation, lacking intelligence and insights from its Information Assets.	Governance	Christopher Wroath	Technology & Information Committee	Planning & Performance Committee

Type of Risk	Risk Appetite		
	Concept (Net Risk)	Pilot /Test of Change (Net Risk)	Business as Usual (Net Risk)
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)
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 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

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

NHS Education for Scotland

NES/25/11

Agenda Item: 10a

6 February 2025

NES Public Board

1. Title of Paper

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

2. Author(s) of Paper

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

3. Lead Director(s)

- 3.1. Jim Boyle, Executive Director of Finance

4. Situation/Purpose of paper

- 4.1. This paper brings the following elements of the Board Corporate Governance Package to the Board for review and approval:
- Board Standing Orders (Website hyperlink)
 - Board Code of Conduct (Website hyperlink)
 - Board Scheme of Delegation (Appendix 1)
 - Standing Financial Instructions (SFIs) (Appendix 2)
 - Audit and Risk Committee (ARC) Terms of Reference (ToRs) (Appendix 3)
 - Remuneration Committee ToRs (Appendix 4)
 - Staff Governance Committee (SGC) ToRs (Appendix 5)
 - Education and Quality Committee (EQC) ToRs (Appendix 6)
 - Planning and Performance Committee (PPC) ToRs (Appendix 7)
 - Generic Committee ToRs (Appendix 8) included for information as these have already been approved by Board previously.

5. Background and Governance Route to Meeting

- 5.1. The Board Corporate Governance Package is reviewed on an annual basis by the Audit and Risk Committee (ARC) and approved for onward progression through to the Board for final approval. Once approved by the Board, the pack is published on the Board website.
- 5.2. The ToRs were sequenced through the respective Committees for review and approval prior to the 16 January 2025 ARC meeting as follows:
 - ARC ToRs – 3 October 2024 ARC meeting
 - Remuneration Committee ToRs – by correspondence October 2024 and again by correspondence November/December 2024.
 - Staff Governance Committee (SGC) and Remuneration Committee ToRs – 7 November 2024 SGC meeting. The Remuneration Committee ToRs were then considered again by the Remuneration Committee and quorate approval by correspondence received on 16 December and then further approved by the SGC by correspondence on 7 January 2025.
 - Education and Quality Committee (EQC) ToRs – 13 December 2024 EQC meeting
- 5.3. Further to the respective Committee review, changes were made to the ToRs as detailed in section 6 of this paper.
- 5.4. Changes recommended to the other corporate governance documents (Board Standing Orders; SFIs, Board Scheme of Delegation and Board Code of Conduct) are also detailed in section 6. These documents have not been sequenced to any other Committee prior to ARC.
- 5.5. All Committee ToRs, once approved by Board will have active hyperlinks to the already approved generic Committee ToRs (Appendix 8)
- 5.6. As the Board has made the decision to dissolve the Technology and Information Committee (TIC) as of 31 March 2025, the TIC ToRs are not included in this corporate governance package.
- 5.7. The Board have approved the formation of the new Planning and Performance Committee (PPC) as of 1 April 2025.
- 5.8. The PPC met in developmental form on 20 January 2025 to discuss their role and remit and review their draft ToRs. Amendments were made to the draft ToRs further to this meeting and circulated to PPC members and to the ARC for review and approval by correspondence.

6. **Assessment/Key Issues**

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

- 6.1. There is a risk that if the Corporate Governance Package is not considered from a strategic overview perspective, as well as an individual component perspective, then changes or improvements in governance elsewhere in the organisation or in the wider system may not be implemented as appropriate. The strategic overview mitigates duplication of governance effort and enables the identification of any gaps and enhances governance line of sight.
- 6.2. The 16 January 2025 ARC discussed how this strategic overview could be taken, especially as the PPC ToRs were not available as part of the Corporate Governance pack for the ARC to review at their meeting. Further to this discussion it is suggested that the following aspects would support this strategic overview:
- The role of the ARC, as per their ToRs, is to draw attention to potential weaknesses in systems of risk management, governance and internal control and to review the system of internal control and to evaluate the control environment and decision-making processes. This will include annual review of the Board's Standing Orders, Standing Financial Instructions, Scheme of Delegation.
 - To assist with this, we now have a well-developed and embedded governance processes to ensure the ARC and then the Board, receive the full corporate governance pack including Committee ToRs on an annual basis.
 - The Board Assurance Framework will assist with this role. This document will be updated to remove references to the role of TIC and include the role of PPC and be brought to the 24 April 2025 ARC for review and approval as part of the bi-annual review of the Board Assurance Framework conducted by the ARC.
 - In addition, we have the list of NHS legislative responsibilities and the Board and Committee Schedules of Business (SoB) which assist in ensuring key aspects of business do not get inadvertently missed.
 - The TIC held their final meeting on 27 January 2025 and received papers outlining where the business and governance aspects of their role and remit will be governed once the TIC is dissolved. The business paper will be brought to the first meeting of the PPC on 2 May 2025 for assurance that all aspects handed over to the PPC are included in the PPC SoB and are within the delegated remit of the PPC as per their ToRs.

6.3. **Board Standing Orders**

- 6.3.1. The Board Standing Orders approved by the Board at the 8 February 2024 Board meeting are published on the NES website [here](#) and align with [DL\(2019\)24](#).

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

6.4. Board Code of Conduct

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

6.5. Board Scheme of Delegation

6.5.1. The Board Scheme of delegation has been reviewed and is available as Appendix 1.

6.5.2. The following changes were recommended and approved by the ARC:

- Number 4, removal of reference to Committee Assurance Frameworks
- Number 14 new delegation for Public Protection / Infection Prevention and Control added
- Number 19 d) clarification has been added that virements over £1m require Board approval
- Number 24, new delegation for approval of Memorandum of Understandings (MoUs) between NES and other organisations added
- Number 47, new Caldicott Guardian and Caldicott Guardian deputy specified
- Reference to the Director of Workforce removed and Director of People and Culture added.

6.6. SFIs

6.6.1. The SFIs (Appendix 2) have been reviewed and revised and the following amendments were recommended and approved by the ARC.

6.6.2. Section 11 (sub section 11.5) Contracting and Procurement has been updated. This section now allows NES to support SMEs and comply with Procurement Equality Duty and Fair Work principles by directly awarding contracts up to the value of £25,000.

6.6.3. The finance guidance notes issued during the financial year 2024/25 which support the update of the Scottish Public Finance Manual are not relevant to NES or other NHS Boards.

6.7. ARC ToRs

6.7.1. The ARC ToRs were considered at the 3 October 2024 ARC meeting. No changes were required.

6.7.2. The ARC ToRs are included as Appendix 3.

6.8. Remuneration Committee ToRs

6.8.1. Remuneration Committee approved their ToRs by correspondence between 14 October – 28 October 2024. Further to the 7 November 2024 SGC meeting, a change to one of the paragraphs (9.1.1) was recommended. This change was made, and the Remuneration Committee further considered these changes by correspondence and quorate approval was received 16 December 2024. The SGC provided their quorate approval by correspondence 7 January 2025.

6.8.2. The changes made to the Remuneration Committee ToRs are as follows:

- paragraph 3.2 has been changed to reflect the new member of the Remuneration Committee from 1 April 2025, the Chair of the newly constituted Planning and Performance Committee.
- the heading in section 5 has been revised to reflect not only attendees, but also access to papers and a new paragraph added to reflect the requirement that accessibility of papers should be in line with General Data Protection Regulations and the [Data Protection Act 2018](#).
- paragraph 9.1.1 has been amended to remove the role of Remuneration Committee in approving executive job descriptions as this is the role of the National Evaluation Committee (NEC) under the Korn Ferry/Hay system for appropriate grading under ESM scales. The role of the Remuneration Committee is to approve the place on the grade scale for the new post holder.
- the ToRs have been amended to remove the reference to the Director of Workforce and refer instead to the Director of People and Culture.

6.8.3. The Remuneration Committee ToRs are included as Appendix 4.

6.9. SGC ToRs

6.9.1. The SGC ToRs were reviewed and approved at the meeting held 7 November 2024.

6.9.2. Some minor changes were approved by the SGC to wording and the reference to the Director of Workforce has been removed and replaced with the Director of People and Culture.

6.9.3. The SGC ToRs are included as Appendix 5.

6.10. EQC ToRs

6.10.1. The EQC ToRs were considered at the meeting held 13 December 2024.

6.10.2. The changes approved by the EQC are as follows:

- paragraph 9.9 of the EQC ToRs has been amended to remove the delegation of governance of health inequalities as it is proposed that this will now be remitted to the PPC.
- paragraph 9.14 has been amended to remove reference to the governance of complaints, as it is proposed that this will now be remitted to the PPC.
- a new paragraph has been added to reflect the governance role of the EQC in relation to seeking assurance in relation to the new Clinical and Care Assurance Sub-Group of ECQ.

6.10.3. EQC ToRs are available as Appendix 6.

6.11. PPC ToRs

6.11.1. The Board received a paper at the 26 September 2024 meeting which outlined the proposed role and remit of the PPC. This was further developed into a set of draft ToRs which was considered by the PPC when they met in developmental form on 20 January 2025.

6.11.2. Further to this meeting amendments were made and the ToRs. The governance of social care was discussed, but not explicitly included in the PPC ToRs as at this point in time the governance of social care is expected to flow through a number of Committees as opposed to being governed by one particular Committee as a distinct entity, however this will be monitored over the next financial year.

6.11.3. The revised PPC ToRs were circulated following the meeting for comments and then sequenced onwards to the ARC for approval by correspondence 24 January – 28 January 2025.

6.11.4. The Board are asked to approve the delegation of duties to the PPC and note that we believe a robust set of ToRs have been prepared, against which a Schedule of Business (SoB) for the Committee will be developed. As the PPC is new and the work evolving, the PPC plan to revisit their role and remit in-year.

7. Recommendations

7.1. The Board is invited to:

- Approve the delegation of duties to the PPC as per the PPC ToRs.
- Review and approve the full Corporate Governance Package.

Author to complete **checklist**.

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

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

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

Yes

No

Author name: Della Thomas

Date: January 2025

NES

NES Board Scheme of Delegation

RESERVATION OF POWERS AND SCHEME OF DELEGATION

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

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

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

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

Delegated Issue and Scope of Delegation	Individual Responsible	Deputy
<ul style="list-style-type: none"> Staff 	Chief Executive	Executive Director of Finance
10. Approve and sign all legal documents which will be necessary in legal proceedings related to staff	Chief Executive	People and Culture
11. Complaints	Chief Executive	Director of Planning and Performance
12. Freedom of Information	Chief Executive	Director of Planning and Performance
13. Educational Quality Assurance Systems	Chief Executive	Executive Director of Nursing, Midwifery and Allied Health Professionals (NMAHP) and Executive Medical Director
14. Public Protection / Infection Prevention and Control	Executive Director of Nursing, Midwifery and Allied Health Professionals (NMAHP)	Deputy Director of Nursing, Midwifery and Allied Health Professionals (NMAHP)
15. Operation of all detailed financial matters including bank accounts and banking procedures.	Executive Director of Finance	Deputy Director of Finance

Delegated Issue and Scope of Delegation	Individual Responsible	Deputy
16. Implementing the Board's financial policies and co-ordinating corrective action and ensuring detailed financial procedures and systems are prepared and documented	Executive Director of Finance	Deputy Director of Finance
17. Delegation of budgets	Chief Executive & Executive Directors	Executive Director of Finance
18. Responsibility for the implementation and monitoring of budget virements	Executive Director of Finance	Deputy Director of Finance
19. Virement between Budgets (<i>Section 21.6 to 21.9 of SFIs</i>)		
a) Up to or equal to £25,000	Budget Holder	N/A
b) Up to or equal to £100,000	Deputy Director of Finance	Head of Finance Business Partnering
c) Up to or equal to £500,000	Executive Director of Finance	Deputy Director of Finance
d) Up to or equal to £1,000,000 (virements over £1m require Board approval)	Chief Executive (and report to the Board)	Executive Director of Finance (only if Accountable Officer is absent and report to Board)

Delegated Issue and Scope of Delegation	Individual Responsible	Deputy
20. Approval of expenditure for which no provision has been made in an approved budget, and which is not covered by funding under the delegated powers of virement, (<i>Section 6.12 & 9.2 of SFIs</i>)		
a) Up to or equal to £500,000	Executive Director of Finance	Deputy Director of Finance
b) up to or equal to £1,000,000	Chief Executive (and report to the Board)	Executive Director of Finance (only if Accountable Officer is absent and report to Board)
21. Approval to spend funds within delegated limits: [<i>Section 21.4 of SFIs</i>]		
c) Up to the level of their designated authority, which shall be no greater than £10,000	Designated Directorate Administrator, Coordinator, Officer	Nominated authoriser as per the PECOS matrix
d) Up to or equal to £25,000	Senior Managers and Associate Directors	Nominated authoriser as per the PECOS matrix
e) Up to or equal to £50,000	Associate Directors and Deputy Directors	Senior Managers and Associate Directors
f) Up to or equal to £250,000	Directors and Executive Medical Director	Associate Directors and Deputy Directors.

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

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

Delegated Issue and Scope of Delegation	Individual Responsible	Deputy
c) Up to or equal to £250,000	Directors and Executive Medical Director	Associate Directors and Deputy Directors.
d) Up to or equal to £500,000	Executive Director of Finance	Deputy Director of Finance
e) Over £500,000	Chief Executive	Executive Director of Finance (only if Accountable Officer is absent and report to the Board)
29. Payment of staff	Executive Director of Finance	Deputy Director of Finance
30. Procedures for the payment of travel, subsistence, study course and other expenses	Executive Director of Finance	Deputy Director of Finance
31. Procedures for the payment of accounts including Payments on Behalf (PoB) to other Boards	Executive Director of Finance	Deputy Director of Finance
32. Management of Non-Exchequer funds	Executive Director of Finance	Deputy Director of Finance
33. Management of Capital Schemes	Executive Director of Finance	Deputy Director of Finance

Delegated Issue and Scope of Delegation	Individual Responsible	Deputy
34. Liaison with Internal and External Audit services	Executive Director of Finance	Deputy Director of Finance
35. Issuing Tenders	Executive Director of Finance	Head of Procurement
36. Receiving and Opening of Tenders	Executive Director of Finance	Authorised personnel
37. Waiving of Competitive Tendering (in specific, limited circumstances) (<i>Section 11.8 – 11.9 of SFIs</i>)	Executive Director of Finance	Head of Procurement
a) Up to or equal to £50,000	Head of Procurement	Procurement Manager
b) greater than £50,000	Executive Director of Finance	Deputy Director of Finance
38. Devise and maintain systems of budgetary control	Executive Director of Finance	Deputy Director of Finance
39. Preparing the Annual Accounts and the Annual Report	Executive Director of Finance	Deputy Director of Finance
40. Signing the Annual Accounts and Annual Report	Chief Executive (CEO)/ Accountable Officer (AO) and Executive Director of Finance (statement of Financial Position)	In the absence of the Accountable Officer the Accounts can be delayed until the AO is available to sign them

Delegated Issue and Scope of Delegation	Individual Responsible	Deputy
41. Banking Arrangements	Executive Director of Finance	Deputy Director of Finance
42. Risk Management Processes	Executive Director of Finance	Director of Planning and Performance
43. Management and control of technology systems and facilities including data protection	Director of NES Technology	Deputy Director Technology
44. Investigate any suspected cases of fraud and other irregularity	Fraud Liaison Officer (Deputy Director of Finance)	Head of Governance and Operational Services (Finance)
45. Review, appraise and report in accordance with NHS Internal Audit Manual and best practice	Chief Internal Auditor	N/A
46. Information Governance including Cybersecurity	Director of NES Technology	Deputy Director of Technology
47. Caldicott Guardianship	Director of Social Care	Executive Medical Director
48. Human Resource (HR) Management	Director of People and Culture	Associate Director of HR

Delegated Issue and Scope of Delegation	Individual Responsible	Deputy
49. Procedures for employment of staff	Director of People and Culture	Associate Director of HR
50. Leave: annual, compassionate, special leave and leave without pay.	Director of People and Culture	Associate Director of HR
51. Grievance and disciplinary procedures for staff	Director of People and Culture	Associate Director of HR
52. Any redundancy situation leading to contractual entitlement to a payment in excess of £95,000 (<i>Section 9.53 & 9.55 of SFIs</i>)	Remuneration Committee and Chief Executive as Accountable Officer	N/A
53. Chair of Consultant Discretionary Points Panel (non-voting)	Director of People and Culture	Associate Director of HR
54. Health and Safety arrangements	Director of People and Culture	Associate Director of HR
55. Whistleblowing	Chief Executive	Director of Planning and Performance
56. Emergency Climate Change and Sustainability	Executive Director of Finance	Clinical Lead for Climate Emergency and Sustainability (Associate Post Graduate Dean)
57. Responsible for security of the Board's property, avoiding loss, exercising economy	All members and employees of NES.	N/A

Delegated Issue and Scope of Delegation	Individual Responsible	Deputy
and efficiency in using resources and conforming Standing Orders, Financial Instructions and Procedures.		

NES
DT/LH February 2025

Appendix 2



STANDING FINANCIAL INSTRUCTIONS

Financial Year 2025/26

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

1. INTRODUCTION

1.1 Background

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

1.2 The purpose of such a scheme of control is:

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

COMPLIANCE

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

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

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

2. RESPONSIBILITIES OF THE CHIEF EXECUTIVE AS ACCOUNTABLE OFFICER

- 2.1 Under the terms of Section 14 and 15 of the Public Finance and Accountability (Scotland) Act 2000, the Principal Accountable Officer (PAO) for the Scottish Government has designated the Chief Executive of NES as its Accountable Officer.
- 2.2 Accountable Officers must comply with the terms of the Guidance to Accountable Officers and any updates issued to them from time to time by the Scottish Government Health and Social Care Directorate.
- 2.3 GENERAL RESPONSIBILITIES
 - 2.3.1 The Accountable Officer is personally answerable to the Scottish Parliament for the propriety and regularity of the public finances for NES ensuring that the resources of the body are used economically, efficiently, and effectively.
 - 2.3.2 The Accountable Officer has a personal duty of signing the Annual Accounts of NES for which they have responsibility. Consequently, they may also have the further duty of being a witness before Scottish Parliament committees including the Public Audit Committee (PAC) and be expected to deal with questions arising from the Accounts, or, more commonly, from reports made to Parliament by the Auditor General for Scotland on examinations into the economy, efficiency, and effectiveness with which the body has used its resources in discharging its functions. The Accountable Officer must also ensure that any

arrangements for delegation promote good management, and that they are supported by the necessary staff with an appropriate balance of skills. This requires careful selection and development of staff and the sufficient provision of special skills and services.

2.4 SPECIFIC RESPONSIBILITIES

The Accountable Officer must:

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

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

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

2.5 REGULARITY AND PROPRIETY OF EXPENDITURE

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

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

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

2.7 ABSENCE OF ACCOUNTABLE OFFICER

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

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

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

3. RESPONSIBILITIES OF THE BOARD

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

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

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

- 3.2 In fulfilling these functions, the Board should:

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

understand its responsibilities.

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

4. RESPONSIBILITIES OF SENIOR MANAGERS AND ALL OFFICERS

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

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

5. RESOURCE LIMITS

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

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

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

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

Government Health and Social Care Directorate.

6. PLANNING AND BUDGETING

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

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

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

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

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

7. ANNUAL ACCOUNTS AND REPORTS

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

appointment of the External Auditors of NES.

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

8. BANKING ARRANGEMENTS AND OPERATION

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

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

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

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

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

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

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

FOREIGN CURRENCY

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

9. FINANCIAL ARRANGEMENTS

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

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

SECURITY OF CASH, CHEQUES AND OTHER NEGOTIABLE INSTRUMENTS:

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

be undertaken by two officers together.

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

SECURITY OF ASSETS

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

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

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

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

INCOME

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

PAYMENT OF ACCOUNTS

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

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

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

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

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

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

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

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

PAYMENT OF STAFF

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

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

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

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

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

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

10. TRAVEL, SUBSISTENCE AND OTHER ALLOWANCES

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

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

CONTRACTING AND PROCUREMENT

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

THRESHOLDS FOR PURCHASING/ORDERING

- 10.7 The central Procurement team are responsible for all Procurement activities Best Value, the use of Public Contracts Scotland (PCS), including PCS Mini-competition and any World Trade Organisation's (WTO) and Government Procurement Agreement (GPA) directives must be applied when the estimated contract value exceeds the procurement thresholds set out in the table below.
- In case of any doubt, advice must be sought from the Procurement Department.

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

* UK Find a Tender (FaT) threshold £116,407 ex-VAT, implemented 30/10/23 and valid from 1/1/24 ((FaT) replaced OJEU Tender process on 1/1/21). The threshold is modified from time to time by the Scottish Government Scottish Procurement Policy Notices (SPPN).

PSC – Public Contracts Scotland
PSC-T Public Contracts Scotland Tender

** To support our SMEs (as defined by HMRC) and comply with Procurement Equality Duty and Fair Work principles, NES may directly award contracts up to the value of £25,000 in line with procurement regulations.

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

ACCEPTANCE AND AWARD BY CHIEF EXECUTIVE

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

SINGLE TENDER (REGULATED)

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

OFFICIAL ORDERS

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

MANAGEMENT CONSULTANTS

- 10.18 In accordance with the [SG Consultancy Procedures](#) issued in 2017, when consultants are necessary, they need to be used sparingly, appropriately and

effectively. Within NES, Management Consultants should only be used when documentary evidence of a benefit to NES has been prepared and the following demonstrated:

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

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

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

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

CONTRACTS

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

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

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

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

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

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

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

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

IN HOUSE SERVICES

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

REGISTER OF INTEREST

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

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

11. LOSSES AND SPECIAL PAYMENTS

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

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

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

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

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

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

12. RISK MANAGEMENT

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

The Risk Management Strategy shall include:

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

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

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

13. STANDING COMMITTEES

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

14. SPECIFIC ROLES & RESPONSIBILITIES

ROLE OF THE EXECUTIVE DIRECTOR OF FINANCE

14.1 The Executive Director of Finance is responsible for:

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

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

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

ROLE OF INTERNAL AUDIT

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

CFS on NES's behalf and will distribute all fraud reports and communications, on behalf of CFS, to appropriate recipients within NES.

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

EXTERNAL AUDIT

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

15. INFORMATION TECHNOLOGY

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

- (b) data produced for use with financial systems is adequate, accurate, complete, and timely, and that a management (audit) trail exists; and
- (c) Executive Director of Finance staff have access to such data.

16. FIXED ASSETS

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

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

16.3 Items falling into the following categories are tangible assets:

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

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

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

- 16.5 The Executive Director of Finance shall ensure that every capital expenditure proposal meets the following criteria:
- potential benefits have been evaluated and compared with known costs,
 - the cost consequences of the developments have been evaluated and included in future budgets, and
 - complies with the guidance in the NHSScotland (NHSS) Scottish Capital Investment Manual and subsequent disclosure complies with International Financial Reporting Standards (IFRS).
- 16.6 The Executive Director of Finance shall ensure that processes are in place to capture the impact on the NES Capital Resource Limit (CRL) from entering into property and equipment leases from the 1st April 2022.
- 16.7 In the case of large capital schemes, a system shall be established for progressing the scheme and authorising necessary payments up to completion. Provision should be made for regular reporting of actual expenditure against authorisation of capital expenditure.
- 16.8 Where capital assets are sold, scrapped, or impaired, their value must be reduced or moved from the accounting records and each disposal must be validated by reference to authorisation documents and ~~notes~~ (where appropriate). Where land and property are disposed of, the requirements set out in the NHSS Scottish Government Property Transactions handbook and the Scottish Public Finance Manual (SPFM), together with any subsequent amendments, ~~shall~~ be followed.
- 16.9 There is a requirement to achieve the best price reasonably achievable when disposing of assets belonging to NES. Competitive Tendering should normally be undertaken in line with requirements of the Board's tendering procedure.
- 16.10 Competitive Tendering or Quotation procedures shall not apply to the disposal of:
- any matter in respect of which a fair price can be obtained only by negotiation or sale by auction as determined by the Chief Executive.
 - obsolete or condemned articles and stores, which may be disposed of in accordance with the supplies policy and recorded within the losses of the organisation.
 - items to be disposed of with an estimated sale value of less than £5,000, this figure to be reviewed annually.

- items arising from works of construction, demolition, or site clearance, which should be dealt with in accordance with the relevant contract; and
- land or buildings concerning which Scottish Government guidance has been issued but subject to compliance with such guidance.

16.11 When evaluating options for the treatment of surplus assets, consideration of the disposal of assets to community bodies will be included, where appropriate. This consideration should be consistent with the principles of Best Value, where wider public benefits may be achieved.

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

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

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

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

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

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

16.16 The Executive Director of Finance shall approve procedures for

reconciling balances on fixed assets accounts in ledgers against balances on fixed asset registers.

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

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

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

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

17. PERSONAL USE OF OFFICIAL ACCOMMODATION, EQUIPMENT OR VEHICLES

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

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

18. FINANCIAL IRREGULARITIES

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

18.1

In November 2023, the Scottish Government with NHS Scotland Counter Fraud Services published NHS Scotland Counter Fraud Strategy 2023-

2026.pdf The strategy sets out the key priorities for the period to reduce fraud affecting the NHS in Scotland.

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

Deception	bribery	forgery
Extortion	corruption	theft
Conspiracy	embezzlement	misappropriation
false representation	concealment of material facts & collusion	

For practical purposes fraud may be defined as the use of deception with the intention of obtaining an advantage, avoiding an obligation, or causing loss to another party.

- 18.8 Any officers suspecting theft and/or fraud should immediately inform their line manager who shall in turn inform the Fraud Liaison Officer, who will immediately comply with the requirements of the partnership agreement with NHS Counter Fraud Services.
- 18.9 The Fraud Liaison Officer will also prepare a report for the first appropriate meeting of the Audit and Risk Committee setting out the full circumstances of the incident and any implications for management, including changes to internal control systems which may require to be made.
- 18.10 Careful consideration should be given to payment claims which arise from organisations or individuals who are under investigation or against whom proceedings are being taken for suspected fraud, etc. Legal advice should be sought where necessary.
- 18.11 The Chief Executive should report the matter to the Scottish Government Health and Social Care Directorate in cases where the nature, scale or the persons involved in the suspected offence could give rise to national or local controversy or publicity, or where the offence may be widespread.

19. WHISTLEBLOWING

- 19.1 NES adopts the National whistleblowing standards and encourages all staff in NES to raise any concerns where there is a risk of harm or wrongdoing (including where financial loss or misuse could ensue). Information on how to raise any concerns is available on the [NES Intranet](#).
- 19.2 Any issues raised will be investigated fully and impartially. Nobody will be unfairly treated for raising a concern, for having a whistleblowing allegation made about them or for cooperating with any investigation.

20. AUTHORISATION LIMITS

- 20.1 One of the objectives of the Standing Financial Instructions is to ensure adequate controls exist for the committing and payment of funds on behalf of the Board.

SERVICE LEVEL AGREEMENTS (SLAs)

- 20.2 Provided the service or activity has been approved in the Operational Planning process or virement approval has been obtained, and once verified by the designated Finance Manager, one of the signatories on a Service Level Agreement must be in accordance with Delegated Authority Limits as per Section 24 of the Scheme of Delegation. The relevant Director should also sign the SLA.

CONTRACTS

- 20.3 Contracts and other agreements with non-NHS Bodies must have two signatories, one of which will be a Directorate officer and the other an authorised buyer, with specific delegated authority in accordance with Sections 22 and 23 of the Scheme of Delegation. The total contract value must also be verified by the designated Finance Manager to ensure this is in line with Operational Plans and budgets.
Contractual and other commitments with non-NHS Bodies, over £1,000,000 in total, should be reported to the Board.

PURCHASES (PURCHASE ORDERS AND NOTES)

- 20.4 Purchase requisitions and invoices must be authorised by budget holders, or staff with delegated authority from budget holders, and verified by the designated Finance Managers as noted in Section 18 of the Scheme of Delegation:
- 20.5 Special arrangements exist for payments to other Boards in relation to payments made through the Payment on Behalf Process as outlined in Section 9.40. These include payments in respect of Training Grades and the Additional Costs of Teaching (ACT). These payments are covered by approved SLAs and individual monthly payments are processed subject to confirmation from nominated senior officers within the relevant Directorate who have delegated authority from their director. All submissions are reviewed and authorised by the Deputy Director of Finance before being processed.

VIREMENTS

20.6 It is the responsibility of the Chief Executive and the Executive Director of Finance to ensure all financial commitments entered into on behalf of the Board are in line with approved budgets and management plans.

20.7 A Virement is the transfer of budget from one income or expenditure line to another. To maintain financial control within NES we require authorisation of virements which are above agreed delegated levels and are not considered to be technical adjustments required to adhere to recognised accounting processes. The authority to vire between budgets and the virement limits is covered in Section 16 of the Scheme of delegation.

20.8 During the operational planning process, the Executive Team members consider, and the Board approves the allocation of budgets on the basis of the information provided to them at that time. A key part of the governance process in NES is a robust system of budget monitoring and review to ensure that:

- budgets are used for the purposes for which they are allocated,
- any planned change in the purpose for which funds are used, supports the strategic direction of NES, and
- there is no duplication in the use of funds across the organisation.

It is these criteria which must be taken into account when any budget virement is being considered.

20.9 The following technical budget adjustments are not subject to the Scheme of Delegation for Virements but will be approved by the Head of Finance Business Partnering or their nominated deputy:

- actual receipt of allocations which were anticipated and included as part of the operational planning process and therefore use has been approved. This transaction merely confirms receipt of pre-agreed funds. and will be noted at the next Executive team meeting.
- the anticipated receipt of a confirmed allocation from Scottish Government which has been accepted by NES outwith the Operational planning process
- training grade adjustments - where the number of trainees is set by Scottish Government and the total funding allocation agreed. Budget

adjustments which reallocate funds within the pre-agreed total and on the approval of the appropriate governance group (National Reshaping Workforce Group) are not subject to virement rules.

- Technical Adjustments including budget allocations made by finance to release pre-agreed provisions (example – a provision created for a potential pay award) or movement of budget between budget lines where the purpose for which the budget was allocated has not changed; and
- enactment of structural change within the organisation. Where organisational change has been approved by the Change Management Board and/or the Executive team which necessitates the reallocation of budget this will not also be subject to the Virement rules (example – consolidating budgets which are currently split across cost centres into one single budget).

20.10 Once the Board has approved the budget, plans and performance target for the year and taken account of all reserves and anticipated contingencies, the Directors and Budget Holders will be responsible for managing their affairs within the budget allocated to them and in line with NES' Strategic Financial Principles. This will include dealing with planned or unplanned expenditure on an individual basis and virement within the rules stated above. The virement rules stated above may be suspended with the agreement of the Chief Executive and Executive Team.

20.11 Any savings generated during the year must be quantified and disclosed to the Executive Director of Finance as soon as possible to support achievement of efficiency target savings or for ET agreement as per scheme of delegation for virement

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

21. ENDOWMENT FUNDS

21.1 The Review of Governance of NHS Endowment Funds, November 2019, was developed to ensure that all Scottish Endowment funds are managed appropriately using a standard regulations and procedures and this review reported in October 2021.

21.2 Should the Board ever receive an endowment (NHS-linked charity), an endowment fund should be set up following regulations set out in 21.1 above. These were put in place to safeguard the use of NHS-linked charitable funds within the Scottish NHS.

22. GENERAL NURSING COUNCIL (GNC) FUND: REGISTERED CHARITY: SC015662

- 22.1 The GNC is a charitable trust and is registered with OSCR (SC015662) and constituted by deed which includes provision for the appointment and resignation of Trustees who manage the fund in the deliverance of its charitable purpose.
- 22.2 The GNC Fund was set up with the net proceeds from the sale of the former General Nursing Council for Scotland premises in Darnaway Street, Edinburgh by the National Board for Nursing, Midwifery and Health Visiting for Scotland, a predecessor body of NHS Education for Scotland, in 1983.
- 22.3 The management of The Fund is the responsibility of the Trustees. The Trustees rely on the GNC Fund project team and disbursement panel to distribute information concerning The Fund to potential beneficiaries and to make recommendations to the Trustees concerning awards. The day-to-day financial management of the charity is delegated to the Executive Director of Finance at NHS Education for Scotland.
- 22.4 The Trustees of the GNC may include NES Executive and Non-Executive Directors and Board Members whose appointment will be endorsed by the NES Board Chair. All Trustees act independently of the NES Board.
- 22.5 The Trustees shall ensure appropriate arrangements are in place to maintain such accounts and records as may be necessary to record and protect all transactions and funds of the GNC Fund, including an Investments Register consistent with the current statutory requirements (Law Reform (Miscellaneous Provision) (Scotland) Act 1990).
- 22.6 The Trustees shall ensure that annual accounts are prepared within 9 months of the year end and in accordance with the Charities and Trustee Investment (Scotland) Act 2005 and the Charities Accounts (Scotland) Regulations 2006 (as amended), and that proper arrangements are made for these to be either independently examined or audited by a separately appointed External Auditor and submitted to the Office of the Scottish Charity Regulator (OSCR).
- 22.7 All share and stock certificates and property deeds shall be deposited either with the trustee body's Bankers or Investment Advisers, or in a safe, or a compartment within a safe, to which only a designated responsible officer will have access.

23. JOINT WORKING ARRANGEMENTS

- 23.1 NES has entered a joint arrangement with the NHS Golden Jubilee for the provision of the NHS Scotland Academy (NHSSA). The NHSSA is held accountable through the existing parent Board scrutiny and reporting arrangements.
- 23.2 Financial allocations for the NHSSA work are made to and managed by the respective parent Boards. Expenses and liabilities, and the accounting treatment of these, are recorded and reporting within each parent Boards own records. [IAS 31]
- 23.3 Participation or investment in any legal entity (e.g. joint venture) is subject to prevailing legislation and SGHSC guidance and is subject to approval by the Minister. Before proceeding, legal and procedural advice is required, and any activity in this area must be advised to and approved by the Executive Director of Finance.
- 23.4 Joint working with pharmaceutical companies is permitted within certain parameters set out in the Scottish Government's guidance – A Common Understanding 2012 Working Together for Patients. The guide on joint-working between NHS Scotland and the pharmaceutical industry, should be applied to any such joint-working arrangement and will assist in developing local joint-working, governance, monitoring, and project arrangements. Such arrangements should also be reviewed in line with sponsorship and Intellectual property policies
- 23.5 Joint working is also permitted with voluntary organisations, in the form of funding arrangements, subject to certain conditions. NES can only directly fund a third sector organisation; whose role was in line with NES's statutory purpose, strategic direction and roles and responsibilities.

24. SPONSORSHIP

- 24.1 All sponsorship arrangements, entered into by NES, must comply with the NES Sponsorship policy and MEL(2000)13: "Fund Raising, Income Generation and sponsorship within the NHSS" at all times and be in accordance with the NES Sponsorship Policy, as amended for arrangements within the NHS Scotland Academy (NHSSA).
- 24.2 Where sponsorship arrangements are entered into, they should be

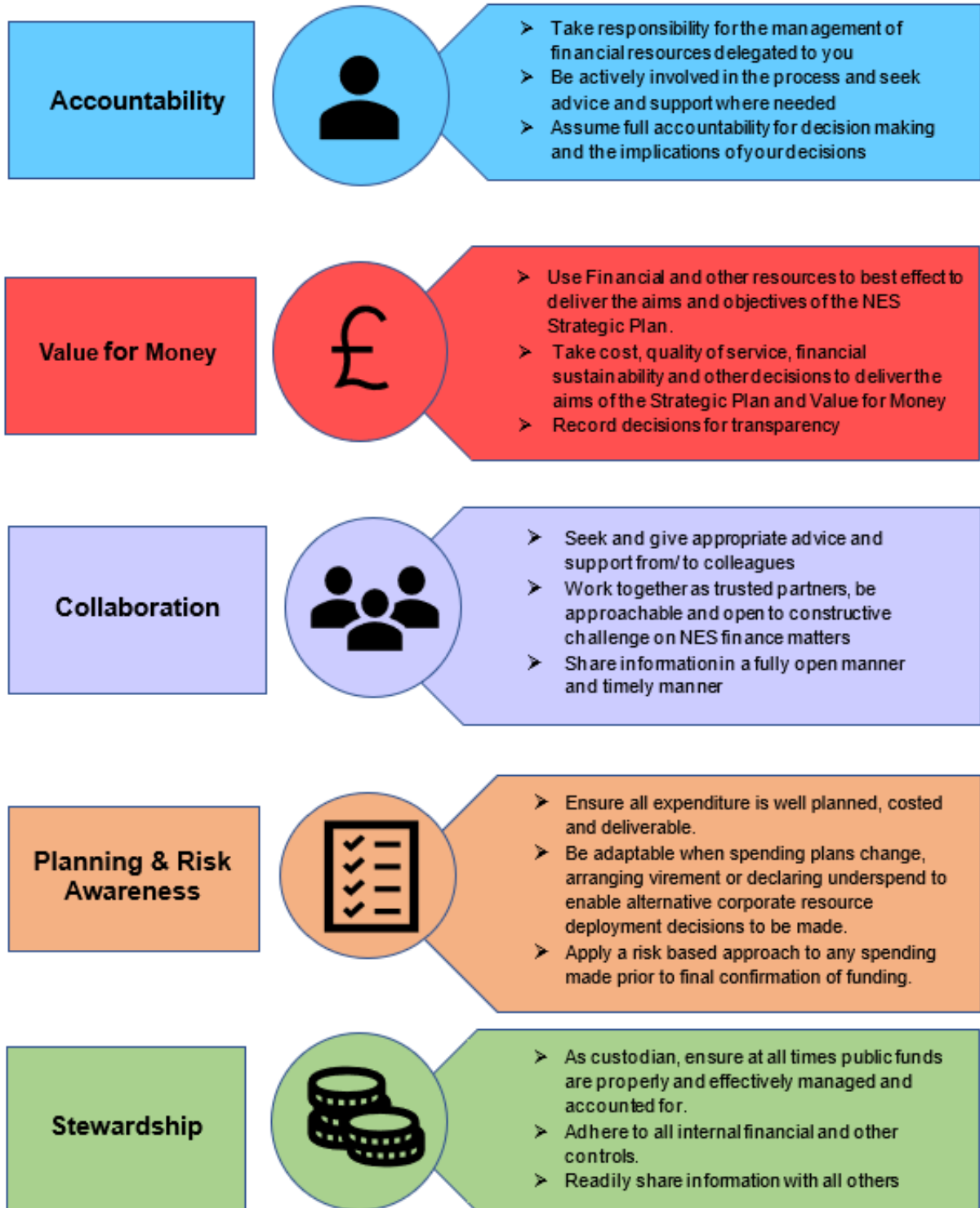
appropriate and discreet and not call into question NHSS funding of core business.

- 24.3 If sponsorship arrangements are agreed, the requirements set out in the income sections 9.23 to 9.26 of the is document, should be followed.

25. INTELLECTUAL PROPERTY

- 25.1 The registration, other forms of protection, management, and exploitation of Intellectual Property Rights (e.g. a brand, patent, domain name, etc.) is subject to compliance with HDL(2004)09 A framework and Guidance on the Management of IP in NHSS, MEL (1998) 23 Policy Framework for the Management of IP within NHSS and current [NES Intellectual Property Policy](#), the IP Policy and Scheme of Delegation.
- 25.2 Where we wish to exploit our right or potential right commercially, it is NES policy to take appropriate advice from legal and IP experts in concluding any agreements or licences necessary to deal with the commercial exploitation of IP owned or being developed by NES. All proposals to commercially exploit our IPR must be fully costed, taking into account NES policies on income generation, and must have the approval of the Executive Director of Finance and the relevant Director.
- 25.3 Any request by a third party for permission to exploit NES IPR commercially must be given reasonable consideration in compliance with the Re-use of Public Sector Information regulations, and any refusal must be recorded together with the rationale for refusal. NES will, whenever appropriate, ensure that IP resulting from projects funded in whole or in part by NHS funds is exploited to the benefit of NES and ultimately NHSScotland.
- 25.4 As per the NES Standard Terms of Purchase, where development forms part of a contract for supply of goods or services, right of ownership of any invention, design or IP arising from such development shall be transferred to NES as soon as any such right arises.
- 25.5 If the sale of any intellectual property rights is being considered, the requirements set out in the income sections 9.23 to 9.26 of the is document, should be followed.

Strategic Financial Principles



NHS Education for Scotland

Audit and Risk Committee

Terms of Reference

1. Constitution and Context

1.1 The NHS Education for Scotland (NES) Board has established a Committee to be known as the Audit and Risk Committee; hereafter referred to as the Committee, which will operate within the terms of the Board's Standing Orders; Standing Financial Instructions and the Board Code of Conduct.

1.2 The Committee will fulfil its duties in line with the Scottish Public Finance Manual and the Scottish Government Audit and Assurance Committee Handbook (3 April 2018).

2. Role

2.1 The Committee independently supports the Accountable Officer and the Board by reviewing the comprehensiveness and reliability of assurances provided in relation to: the governance, the risk management, the control environment and the integrity of the Annual Report and Accounts, Finance, Procurement and Properties and Facilities.

3. Membership

3.1 The Members and Chair of the Committee are appointed by the Board who ensure members are sufficiently independent. The Chair of the Board is not a member but is invited to attend. The Board ensure that the Committee has a balance of skills including recent financial experience.

3.2 Full membership of the Committee shall include a minimum of four non-executive directors of the Board including the Committee Chair.

3.3 The Board may co-opt independent external members for up to one year if additional skills are needed to meet the assurance requirements.

3.4 The Committee may procure specialist ad-hoc advice at the expense of the organisation, subject to budgets agreed by the Accountable Officer.

4. Quorum

4.1 – 4.7 **Quorum: Generic ToRs**

5. Attendees

5.1 – 5.2 Attendees: Generic ToRs

5.3 The external auditor, internal auditor, Chief Executive and Executive Director of Finance shall normally attend all meetings.

6. Private Member Meetings

6.1 Private Member Meetings: Generic ToRs

6.2 The Committee may also meet in private with the internal auditors and external auditors at any time but should ensure that it does so at least annually.

6.3 There are mutual rights of access between the Committee Chair and the Accountable Officer, Chief Internal Auditor, and the External Auditors.

6.4 The Chief Internal Auditor will report functionally to the Committee Chair.

6.5 In the interests of developing relationships, the Committee Chair may elect to have private individual meetings with the Accountable Officer, Director of Finance, Chief Internal Auditor, and the senior representative of the External Auditor.

7. Frequency of Meetings

7.1 The Committee will meet four times a year.

8. Authority

8.1 Authority: Generic ToRs

8.2 The Committee has delegated authority from the Board on the following matters, so that it may carry out its responsibilities and duties:

- Oversight of the process to appoint the Chief Internal Auditor and making a recommendation to the Board. The appointment of the Chief Internal Auditor is a matter reserved to the Board.
- Approving the fee of the external auditor within the scale defined by the Auditor General.

9. Responsibilities and Duties

The Committee will generally discharge its responsibilities and duties through:

9.1 Assurance

(an evaluated opinion, based on evidence from review, on the organisation's governance, risk management and internal control framework).

- 9.1.1 Clear articulation of the level and type of assurance required across all areas within the remit of the Committee through review of the Assurance Framework and the recommendation of an optimum mix of assurance.
- 9.1.2 Reviewing and challenging the assurances that have been provided, as to whether their scope meets the needs of the Accountable Officer and the Board.
- 9.1.3 Ensuring effective mechanisms are in place to provide assurances that are reliable and adequately evidenced.
- 9.1.4 Drawing attention to potential weaknesses in systems of risk management, governance and internal control.
- 9.1.5 Commissioning further assurance work for areas that have not had sufficient review.
- 9.1.6 Reviewing annual reports from the other Committees of the Board to ensure they have obtained appropriate assurance to enable them to discharge their duties and responsibilities and give assurance to the Accountable Officer and Board.
- 9.1.7 The Committee will also periodically review its own effectiveness and report the results of that review to the Board and Accountable Officer.

In practice the Committee will carry out the following activities:

9.2 Internal Control, Risk Management and Corporate Governance

- 9.2.1 Assess the scope and effectiveness of the risk management processes.
- 9.2.2 Review the system of internal control and evaluate the control environment and decision-making processes. This will include annual review of the Board's Standing Orders, Standing Financial Instructions, Scheme of Delegation and Risk Management Strategy.
- 9.2.3 On an annual basis, review the Board's attitude to and appetite for risk across the agreed risk areas of *Strategy/Policy; Financial; Operational/Service Delivery; Accountability/Governance and Reputational/Credibility*, to ensure these are appropriately defined and consider if these are aligned to the strategic and delivery plans.
- 9.2.4 Receive and review reports from management on the effectiveness of internal controls – seek assurance that policies, procedures, and processes are appropriately designed and effectively implemented.
- 9.2.5 Seek assurance on the risk and control environment where services are outsourced to external providers, including shared service arrangements.
- 9.2.6 Review and recommend for approval by the Board, the corporate governance disclosures on audit and risk management in the annual accounts (Governance Statement).
- 9.2.7 Review internal arrangements by which staff may raise concerns about possible improprieties such as anti-fraud policies and arrangements for special investigations.
- 9.2.8 Review counter fraud activity and outcomes.

9.3 External Audit (including review of the Annual Accounts)

- 9.3.1 Review the External Audit strategy and plan.

- 9.3.2 Review the previous External Audit letter to those Charged with Governance and review management responsiveness to any recommendations.
- 9.3.3 Consider planned external audit activity and review the level of coordination and engagement between internal and external audit to ensure there is no unnecessary duplication of audit work.
- 9.3.4 Review the proposed accounting policies before management present them to the Board for its approval.
- 9.3.5 Review the draft Annual Accounts including areas of substantial estimates and judgements and the Governance Statement.
- 9.3.6 Review the clarity and completeness of disclosures in the draft Annual Accounts.
- 9.3.7 Consider any items raised in the external Audit letter to those charged with Governance in reaching a view on whether the committee should recommend that the Board approve the draft Annual Accounts.
- 9.3.8 Review management's letter of representation to the external auditors.
- 9.3.9 Provide the Board and Accountable Officer with an Annual Report, timed to support finalisation of the accounts and the Governance Statement, summarising its conclusions from the work it has done during the year.
- 9.3.10 Approve the annual fee of the external auditor.
- 9.3.11 Review the performance of External Audit on an annual basis.
- 9.3.12 On appointment of a new External Auditor by the Auditor General for Scotland, ensure completion of all required assurance checklists.

9.4 Internal Audit

- 9.4.1 Approve the appointment and termination of Internal Audit and advise on the purchase of non-audit services from the suppliers of audit services.
- 9.4.2 Review and approve the Internal Audit strategy and annual Internal Audit in order to assess their access their accuracy in reflecting the risk exposure of the organisation.
- 9.4.3 Monitor and check that Internal Audit Strategy, annual Internal Audit and adequate resources are being made available to Internal Audit enable the Head of Internal Audit to provide an annual audit opinion.
- 9.4.4 Review the arrangements which the Internal Auditors have in place to implement the requirements of the Public Sector Internal Audit Standards (such as the internal audit charter).
- 9.4.5 Review the results of Internal Audit work, including reports on the effectiveness of systems for governance, risk management and internal control.
- 9.4.6 Review management responses to issues raised.
- 9.4.7 Review the annual Internal Audit opinion and annual report.
- 9.4.8 Review the performance of Internal Audit, including conformance with the applicable standards, expected performance measures, and the results of both Internal and external quality assessments.

9.5 Financial Management

- 9.5.1 Review the draft financial strategy which sets out the financial assumptions and approaches to strategic financial planning which will underpin the draft budget.

- 9.5.2 Review draft financial Plans (Budgets), considering if they support delivery of the Annual Delivery Plan and the NES Strategic objectives, and make recommendations on these to the Board.
- 9.5.3 Provide detailed scrutiny of the estimates of income and expenditure associated with significant new developments requiring formal Business Case approval.
- 9.5.4 Consider the year-end financial report and in particular the financial performance analysed therein and make recommendations to the Board.
- 9.5.5 Consider and make recommendations to the Board on matters relating to the financial management of NES, including efficiency programmes and resource allocation, and the financial arrangements governing relationships with other organisations.
- 9.5.6 Monitor compliance of finance activities with statutory duties, NHSScotland policy and NES priorities in relation to equality and diversity.
- 9.5.7 Consider the financial implications of matters relating to accommodation, maintenance of premises and provision of services. This will include reviewing the content of the Property and Asset Management Strategy (PAMS).

9.6 Procurement

- 9.6.1 Review quarterly reports on Procurement activity including compliance with the Procurement Reform (Scotland) Act 2014, the Scottish Government Procurement Journey and the utilisation of National Contracts.
- 9.6.2 Approve the 3-year Procurement Strategy and associated action plan.
- 9.6.3 Review the NES Procurement Annual Report and approve for publication.
- 9.6.4 Review the Procurement Annual Equality Duty Report and approve for publication.

9.7 Climate Emergency and Sustainability

- 9.7.1 Review sustainability performance, plans and returns.
- 9.7.2 Review the progress against the NHS Scotland Global Climate Emergency and Sustainable Development Policy as per [DL \(2021\) 38](#)
- 9.7.3 Consider the climate emergency and sustainability implications of matters relating to accommodation, maintenance of premises and provision of services.

9.8 Schedule of Business

- 9.8.1 The Committee will develop a Schedule of Business to discharge its responsibilities and duties, which will determine the information that it requires at meetings and consequently the agenda for those meetings.

10. Reporting Arrangements

10.1 - 10.5 **Reporting Arrangements: Generic ToRs**

11. Review

11.1 Review: Generic ToRs

11.2 The Committee will undertake an annual assessment of their performance, highlighting any steps for further improvement to the way they conduct business.

12. Conduct of Business

12.1 As per the [Board Standing Orders](#)

Della Thomas
Board Secretary
January 2025

NHS Education for Scotland

Remuneration Committee

Terms of Reference

1. Constitution/context

1.1 The NHS Education for Scotland (NES) Board has established a Committee to be known as the Remuneration Committee; hereafter referred to as the Committee, which will operate within the terms of the Board's Standing Orders; Standing Financial Instructions and the Board Code of Conduct.

1.2 The Committee will fulfil its duties in line with relevant statutory and regulatory requirements.

1.3 The Committee will be a Sub-Committee of the Staff Governance Committee.

2. Role

2.1 To provide assurance to the Board, through the Staff Governance Committee, that appropriate arrangements are in place to ensure that the Board meets the statutory requirements laid out in the Staff Governance Standard in respect of the remuneration of individual Executive Directors and Directors (and any other staff employed under Executive Managers' or Consultants' pay arrangements).

2.2 The Committee will also review submissions from the Chief Executive for any settlement agreements.

3. Membership

3.1 Membership of the Remuneration Committee will include, as a minimum, three non-executive Directors of the NHS Board, one of whom should, in normal circumstances, be the Employee Director.

3.2 Membership will include:

The Non-Executive Chair will in normal circumstances be the Board Vice Chair.

- i. Non-Executive Board Vice-Chair (and Chair of Education and Quality Committee)

- ii. Non-Executive Chair of the Staff Governance Committee
- iii. Non-Executive Board Chair
- iv. Non-Executive Chair of the Audit and Risk Committee
- v. Non-Executive Chair of Planning and Performance Committee
- vi. Non-Executive Employee Director

4. Quorum

4.1 – 4.7 **Quorum (generic ToRs)** insert link

5. Attendees and Access to Papers

5.1 – 5.2 **Attendees (generic ToRs)** insert link

5.3 Due to the confidential nature of the Remuneration Committee business, and the identifiable confidential personal data included in Committee papers, in line with General Data Protection Regulations and the [Data Protection Act 2018](#), meeting papers will only be accessible to Committee members and the agreed regular attendees and executive performance related papers will be shared only with Remuneration Committee members. The exception to this will be in relation to any requests received from the National Performance Management Committee requiring supporting evidence in relation to executive performance.

5.4 The Chief Executive and Director of People and Culture will be in attendance throughout to provide advice and support (apart from during their review). A senior member of the Workforce Directorate will deputise for the Director of People and Culture in their absence, as appropriate, to ensure specialist HR advice is always available to the Remuneration Committee.

5.5 The Chief Executive and Director of People and Culture will leave the meeting when their own remuneration and terms and conditions are to be discussed, and at other times, at the discretion of the Chair.

6 Private Member Meetings

6.1 **Private Member Meetings (generic ToRs)** insert link

7 Frequency of Meetings

7.3 The Committee will be scheduled to meet three times per annum, and with the Chair's discretion, conduct business by correspondence on occasion where this provides a more timely or effective mechanism.

7.4 Remuneration issues may arise between meetings and will be brought to the attention of the Remuneration Committee Chair by the Chief Executive or the Director of People and Culture. The Chair may call a special meeting of the Remuneration Committee to address the issue.

8 Authority

8.3 **Authority (generic ToRs)** insert link

8.4 No director or senior manager shall be involved in any decisions as to their own remuneration outcome.

9 Responsibilities and Duties

9.1 In relation to Executive Directors and Directors, to:

9.1.1 review and approve the place on the grade scale for new post holders.

9.1.2 seek assurance that remuneration, benefits and employment related terms and conditions are in line with and fair, (whether on an individual or collective basis), in relation to the national system and the arrangements for determining those matters and to seek redress if this is determined to not be the case.

9.1.3 confirm that individual annual SMART performance objectives are in place aligned to the organisations corporate vision, objectives, purpose and values.

9.1.4 review and approve individual annual SMART performance objectives, including overseeing the annual review of performance against these objectives and at the mid-year point seek assurance that performance against objectives is on track and agree any revisions to the objectives during the course of the year.

9.1.5 consider and approve proposals on the assessment of performance at the year-end (taking into account any factors which the Committee consider to be relevant and which may not have been known by the relevant parties at the time when objectives, including their weighting were agreed or at the mid-year point) and any changes to the remuneration or the Terms and Conditions of Employment arising from this assessment of performance during the review period. The Remuneration Committee will sign off the final versions, following discussion, which will then be sent to the National Performance Management Committee (NPMC). Following the initial assessment by the NPMC, the Remuneration Committee will sign off any documents which have been returned for amendment.

9.1.6 delegate responsibility to a sub-group of the Committee to act as a final appeals body for the Chief Executive and Executive Directors who have raised a

grievance regarding their remuneration, benefits, performance grading or terms and conditions of employment.

9.1.7 seek assurance on application of the performance review and development process.

9.2 In relation to any other staff employed under Executive Managers' or Consultants' pay arrangements to: maintain an overview of remuneration arrangements for staff falling within these categories, including providing approval of remuneration.

9.3 Comply with any Scottish Government Health Directorates directions and take into consideration any relevant guidance on remuneration, benefits or terms and conditions of employment, including the guidance contained in the [Remuneration Committee Self-Assessment Pack](#) published by the Scottish Government and Audit Scotland in 2007.

9.4 Review NES policy as appropriate regarding the remuneration, benefits, terms and conditions in the light of any guidance issued by Scottish Government or NHS Scotland.

9.5 Provide assurance to the Board, through the Staff Governance Committee, that systems and procedures are in place to manage the issues set out in Scottish Government guidance so that overarching staff governance responsibilities can be discharged. The Staff Governance Committee will not be given the detail of confidential employment issues that are considered by the Remuneration Committee.

9.6 Review submissions from the Chief Executive for the terms of any Settlement Agreement. Such agreements may also require the approval of the Scottish Government, in accordance with procedures applicable across the public sector.

9.7 All proposals for redundancy leading to contractual entitlement for a payment in excess of £95,000 must have been approved by the accountable officer before being submitted to the Remuneration Committee for review and approval.

9.8 Receive for noting an anonymised annual report on voluntary severance agreements and any other voluntary resignations with a financial consideration that have been approved through the extant Scottish Government business case process and authorised by the NES CEO as Accountable Officer. The Committee shall receive this report in advance of the inclusion of the associated data in the Annual Accounts.

9.9 Subject to the limits laid down in the Scheme of Delegation, all early retirements, that meet the requirement for a two-year maximum payback period and result in additional costs being borne by the employer will be submitted to the Remuneration Committee for consideration and recommendation to the NES Board. Whilst ill health retirements are approved by SPPA and are usually out with the remit of the Remuneration Committee, in any rare and exceptional case where additional costs may be borne by NES, this will be submitted to the Remuneration Committee for consideration and recommendation to the NES Board.

9.10 The Remuneration Committee will act in accordance with the applicable pension scheme rules and regulations, and NHSS pay policy applicable to NES employees.

10 Reporting arrangements

10.1 - 10.5 **Reporting Arrangements (generic ToRs)** insert link

11 Review

11.1 **Review (generic ToRs)** insert link

11.2 The Committee will undertake an annual assessment of their performance, highlighting any steps for further improvement to the way they conduct business.

12 Conduct of Business

12.1 As per the [Board Standing Orders](#)

12.2 All business of the Committee will be conducted in strict confidence.

Della Thomas, Board Secretary

NES

January 2025

NHS Education for Scotland

Staff Governance Committee

Terms of Reference

1. Constitution/context

1.1 The NHS Education for Scotland (NES) Board has established a Committee to be known as the *Staff Governance Committee*; hereafter referred to as the Committee, which will operate within the terms of the Board's Standing Orders; Standing Financial Instructions and the Board Code of Conduct.

1.2 The Committee will fulfil its duties in line with relevant statutory and regulatory requirements.

2. Role

2.1 The role of this Committee is to support and maintain a culture within NES where the delivery of the highest possible standard of staff management is understood to be the responsibility of everyone working within the system and is built upon partnership and collaboration. It will ensure that robust arrangements to implement the Staff Governance Standard are in place and monitored.

2.2 The Committee may also have a role in seeking assurance in relation to staff health and well-being, as a result of work commissioned directly by Scottish Government, or any other aspect of NES business approved formally through the Annual Delivery Plan.

3. Membership

3.1 Full membership of the Committee shall include the following:

- four non-executive directors of the NHS Board, of which one must be the Employee Director with voting rights;
- two lay representatives, from the trade unions and professional organisations (acting in an ex officio capacity), nominated by the NHS Board Partnership Forum with non-voting rights.

4. Quorum

4.1 – 4.7 **Quorum (Generic ToRs)** [insert link](#)

5. Attendees

5.1 – 5.2 **Quorum (Generic ToRs)** [insert link](#)

5.3 The Director of Workforce will attend to provide Committee with advice, provision of information and guidance. With the prior approval of the Chair of the Committee, the Director of Workforce will be able to provide a deputy on an exceptional basis.

5.4 The NES Chief Executive may attend any meetings.

5.5 The Committee may require relevant officers/partnership representatives to attend at meetings, where specific advice and/or guidance is required on relevant topics.

5.6 The Committee may co-opt additional advisors as required.

6. Private Member Meetings

6.1 **Private Member Meetings (Generic ToRs)** insert link

7. Frequency of Meetings

7.1 The Committee shall normally meet four times per year.

7.2 The Chair of the Committee, may within reason, convene additional meetings if they deem this necessary, in consultation with the relevant executive lead.

8. Authority

8.1 **Authority (Generic ToRs)** insert link

8.2 The Committee may establish Sub-Committees to support its functions. This, as per the Staff Governance Standard, will include the Remuneration Committee.

9. Responsibilities and Duties

9.1 The Committee shall act for the Board to oversee the commissioning of structures and process which ensure that delivery against the Staff Governance Standard is being achieved. Specifically, the Committee will:

- 9.1.1 monitor and evaluate strategies and implementation plans relating to people management.
- 9.1.2 note Once for Scotland staff governance related policies and their local implementation.
- 9.1.3 approve any local staff related policy amendment and consider any funding or resource submission in line with NES expenditure processes to achieve the Staff Governance Standard.

- 9.1.4 take responsibility for the timely submission of all staff governance information required for national monitoring arrangements.
- 9.1.5 provide staff governance information for the statement of internal control.
- 9.1.6 provide assurance that systems and procedures are in place to manage the issues set out in MEL (1993) 114 (amended)
- 9.1.7 receive assurance that the Remuneration Committee discharges its duties.
- 9.1.8 consider any recommendations from the Partnership Forum and receive assurance that the Partnership Forum discharges its duties.

9.2 The Committee will also:

- 9.2.1 review and advise on the Board's whistleblowing policy, procedures and processes.
- 9.2.2 receive assurance that health and safety and wellbeing meet legislative requirements and where relevant, the implementation of the Safer Staffing Regulations.
- 9.2.3 ensure appropriate governance in respect of Board delegated strategic risks. Review risk identification, assessment and mitigation, in line with the NES Board's risk appetite, and agree appropriate escalation.
- 9.2.4 monitor compliance of staff governance activities with statutory duties, NHSScotland policy and NES priorities in relation to equality and diversity and oversee the implementation of key aspects of Equality legislation in respect of staff e.g. Equal Pay, Equality and Diversity Training.
- 9.2.5 receive assurance in relation to NES commissions from Scottish Government, regarding wider NHS and/or Health and Social Care workforce data provisions and attraction to related career pathways.

9.3 The Committee will deal with any such matters as may be assigned to the Committee by the Board or other Standing Committee. In particular, the Audit and Risk Committee may assign activity related to Internal Audit Reports and the Board has assigned specific equality outcomes.

10. Reporting Arrangements

10.1 - 10.5 **Reporting Arrangements (Generic ToRs)** insert link

11. Review

11.1 **Review (Generic ToRs)** insert link

11.2 The Committee will undertake a self-assessment of their performance and effectiveness after every meeting and highlight any steps for further improvement to the way they conduct business.

12. Conduct of Business

12.1 As per the [Board Standing Orders](#)

Della Thomas, Board Secretary

NES

January 2025

NHS Education for Scotland

Education and Quality Committee

Terms of Reference

1. Constitution/context

- 1.1 The NHS Education for Scotland (NES) Board has established a Committee to be known as the *Education and Quality Committee*, hereafter referred to as the Committee, which will operate within the terms of the Board's Standing Orders; Standing Financial Instructions and the Board Code of Conduct.
- 1.2 The Committee will fulfil its duties in line with relevant statutory and regulatory requirements.
- 1.3 Specifically, the Committee will take cognisance of the fact that most health professional education and training within the UK is governed by UK statutes and overseen by UK regulators, and that many of the curricula and outcomes are determined at a UK level, by Higher Education Institutions, Royal Colleges and Statutory regulators.

2. Role

- 2.1 The role of the Committee is to:
 - provide assurance to the NES Board that effective arrangements are in place to plan, commission, deliver and quality manage all of NES's education and training provision in line with the organisation's Strategic Plan
 - advise the NES Board, when appropriate on where, and how, its education systems and assurance framework may be strengthened and developed further and
 - provide assurance to the NES Board that effective arrangements are in place for the educational and quality governance of the NHS Scotland Academy accelerated education and training activities.

3. Membership

- 3.1 Full membership of the Committee shall include at least four non-executive Directors of the NHS Board and may include one co-opted member with non-voting rights.

4. Quorum

- 4.1 – 4.7 **Quorum (Generic ToRs)** insert link

5. Attendees

- 5.1 – 5.2 **Quorum (Generic ToRs)** insert link

6. Private Member Meetings

6.1 Private Member Meetings (Generic ToRs) insert link

7. Frequency of Meetings

7.1 The Committee shall normally meet four times per year. The Chair of the Committee, may within reason, convene additional meetings if they deem this necessary, in consultation with the relevant executive lead.

8. Authority

8.1 Authority (Generic ToRs) insert link

9. Responsibilities and Duties

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

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

9.3 Seek assurance that there is a robust and effective clinical and care assurance process in place in NES.

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

9.5 Seek assurance in relation to progress with the implementation of education and learning strategies and policies.

9.6 Seek assurance that arrangements are in place to identify and embed good and innovative practice across NES in ways that enhance the quality of the Health and Social Care education and training provided.

9.7 Seek assurance of the effective performance, monitoring, management and value of Health and Social Care education and training programmes and contracts, including the identification of impact (including outcomes) or intended impact, where possible.

9.8 Ensure appropriate governance in respect of Board delegated strategic risks. Review risk identification, assessment, and mitigation, in line with the NES Board's risk appetite, and agree appropriate escalation.

9.9 Monitor compliance of Health and Social Care education and training activities with the statutory and regulatory requirements of equity, equality legislation,

human rights, person centred care and participation and Government policy and other relevant policies and seek assurance in relation to the Board delegated equality and diversity outcomes relating to educational quality.

- 9.10 Seek assurance as to the effective management of Health and Social Care educational research programmes.
- 9.11 Seek assurance relating to the key strategic engagement of partners and users across Health and Social Care, including approaches to integration that impact on service delivery.
- 9.12 Seek assurance of continuous improvement in relation to Health and Social Care user feedback, including learner satisfaction, fill rate, retention, attainment and progression.
- 9.13 Take steps to ensure there is an acceptable balance between the value of the information received by the Committee and the time and other costs it takes to acquire and process it.
- 9.14 Scrutinise, approve, or note annual reports as appropriate, in relation to the statutory regulation of health and social care education; and other areas of responsibilities as delegated by the NES Board.
- 9.15 Provide assurance to the NES Board in relation to the education and quality assurance for the work of the NHS Scotland Academy in line with the educational statutory function of the NES Board. The Education and Quality Committee's NHS Scotland Academy delegated remit is as per Appendix I.
- 9.16 The Committee will deal with any such matters as may be assigned to the Committee by the Board or other Standing Committees. The Audit and Risk Committee may assign activity related to Internal Audit Reports.

10. Reporting arrangements

10.1 - 10.5 **Reporting Arrangements (Generic ToRs)** insert link

11. Review

11.1 **Review (Generic ToRs)** insert link

11.2 The Committee will undertake a self-assessment of their performance and effectiveness after every meeting and highlight any steps for further improvement to the way they conduct business.

12. Conduct of Business

12.1 As per the [Board Standing Orders](#)

Della Thomas
Board Secretary

January 2025

Appendix I

NHS Scotland Academy Delegated governance and scrutiny to the NES Education and Quality Committee

Review, scrutinise and approve education and quality developmental and performance reports on behalf of the NES and NHS Golden Jubilee (NHSGJ) parent Boards, to ensure that:

1. key strategic partners are effectively and appropriately engaged and involved including for example, universities, the regulators, and health and social care partners, including young people and school-based pathways.
2. the education and training planned for or provided by, the NHS Scotland Academy, is subject to the appropriate statutory regulatory oversight, and the requirements of the relevant regulators are met.
3. the education and training planned for or provided by, the NHS Scotland Academy, is appropriately accredited.
4. the NHS Scotland Academy education and training activities and outcomes; activities are effectively managed; quality assured; subject to continuous improvement and impact is measured and achieved.
5. arrangements are in place to identify and embed good and innovative practice across NES and NHSGJ in ways that enhance the quality of the education and training provided.
6. continuous improvement in relation to user feedback, complaints, including learner satisfaction, retention, attainment and progression is embedded in the management and delivery of the NHS Scotland Academy education and training programmes.
7. governance processes and quality management controls are in place relating to the delivery of NHS Scotland Academy technology enhanced education and training.
8. educational and quality related risks are identified, mitigated and reported.
9. NHS Scotland Academy educational and quality governance is reported annually to the NES Audit and Risk Committee as part of the Education and Quality Committee Annual Report.

NHS Education for Scotland

Planning and Performance Committee

Terms of Reference

1. Constitution/context

1.1 The NHS Education for Scotland (NES) Board has established a Committee to be known as the *Planning and Performance Committee*; hereafter referred to as the Committee, which will operate within the terms of the Board's Standing Orders; Standing Financial Instructions and the Board Code of Conduct.

1.2 The Committee will fulfil its duties in line with relevant statutory and regulatory requirements.

2. Role

2.1 The role of this Committee is to review organisational outcomes and impact achieved in line with the Board's Corporate Strategy and Key Strategic Performance Indicators (SKPIs), the requirements of the Annual Delivery Plan as per Scottish Government guidance, the NES transformation programme and Scottish Government Commissions. The Committee will provide advice and oversight of the development of these Strategies, Plans and programmes in advance of the Board.

2.2 The Committee will provide oversight, scrutiny and assurance relating to digital and innovation work, in line with the Scottish Government's Digital Health and Care Strategy (October 2021). This will include governance and scrutiny within the context of "*Technology*" as defined as the application of technology to deliver business services through the public and private cloud and governance and scrutiny within the context of "*Information*" in relation to the technical aspect of information and cyber security and within the context of the NES legal obligations. The Committee will also provide scrutiny of technology and innovation activity undertaken by the NES Technology Service.

2.3 The Committee will have a strategic horizon scanning role. 2.4 The Committee will provide governance and scrutiny for the NES inequalities work programmes, the Anchors Strategic Plan and any strategic Population Health considerations.

3 Membership

3.1 Full membership of the Committee shall include five non-executive directors of the NHS Board, who shall include the Board Chair and the Standing Committee Chairs.

3.2 The Committee may include one co-opted member with non-voting rights.

4 Quorum

4.1 – 4.7 **Quorum** (insert link to revised generic ToRs)

5. Attendees

5.1 – 5.2 **Attendees** (insert link to revised generic ToRs)

5.3 The Chief Executive, the Director of Planning and Performance and the Director of Technology (when appropriate) will attend the Committee.

5.5 The Committee may require relevant officers to attend at meetings, where specific advice and/or guidance is required on relevant topics.

5.6 The Committee may co-opt additional advisors as required.

5 Private Member Meetings

6.1 **Private Member Meetings** (insert link to revised generic ToRs)

6 Frequency of Meetings

7.1 The Committee shall normally meet four times per year, in advance of the Board.

7.2 The Chair of the Committee, may within reason, convene additional meetings if they deem this necessary, in consultation with the relevant executive lead(s).

7 Authority

8.1 **Authority** (insert link to revised generic ToRs)

8 Responsibilities and Duties

9.1 Horizon scan so that the Board is kept informed of emerging policies, research, data, technical, clinical or other innovative developments, as might have a bearing on the organisation's approach to development and delivery of its strategies and work.

9.2 Review and provide assurance on the development of the Board's Strategic Plan, the supporting Annual Delivery Plan and Transformation Plans and provide scrutiny of progress made in achieving outcomes and impact.

- 9.3 Receive assurance that the corporate governance processes have incorporated in-year Scottish Government commissions into the overall strategic work programme with specific focus on alignment with the Board's Strategy and the benefits realisation ambitions from these developments.
- 9.4 Ensure that systems and procedures are in place to monitor, manage and improve organisational performance reporting and this reporting includes evidence of impact and outcomes achieved.
- 9.5 Scrutinise the full quarterly Strategic Key Performance Indicator (SKPI) report prior to Board and the associated performance data relating to risk, delivery and finance, Best Value and efficiencies.
- 9.6 Monitor, seek evidence and give assurance on business continuity and organisational resilience, including emergency planning.
- 9.7 Seek assurance that health inequalities and social accountabilities is addressed across the NES business, including the development and monitoring of the Anchors Strategic Plan and any Population Health considerations.
- 9.8 Ensure compliance with statutory and regulatory requirements including, clinical and technical assurance and in line with lawful and ethical processing of patient identifiable data, cybersecurity, safety and user acceptability and as per policies and guidance from the Scottish Government and other organisations as appropriate. Noting that the Clinical and Care Assurance Sub-Group of the Education Quality Committee (EQC) will provide assurance to EQC in relation to educational clinical and technical assurance matters.
- 9.9 Scrutinise the quarterly complaints reports and the Annual Feedback Comments Concerns and Complaints Report in advance of Board.
- 9.10 Ensure that effective and coherent strategic engagement and communications is progressed with the relevant stakeholders particularly Scottish Government, NHS Boards, Integration Joint Boards, COSLA, third sector and suppliers to increase confidence in using digital ways of working.
- 9.11 Receive assurance that the NES Corporate Parenting action plan activities are progressing satisfactorily.
- 9.12 Delegate as appropriate any more detailed performance scrutiny to the relevant Committees.
- 9.13 Collaborate effectively and interact constructively with the governance structures of other external organisations as appropriate, as well as the across the internal Committee structures of NES.
- 9.14 Deal with any such matters as may be assigned to the Committee by the Board or other Standing Committee. In particular the Audit and Risk Committee may assign activity related to Internal Audit Reports and the Board has assigned specific equality outcomes.

9 Reporting Arrangements

10.1 - 10.5 **Reporting arrangements** (insert link to revised generic ToRs)

10 Review

11.1 **Review** (insert link to revised generic ToRs)

11.2 The Committee will undertake a self-assessment of their performance and effectiveness after every meeting and highlight any steps for further improvement to the way they conduct business.

11 Conduct of Business

12.1 As per the [Board Standing Orders](#)

Della Thomas, Board Secretary

NES

January 2025

Terms of Reference: Standard headings for all Committees

1. Constitution/context
2. Role
3. Membership
4. Quorum
5. Attendees
6. Private Member Meetings
7. Frequency of Meetings
8. Authority
9. Responsibilities and Duties
10. Reporting arrangements
11. Review
12. Conduct of Business

Generic Terms of Reference: applicable to all NES Committees

4. Quorum

- 4.1 Three Non-Executive members will constitute a quorum.
- 4.2 All Committees will have a membership of a minimum of four non-executives.
- 4.3 In determining whether a quorum is present the Committee Chair must consider the effect of any declared interests. This consideration shall be minuted.
- 4.4 If a member, or an associate of the member (i.e. family, friend or business associates), has any pecuniary or other interest, direct or indirect, in any contract, proposed contract or any other matter under consideration by the Committee, the member should declare that interest at the start of the meeting or at any other part of the meeting.
- 4.5 A 'conflict of interest' is considered to be any connection or association with a third party that is (or appears to be) against the best interests of NES, or which could enable the member reasonably to be suspected of using their position within NES to gain an unfair advantage for or from a third party.
- 4.6 This applies whether that interest is already recorded in the Board Members' Register of Interests. Following such a declaration, the member shall be excluded from the Committee meeting when the item is under consideration and will leave the meeting for that item. The member will not be counted as participating in that part of the meeting for quorum or voting purposes.
- 4.7 When a quorum is not present, the only actions that can be taken are to either adjourn to another time or abandon the meeting altogether and call another one. The quorum should be monitored throughout the conduct of the meeting in

the event that a member leaves during a meeting, with no intention of returning.

5. Attendees

- 5.1 Board members (non-executive or executive members) who are not members of the Committee may attend a Committee meeting and have access to the meeting papers. However, if the Committee elects to consider certain items as restricted business, then the meeting papers for those items will normally only be provided to members of that Committee. The person presiding at the Committee meeting may agree to share the meeting papers for restricted business papers with other Board members.
- 5.2 The Committee Secretary will attend meetings. The Board Secretary may attend, in agreement with the Committee Chair.

6. Private Member Meetings

- 6.1 The Chair has the right to call a private meeting of Committee members to deal with matters that may arise from their Terms of Reference.

8. Authority

- 8.1 The Committee is authorised to:
- Ensure compliance with due process relating to any investigation of activities which are within the terms of its responsibility and duties. In doing so, is authorised to seek information it requires from any Board member or employee, paying due regard to professional responsibilities and personal data rights. All members and employees are expected to co-operate with reasonable requests made by the Committee;
 - Approve matters as described within its responsibility and duties;
 - Request the attendance of any employee or contractor of NES (as/if agreed on their engagement), as may be required;
 - Establish such Sub-Committees or Sub-Groups it considers appropriate to ensure its work is suitably informed and supported;
 - The Audit and Risk Committee and the Planning and Performance Committee may delegate certain aspects of work to other Committees for more in-depth scrutiny and active governance as / if appropriate.

10. Reporting Arrangements

- 10.1 The names of members present at a meeting of the Board Committee, shall be recorded in the minute of the meeting. The names of other persons in attendance shall also be recorded.

- 10.2 The Board Secretary (or his/her authorised nominee) shall prepare the minutes of meetings of the Committee. The Committee shall review the draft minutes at the following meeting. Any amendments, as agreed by the Committee will be made and the person presiding at that meeting shall sign the final version of the approved minute.
- 10.3 The approved minute will be brought to the next public Board meeting for noting and be published on the Board's external website. The Remuneration Sub Committee will be the exception to this.
- 10.4 In the interim, a verbal report on relevant matters can be given by the Chair to the Board. Additional reports, as appropriate, will be provided to the Board as required to ensure it is informed of current issues.
- 10.5 The Standing Committee Chair will report to the Board, and will submit an Annual Report on its activities, outcomes and effectiveness to the Audit and Risk Committee. The Remuneration Sub Committee will submit their annual report through the Staff Governance Committee. It is then the responsibility of the Audit and Risk Committee to review and recommend approval to the Board. This will also give relevant assurance to the Board and Accountable Officer relating to the Governance Statement.

11. Review

- 11.1 The Committee will review its Terms of Reference annually and these will be submitted as part of the corporate governance package to the Board for approval on an annual basis.

12. Conduct of Business

As per the [Board Standing Orders](#)

- Etiquette and Standards;
- Conduct at meetings;
- Appointment and Review

Della Thomas, Board Secretary
NES

Approved by Board 26 September 2024

NHS Education for Scotland

NES/25/12

Agenda Item: 11a

Date 06 February 2025

NES Public Board

1. Title of Paper

1.1 Changes to Board and Committee Membership

2. Author(s) of Paper

2.1 Della Thomas, Board Secretary and Corporate Governance Principal Lead

3. Lead Director(s)

3.1 Karen Reid, CEO and Accountable Officer

4. Situation/Purpose of paper

4.1 This paper details some changes to Board and Committee membership for homologation by the Board.

5. Background and Governance Route to Meeting

5.1 The Board Chair is responsible for reviewing the Board Skills and Experience Matrix and ensuring that the membership of the Board and the Committees include the right level of skill and experience to govern the business.

6. Assessment/Key Issues

6.1 We have been successful in appointing a new non-executive director to our Board. George Valiotis joined our Board from 6 January 2025 for a term of

four years. George will become a member of the Education and Quality Committee from 1 February 2025.

- 6.2 As per the decision made at the 26 September 2024 Board, the Technology and Information Committee will be dissolved as of 31 March 2025. Some members of this Committee will serve on the newly formed Planning and Performance Committee as of 1 April 2025. This will include non-executive directors, Ally Boyle (PPC Chair); David Garbutt (member) and Jean Ford (member). Angus McCann will become a co-opted member of the PPC until his co-opted period ends on 31 August 2025. Additional members of the PPC will include non-executive directors, Annie Gunner Logan and Nigel Henderson.
- 6.3 Shona Cowan, non-executive director will move from the Technology and Information Committee to join the Staff Governance Committee as of 1 April 2025.

7. Recommendations

- 7.1 The Board is invited to homologate these membership changes.

Author to complete **checklist**.

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

a) Have Educational implications been considered?

- Yes
 No

b) Is there a budget allocated for this work?

- Yes
 No

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

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

- d) **Have key strategic risks and mitigation measures been identified?**
 Yes
 No
- e) **Have Equality, Diversity, Human Rights and health inequality issues been considered as per [Fairer Scotland Duty: Guidance for Public Bodies](#) and Corporate Parenting as per the [Children and Young People \(Scotland\) Act 2014](#)?**
 Yes
 No
- f) **Has an Equality Impact Assessment (EQIA) been completed or in progress for this piece of work?**
 Yes
 No
- g) **Have you considered Emergency Climate Change and Sustainability implications as per [DL \(2021\) 38](#)?**
 Yes
 No
- h) **Have you considered a staff and external stakeholder engagement plan?**
 Yes
 No

Author name: Della Thomas
Date: Janaury 2025
NES

AUDIT AND RISK COMMITTEE

NES/AR/24/70

Minutes of the Eighteenth NES Audit and Risk Committee held on Thursday 03 October 2024 9.30 – 11.30 via Microsoft Teams.

Present: Jean Ford, (JF) Non-Executive Director and Committee Chair
Ally Boyle, (AB) Non-Executive Director
Gillian Mawdsley, (GM) Non-Executive Director – Climate Emergency and Sustainability Champion and Whistleblowing Champion

In attendance: Jenn Allison, (JA) Committee Secretary
Christina Bichan, (CBI) Director of Planning and Performance (item 15)
Jim Boyle, (JB) Executive Director of Finance
David Garbutt, (DG) Chair of NES
Micheal Gibbons (MG) Management Trainee (observing)
Laura Howard, (LH) Head of Finance
Debbie Lewsley, (DL) Risk Manager (observing) (item 16)
James Lucas, (JL) Internal Audit, KPMG
Kenny McLean, (KM) Procurement Manager (item 13)
Christopher McClelland, (CM) External Audit, Audit Scotland
Karen Reid, (KR) Chief Executive
Syed Shah (SS) Internal Audit, KPMG
Andrew Sturrock (AS) Director of Pharmacy (observing)
Della Thomas, (DT) Board Secretary & Corporate Governance Principal Lead

1. Welcome and introductions

- 1.1 The Chair welcomed everyone to the Audit and Risk Committee (ARC). The Committee noted that Andrew Sturrock and Debbie Lewsley were observing the Committee to shadow Karen Reid and Della Thomas, respectively, as part of their development. Micheal Gibbons was also observing the Committee as part of his management traineeship.
- 1.2 The Committee noted that Kenny McLean would be in attendance for the Procurement items, Debbie Lewsley would cover the Risk items and Christina Bichan for the item regarding Best Value Principles.

2. Apologies for absence

- 2.1 Apologies were received from Olga Clayton Non-Executive Director and Helen Russell and Carol Grant, Audit Scotland, External Auditors.

3. Declarations of interest

- 3.1 There were no declarations of interest in relation to the items of business on the agenda of this meeting.

4. Any Other Business

4.1 No other business items were identified.

5. Minutes of Audit and Risk Committee 13 June 2024 (NES/AR/24/51)

5.1 The minutes were approved as a correct record.

6. Actions of the Audit and Risk Committee (NES/AR/24/52)

6.1 The Committee noted that eleven of the twelve actions have been marked as complete or closed.

6.2 Committee sought clarity on the outcome of the action for the Chair of the ARC to meet with Christina Bichan to discuss development of a Policy register. The ARC Chair updated that Christina Bichan and her team are developing procedures to track policies and suggested that a future update regarding this work is added to the ARC schedule of business. Committee Secretary to ensure that updates against future actions completed include fuller information to reflect outcome rather than simply stating the action is complete or e.g. that a meeting took place.

Action: JA

7. Matters arising

7.1 There were no matters arising from the previous minutes.

8. Internal Audit Reports

a) Core Financial Controls – Establishment Controls (NES/AR/24/53)

8.1 The Chair welcomed Ameet Bellad to the meeting, who was in attendance to answer any questions regarding the audit. The Chair invited James Lucas to introduce the report.

8.2 James Lucas presented the report which reviewed NES Establishment Controls process with focus on the key controls in place for matching information on agreed funded posts to the details of staff currently employed in those posts.

8.3 The report provided an overall assurance rating of 'significant assurance with minor improvements required'. Three medium rated management actions have been agreed in relation to matching of funding to posts, data accuracy and improvements to the centralised dashboard. Two low rated management actions were agreed regarding roles and responsibilities and improvements to the business case form.

8.4 Karen Reid informed the Committee that Jim Boyle chairs the ET Sub-Group that reviews business cases for new posts and changes to current posts. The Sub-

Group look at the requests collectively and make recommendations to the NES Executive Team for final approval. Karen Reid also informed the Committee that NES also intend to conduct a review of workforce data management and make improvement recommendations.

8.5 The Committee asked Ameet Bellad if the due dates for recommended actions were achievable and he confirmed that they were.

8.6 The Committee noted the report, and the assurance provided, noting the report will be submitted to the Staff Governance Committee (SGC) for monitoring of the management actions to closure, seeking further updates as they deem appropriate.

b) Workforce HR and Finance Data (NES/AR/24/54)

8.7 The Chair invited James Lucas to introduce the report and noted that Ameet Ballad was in attendance to answer any questions.

8.8 James Lucas presented the report which reviewed data quality controls in place to manage joiners, changes and leavers records within HR, payroll and finance systems under the Core Staff Model (CSM) and Lead Employer Model (LEM).

8.9 The Committee noted that the report provided an overall assurance rating of 'partial assurance with improvements required'. Six medium rated management actions and eight low rated management actions have been agreed with management.

8.10 James Lucas updated the Committee that several areas of good practice were identified across both models. He highlighted that there are a few minor control design issues within the joiner and leavers processes and some issues in data recording which creates a need to increase staff awareness through regular training and communications.

8.11 James Lucas informed the Committee that the design of NES data quality controls within the LEM are not as robust or mature compared to the CSM. There is a need to review the end-to-end processes (those within NES), particularly around joiners and absence management and there is an opportunity to consolidate all existing SOPs into fewer documents. He added that NES should explore appropriate solutions to overcome certain limitations within different systems to ensure consistency and accuracy of the Doctors and Dentists in Training record. With regards to data quality controls within the placement Boards, there is currently no mechanism within NES which provides assurance over the accuracy and completeness of information recorded by the Boards on behalf of NES.

- 8.12 Discussion took place regarding the NHS Scotland Workforce data system electronic employee self-service (eESS). The Committee noted that eESS, which was implemented around twelve years ago, has various issues integrating with other key business systems.
- 8.13 Karen Reid informed the Committee that NHS Scotland Business Systems group are aware of issue and working on improvements including upskilling staff to reduce human errors.
- 8.14 Ameet Bellad commented that eESS is operating within a complex business systems landscape and informed the Committee that work arounds are identified and implemented as appropriate. For example, an existing interface will be able to be used to link eESS to the system Job Train, however he added that the National Rostering system, for example, cannot be integrated with eESS.
- 8.15 The Committee noted that one of the due dates is scheduled for a year away and asked for confirmation that these will be worked on in the meantime. Ameet Bellad confirmed that work is already ongoing towards this action and confirmed that due dates are reasonable.
- 8.16 The Committee noted the report, and the assurance provided, noting the report will be submitted to the SGC for monitoring of the management actions to closure, seeking further updates as they deem appropriate.
- 8.17 James Lucas extended his thanks to Ameet Bellad and his colleagues for their engagement throughout the development of this internal audit. Ameet Bellad left the meeting.

c) Progress Report

(NES/AR/24/55)

- 8.18 The Chair invited James Lucas to introduce the report.
- 8.19 James Lucas presented the report which updated the Committee on progress against delivery of the Internal Audit plan for 2024-25 and against the outstanding management actions.
- 8.20 The Committee noted that two internal audits are complete and reported to this committee with a further two in progress, due for submission to the January 2025 ARC meeting: Cyber - Business continuity, resilience and recovery - Cloud Services and Transformation Programme Assurance.
- 8.21 James Lucas informed the Committee that good progress has been made on implementing outstanding management actions, with six actions being closed since the ARC meeting in June. The Committee noted that there are thirty-three

outstanding actions in total, twenty-seven of which are not yet due and six remaining actions have revised due dates.

8.22 The Committee noted that internal auditors are now using the Jira system to track progress of the NES interna audit actions.

8.23 The Committee were content that the report provided them with assurance. They were also content with the progress of the internal audit plan and progress in implementing outstanding recommendations.

9. External Audit Recommendation Follow up (NES/AR/24/56)

9.1 The Chair invited Laura Howard to present the paper to update the Committee on progress of External Audit Recommendations from the 2023-24 Annual Report and Accounts.

9.2 The Committee noted that all three recommendations are in progress and have a completion date of March 2025 and that recommendations two and three are being taken forward as part of the preparation of the annual report and accounts for 2024/25.

9.3 The update provided the Committee with assurance that External Audit recommendations were being satisfactorily implemented and progressed.

10. Board Assurance Framework (NES/AR/24/57)

10.1 The Chair invited Della Thomas to introduce Board Assurance framework for review and approval.

10.2 Della Thomas informed Committee that as per Board approval at the 26 September 2024 meeting, the Technology and Information Committee will be dissolved as of 31 March 2025 and the new Planning and Performance Committee constituted as of 1 April 2025. She asked the Committee to note that these changes will be reflected in the Board Assurance Framework when it is next brought through the ARC for bi-annual review at the April 2025 meeting.

10.3 Della Thomas advised the Committee that discussion took place at the NHS Board Chairs Group Development meetings on 19-20 September 2024 regarding the potential for a Once for Scotland Board Assurance Framework. The Committee noted that, if this is agreed, the NES Board Assurance Framework will be developed in line.

10.4 The Committee asked that an amendment is made to refer to the SGC champion as the whistle blowing champion.

10.5 It was noted that the formatting of the Board Assurance Framework was out of alignment and this this amendment would be made along with a revision to overall

formatting of the Board Assurance Framework for easier read across and navigation. **Action: DT**

10.6 The Committee suggested that future iterations could include reference to the Remuneration Committee's role, for example in relation to Executive Objective setting and appraisal and in relation to Executive recruitment. It was agreed this amendment would be made at the April 2025 Bi-Annual review stage. **Action: DT**

10.7 The Committee noted the reference to the development of NES Strategies, however some of these are now already approved and in place. The Board Assurance Framework will be amended to reflect this. **Action: DT**

10.8 The Committee noted the revisions to the NES Board Assurance Framework regarding inclusion of reference to the quarterly complaints reporting scheduling through the Education and Quality Committee (EQC) and Board (page 4) and the reference to the NES NHS Corporate Governance Blueprint Improvement Action Plan.

10.9 The Committee were content to approve the amendments to the current Board Assurance Framework with the additions and revisions as agreed for onward sequencing to the 21 November 2024 Board meeting.

11. Review of ARC ToRs (NES/AR/24/58)

11.1 The Chair invited Della Thomas to introduce the updated draft Terms of Reference (ToRs) for annual approval.

11.2 Della Thomas highlighted that some amendments were approved to the generic headings at the 26 September 2024 Board meeting in relation to 8.1 "Authority". The additions made were to enable all Committees to establish Sub-Committees or Sub-Groups and enable the ARC and the Planning and Performance Committee to delegate certain aspects of work to other Committees for more in-depth scrutiny and active governance as / if appropriate.

11.3 Della Thomas informed the Committee that the approved ARC ToRs will come back to the ARC in January 2025 with the other NES Committee ToRs as part of the Corporate Governance package.

11.4 The Committee noted that the Corporate Governance package will not include the Technology and Information Committee (TIC) ToRs, as the 26 September 2024 Board have agreed that this Committee will be dissolved. As the newly approved Planning and Performance Committee (PPC) will not have met in shadow form by 16 January 2025, the PPC ToRs will be brought through ARC by correspondence before being added to the Corporate Governance pack for the 06 February 2025 Board for approval.

11.5 The Committee noted there had been one minor amendment to the ARC ToRs (at paragraph 9.5.5) identifying that the Committee would receive regular reporting of salary overpayments. The Committee discussed this and agreed that this was a one-off process and that it was not necessary to revise the ToRs to include this aspect. It was agreed that the ARC would not require formal and regular reports regarding progress of improvements to processes in relation to salary overpayments, as salary overpayments are covered in the annual losses report, as part of the NES Annual Accounts. **Action: DT**

11.6 It was noted that the format of the numbering is required to be corrected.

Action: DT

11.7 The Committee were content to approve the proposed minor change in relation to the format and paragraph numbering for inclusion in the corporate governance package to be submitted to the ARC meeting in January 2025.

12. Corporate Governance Blueprint Improvement Action Plan: Progress update (NES/AR/24/59)

12.1 The Chair invited Della Thomas to update the Committee regarding progress of implementation of the NES Corporate Governance Blueprint Improvement actions.

12.2 Della Thomas invited the Committee to note amendments to the Improvement Plan to include two additional columns to assist the progress update process and that amendments have been made to reflect changes since agreed by the Board in March 2024.

12.3 Discussion took place regarding the reference in the plan to a Board apprenticeship. Della Thomas informed the Committee that this is a United Kingdom Government scheme that has been in place for three years. She explained that while the Board room apprentice would be encouraged to engage and scrutinise, they would not make up quorate. They would be allocated a mentor and would be observing Boards and Committees.

12.4 The Committee noted that the aim is to increase Board diversity and provide opportunities to develop future NHS Board non-executive applicants. In addition, there are discussions through the NES Board Development Team, to determine if this scheme could be developed specifically for the NHS in Scotland. Some background on the scheme will be circulated to the ARC for information. **Action: DT**

12.5 The Committee were content with progress against actions and confirmed that the progress made to date provides them with satisfactory assurance.

13. Procurement

a) 2024-25 Bi-Annual Procurement Update (NES/AR/24/60)

13.1 The Chair welcomed Kenny McLean to the meeting and invited him to update the Committee on Procurement activity, including commentary on key contracts delivered and savings achieved in the first half of financial year 2024-25 and planned procurement work for Q3-4.

13.2 Kenny McLean informed the Committee that whilst it has been a challenging year, the figures are broadly similar to last year.

13.3 The Committee congratulated the Procurement team that 99% of procurement contracts were paid within the agreed timescales and noted that two cataract simulators are now up and running.

13.4 Kenny McLean updated the Committee that there will be future procurement activity in relation to large scale projects in NES, such as digital front door and digital prescribing. He added that procurement work can be impacted if there are delays to funding allocation.

13.5 Discussion took place regarding quality assurance in relation to University contracts. Kenny McLean advised the Committee that quality assurance of services is the responsibility of Directorates. Karen Reid added that Universities often provide very specialised services and that she is not aware of any quality issues.

13.6 The Committee were content with the information in this report.

b) 2024/24 Annual Procurement Report (NES/AR/24/61)

13.7 The Chair invited Kenny McLean to present the 2023-24 Annual Report to Scottish Government (SG).

13.8 Kenny McLean informed the Committee that they reviewed the detailed annual report at the June meeting and the report to SG only covered regulated procurements which are tenders above £50,000.

13.9 The Committee were content with the information in this report and approved the report for publication.

13.10 Kenny McLean left the meeting.

14. Update re Progress of Improvement processes regarding salary overpayments (NES/AR/24/62)

14.1 The Chair invited Laura Howard to present the paper to update the Committee regarding on progress of improvement processes relation to salary overpayments.

14.2 Laura Howard informed the Committee that a further £118k, of the £856k salary overpayments from financial year 2023-34 has been recovered leaving a balance of £321k. One overpayment of £94k continues to be pursued but is unlikely to be recovered. Committee were assured by Chief Executive that action here is being managed appropriately.

14.3 The Committee noted that £277k of overpayments have been identified in financial year 2024-25. £124k (45%) has been recovered to date and work is ongoing to agree payment plans for recovery for the outstanding amount.

14.4 Laura Howard informed the Committee that 92% of the salary overpayments identified in 2024-25 relate to Doctors and Dentists in training (DDiTs) and that a project team has been established to address the issues identified.

14.5 The Committee noted that there has been a marked reduction in the number of overpayments relating to NES directorate staff due to the implementation of monthly reconciliations between HR and the payroll system and the prompt processing of changes.

14.6 The Committee noted the information contained in the report and confirmed it provided satisfactory assurance on actions taken and progress being made.

15. Best Value Principles

(NES/AR/24/63)

15.1 The Chair welcomed Christina Bichan to the meeting and invited her to present the principles which have been developed to aid operational and financial planning for 2025-26 and ensure best value is achieved.

15.2 Christina Bichan explained that the Planning Principles aim to encourage strategic alignment, promote consistency and transparency in decision-making processes, provide a common language and understanding, and enable informed decisions based on shared values and priorities.

15.3 The Committee noted the Planning Principles which cover the following themes: strategic alignment; best value and efficient use of resources; person centred and preventative approaches; innovation, transformation and sustainability; collaboration, integration and teamwork; and equity, social justice and compassion.

15.4 The Committee noted the position regarding the development and adoption of planning principles within NES and confirmed this provided them with assurance.

15.5 Christina Bichan left the meeting.

16. Risk

a) Risk Update and Review of Risk Appetite

(NES/AR/24/64)

16.1 The Chair invited Debbie Lewsley to introduce the paper and highlight any areas of significance.

16.2 The Committee noted the amendments to risks 1, 2, 3, 4 and 9, which had been recently reviewed by the NES Executive Team.

16.3 The Committee felt that there were inconsistencies in relation to controls and noted that the Control Assurance proposal, item 16b seeks to address this challenge. Karen Reid assured the Committee that controls and ratings will be reviewed to ensure a consistent approach is being applied. **Action: DL**

16.4 The Committee approved the risk register, subject to the further changes agreed during the meeting and noted the approved risk appetite.

b) Control Assurance Proposal (NES/AR/24/65)

16.5 The Chair invited Debbie Lewsley to present the Risk Control Assurance proposal, as recommended by the Chair of the Audit and Risk Committee.

16.6 Debbie Lewsley explained that the Control Assurance proposal has been designed to provide enhanced guidance to risk owners on identifying how well individual and collective risk controls are working to mitigate individual risks. This will also strengthen assurance to the NES Board and Governance Committees that all risks are being managed appropriately.

16.7 The Committee approved the NES Risk Control Assurance proposal.

17. Strategic Key Performance Indicator Report (SKPI) (NES/AR/24/66)

17.1 The Chair invited Jim Boyle to introduce the SKPI that relate to the remit of the ARC.

17.2 The Committee noted that this paper represents the first time the Committee has received a report on performance against the strategic KPIs prior to it being presented to the Board.

17.3 The Committee asked why recent performance was marked as not applicable against SKPI32.

Laura Howard explained this is because no internal audits had taken place during the period.

17.4 The Committee confirmed the report provides them with adequate assurance.

18. Climate Emergency and Sustainability Update (NES/AR/24/67)

18.1 The Chair invited Jim Boyle to present the paper to update the Committee regarding work in relation to Climate Emergency and Sustainability.

18.2 Jim Boyle informed the Committee that the NES Climate Emergency and Sustainability Group (CESG), which is made up of representatives from each Directorate, have developed an Action Plan to continue to take forward work to ensure NES is in full compliance with the National Strategy.

- 18.3 Jim Boyle updated that the Scottish Government climate week took place over 23-29 September and that made a range of information available to showcase some of the work we are already doing, to preview some of the actions that we will be implementing in future, and to signpost resources that we have been making available to our employees.
- 18.4 The Climate Emergency and Sustainability Champion felt that the webinar that took place in NES recently was excellent and well attended.
- 18.5 The Committee noted that two National reports are currently in development: The Public Bodies Climate Change Duties Report that will be submitted to the Sustainable Scotland Network in November 2024; and The Annual Climate Emergency and Sustainability Report that all Boards are required to submit to the Scottish Government by 30 November 2024. The Committee noted that these reports will be sent to ARC members for comment via correspondence prior to the reports being sequenced to the 21 November 2024 Board meeting.
- Action: JB**
- 18.6 A query was raised regarding how frequently the plan is reviewed and if the plan or a summary of information of the plan should be made available to NES staff. Jim Boyle informed the Committee that the CESG review the plan regularly and will discuss with the group how information regarding the groups' activities could be shared more widely across NES.
- Action: JB**
- 18.7 The Committee congratulated Jim Boyle and colleagues regarding the variety of work ongoing in this area and stressed the importance of highlighting NES' role in terms of education and its potential impact on the whole service.
- 18.8 Jim Boyle added that NES work closely with National Services Scotland (NSS), supporting the wider NHS in Scotland to make improvements to facilities and fleet services.
- 18.9 The Committee noted ongoing and planned activities across the breadth of all NES regarding Climate Change and Sustainability, including the NES Action Plan, which they confirmed provide satisfactory assurance. The Committee noted that updates regarding the Climate Emergency and Sustainability will be submitted to the NES Board for information.

19. Property Update

(NES/AR/24/68)

- 19.1 The Chair invited Jim Boyle to present the report to update the Committee on progress of reviewing NES' property requirements.
- 19.2 Jim Boyle asked the Committee to note that one of the two offices in Dundee has been closed with consolidation of staff into the former Dundee Dental Education Centre (DDEC), which has been renamed the Frankland Building. He reported that some office space at Forest Grove House in Aberdeen has been reduced and taken over by NHS24. He advised that plans to reduce office

space in Inverness by 30% are underway and that the second floor at Westport in Edinburgh has been taken over by NHS Lothian.

19.3 Jim Boyle informed the Committee that there has been a development in relation to renovations to the new Glasgow office. The papers had advised the Committee of recent delays to building work, however it has since been announced that the contractors have gone into Administration. He reported that Procurement are working closely with the Central Legal Office in relation to this.

19.4 Jim Boyle advised that it would likely be necessary to provide a report to Private Board recommending the way forward. **Action: JB**

19.5 Jim Boyle advised the Committee that a short-term extension has been negotiated with the landlord of 2 Central Quay in Glasgow, at existing rental levels, until the end of January 2025, with the option to extend if both parties are agreeable.

19.6 The Committee were content with the update and confirmed it provided them with assurance and noted that a full Private Board paper would follow.

20. Counter Fraud Update (NES/AR/24/69)

20.1 The Chair invited Laura Howard to present the paper to update the Committee regarding Counter Fraud activity in NES.

20.2 Laura Howard informed the Committee that NES continues to make good progress to fulfill the Counter Fraud requirements, with robust controls in place. The Committee noted that eleven of the twelve Fraud standards components have been met.

20.3 The Committee noted that there have been no investigations and no declarations of gifts and hospitality since the April 2024 ARC meeting.

20.4 The Committee noted the information contained in the report and confirmed it provided assurance. The Committee noted the appendices including NES' agreed Counter Fraud Annual Action Plan and NES' Fraud Risk Assessment. The Committee also noted Counter Fraud Services Annual and Quarterly Reports.

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.

22. Audit Scotland Reports

22.1 The Committee noted the following Audit Scotland Reports:

- Quality of public audit in Scotland: Annual report 2023/24
- Audit quality: Audit Scotland's transparency report 2023/24
- The important role of a CFO
- Risk Management Authority annual audit 2023/24

23. Date and time of next meeting

23.1 The next meeting of the Audit and Risk Committee will be held on Thursday 16 January 2025 at 09:30 via MS Teams.

NES
October 2024
JA/CD/DT/JB/JF

NHS Education for Scotland

EDUCATION & QUALITY COMMITTEE

12 September 2024 from 10:15am to 13:15pm

Approved minutes of the sixteenth meeting of the Educational & Quality Committee (EQC) held on Thursday 12 September 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
Peter Donnelly (PD), Co-opted Committee Member
Nigel Henderson (NH), Non-Executive Director

In Attendance: Rob Coward (RC), Principal Educator, Executive Secretary
Chris Duffy (CD), Senior Admin Officer, Minute-Taker
David Garbutt (DG), Board Chair
Kevin Kelman (KK) Director of NHS Scotland Academy (NHSSA), Learning & Innovation
Duncan MacKinnon, Head of Programme – Leading to Change
Gordon Paterson (GP) Director of Social Care
Ryan Reed (RR), Head of Programme NHSSA, Learning & Innovation
Della Thomas (DT), Board Secretary and Principal Lead for Corporate Governance
Emma Watson (EW), Executive Medical Director and joint EQC Executive Lead
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 There were no apologies received from members of the Committee.

2.2 Apologies were received from regular Committee attendees Janice Gibson, Associate Director, Organisational Development Leadership and Learning (ODLL), Lindsay Donaldson, Deputy Medical Director and Karen Reid, Chief Executive and Accountable Officer.

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 12 May 2024

5.1 The Chair invited the Committee to review the draft minutes from the 12 May 2024 EQC meeting.

5.2 The Committee approved the draft minute with no amendments required.

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 16 completed actions with 6 actions in progress and 1 action for the Committee to confirm if they consider the action complete.

6.2 The Committee received a verbal update from Gordon Paterson who confirmed that NES are actively engaged in discussions with 'The Promise' team in Scottish Government. This is through Claire McGuire in NMAHP and work on children's rights, in order to close off this action, Clare McGuire will link with Dylan White in NHSSA.

6.3 The Committee thanked Janice Gibson and Duncan MacKinnon for the updates provided relating to Leading to Change. The Committee confirmed the information does provide more context and assurance and recommended the actions relating to Leading to Change are also complete.

6.4 The Committee noted the updates within the report and approved the action status report.

7. Education & Quality Executive Leads Report

7.1 The Committee Chair invited Karen Wilson and Emma Watson to introduce the report. The broad representation across the whole of NES, diversity of work and interlinkages were highlighted. It was noted that Committee members had previously asked for more data and effort has been made to incorporate this into the report. The Committee were asked for feedback and if this now meets the Committee's expectation. The Committee Chair recognised that a lot of work has been put into adding contextual information and it is much clearer to see what impact the work is having. The data coming through makes a difference for Committee members and there has been huge improvement.

7.2 The Committee Chair opened the report for comments and questions.

The Committee asked a question in relation to 5.2.3.2 in the report, General Medical Council (GMC) annual trainee survey (NTS) outcomes. It was noted that last year the Committee received a more detailed picture on the low performing areas and it was asked if the Committee will see this detail this year. Also, it was noted that 25 sites sit in the bottom 2% and 30 sites sit in the top 2%, and it was asked how many sites are there altogether. Emma Watson responded, the process of fully understanding the results and pulling together action plans is still in progress. The Committee will receive much more in-depth analysis at the next EQC meeting in December.

- 7.3 A further question was asked in relation to the NTS outcomes, is it possible to review the top performing sites and translate their good practice to those that are low performing. Also, is it possible to work out why satisfaction is not good in particular areas. Emma Watson replied, these conversations will take place when the Quality Review Panels meet during September, the outcomes of these conversations will also feed into the monthly Medical Quality and Safety Group. It was noted that there are also the Scottish Training Survey results to analyse which will further triangulate the data. Emma Watson noted that the update may have come to Committee too soon and will consider this for next year.

Action: Emma Watson

- 7.4 The Committee commented on 5.2.3.4 in the report, Turas Refresh. It was noted that Turas includes an interface with the Scottish Online Appraisal Resource (SOAR) and that as of a certain date those requiring to use SOAR for appraisal will only be able to access by using a Turas account. It was asked if this could be a potential issue with lots of people becoming locked out of SOAR with imminent appraisals. Emma Watson agreed to take this to the operational team outwith this Committee.

Action: Emma Watson

- 7.5 The Committee noted the update at 5.2.3.3 in the report, National Leadership Development and Succession Planning and focussed on the social care workforce numbers, recognising they are low. It was noted that communications and social media will help increase these numbers, but it was asked if any more could be done at this stage. Gordon Paterson chaired the first 2 selection panels for developing senior systems leadership and there were concerns with Social care representation at the time, an inquiry has been carried out and there has been engagement with Scottish Care, Scottish Social Services Council and the chief social work adviser to get a greater understanding of some of the challenges. NES is seen as a national health board and there is work to address some of the NHS specific language that is used. Angella Fulton (Associate Director, Social Care) co-chairs the leading to change social work group and NES are continuing to take every measure to mitigate these problems and to open up the programmes to the wider workforce.

- 7.6 The Committee noted the two Artificial Intelligence fellows and the focus on reemergent technology and asked what might NES be adopting. Kevin Kelman confirmed that an update will be provided at the next Board development session and this will provide an opportunity for board members to ask more detailed questions.

7.7

The Committee Chair thanked all those who contributed to the report. The report contained excellent data and context and evidence that authors are responding to the Committee's requests. Particular thanks was given to Judy Thomson and her team for the impressive and useful Psychology update.

7.8

The Committee noted the report and confirmed it provided the necessary assurance.

8. Medical Education Reform Update

8.1 The Committee Chair invited Emma Watson to introduce this report.

8.2 Emma Watson noted that following the launch of Medical Education Reform at the Board development session in January, the Medical Directorate have been busy engaging within NES and externally. The paper sets out what reform is aiming to achieve. Phase 1 is due to run until January 2025 and much of this work is already complete. Engagement has been extensive, including round tables with health boards and medical directors, regular slots at the business meeting on Medical Education Reform, links with GMC. On Monday this week, Emma Watson, Karen Reid, Karen Wilson and Kevin Kelman attended a 4 Nation meeting to discuss Medical Education Reform. There was significant buy-in at the meeting with next steps including setting up a steering committee and developing a risk management infrastructure.

8.3 The report was opened up for feedback and questions.

8.4 The Committee thanked Emma Watson for this excellent piece of work and commended the 4-nation approach. It was asked where the Universities fit into the agenda. Emma Watson responded, conversations continue with Universities and Medical schools. Challenging questions are being asked and NES are trying to offer up solutions. Curriculum content review is a critical area and Medicine can learn from other professions by stripping out knowledge heavy areas and replacing with more critical thinking. Kevin Kelman highlighted a shift in culture with the recent acceptance of 2 foundation apprenticeships. This is a progressive piece of work.

8.5 The Committee asked about the evaluation/improvement approach and noted that this was due to start in quarter 3 of 2026. It was asked if there will be ongoing iterative improvements also. Emma Watson replied, quarter 3 of 2026 would be when trainees start in the programme but committee members are correct, feedback is already being gained and changes are already being made. Emma Watson thanked the Committee for this point, ongoing feedback will be captured in future updates.

8.6 The Committee asked how wider impact will be monitored and if there is sufficient scope for this. Emma Watson confirmed data is being collected across the whole of NES to underpin the strategy. This is reviewed regularly. For this piece of work the impact has to be proportionate for what societal change it can make in 3 or 4 years when considering the time taken to train.

8.7 The Committee highlighted the change to foundation placements to trial 3x8 month placements and asked why it is expected to make a difference. Emma Watson responded, our newest recruits in Foundation training currently spend around 4 weeks in any one place. This does not provide sufficient opportunity to build good working relationships. The pilot of 8 month placements is to provide further opportunity to embed in a team and provide a better environment to foster strong relationships with clinical and educational supervisors and therefore more opportunities for coaching/mentoring.

8.8 The Committee Chair thanked Emma Watson for the helpful update and discussion. The Committee confirmed the report provided the necessary assurance.

9. **Medical Quality and Safety Annual Report**

9.1 The Committee Chair invited Emma Watson to introduce the report which provided the Committee with the first Annual report of the Medical Quality and Safety Group which has been setup to better learn from the quality activity to further understand what it means for Medicine, NES and Health Boards. This is an internal medical directorate report for the committee to review. The group receives reports from all areas and some highlights of this year's activity include, a new process for exit interviews and feedback, a resignation process, analysis of Annual Review of Competence Progression (ARCP) data has resulted in a reduction of doctors that received a 'no review' and maintaining a 100% fill-rate in GP recruitment despite stoppages.

9.2 The report was then opened for feedback and questions.

9.3 The Committee thanked Emma Watson and noted the amount of data within the report which is what members are looking for. It was asked if members should be worried in areas where there were a 0% fill-rate. Emma Watson explained that some specialties recruit to very low numbers and on certain years there wouldn't be anybody eligible to apply for these positions. The Committee were informed that Healthcare Science is moving from the Dental Directorate to the Medical Directorate and it is hoped that there is the potential to work with clinical scientists to look at doing things differently in the future.

9.4 The Committee stated the report was very clear with good presentation. It was asked if there was a system for complimenting the excellent sites/programmes that are doing really well and is there any scope to share what they are doing. Emma Watson confirmed the directorate do try and get active in that space. It is a very important point and Enhanced delivery sites could be explored, opposite to Enhanced Monitoring.

9.5 The Committee asked if the people who asked for a transfer but were unsuccessful, did they carry on or resign? Emma Watson will check if this data is available after the meeting. **Action: Emma Watson**

9.6 The Committee asked for further explanation or a key for the different training levels (FY, ST1, CT1 etc) and an explanation of ARCP outcomes. This will be circulated to members via correspondence. **Action: Chris Duffy**

9.7 The Committee noted that there wasn't much safety information contained within the report. Emma Watson recognised this comment, the group receives regular updates on patient safety, equity and trainee wellbeing but this could have been drawn out further in the report.

9.8 The Committee Chair thanked Emma Watson and colleagues for an excellent report. Some small feedback points were highlighted in the discussion plus it was noted that a little more commentary on how the Committee can be reassured in areas where there are problems would be welcomed.

9.9 The Committee confirmed the report provided the necessary assurance.

10 Act Funding – Internal Audit Action Plan Update

10.1 The Committee Chair noted that the wrong paper had been circulated to members. Members will receive the correct paper circulated via correspondence before the next EQC meeting. **Action: Chris Duffy**

11 EQC Clinical and Care Assurance Group

11.1 The Committee Chair welcomed Della Thomas to the meeting and then invited Karen Wilson to introduce this item. Several years ago it was explored if any clinical governance was required in NES and it was decided that it wasn't required at that time. Recent events have now made the Executive Team aware that some form of clinical assurance/process is required. For example, the work of the NHSSA is covered by the clinical governance of NHS Golden Jubilee but there needs to be a process to capture any clinical governance issues caused by the education NES is providing. The plan is to create an assurance group.

11.2 Emma Watson noted that through the lead employer model NES employ all GP trainees as well as having educational governance over the training NES delivers and as such there are clinical issues and complaints that are part of NES responsibility. The clinical and care assurance group will provide greater oversight of these issues and complaints.

11.3 The proposal was opened up for questions and comment.

11.4 The Committee welcomed the proposal but requested that further work in the following areas was required before the Committee could be in a position to fully approve the formation of the group. The recent events need to be expanded on, so committee members fully understand the reasoning. The relationship between this group and the EQC risks needs to be explained so members can understand the link. It was also asked if a link could be made between this group and the quality policy. **Action: Karen Wilson/Emma Watson**

- 11.5 The Committee noted that the group may encounter governance and terminology issues but trust should be given to the group to find solutions. Karen Wilson agreed and added there is also a focus on not risking double governance, that is why the group is starting with an assurance approach and if governance gaps appear then the group can evolve.
- 11.6 Della Thomas highlighted that an addition will be required to the NES Committee Generic Terms of Reference (ToRs) in order to give EQC a permissive environment to establish a new group. This will now be scheduled for September Board.
- 11.7 The Committee chaired thanked all for the important discussion and suggested the Committee approve the establishment of the group in principle, with an updated paper coming to December EQC based on the additions noted above.
- 11.8 The Committee approved the formation of the group in principle.

12. Dental Directorate Review

12.1 The Committee Chair invited Rob Coward to introduce the report. Rob Coward advised that this report is an example of the well-established peer review process that has been restarted after the pandemic. The report enables NES to take a broad overview of directorates and to seek assurance that educational performance and quality is being managed effectively. The Committee were invited to consider the final report of the review of NES's Dental Directorate held on 20 May 2024 and confirm that the review process provides adequate assurance.

12.2 The report was opened for comments and questions.

12.3 The Committee noted that the values and outcomes that matter to the population were a little unclear and could be evidenced more in future reports. The move towards community-based care in dentistry was highlighted. Rob Coward noted this and suggested that a future review of dentistry could focus in this area, particularly when looking at oral health improvement programmes.

Action: Rob Coward

12.4 The Committee thanked Rob Coward for the report and confirmed it provided the necessary assurance. The Committee also suggested that when future directorate reviews are scheduled, a member of that directorate is invited to the meeting to answer any specific questions.

Action: Chris Duffy

13. Feedback, Comments, Concerns and Complaints Annual Report 2023-24 and Q1 Complaints Report

13.1 The Committee Chair invited Rob Coward to introduce this report. Feedback, comments, concerns and complaints are considered by the Scottish Government as an important performance indicator, and a mechanism for driving continuous improvement. NHS Boards are required to publish an Annual Report. The Q1 Complaints report was also included for the Committee to approve.

- 13.2 NES continue to receive a low number of complaints, with 16 received this year down 1 from 17 the previous year. A feature of the report highlighted to Committee was the changing approach to involving communities and people.
- 13.3 The Q1 complaints report shows that 3 complaints were received in this period with 2 upheld.
- 13.4 The reports were opened for questions and comment.
- 13.5 The Committee sought assurance that the actions agreed when these items were last presented (a year ago) had been taken forward and Rob Coward confirmed that they had.
- 13.6 The Committee noted that there were a lack of negative comments within the report. It was recognised that there isn't a once for NES approach to collecting feedback. Rob Coward replied, as part of the Learning Education Quality Systems (LEQS) work NES are moving towards a whole system approach to evaluation and greater consistency.
- 13.7 The Committee noted that NES upheld 9 out of 16 complaints and asked how that compares to other organisations. Rob Coward agreed to look at this outwith the meeting. **Action: Rob Coward**
- 13.8 The Committee noted that in future reports it may be useful to add a classification of the type of complaint.
- 13.9 The Committee approved the Feedback, Comments, Concerns and Complaints Annual Report for onward sequencing to NES Board with feedback highlighted for next years report.
- 13.10 The Committee also approved the Q1 Complaints Report.

14. Annual Research Governance report 2023-24

- 14.1 The Committee Chair invited Rob Coward to introduce this report which was presented to provide the Committee with assurance that NES research complies with UK-wide health and social care principles of good research practice. NES research is completed in a reasonable timescale and NES research is generating outcomes and impacts that are making a difference to NES and health and social care in Scotland.
- 14.2 The report was opened for questions and comment.
- 14.3 The Committee sought assurance that the actions agreed when these items were last presented (a year ago) had been taken forward and Rob Coward confirmed that they had.
- 14.4 The Committee asked if a research plan was being developed. Kevin Kelman confirmed that now the Learning and Education Strategy is in place work has

begun to develop a Learning and Education research plan and Learning and Education innovation plan that will support the implementation of the strategy.

- 14.5 The Committee asked if there is a once for NES approach to research. Rob Coward confirmed resource has been identified in the Medical and Dental directorates to support once for NES research activity.
- 14.6 The Committee noted that Healthcare Science will be moving from the Dental directorate to Medical and asked if this will change the way they work in the future. Emma Watson replied, there was an opportunity to review the directorate and the move to medicine will have real benefits for both professions and will open up different training and learning opportunities.
- 14.7 The Committee approved the Annual Research Governance Report.

15. Equality and Diversity Mid-Year Report

- 15.1 The Committee Chair welcomed Katy Hetherington to the meeting and invited her to introduce this report. The report asked the Committee to approve the mid year report for the period April 2024-August 2024. This included progress on NES's Equality Outcomes since the end of-year report to the Committee in May 2024 and activities to progress equality, diversity and inclusion which are relevant to the Committee's business.
- 15.2 The report was opened for questions and comment, but none were received.
- 15.3 The Committee noted the very comprehensive Equality and Diversity Mid-Year Report.

16. NES Quality Policy

- 16.1 The Committee Chair invited Rob Coward to introduce the report which provided the Committee the opportunity to review the policy positions within the draft Quality Policy, to consider how they have been developed and to approve these as the basis for progressing the further work required to support implementation.
- 16.2 The Committee formally noted that they were not approving the policy today, they were approving the policy positions set out in the policy.
- 16.3 The Committee complimented the links in the policy to the Strategic Key Performance Indicators (SKPIs).
- 16.4 The Committee commented on learning design and added that this should also include the rights of people. Furthermore, the language should be made more inclusive to the language of health and social care services. **Action: Rob Coward**
- 16.5 The Committee asked where the clinical and care assurance group will link with the policy and could this be made more specific. **Action: Rob Coward**

- 16.6 The Committee asked, once the policy has been approved and begins to be implemented how will it be monitored. Ryan Reed replied, controls will be put in place so that products can only come on to the NES system if they can verify relevant questions and meet certain standards. There will also be a directorate review process and a requirement for a Scottish Credit and Qualifications Framework (SCQF) organisational review.
- 16.7 The Committee approved the policy positions within the draft Quality Policy. The Committee requested that work continues on the development of the policy and it is then brought back to Committee once progress has been made. Scheduling to be confirmed. **Action: Rob Coward/Chris Duffy**
- 17. Strategic Key Performance Indicators (SKPIs): Education & Quality Committee**
- 17.1 The Committee Chair invited Karen Wilson to introduce this item which reported on the SKPIs delegated to EQC. The report contains data on those measures for which data have been collected and proposed amendments to measures previously reported. An update on measures which have not yet been reported and an update on progress with the implementation of the NES Learning and Education Strategy and associated Corporate Improvement Programmes.
- 17.2 The Committee Chair opened the report for questions and comment.
- 17.3 Emma Watson confirmed that SKPI13a (Medical Funded trainee placements – fill rate) should be changed from fill rate to vacancy rate. Also, SKPI14a (Medical Funded trainee placements – completion rate) should use the data from the number of trainees who did not receive an outcome 1 or 6 in their Annual Review of Competence Progression (ARCP). It was also suggested that SKPI13b and SKPI14b also change so Medical and Dental are aligned. **Action: Emma Watson/Karen Wilson**
- 17.4 The Committee noted huge improvement in the report, the data is more comprehensive and allows for greater discussion on performance. The paper links with the strategy and the narrative makes sense. The Committee felt it would benefit from a longer discussion on this area at the next meeting. An action was taken to schedule SKPIs immediately after the Lead Executive report at future meetings to allow longer discussion. **Action: Chris Duffy**
- 17.5 The Committee confirmed that report provided the necessary assurance and thanked all those who input into the production of the report.
- 18. Education & Quality Committee Strategic Risks**
- 18.1 The Committee Chair invited Rob Coward to introduce the report.
- 18.2 Rob Coward advised that there are 2 strategic risks relevant to EQC and there have been no significant changes to the report since it was last reviewed by EQC.
- 18.3 The report was opened to the Committee for questions.

- 18.4 The Committee suggested the Quality policy is added as a mitigating action.
- 18.5 No questions were raised, and the Committee noted the report and confirmed that the risks delegated to EQC are managed effectively.

Items for noting

19. Education Leadership Group (ELG) Annual Report

- 19.1 The ELG Annual Report was noted.

20. Consultations Log

- 20.1 The consultations log was noted.

21 Range of Stakeholder for TURAS Refresh

- 21.1 The Committee thanked the authors for this helpful report.
- 21.2 The Range of Stakeholder for TURAS Refresh was noted.

22. Scottish Government and NES Educational policies

- 22.1 The Committee noted that there were none for this meeting.

23. Committee Effectiveness

- 23.1 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 but no specific examples were raised at this meeting.

24. Any other business

- 24.1 The Committee Chair noted that this will be the last meeting for Peter Donnelly in his term as co-opted member of EQC. The Committee Chair, Board Chair and Committee members thanked Peter for his excellent input and contribution.

25. Date and time of next meeting

- 25.1 The next meeting of the Education and Quality Committee will be held on 13 December 2024, 09:45am – 12:45pm as a hybrid meeting.

NES
CD/AGL/KW
October 2024

Approved – Annie Gunner Logan on 11/10/2024

TECHNOLOGY AND INFORMATION COMMITTEE

NES/TI/24/37

Minutes of the Fourteenth NES Technology and Information Committee held on Tuesday 27 August 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
Paula Baird, Principal Lead, Workforce (item 11)
Colin Brown, Head of Strategic Development
Jim Boyle, Executive Director of Finance
David Felix, Postgraduate Dean, Dental (Caldicott Guardian)
Kevin Kelman, Director of NHS Scotland Academy, Learning and Innovation (item 12)
Debbie Lewsley, Risk Manager (item 14)
Karen Reid, NES Chief Executive Officer
Jackie Sweeney, Finance Manager
Marisa Wedderspoon, Senior Specialist Lead, NTS
Christopher Wroath, Director of NTS

1. Welcome and introductions

- 1.1 The Chair welcomed everyone to the meeting.

2. Apologies for absence

- 2.1 Apologies were received from Tracey Ashworth-Davies and Della Thomas.

3. Declarations of interest

- 3.1 There were no declarations of interest raised.

4. Notification of Any other Business

- 4.1 There was no other business raised.

5. Minutes of the meeting 13 May 2024

(NES/TI/24/11)

- 5.1 The Committee approved the draft minutes, with one minor correction to paragraph 3.2, to note that Angus McCann was invited by the Digital Health and Care Innovation Centre Board.

6. Committee Rolling Action Log (NES/TI/24/12)

- 6.1 The Committee noted that all 9 of the actions had been marked as completed or closed.

7. Executive Lead Officer's Report (NES/TI/24/13)

- 7.1 The Chair invited Christopher Wroath to make any introductory remarks in relation to the Executive Lead Officer's Report to provide the Committee with an overview of progress on delivery since the last meeting in on 13 May 2024.
- 7.2 Christopher Wroath informed the Committee that there is re-emerging uncertainty regarding funding of major programmes. For example, there continues to be uncertainty regarding the funding for the Digital Prescribing and Dispensing Pathway programme (DPDP), which supports identity management and underpins the Digital Front Door (DFD) project. NTS are continuing to plan and advance these areas of work, despite the financial uncertainties.
- 7.3 Jim Boyle added that this level of uncertainty regarding funding exists across the whole of the Public Sector in Scotland. Discussion have already taken place with Scottish Government (SG) Sponsorship and Policy teams, resulting in some areas of work being brought into recurrent funding. At present there has been no request to cancel any of the non-recurrent work, however it is possible that NES may be asked to conduct a prioritisation exercise against non-recurrent work.
- 7.4 The Committee noted that Christine McLaughlin has been appointed as the new Director of the Digital Health and Care Directorate (DHAC). She has stated that she wishes to create a single governance model. Christopher Wroath informed the Committee that he hoped this would help to provide stability and vision, to support this long-term programme. The Committee agreed this could be positive.
- 7.5 A query was raised regarding if NES has provided SG with a cost analysis comparing contractor staff to those employed under agenda for change contracts. Christopher Wroath informed the Committee that this information has already been shared with SG and explained that if security of funding could be provided at the start of the financial year, then agenda for change staff could be recruited.
- 7.6 Christopher Wroath informed the Committee that the outstanding funding from DHAC funding for the DPDP Programme has now been received.
- 7.7 A question was asked if other NHS Health Boards are aware and supportive of the ongoing work within NTS, given it will support transformational change across the system. Karen Reid informed the Committee that the Board Chief Executives and

the Board Chairs have 2 dates already planned for September and October to discuss digital transformation. Karen Reid explained this will include Once for Scotland opportunities. The Committee supported these development sessions and requested that an update regarding the sessions is provided at the next meeting. **Action: DG**

7.8 The Committee thanked Christopher for the report and confirmed it provided them with satisfactory assurance.

8. NTS Consolidated Delivery Plan Update 2024-25 (NES/TI/24/14)

8.1 The Chair invited Christopher Wroath to update on the development of the NES Technology Service (NTS) consolidated delivery plan for 2024-25.

8.2 Christopher Wroath informed the Committee that the NES Delivery Plan was presented to the Executive Team at on 21 May and the work has been agreed for the remainder of 2024-25.

8.3 The Committee noted that work continues at pace to reach agreement on the DHAC plan with the NTS team recently responding to recent movement within SG, particularly regarding the scope of the DFD programme. Agreement on DHAC delivery plan is anticipated by the end of August 2024.

8.4 Christopher Wroath advised that when DHAC plan has been agreed, a consolidated NTS Delivery Plan will be made available to the Committee.

8.5 The Committee asked how urgent commissions are being managed, without formal agreement from DHAC on the delivery plan. Christopher Wroath informed the Committee that these requests are monitored and approved by the NES Executive Team via the Corporate Radar process. Once approved NTS review how this may impact the overarching delivery plan.

8.6 The Committee asked that a key is added to the plan to explain the colour coding. **Action: CW**

8.7 The Committee thanked Christopher for the report and confirmed it provided them with satisfactory assurance.

9. Cyber Security (NES/TI/24/15)

9.1 The Chair invited Christopher Wroath to introduce the paper and highlight any key areas relating to Cyber Security in NES.

- 9.2 The Committee noted that the June 2024 Network Information Systems (NIS) audit report was issued in June 2024, with NES achieving an overall compliance status of 92%. An Action Plan has been produced and the 2025-2026 NIS Audit will take place April - June 2025.
- 9.3 The National Cyber Security Centre (NCSC) “Cyber security: top tips for staff” training module has been added to Turas Learn and continues to be actively promoted. NES will be preparing a cyber awareness campaign for NES staff to coincide with Cyber Security Month in October 2024.
- 9.4 A question was raised on how robust the NIS Audit is in relation to providing assurance that cyber security is adequately managed. Christopher Wroath explained that the NIS Audit specifically looks at the information infrastructure and the practical implementation of this. Christopher Wroath assured the Committee that in order to provide further assurance in relation to the processes in place, NES have arranged for internal audits to be conducted to support this.
- 9.5 A revised NES Cyber Incident Response Plan is currently being drafted. This is expected to be completed by the end August 2024.
- 9.6 NES Internal Auditors have confirmed that the paper “NES Cloud Services Shared Responsibility Model” and the detail contained within is sufficient evidence to close the outstanding Cloud Disaster Recovery audit actions, marking them as complete.
- 9.7 The Committee thanked Christopher Wroath for the report and confirmed it provided them with satisfactory assurance.

10. Accelerated National Innovation Adoption (ANIA) Programme

(NES/TI/24/16)

- 10.1 The Chair invite Christopher Wroath to update on the ANIA Programme.
- 10.2 Christopher Wroath informed the Committee that the revised delivery plan for Digital Dermatology was approved by the Innovation Design Authority (IDA) in May 2024 and is now being managed by the Programme Delivery Board. Technical elements of the programme are being taken forward by NTS and NTS are also supporting the wider programme team in the development of the education and training elements as required.
- 10.3 A question was asked regarding how the roll out and utilisation of the technology will be monitored across the service. Christopher Wroath explained that the roll out has been delayed by 5-6 weeks and will take place in October 2024. Karen Reid explained that NES is responsible for the technology and the Boards are

responsible for utilising the technology, however NES will support Boards with education and training.

10.4 The Committee noted that the Digital Skills Programme is a key programme to support the upskilling of Health and Care staff.

10.5 The Committee thanked Christopher Wroath for the report and confirmed it provided them with satisfactory assurance.

11. Digital Skills and Leadership Programme (NES/TI/24/17)

11.1 The Chair welcomed Paula Baird to the meeting and invited her to provide an update on progress of the Digital Skills and Leadership Programme.

11.2 Paula Baird informed the Committee that the programme of work is on track and on budget except for embedding Viva Engage into the Microsoft 365 skills hub.

11.3 The Committee asked for more information regarding the delay to embedding Viva Engage into the Microsoft 365 suite of applications. Paula Baird explained that implementation of new applications is agreed at a national level.

11.4 The Chair drew attention to what he regarded as a lack of clarity in reporting the NES position in relation to the Leading in the Digital Age Board Development sessions, where it was stated that NES would not be undertaking the training as a whole board due to other priorities. He assured members of the Committee that this was not the case as NES lead and champion the programme and three members of the Board have already attended or are about to do so. The Chair explained that other members had been encouraged to attend but as a high performing and Digitally expert Board, providing National solutions, some members of the Board were already operating above the level which the programme seeks to address.

11.5 The Committee also recognised that there is interest amongst Board members to participate in mixed sessions with other Health Boards which, they felt, brought a richer range of views to the sessions.

11.6 The Chair also queried the suggestion in the paper that unless Boards attended these sessions, as a group, their senior officers would not be offered the training. Paula Baird confirmed that a decision was made in July to open up the sessions to the next level of managers without this proviso. She informed the Committee that Board members could register their interest for any of the future sessions.

11.7 The Committee thanked Paula Baird for the report and confirmed it provided them with satisfactory assurance.

11.8 Paula Baird left the meeting.

12. Turas Refresh Progress Report (NES/TI/24/18)

12.1 The Chair welcomed Kevin Kelman to the meeting and invited him to provide an update on progress of the Turas Refresh Programme.

12.2 Kevin Kelman informed the Committee that Scottish Government (SG) have acknowledged the Turas Refresh Outline Business Case (OBC) and that it will be discussed at the Health and Social Care Management Board week beginning 02 September 2024. The Committee noted that activity continues towards completion of a Full Business Case, as per the recommendations detailed in the OBC paper presented to TIC on 13 May 2024.

12.3 Discussion took place regarding the benefits of Turas becoming a Once for Scotland platform for education and training resources and the Committee noted the importance of continued engagement with SG, highlighting the benefits of investing to create future savings.

12.4 The Committee noted the strategic considerations resulting from the OBC and other horizon scanning activity alongside the Turas Refresh Monthly Report (July - August 2024).

12.5 The Committee thanked Kevin Kelman for the report and confirmed that they were happy to approve the report.

12.6 Kevin Kelman left the meeting.

13. TIC Delegated Strategic Risk Report (NES/TI/24/19)

13.1 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.

13.2 The Committee noted the five strategic risks considered relevant to TIC's remitted responsibilities and that the Committee's Strategic Risks have been subject to a recent review by individual risk owners.

13.3 Debbie Lewsley informed the Committee that Strategic Risk 8 has been realigned from the Governance category to the Operational category, the risk now sits within the Board Risk Appetite.

13.4 The Committee noted there have been no changes to other risks aligned to TIC within this reporting period.

13.5 The Committee requested that further information is provided in the narrative for actions relating to Risk 6 and to identify further mitigating actions for Risk 7, including additional information regarding the Internal Audit arrangements.

Action: CW/DL

13.6 Discussion took place regarding whether Risk 6 and 7 should be classified as Governance or Operational and it was agreed that the narrative of these risks would be reviewed.

Action: CW/DL

13.7 The Committee thanked Debbie Lewsley for the report and confirmed it provided them with satisfactory assurance.

13.8 Debbie Lewsley left the meeting.

14. TIC Delegated Strategic Key Performance Indicator (SKIPs) Report

(NES/TI/24/20)

14.1 The Chair invited Christopher Wroath to introduce the report, which presented progress against the SKPIs delegated to this Committee as of Quarter 2 2024-25.

14.2 This is the first time that the SKPIs have been presented to this Committee for scrutiny prior to review by the Board at their meeting on 21 November 2024.

14.3 The Committee acknowledged the five SKPIs delegated to it and noted that data for one of these indicators is scheduled to be presented for the first time at the end of 2024-25 Quarter 2.

14.4 The Committee confirmed it provided them with satisfactory assurance.

15. Annual Information Governance Report 2023/2024

(NES/TI/24/21)

15.1 The Chair invited Christopher Wroath to present the 2023-24 Annual Information Governance Report.

15.2 The Committee noted the number of Freedom of Information (FOI) requests received in 2023/24 and that this figure is similar to financial year 2022/23.

15.3 A query was raised regarding if mitigations are put in place to prevent FOI requests being made, for example publishing information on the NES website. Karen Reid informed the Committee the nature of FOI is monitored regularly, and mitigations implemented where possible. Colin Brown assured the Committee that each FOI response is reviewed by senior leaders prior to submission.

15.4 The Committee asked that for future reports figures of essential learning completion rates are split between new and existing staff members. **Action: CW**

15.5 The Committee confirmed they were content to approve the annual report for onward submission to the 26 September Board.

16. Annual Information Security Report 2023/2024 (NES/TI/24/22)

16.1 The Chair invited David Felix to present the report which provided the Committee with assurance around NES compliance with the Caldicott Principles.

16.2 Christopher Wroath informed the Committee that a number of policies and procedures are overdue for review due to workload pressures. He assured the Committee that there is a commitment to carry out these reviews in Q1 2024/2025.

16.3 The Committee confirmed that they were content to approve the annual report for onward submission to the 26 September 2024 Board.

17. Annual Caldicott Guardian Report 2023/2024 (NES/TC/24/23)

17.1 The Chair invited David Felix to introduce the Annual Caldicott Guardian report.

17.2 The Committee acknowledged that the report has been updated in response to comments from Committee members regarding last years' report. The updated report now includes the length of time data was exposed during data breaches, lessons learned, and highlights actions taken place to prevent similar breaches in future.

17.3 David Felix provided assurance to the Committee that the Caldicott principles had been upheld across NES during 2023/24 and that all appropriate measures were in place.

17.4 David Felix informed the Committee that no new patient identifiable data processing was undertaken within NES in 2023/24. The committee noted the number of incidents and information breaches reported and that figures are similar to financial year 2022/23. David Felix informed the Committee that none of the breaches were required to be reported to the Information Commissioner Office.

17.5 David Felix thanked Tracey Gill, (Principal Analyst, Information Governance and Security, NTS) and her team for their work in producing the report. He added that the team has recently expanded which has provided additional support to a busy team. Christopher Wroath added that Tracey Gill has been invited to chair the National Information Governance Group.

17.6 The Committee confirmed that they were satisfied that NES was compliant with the Caldicott Principles and were content to approve the annual report for onward submission to the 26 September 2024 Board.

18. Proposal to dissolve the TIC

18.1 The Chair updated the Committee on plans to dissolve the TIC and create a new Committee.

18.2 The Committee noted that the NES Board Chair and NES Chief Executive have recently met to discuss the creation of the new Committee. The Committee will cover Strategy, Technology and Planning and Performance. The NES Non-Executives and NES Executive Team will be given the opportunity to comment on the draft Terms of Reference of the new Committee in due course.

18.3 The Committee noted that there are 2 TIC meetings scheduled before the end of the financial year and these will take place, with the new Committee formally starting in the new financial year.

18.4 The Chair advised that a shadow meeting of the new Committee may also be held early in 2025.

19. KPMG Internal Audit report – NTS Strategic Planning

19.1 The Committee were content with the recommendations in the report, which were submitted to the Audit and Risk Committee on 13 June 2024. The Committee congratulated Christopher Wroath and his team for the positive results of the report and noted that progress against the actions will be reported to the next TIC meeting on 04 November 2024.

20. Reappointment of Co-opted member 01 September 2024 – 31 August 2025

20.1 The Committee to noted that the Board approved the reappointment of Co-opted member, Angus McCann to 31 August 2025.

21. Turas Refresh Project Minutes

21.1 The Committee noted the April, May and June minutes of the Turas Refresh Project.

21.2 The Committee noted that the ToRs has been submitted to the May meeting for information.

22. Identification of any new risks emerging from this meeting

22.1 The Committee agreed that no new risks were identified as a result of discussions during the meeting.

23. Review of Effectiveness of Meeting

23.1 The Committee agreed that the meeting had operated effectively.

24. Any Other Business

24.1 No other business was raised for discussion.

25. Date and time of next meeting

25.1 The next meeting of the Technology and Information Committee will be held on Monday 04th November 2024 via Microsoft Teams at 10:15.

NES
August 2024
JA/LS/CW/DG

TECHNOLOGY AND INFORMATION COMMITTEE

NES/TI/25/02

Minutes of the Fifteenth NES Technology and Information Committee held on Monday 02 December 2024 12:00 – 14:00 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 (from item 07)
Angus McCann, Ex-Officio Member and Non-Executive Director

In attendance: Jenn Allison, Senior Officer, Board / CEO Office
Colin Brown, Head of Strategic Development
Paula Baird, Principal Lead, Workforce (item 13)
David Felix, Postgraduate Dean, Dental (Caldicott Guardian)
Kevin Kelman, Director of NHS Scotland Academy, Learning and Innovation (item 10)
Debbie Lewsley, Risk Manager (item 11)
Jackie Sweeney, Finance Manager
Marisa Wedderspoon, Senior Specialist Lead, NTS
Christopher Wroath, Director of NTS

1. Welcome and introductions

1.1 The Chair welcomed everyone to the meeting.

2. Apologies for absence

2.1 Apologies had been received from Karen Reid, Chief Executive Officer, Jim Boyle, Executive Director of Finance and Della Thomas, Board Secretary.

2.2 Jean Ford joined the meeting at item 07.

3. Declarations of interest

3.1 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.

5. Draft Minutes of the meeting 27 August 2024

(NES/TI/24/38)

5.1 The Committee approved the draft minutes.

6. Committee Rolling Action Log (NES/TI/24/39)

6.1 The Committee noted that all 5 of the actions had been marked as complete or closed.

7. Executive Lead Officer's Report (NES/TI/24/40)

7.1 The Chair invited Christopher Wroath to make introductory remarks in relation to the Executive Lead Officer's Report to provide the Committee with an overview of progress on delivery since the last meeting on 27 August 2024.

7.2 Christopher Wroath informed the Committee that there is still uncertainty regarding the funding for Digital Prescribing and Dispensing Pathways (DPDP). Christopher Wroath explained that no formal commissioning letter has been received for this financial year's commissioned work, which includes no confirmation of multi-year funding.

7.3 The Committee noted that this may impact on delivery and may result in some monies already received for this financial year to be returned due to time constraints to complete the work by March 2025.

7.4 The Committee raised a concern that NES are ready to commence the DPDP work however, cannot do so until the commissioning letter has been received. The Committee noted their frustration at this delay, particularly given that the work is a Cabinet Secretary priority.

7.5 Christopher Wroath advised the Committee that concerns have been raised and recorded during Digital Health and Care Directorate (DHAC) Programme Board meetings. The Committee noted that a joint letter has been written to Scottish Government (SG) from Christopher Wroath and the Senior Information Risk Owner (SIRO) of NSS asking for the commissioning letter to be issued.

7.6 The Committee asked how much of the budget would be returned to SG if the commissioning letter was not received in time and if there would be any possibility of budget being carried over into 2025-26. Christopher Wroath informed the Committee that 2.5million has been received for the National Digital Platform (NDP), Digital Front Door (DFD) and DPDP however, he was unable to confirm if it would be possible to carry over. Christopher Wroath added that a priority at present is to seek confirmation from SG that they commit to all three programs of work into the next financial year.

- 7.7 The Committee noted that Digital Dermatology is now live, and Christopher Wroath informed the Committee that this has been a complex piece of work involving multiple Health Boards, including an interplay with the NDP. Christopher Wroath commended everyone involved in this work, which has been an excellent result for the National Centre for Sustainable Delivery (CfSD).
- 7.8 Christopher Wroath updated the Committee that following the Operational Planning exercise the demand for NTS work is higher than capacity for financial year 2025-26.
- 7.9 The Committee thanked Christopher Wroath for the report and confirmed it provided them with satisfactory assurance.

8. NTS Consolidated Delivery Plan Update 2024-25 (NES/TI/24/41)

- 8.1 The Chair invited Christopher Wroath to update on the development of the NES Technology Service (NTS) consolidated delivery plan for 2024-25.
- 8.2 The NES Delivery Plan was presented to the Executive Team at the start of July and the work has been agreed for the remainder of 2024-25.
- 8.3 Christopher Wroath informed the Committee that work continues at pace to reach agreement on the DHAC plan. The Committee noted that until the planning work in SG is complete NTS cannot have a fully completed, consolidated delivery plan but this is expected imminently.
- 8.4 When both plans have been agreed, a consolidated NTS Delivery Plan will be made available for all Stakeholders. It is anticipated this will be submitted to the January TIC meeting. The Committee emphasised that it would be helpful to see the plan. **Action: CW**
- 8.5 The Committee thanked Christopher for the report and confirmed it provided them with satisfactory assurance.

9. Cyber Security (NES/TI/24/42)

- 9.1 The Chair invited Christopher Wroath to introduce the paper and highlight any key areas relating to Cyber Security in NES.
- 9.2 Christopher Wroath informed the Committee that Microsoft Cloud App Security (MCAS) conditional access policies were implemented for NES staff in November 2024 as part of a wider national implementation across all health boards. The Committee noted that the purpose of this is to restrict what actions can be carried

out on Microsoft 365 services from unmanaged/personal devices used by NHSS staff to better secure data within the platform.

9.3 The Committee requested that information is provided within the next paper outlining the work being done to prevent human error. Colin Brown suggested that the human factors team may be able to support this. The Committee suggested that further development of the NES Business Continuity Plan could also support this. **Action: CW**

9.4 The Committee thanked Christopher Wroath for the report and confirmed it provided them with satisfactory assurance.

10. Turas Refresh Progress Report (NES/TI/24/43)

10.1 The Chair welcomed Kevin Kelman to the meeting and invited him to provide an update on progress of the Turas Refresh Programme.

10.2 Kevin Kelman informed the Committee that there has been delay in a decision in relation to the funding request detailed in the Outline Business Case (OBC) to SG. Since the papers were distributed, SG have confirmed that no funding will be available from the Workforce Directorate, however added that this work could be considered under the wider DHAC envelope.

10.3 The Committee noted that the Turas Refresh Programme raised a formal risk in relation to the impact of this delay at the November Turas Refresh Programme Board (TRPB). Mitigations will include the exploration of scenario planning and prioritisation.

10.4 The Committee emphasised that as well as a strong economic case for improving Turas, there is also a strong case for increased user experience. The Committee raised concerns that delaying progress due to limited funding will lead to increased costs for NHS Scotland in the future if improvement work is not prioritised.

10.5 The Committee asked why the employment of a Health Economist did not cover as full a scope as initially intended. Kevin Kelman explained that Health Economists have limited capacity across Scotland and the post was unable to be filled on a full-time basis.

10.6 The Committee noted that horizon scanning activities flagged the following inter-dependencies and potential impact on the Programme, including SG's Government's Vision for Reform. As a result of this, the TRPB, approved by the Transformation Group, have refined the Programme Vision Statement to: *Harnessing technology to deliver accessible, personalised, engaging learning*

experiences which enables individuals and organisations to deliver high-quality care to the people of Scotland.

10.7 The Committee thanked Kevin Kelman for the report and confirmed that they were happy to approve the report.

10.8 Kevin Kelman left the meeting.

11. TIC Delegated Strategic Risk Report (NES/TI/24/44)

11.1 The Chair welcomed Debbie Lewsley to the meeting and invited her to provide an update regarding the five strategic risks delegated to the TIC, which had been subject to a recent review by individual risk owners.

11.2 Debbie Lewsley noted that at its 03 October 2024 meeting the ARC approved a proposal to enhance NES's Risk Control Assurance. Debbie Lewsley informed the Committee that the control assessments will be included in a revised reporting template that will be applied in the next quarterly TIC Governance Strategic Risk Report.

11.3 The Committee welcomed this improvement, noting that there still appear to be inconsistencies in terms of how the controls are applied. Debbie Lewsley assured the Committee that these will be reviewed by the Risk Management Group (RMG) in due course.

11.4 A question was raised regarding controls in relation to readiness of staff in response to potential outage. Christopher Wroath assured the Committee that NTS staff are fully prepared to enact instant response plans, however agreed that it would be useful to consider readiness from the rest of the organisation in terms of response to an outage. **Action: CW/DL**

11.5 The Committee noted that following an ask by the NES Board and the Technology and Information Committee a further review of Strategic Risk 6 and Strategic Risk 7 was undertaken by the Executive Team. The Executive Team agreed they were content that these risks are aligned to the appropriate primary category of Governance with alignment to Operational as a secondary category.

11.6 The Committee felt that Strategic Risk 6 was more positive than the score reflected however, Debbie Lewsley explained that the green rating reflected the progress of actions and agreed to include a key explaining rag statuses on the future risk reports. **Action: DL**

11.7 The Committee requested that actions for Strategic Risk 15 reflect greater recognition of culture / staff roles. **Action: DL**

11.8 Christopher Wroath informed the Committee that a forthcoming Internal Audit will focus around NTS Strategic Risks.

11.9 The Committee noted that the net Risk rating, for 3 of the NES Technology Service (NTS) risks, currently sit outwith the agreed Board appetite.

11.10 The Committee noted Strategic Risk 13, which had been shared with the Committee for information. Debbie Lewsley informed the Committee that the risk has been recently reviewed with no movement to the risk rating, however additional controls and actions have been strengthened to include Workforce Planning to support the mitigation of the risk.

11.11 The Committee thanked Debbie Lewsley for the report and confirmed it provided them with satisfactory assurance.

11.12 Debbie Lewsley left the meeting.

12. TIC Delegated Strategic Key Performance Indicator (SKIPs) Report

(NES/TI/24/45)

12.1 The Chair invited Christopher Wroath to introduce the report, which presented progress against the SKPIs delegated to this Committee as of Quarter 3 2024-25.

12.2 Christopher Wroath informed the Committee that the definition of outage would be further clarified in relation to one of the SKPIs. The Committee noted that there was a recent outage experienced at the Frankland Building in Dundee, however this was due to the Scottish Wide Area Network (SWAN) outage, which is outwith NES' control.

12.3 The Committee acknowledged the five SKPIs delegated to it and that they are all rated green. The Committee confirmed the report provided them with satisfactory assurance.

13. Digital Skills and Leadership Programme

(NES/TI/24/46)

13.1 The Chair welcomed Paula Baird to the meeting and invited her to provide an update on the progress of the Digital Skills and Leadership Programme.

13.2 Paula Baird informed the Committee that the programme of work is on track and on budget except for embedding Viva Engage into the Microsoft 365 skills hub.

13.3 The Committee congratulated the Digitally Enabled Workforce Team (DEW) on being selected as one of the 10 finalists in the 'Digital Skills or Talent Initiative of the Year' category in the Digital Leaders 100 awards.

13.4 The Committee raised a question regarding the Alumni network and links to the NES Innovation team. Paula Baird informed the Committee that there was an Alumni event last week regarding innovation and confirmed that all networks are linked to relevant areas of work.

13.5 A further question was asked about the impact on Health Boards. Paula Baird informed the Committee that evaluation is conducted in all areas of work and that there is a correlation between positive results of Digital Maturity Assessments for Health Boards who have engaged in programmes.

13.6 The Committee raised a question in relation to the NES Stakeholder Survey which identified that Stakeholders don't understand the full picture of NES' Digital responsibilities and suggested it would be helpful to link in with the Communication team to highlight priority areas. **Action: PB**

13.7 The Committee asked a question regarding expectations of Boards in relation to the Digital Mindset Programme, suggesting that the Board Chief Executives (BCE) Forum may be a good place to promote the programme as well as set expectations. Paula Baird informed the Committee that Communications regarding the Programme is already planned for January. The Committee noted that numerous Health Boards have already taken part in this programme and that requests have been made for follow up sessions and mixed Board sessions.

13.8 A question was asked regarding the Public Sector Scottish Digital Academy (SDA) and Paula Baird confirmed that NES is in communication with the SDA and they have sight of all NES' resources.

13.9 The Committee thanked Paula Baird for the report and confirmed it provided them with satisfactory assurance.

13.10 Paula Baird left the meeting.

14. Turas Refresh Project Minutes

14.1 The Committee noted the 20 August 2024 and 17 September 2024 minutes.

15. Identification of any new risks emerging from this meeting

15.1 The Committee agreed that no new risks were identified as a result of discussions during the meeting.

15.2 Christopher Wroath informed the Committee of a potential emerging risk in relation to the NHS Scotland (NHSS) Microsoft Office 365 contract. The Committee noted that re-negotiations are currently underway between NHSS Microsoft Cloud Strategy Board and Microsoft to agree licensing structure costs.

16. 2024/25 Mid-Year Equality and Diversity Outcomes Report

(NES/TI/24/47)

16.1 The Committee noted that the report was sent to members via correspondence on 31 October 2024. Members replied with feedback and approved the report for submission to the Board.

17. Review of Effectiveness of Meeting

17.1 The Committee agreed that the meeting had operated effectively.

18. Any Other Business

18.1 No other business was raised for discussion.

19. Date and time of next meeting

19.1 The next meeting of the Technology and Information Committee will be held on Monday 27th January 2024 via Microsoft Teams at 13:00-15:00.

NES
December 2024
JA