

DRAFT AGENDA FOR THE ONE HUNDRED AND NINETY-FIRST BOARD MEETING

Date: Thursday 19 March 2026

Time: 10:15 am – 11:20 am

Venue: Hybrid meeting: Microsoft Teams / Room 3 Westport, Edinburgh

1. **10:15 Chair’s introductory remarks**
2. **Apologies for absence**
3. **Declarations of interest**
4. **Draft Minutes of the One Hundred and Ninetieth Board Meeting 5 February 2026** NES/26/19
For Approval
5. **Matters arising from the Minutes and notification of Any Other Business**
6. **Actions from previous Board Meetings**
There are currently no open actions.
7. **10:20 Chair and Chief Executive reports**
- 7a. **Chair’s Report** NES/26/20
For Information and Assurance
- 7b. **Chief Executive’s Report** NES/26/21
For Review and Assurance
8. **10:50 Strategic Items**
- 8a. **2023-26 NES Strategy: Delivery & Achievements Presentation** NES/26/22
For Noting (C Bichan/ A Shiell)
- 8b. **Updated Strategic Risk Log Prior to Transition** NES/26/23
For Approval (J Boyle / D Lewsley)

9. 11:15 Items for Homologation

NES Standing Committee Minutes:

9a.	Staff Governance Committee 6 November 2025	NES/26/24
9b.	Education & Quality Committee 4 December 2025	NES/26/25
9c.	Audit & Risk Committee 15 January 2026	NES/26/26
9d.	Planning & Performance Committee 28 January 2026	NES/26/27
9e.	Staff Governance Committee 19 February 2026	NES/26/28
9f.	Education & Quality Committee 5 March 2026	NES/26/29

10. 11:20 Final Closing Remarks:

Chair and Chief Executive Officer

Drew McGowan, Board Secretary & Principal Lead for Corporate Governance
Lorraine Scott, Associate Manager, Chair and CEO Office
NHS Education for Scotland (NES)
e-mail: ceo.nes@nes.scot.nhs.uk

NES/26/

NHS Education for Scotland

Approved Minutes of the one hundred and ninetieth Public Board Meeting held on 5 February 2026 at 10:00 – 12:15

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

Non-Executive Members:	David Garbutt – Chair Annie Gunner Logan – Non-Executive Director / Vice Chair Ally Boyle – Non-Executive Director Olga Clayton – Non-Executive Director Shona Cowan – Non-Executive Director Jean Ford – Non-Executive Director Lynnette Grieve – Employee Director Louise Harker – Boardroom Apprentice Nigel Henderson – Non-Executive Director Gillian Mawdsley – Non-Executive Director / Whistleblowing Champion George Valiotis – Non-Executive Director
Executive Members:	Jim Boyle – Executive Director of Finance Karen Reid – Chief Executive & Accountable Officer Emma Watson – Executive Medical Director Karen Wilson – Executive Director of Nursing, Midwifery & AHPs & Deputy Chief Executive
Regular Board Attendees	Christina Bichan – Director of Planning, Performance & Transformation Colin Brown – Head of Strategic Development Sybil Canavan – Director of People and Culture Nick Hay – Principal Manager Communications & Engagement Laura Howard – Head of Programme; Finance (item 9a) Kevin Kelman – Director of NHS Scotland Academy, Learning & Innovation Debbie Lewsley – Risk Manager (items 8a, 8c & 8d) Drew McGowan – Board Secretary & Principal Lead for Corporate Governance Claire Neary – Policy & Briefings Manager Gordon Paterson – Director of Social Care & Communities Lee Savarrio – Postgraduate Dental Dean & Director of Dentistry Lorraine Scott – Associate Manager, Chair & CEO Office (Minutes) Alison Shiell – Manager; Planning, Performance & Transformation (item 8b) Andrew Sturrock – Postgraduate Pharmacy Dean & Director of Pharmacy Judy Thomson – Director of Training for Psychology Services Christopher Wroath – Director of NES Technology Service
Observers	Julie Law – Senior Officer, NHS Scotland Academy (NHSSA) Fiona Needleman, Associate Director Medical

1 Chair's Introduction

- 1.1 The Chair welcomed everyone to the 190th Public Board meeting. He particularly welcomed Julie Law, Senior Officer in the NHS Scotland Academy (NHSSA) and Fiona Needleman, the new Associate Director of Medical who are joining as part of their ongoing development.
- 1.2 The Chair congratulated Karen Reid on her appointment as the Chief Executive Officer-designate of Public Services Delivery (PSD) Scotland. He noted that she had come through a rigorous recruitment process, and he wished her well as she prepares to take up the new role.

2 Apologies for absence

- 2.1 Apologies were received from regular Board attendee Lindsay Donaldson, Deputy Medical Director.

3 Declarations of Interest

- 3.1 No declarations of interest were made regarding the business of the meeting.
- 3.2 Gillian Mawdsley raised a connection to Aberdeen University noted in Agenda item 8d. The Chair confirmed that this connection did not require her to leave the meeting during this item.

4 Draft Minutes of the 189th Meeting – 20 November 2025 (NES/26/02)

- 4.1 The Chair introduced the item and invited members to review the draft minutes for accuracy. The Board confirmed that the minutes accurately reflected the previous meeting
- 4.2 The Board approved the draft minutes of the 20 November 2025 meeting.

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

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

6 Actions from previous Board Meetings (NES/26/03)

6.1 The Board received the rolling Board action list for review and approval. The Chair noted that of the 13 actions raised at the 20 November 2025 meeting all are completed, and the 2 actions from the 21 August 2025 meeting are also now complete.

6.2 The Board approved the completed action log.

7 Chair and Chief Executive reports

7a) Chair's Report (NES/26/04)

7.1 The Chair introduced his report to the Board for information and assurance. He noted a reduction in external engagements due to the festive period, advising that meetings he attended were summarised within the report.

7.2 The Board noted the update and confirmed that no questions were required. The Chair's Report was accepted for assurance.

7b) Chief Executive's Report (NES/26/05)

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

7.4 Karen Reid began by expressing appreciation to Board members and the Executive Team for their sustained support over recent months, emphasising the intensity of organisational activity resulting from ongoing transition work. Karen also congratulated the Chair on his award of a CBE in the New Year's honours list, recognising this as a significant achievement marking more than 60 years of public service.

7.5 Karen Reid highlighted to the Board that pre-election guidance will come into effect on 26 March 2026, requiring NES to ensure strict compliance with communication and engagement protocols during the pre-election period.

7.6 Karen Reid informed the Board that Alan Dennison is now Deputy Director at the General Medical Council (GMC), and NES looks forward to working with him in this position.

7.7 She also reported the successful conclusion of the resident doctor pay negotiations, confirming that, as a result, industrial action was avoided and welcomed this outcome, emphasising relief that services did not face the "severe impact on patients" that industrial action would have caused.

- 7.8 Karen Reid advised that NES remains a core participant in the Eljamel Inquiry, with Emma Watson scheduled to lead NES evidence contributions on behalf of the organisation.
- 7.9 She also advised the Board that preparations continue for the NES Education Conference (23–24 April 2026), with an agenda designed to highlight innovation and workforce development across the system.
- 7.10 Karen Reid reported that NES has consistently delivered strong results across all directorates, despite increased demands prompted by the transition to PSD Scotland. She noted that the organisation has maintained high operational standards and has continued to advance key improvement projects. She advised that this steady progress, even during a period of significant change, demonstrates NES’s resilience and ongoing commitment to excellence.
- 7.11 She highlighted the 30% rise in FOI requests, explaining that while volumes are significantly higher, there is currently no evidence to suggest a decline in public confidence. The Board noted that NES has maintained 100% compliance with the statutory response timescale for requests.
- 7.12 Karen Reid noted the work being undertaken with the Scottish Government on GP walk-in clinic applications, noting the breadth of proposals submitted by territorial boards and her role in contributing to scoring of bids and making recommendations to Ministers.
- 7.13 Karen Reid highlighted the Disability Support Service's substantial contribution, pointing out that its small team has enabled well over 350 resident doctors to continue training or working, thus preserving workforce capacity, and noted strong trainee feedback describing the service as transformational, emphasising financial savings of over £100,000 per speciality trainee, annually, at Level 3. She praised Jane Duffy's leadership and urged the Board to acknowledge the service's importance within NES’s broader workforce support.
- 7.14 The Chair thanked Karen and asked Directors to raise any additional points about their directorate from the report.
- 7.15 Emma Watson reported that the Scottish Government will now fully fund the establishment of resident doctors, resolving a longstanding financial challenge that previously led to annual deficits. She also announced the launch of the GP Progression Dashboard, which will enhance visibility into trainee development and support more effective workforce planning for primary care. Additionally, Emma reaffirmed strong support for the Disability Support Service, highlighting its essential role in promoting trainee wellbeing and workforce retention.

- 7.16 The Board asked how full establishment funding for resident doctors will affect NES's financial sustainability.
- 7.17 Emma Watson explained that the decision ensures stability, reduces annual exposure to unfunded training posts, and materially strengthens NES's financial planning position.
- 7.18 Lee Savarrio reported significant achievements, including the successful completion of the antimicrobial stewardship study, which led to notable reductions in antibiotic prescribing across participating dental practices, especially among the highest prescribers. He noted progress was made on project Extension for Community Healthcare Outcome (ECHO), an educational initiative aimed at decreasing waiting times and unnecessary referrals by boosting practitioner confidence through specialist-supported peer learning.
- 7.19 The Board asked about wider applicability of the ECHO model.
- 7.20 Lee Savarrio advised that NES is exploring expansion, and national dental committees have already formally expressed interest in wider rollout.
- 7.21 Andrew Sturrock advised that Scottish pharmacy trainees continued to excel in the General Pharmaceutical Council (GPhC) registration assessment, underscoring the effectiveness and high quality of NES's educational infrastructure. Additionally, he advised that 377 pharmacists successfully completed NES-funded independent prescribing programs, directly contributing to national priorities, including Pharmacy First Plus and the wider expansion of clinical pharmacy capacity across community and primary care settings.
- 7.22 Karen Wilson shared several significant advancements for NMAHP, including the development of the paramedic e-PAD for upcoming student cohorts, the ongoing growth of the QI National Programme with over 8,000 module completions, and the launch of coaching resources to strengthen practice-based learning. Additionally highlighted forming a Public Health Team to enhance cross-professional public health capabilities, continuing suicide prevention education in partnership with psychological services, and progressing the Prison Nursing Knowledge and Skills Framework to improve recruitment, retention, and professional growth within this vital workforce sector.
- 7.23 The Board asked for clarification on whether suicide prevention learning extended to prison settings.
- 7.24 Karen Wilson confirmed that training is provided to prison health staff, Police Scotland and university partners, ensuring a comprehensive cross-sector approach.

- 7.25 Gordon Paterson highlighted the release of Getting It Right for Everyone (GIRFE) learning resources on Turas, which were created at the Scottish Government's request to facilitate a comprehensive, personalised care approach. He also noted the significant progress on the Community Link Worker Knowledge and Skills Framework. He advised that this initiative has received additional funding to ensure continued development, further supporting workforce capabilities and the broader goal of integrated, person-centred care.
- 7.26 The Board asked about alignment with changes to Integration Joint Board governance, particularly emerging work on voting rights.
- 7.27 Gordon Paterson advised that NES is represented on the national working group and will continue to monitor developments, including implications for integration schemes and Convention of Scottish Local Authorities (COSLA) engagement.
- 7.28 Sybil Canavan noted that there has been ongoing robust participation in the Early Manager Network, signalling strong engagement and enthusiasm among emerging leaders. Additionally, she advised that substantial efforts are underway to ensure NES is prepared for the upcoming transition to PSD Scotland, with a focus on enhancing workforce data management, ensuring system readiness, and fostering cross-team collaboration to facilitate a seamless organisational transfer.
- 7.29 Kevin Kelman highlighted progress on the development of the nine "Once for Scotland" statutory and mandatory e-learning modules. He noted that the work had been a system-wide team effort, and NES's e-learning team was now in the final testing phase, with the modules scheduled to go live in the next financial year. Kevin also emphasised a significant improvement to NES's digital learning infrastructure: for the first time, the modules now include embedded core evaluation questions, aligned to the organisation's education quality system. This will enable NES to undertake a national review of statutory and mandatory training from next year, supporting future ambitions, such as NES becoming an accrediting body, once the necessary infrastructure is fully in place.
- 7.30 The Board asked for clarification on timescales for accreditation.
- 7.31 Kevin Kelman advised that NES is progressing steadily, with infrastructure development critical to ensuring robust data and evidence to support future accreditation status.
- 7.32 Judy Thomson highlighted two key areas of progress within psychology and the wider mental health workforce. She reported strong advancement on the collaborative project with NTS to develop a new national system for capturing mental health workforce data across NHS Scotland, addressing the longstanding gap in understanding the full staffing picture. She also drew attention to the development of two new roles within psychology, the Psychological Intervention Assistants (PIA) and Psychological Intervention

Assistant Trainee (PIAT), these roles are a six-month postgraduate programmes designed to diversify the workforce and provide defined scopes of practice for children's services, Child and Adolescent Mental Health Services (CAMHS) and adult mental health. Judy noted that these roles, created after extensive partnership work with unions, are now active across several Boards and have received very positive feedback.

- 7.33 The Board asked whether the mental health workforce dataset will expand beyond NHS staffing.
- 7.34 Judy Thomson noted that the expansion to social care and third sector settings is planned, subject to Scottish Government approval and funding.
- 7.35 Christopher Wroath advised the Board of the successful initial release of MyCare.scot, the national digital front door programme, for dermatology patients in NHS Lanarkshire on 3 December 2025. He emphasised the significant amount of work undertaken to deliver this release on time and to the expected quality standard. Christopher noted that the programme team was now fully focused on the next major milestone – delivering whole population access through a dynamic web app and mobile apps for Apple and Android - all working towards a 15 April 2026 target date. He acknowledged the demanding timetable but confirmed the programme remained on track, with teams working intensively to meet expectations.
- 7.36 The Board sought clarification on low uptake in the early Lanarkshire rollout.
- 7.37 Christopher Wroath advised that the cause is not yet confirmed; however, Karen Reid noted that NHS Lanarkshire retains responsibility for patient engagement and is actively contacting patients to increase uptake.
- 7.38 The Board also discussed broader issues of digital inclusion and conversion from paper-based communication to digital engagement, noting the importance of ensuring equitable access to digital health services.
- 7.39 The Chair expressed gratitude for the extensive activity detailed within the CEO Report and formally noted the impressive progress made, considering the challenges faced by the executive team in establishing the new organisation, he also highlighted that the executive team and their colleagues have continued to deliver notable achievements across NES's programmes. The Chair also acknowledged the Board's appreciation for the resilience, dedication, and high-quality work demonstrated throughout this demanding period.

8 Performance Items

8a) Quarter 3 Finance Report 2025/26

(NES/26/06)

- 8.1 The Chair invited Jim Boyle to introduce the report which is presented to the Board for review and approval.
- 8.2 Jim presented the Quarter 3 Finance Report, confirming the £3.6 million forecasted underspend driven by delays in digital learning, vacancy lag, and lower dental trainee recruitment. He advised that NES successfully funded National Insurance reductions and pay awards for resident doctors. Noting that financial risks remain around Medical Additional Cost of Teaching (ACT) allocations, managed by territorial boards. Jim confirmed that NES is projected to exceed its £9.2 million savings target, forecasting £11.8 million, and has reduced outstanding government allocations to £0.4 million.
- 8.3 The Chair thanked Jim for the update and opened up for questions.
- 8.4 The Board asked how underspent Medical ACT funds are treated.
- 8.5 Jim advised that these funds return to NHS Scotland for redistribution, with NES maintaining close dialogue with territorial boards.
- 8.6 There were no further questions, and the Board approved the report.
- 8.7 Alison Shiell joined the meeting.

8b) Quarter 3 Performance Delivery 2025/26 (NES/26/07)

- 8.8 The Chair welcomed Alison Shiell to the meeting and asked her to introduce the report which is presented to the Board for review and approval.
- 8.9 Alison presented the 2025–26 Quarter 3 Delivery Report, noting NES achieved 88.5% of its milestones (169 of 191 deliverables), with 19 minor delays and two major ones caused by external factors. She advised that performance has slightly improved over previous years, despite extra work for PSD Scotland preparations. She also advised that NHS Scotland Academy updates were reviewed at the Executive Programme Group and will be included in Q4 if needed. Alison also advised that a new table is included at the request of the Board which shows a projected 92% completion rate by year-end.
- 8.10 The Chair thanked Alison for the update and opened up for questions.
- 8.11 The Board asked about dependencies on single suppliers.
- 8.12 Christina Bichan advised that NES is reviewing delivery models and expanding supplier options where feasible.
- 8.13 There were no further questions, and the Board approved the report.
- 8.14 Alison Shiell left the meeting.

8.15 Debbie Lewsley joined the meeting.

8c) Quarter 3 Strategic Risk Report 2025/26 (NES/26/08)

8.16 The Chair invited Debbie Lewsley to introduce the report which is presented to the Board for review and approval.

8.17 Debbie presented the Quarter 3 Strategic Risk Register update, noting it had already been approved by the Audit and Risk Committee. She advised that key changes included risk rating adjustments and updates to revised wording notably Strategic Risk 11. She noted a reduction in the number of risks outside NES's appetite and noted updates to ownership roles. Debbie advised that an initial review was completed ahead of the organisational transition to PSD Scotland, leading to a proposal to remove Risks 2 and 5 and revise remaining risks in Quarter 4. Debbie requested the Board's approval of these updates and planned actions.

8.18 The Chair thanked Debbie for the update and opened up for questions.

8.19 The Board questioned whether the updated wording of Strategic Risk 11 was too focused on venue availability, potentially overlooking broader issues such as technology flexibility, system reliability, and other operational dependencies and asked how NES would prevent mitigation efforts from concentrating solely on one aspect instead of addressing the overall risk profile.

8.20 Debbie confirmed that the wording of Risk 11 had already been reviewed and updated as requested by the Board, specifically to ensure it continued to reflect the full risk profile and not only the venue related component.

8.21 There were no further questions, and the Board approved the report.

8.22 The Chair thanked Debbie for the report.

8d) Quarter 3 Strategic Key Performance Indicators 2025/26 (NES/26/09)

8.23 The Chair invited Debbie Lewsley to introduce the report which is presented to the Board for review and approval.

8.24 Debbie presented the Quarter 3 Strategic Key Performance Indicators (SKPI) update, confirming prior approval by the Planning & Performance Committee. She reported that 80% of KPIs now have data, with 66% rated Green which is a 6% improvement over Quarter 2, showing fewer red and amber indicators. She noted that progress continues on outstanding measures, especially in education KPIs, with further reporting expected. Debbie advised that following an organisational review, KPI ownership was reassigned to People & Culture, Planning, Performance & Transformation, and NTS.

- 8.25 Debbie requested Board approval for two changes: updating SKPI 34 to track the EPC rating instead of CO₂ emissions and expanding SKPI 14 to cover all trainee groups. She advised that charts will be used to improve performance insights. Debbie concluded by seeking Board approval for both the Quarter 3 update and proposed KPI revisions.
- 8.26 The Chair opened up for questions.
- 8.27 The Board sought clarification on the cause of red-rated SKPIs.
- 8.28 Debbie advised that the delays were related to external factors, including university intake changes and external system constraints.
- 8.29 There were no further questions, and the Board approved the report.

9 Strategic Items

9a) Strategic Risks Annual Review and Board Risk Appetite (NES/26/10)

- 9.1 The Chair invited Debbie Lewsley to introduce the report which is presented to the Board for review and approval.
- 9.2 Debbie presented the report, noting it had been reviewed and approved by the Audit & Risk Committee. She advised that the review included updates to risk ratings, titles, descriptions, and enhanced management processes, noting that some risks were reassigned due to organisational changes ahead of the shift to PSD Scotland. Debbie advised that an initial risk register review led to a proposal to remove SR2 and SR5, and revise or rescore remaining risks for alignment with the new context. Debbie requested Board approval for the annual review and proposed transition actions.
- 9.3 The Chair thanked Debbie for the report and opened up for questions, as there were none the Board approved the report.
- 9.4 Debbie Lewsley left the meeting.

10 Governance Items

10a) Corporate Governance Package (NES/26/12)

- 10.1 The Chair invited Drew McGowan to introduce the report which comes to the Board for review and approval.

- 10.2 Drew introduced the updated Corporate Governance Package, advising that it had undergone a full review at the Audit and Risk Committee. He explained that the changes being presented were primarily minor housekeeping updates, ensuring that the documents remain accurate, consistent, and aligned with current practice. Drew also noted that, once approved, this version of the governance package would support the development of the corporate governance arrangements for the new organisation, PSD Scotland. He invited the Board to approve the updated package.
- 10.3 The Chair thanked Drew and for the report and opened up for questions, as there were none the Board approved the report.

10b) Committee Membership Changes (NES/26/13)

- 10.4 The Chair invited Drew McGowan to introduce the report which comes to the Board for noting.
- 10.5 Drew introduced the paper by explaining that several updates had been made to the membership of the Board's committees since the previous meeting. He advised that the changes were clearly set out in the paper and had been made to ensure committees remain properly constituted and appropriately balanced. Drew highlighted one specific correction: the Chair of the Remuneration Committee is also a member of the Planning & Performance Committee. He invited the Board to approve the updated committee membership, noting the correction.
- 10.6 The Chair opened up for questions, as there were none, the Board approved the report.

Significant issues to report from Standing Committees:

10c) Audit and Risk Committee 15 January 2026

- 10.7 The Chair invited Jean Ford, Chair of the Audit & Risk Committee to provide an update on the recent meeting.
- 10.8 Jean summarised that the latest Audit & Risk Committee meeting presented no new issues for the Board. All agenda items had been covered in today's Board agenda, so there was nothing further to escalate or add beyond the existing reports.

10d) Planning & Performance Committee 28 January 2026

- 10.9 The Chair invited Ally Boyle, Chair of the Planning & Performance Committee to provide an update on the meeting.

- 10.10 Ally stated that the recent Planning & Performance Committee meeting was productive, with most key items presented to the Board today. He noted that previous meetings had excessive material, but the latest meeting had a better balance, improving review efficiency. Ally praised the team for streamlining processes and confirmed the committee's satisfaction with report quality and presentation.

Items for Homologation

NES Standing Committee Minutes:

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|------|--|-------------|
| 11a) | Audit & Risk Committee 2 October 2025 | (NES/26/14) |
| 11b) | Planning & Performance Committee 10 October 2025 | (NES/26/15) |
| 11c) | Education & Quality Committee 11 September 2025 | (NES/26/16) |

The Board homologated the minutes of the above previous meetings presented.

11 Date and Time of Next Meetings

- 11.1 Public Board – 19 March 2026
- 11.2 Private Board – 5 February 2026; 19 March 2026

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

The meeting closed at 11:20am

NES Feb 2026
LS/DM/KR/DG

NES/26/21
Agenda Item: 7a
19 March 2026



CHAIR'S REPORT

David Garbutt, Chair of NES Board

19 March 2026

1. Introduction

- 1.1. Since the last Board meeting on 5 February 2026, I have attended the following meetings and events, as well as internal NES meetings, Board and Standing Committees.
- 1.2. I attended several Public Service Delivery Scotland meetings and Public Service Delivery Scotland Executive Meetings in collaboration with Scottish Government, National Services Scotland and NHS Education for Scotland colleagues.
- 1.3. Since the last Board meeting in February 2026, I have attended mentoring sessions with the Board apprentice, Louise Harker, and completed non-executive appraisal meetings with Non-Executive Board members.

2. Summary of Engagement February 2026

- 2.1. On Tuesday, 10 February 2026, I attended the Promise Scotland Finance Committee to consider the impact of additional finance in areas where there has been an observed shortfall in delivery.
- 2.2. The monthly NHS Chairs meeting with the Cabinet Secretary took place on 11 February 2026. Attended by the Cabinet Secretary, Scottish Government colleagues and NHS Scotland Board Chairs, discussions focused on Operational Improvement Plans, Reduced Working Week and Sub-National Planning. There was a detailed discussion about Maternity Services, including the need for a new code of practice, the impact of HIS inspections, learning time and skills mix and support for women from ethnic and disadvantaged groups. The DG announced a complete review of ESM and Senior Management pay scales, including the efficacy of using Hay methodology. She also raised the issue of grade overlaps and said there would be a review of the NEC and the preparation of a report for Ministers.
- 2.3. The final NHS Education for Scotland Staff Governance meeting took place on 19 February 2026 at Westport, Edinburgh, attended by Non- Executive Board and NHS Education for Scotland colleagues.
- 2.4. On the morning of 20 February 2026 Karen Reid and I met with the Scottish Social Services Council Chair and Chief Executive. We endorsed the continuation of the current Memorandum of Understanding and provided further details about the role and scope of Public Services Delivery Scotland.
- 2.5. I attended the Board Chair's Group meeting on 23 February 2026, attended by NHS Scotland Board Chairs. The agenda focused on the Public Health Scotland – 10 Year Strategy, Sub-National Planning and Public Service Reform. Public Health Scotland announced that they were working with the King's Fund to develop a matrix and a toolkit to support the goal of becoming a Public Health Organisation.

3. Summary of Engagement March 2026

- 3.1. The bi-monthly Improving Population Health Group meeting took place on Monday, 2 March 2026. Chaired by Public Health Scotland, discussions centered on the 2026/27 work plan and objective setting.
- 3.2. On the afternoon of 3 March 2026, I attended the quarterly Promise Scotland Director meeting, which covered the development programme to 2030 and the objectives of holding organisations to account for delivery.
- 3.3. The Improving Working Wellbeing Committee Meeting took place on the afternoon of 4 March 2026, attended by colleagues across NHS Scotland, Local Government and Scottish Government. Discussions at this meeting focused on strengthening Speaking-Up Cultures across Integrated Services. The meeting also addressed the issue of Population Health
- 3.4. I attended the final NHS Education for Scotland Education and Quality Committee Meeting which took place on 5 March 2026. The Medical Director and the Nurse Director of NSS both joined the meeting as observers.

**David Garbutt
Chair**

NES/26/22

Agenda Item: 07b

19 March 2026

Chief Executive's Report

Professor Karen Reid, Chief Executive



Date: 19 March 2026

1. Introduction

The agenda for our upcoming meeting on March 19, 2025, will include a presentation on the NHS Education for Scotland Strategy – a celebration of NHS Education for Scotland delivery and achievements, which the Board will be asked to note.

The Board will also be asked to review and approve a strategic item: Strategic Risk Log – Transition Update. This report ensures our approach to risk management remains robust and responsive to emerging challenges as we transition to Public Services Delivery Scotland.

Finally, the Board will be asked to homologate a suite of NHS Education for Scotland Standing Committee Minutes.

2. Updates and Announcements

2.1. Public Services Delivery Scotland

a) Public Services Delivery Scotland (PSD Scotland).

On Wednesday 4 March 2026, the Scottish Parliament passed legislation to formally establish Public Services Delivery Scotland. The new body, which will drive transformation across the health and care system and the wider public sector, will be established on 1 April 2026, bringing the strengths of NHS Education for Scotland and NHS National Services Scotland together.

The new organisation will lead on workforce planning and development, service infrastructure and innovation, with a particular focus on digital transformation. It will accelerate national programmes, alongside continued delivery of all existing NHS Education for Scotland and NHS National Services Scotland services, delivering safer, more consistent and efficient care for people.

2.2. NHS Education for Scotland – Westport Premises

a) The staff consultation for the short-term move from Westport to Gyle Square has begun and will run until mid-May. This will be a short-term relocation while Public Services Delivery Scotland assesses its property requirements to support its operating model. A project team is currently progressing a number of sub-workstreams to support the move, and are progressing workforce, property, technology, procurement and communications tasks. NHS National Services Scotland colleagues are assisting the move, including the recommissioning of the space to be occupied.

b) The procurement issues cover services that will be necessary to support the move and also the sourcing of venues that will be required for the hosting of education and training activity post-July, although Gyle Square will be able to accommodate a significant number of sessions. Weekly updates are being provided to the NHS National Services Scotland Executive Team, given the criticality of this project and the tight delivery timescale.

2.3. Remote and Rural – National Centre Phase 2 Options Appraisal Commission

- a) Following support from the Scottish Government Primary Care Directorate, NHS Education for Scotland carried out an options appraisal to identify the most effective way to deliver targeted education, training, research, evaluation and leadership tools for remote and rural health care. As part of this work, views were gathered from key external senior stakeholders across rural and island communities.
- b) The preferred option which scored the highest across all of the tailored scoring criteria was to move to a ‘hub and spoke’ model. This was with a view to further embedding delivery in existing NHS Education for Scotland structures and optimising existing resource and networks to have the biggest impact, including in strategic alignment with the Population Health Framework, the Service Renewal Framework and emergent sub-national planning structures.
- c) The business case was submitted timeously on 16 February and NHS Education for Scotland will shortly engage with Scottish Government to address any queries or points of clarity in relation to the proposal, with a view to building a detailed delivery and resource plan.

2.4 Announcements

a) **Final NES Board Meeting**

This will be a particularly significant Board meeting for us, as we gather for the final time as the NHS Education for Scotland Board. I want to acknowledge the dedication, professionalism, and shared purpose that have brought us to this point. It is both a moment to reflect on all we have achieved together and an opportunity to look ahead with confidence as we prepare to join with our new colleagues in shaping the future of the new organisation.

The inaugural meeting of the Public Services Delivery Scotland Board will be held on 2 April 2026.

b) **David Garbutt CBE, Chair, NES**

On behalf of the Board, I want to express my heartfelt thanks to the Chair for his exceptional leadership over the past eight years. At this your final NHS Education for Scotland Board meeting, I want to take a moment to acknowledge the significant contribution you have made throughout your tenure. Your steady guidance, strategic insight, and unfailing commitment to excellence have shaped the organisation in ways that will be felt for years to come. It has been a privilege to work under your stewardship, and I wish you every success and happiness in your retirement.

c) **Equally Safe at Work**

Further to the update provided within the Chief Executive’s Report to the February Board in relation to our aim of securing Equally Safe at Work accreditation, NHS Education for Scotland has recently been notified by Close the Gap (the organisation that oversees the Equally Safe at Work programme) that we have been successful in achieving ‘development’ accreditation status. This is a

significant achievement as it demonstrates our commitment to the advancement of gender equality and the women’s labour market across the NHS Education for Scotland workforce. Our accreditation period runs from February 2026 until February 2028. Within the context of the transition to Public Services Delivery Scotland, a discussion has been held with Close the Gap to enable us to transfer the accreditation to PSD Scotland. Close the Gap have now confirmed criteria and milestones that PSD Scotland will need to evidence over the next 6-12 months which will allow the accreditation status to be transferred and held by the new organisation.

- d) **Quality Improvement National Programmes**
 The Quality Improvement team has been shortlisted for the Best Cross-Organisation Collaboration Award in the Global Top 30 Improver Awards. This recognition highlights the team’s work in developing and delivering nationally recognised Quality Improvement learning programmes. Winners will be announced at the International Forum on Quality and Safety in Healthcare in March 2026.

- e) **Digitally Enabled Workforce (DEW)**
 The Digitally Enabled Workforce (DEW) programme team won the Digital Health and Care Team Award at the recent Holyrood Digital Health and Care Awards, narrowly missing out on the Digital Service Transformation Award. The commitment to excellence in delivery, high performance and impact continues in their work to strengthen digital skills across the Scottish public service workforce.

3. Our Strategic Themes

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



4. Performance - how we are performing as an organisation

a) **NES Corporate Improvement Programme**

The Corporate Improvement Programme continues to provide a coherent and disciplined framework for delivering NHS Education for Scotland's priority improvements during the final phase of transition to Public Services Delivery Scotland. Since the previous update, portfolio activity has increasingly centred on implementation readiness, final governance approvals, and the consolidation of improvements that will transfer directly into the new organisation.

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

A tender for an interim digital solution to enhance oversight and reporting has now been published. This follows the completion of a large-scale review of NHS Education for Scotland's learning products and the continued embedding of commissioning, evaluation and quality-governance arrangements across directorates. Together, these developments position the Learning and Education Quality System to move into active system development, while sustaining the operational quality improvements already in place.

c) **Digital Learning Infrastructure**

The Digital Learning Infrastructure programme has reached a significant milestone with approval of the Economic Case and agreement to adopt a hybrid delivery model. This model - combining a privately hosted learning management system with continued NHS Education for Scotland ownership of the wider Turas platform - represents a substantive shift from earlier build-only assumptions. Updated Full Business Case documentation and programme delivery plans are now progressing through the final stages of governance, while engagement with health boards and national partners continues in advance of endorsement and statutory-mandatory module go-live in March 2026.

d) **Digital Capability and Confidence**

Delivery has progressed from the preparation phase into early organisational adoption. The Digital Resource Hub has now entered soft launch, supported by baseline digital capability analysis, ongoing Copilot training cohorts, progression of the Digital Diploma, and strengthened engagement through Digital Champions and emerging collaborative learning partnerships. Together, these developments enhance workforce readiness and establish the foundations for sustained digital capability within Public Services Delivery Scotland.

New enabling activity has also emerged across the wider improvement landscape. Discovery work for a Data Analytics and AI Improvement Programme is now shaping a draft programme structure for Executive Team consideration, while development of an implementation model for a Virtual Lifelong Learning Unit is progressing in alignment with the Learning and Education Quality System to ensure complementarity rather than duplication.

Across the portfolio, risk continues to be actively managed and remains broadly stable. The most significant pressures relate to recruitment constraints, resource capacity within digital and technical teams, and the need to secure final external endorsements and funding approvals within compressed timescales. These risks

are being mitigated through strengthened governance oversight, targeted stakeholder engagement, and ongoing portfolio coordination through the Project Management Office and Executive Team structures.

Overall, the Corporate Improvement Programme is entering its closing delivery phase, with clear evidence of embedded organisational improvement, strengthened digital capability, and maturing governance. The portfolio is now focused on completing the final approvals, mobilisation activity, and workforce readiness required to ensure NHS Education for Scotland transitions into Public Services Delivery Scotland with a coherent, standardised, and future-ready operating foundation.

4.1 Dental including Optometry

a) External Inspection of Modern Apprenticeships

His Majesty's Inspectorate of Education is conducting inspections of all providers of apprenticeship training in Scotland to ensure that the training delivered meets high standards of quality and aligns with national strategies - addressing the needs of both employers and apprentices. We have received formal notification that an inspection of the NHS Education for Scotland Modern Apprenticeship in Dental Nursing programme will be conducted in March 2026.

b) Dental Therapist Vocational Training

Recruitment for Dental Therapist Vocational Training opened in January 2026, for the first full-time posts due to commence in September 2026. As demand for these training places significantly exceeded expectations, NHS Education for Scotland is exploring the potential for additional training places to be made available.

4.2 Medical, including Healthcare Science

a) Healthcare Science

Twenty trainee clinical scientists and a further 72 colleagues have been supported to undertake additional education to progress their careers within the Healthcare Science career framework. In total, 199 individuals holding national training numbers are being monitored through our quality assurance processes.

Development of the education, skills and competencies framework, along with genomics resources, continues through extensive stakeholder engagement.

4.3 Social Care & Communities

a) Increasing the Capacity and Capability of the Social Care Workforce

Since their launch earlier this year the National Induction Framework for social care learners has been used by over 2,698 learners and the Social Care Career Options tool has been accessed by over 7,500 users.

Improvements are being put in place to help social care learners access NHS Education for Scotland learning resources on Turas Learn, including those that have been repurposed. This includes tagging resources to Scottish Social Services Council Continuous Professional Learning requirements; providing a

social care landing page; and identifying the training needs arising from Care Inspectorate scrutiny activity.

b) Unpaid Carers Programme

Equal Partners in Care resources have been accessed by more than 2,000 new learners since April 2025. The 'How Carer Aware Are You' podcast is now available and being promoted to health and social care, with colleagues now finalising three other sets of resources. One focuses on carer awareness relating to mental health, another on carers involvement in hospital discharge and the third on supporting commissioners and planners to create greater variety in the provision of short breaks for carers.

c) Centre for Workforce Supply (Health)

The Centre for Workforce Supply (Health) has contributed to the drafting of the Scottish Government's Workforce Planning Framework and supported related internal activity on the data analytics. Colleagues have developed and launched two new resources over recent weeks: [NHS Scotland Stay and Thrive Retention Programme for International Educated Staff | Turas | Learn](#) on the Hub, with a Community of Practice and Viva Engage platform alongside it; and [Return to Practice | Turas | Learn](#) Hub via a successful webinar held on 20 January 2026.

Communication and marketing activity delivered by the Centre for Workforce Supply for NHS Careers has resulted in increasing engagement through our channels. Also in this reporting period, Centre for Workforce Supply (Health) has built the Remote and Rural Toolkit that colleagues in the National Centre will take forward with Scottish Government.

d) Centre for Workforce Supply (Social Care)

The Centre for Workforce Supply (Social Care) has been supporting communication of the Scottish Government's Displaced Workers funding package; developing the Human Trafficking and Exploitation Turas pages and resources; and introducing international recruitment experience surveys for employees and employers.

The team have received 112 support requests from individuals and have seen 294 people accessing Guidance for Local Authority Commissioners when a sponsor licence is revoked, as well as 251 downloads of 'Recruiting Displaced workers in Scottish Adult Social Care'. Social media networks and groups also continue to grow. Two new sections of the Turas Learn site have been added, to provide access to learning and to information on how to identify, report and respond to instances of human trafficking and exploitation.

4.4 NHS Scotland Academy, Learning, and Innovation

a) Knowledge Management and Discovery

Work is continuing around the nine selected 'Once for Scotland' statutory and mandatory modules. The modules have now been shared with health boards that use LearnPro as their learning management system. The Turas Learn Content Team are ready to update Turas Learn to map current mandatory training pathways to the new modules and ensure continuity of access for staff when the

modules go live.

The first full meeting of the Digital Library Subgroup of the Clinical and Care Assurance Group has taken place. The group has been established to inform decisions relating to the procurement of digital library resources on behalf of health and social care. Knowledge Service staff are now developing a detailed project plan for the next digital library tender process and preparing supporting materials around data and information collection to inform this.

b) Learning and Education Quality

Educational quality management and assurance structures are now in place across all directorates, operating as Directorate Educational Quality and Safety Groups led by designated Directorate Educational Leads. These groups meet monthly on a cross-directorate basis and contribute directly to the ongoing delivery of the LEQS programme. The 'product estate review' has examined around 15,000 learning resources - over half of NHS Education for Scotland's total products - and remains on track to complete the review of most products by the end of Q4 2025/26.

4.5 NHS Education for Scotland Technology Service

a) Digital Front Door Programme

The Digital Front Door Programme and NHS Lanarkshire are jointly delivering actions to drive uptake of the 'opt-in' initial release of MyCare.scot. The programme will be able to communicate more widely once MyCare.scot is available to all from April 2026. Engagement with sub-national planning groups is underway to support health board readiness and implementation planning. The Digital Front Door Programme National Implementation Community meetings are continuing, with a move to weekly meetings from 17 February.

Planning work continues to confirm the delivery timeline for downloadable, native applications for Apple and Android phones, in addition to the dynamic web application for April 2026. A delivery paper was submitted to the Digital Health and Care Committee to inform ministerial advice, with approval received on this advice.

Detailed planning of the work required for 15 April go-live for Whole Population Availability continues. Information Governance and Assurance teams are working with Central Legal Office to produce a draft agreement between Public Services Delivery Scotland and relevant parties. A Communications Plan for Whole Population Availability launch has been developed based on pre-election feedback received from Scottish Government.

4.6 Planning, Performance and Transformation

a) 2025/26 Annual Delivery Plan

As highlighted in previous Chief Executive Reports to the Board, a draft 2026/27 NHS Education for Scotland Annual Delivery Plan has been developed. This sets out our delivery priorities for the year ahead and demonstrates how our work will

support Scottish Government's strategic priorities and in particular the ambitions of service renewal and improved health and care outcomes for Scottish citizens¹. Within the context of the transition to Public Services Delivery Scotland, deliverables have been developed in line with the 2023-26 NHS Education for Scotland Strategy and the Scottish Government Health and Social Care Service Renewal Framework.

To demonstrate a clear and auditable trail of our 2026/27 delivery intentions, prior to the transition to Public Services Delivery Scotland, the NES Planning & Performance Committee and Board considered a draft version of the 2026/27 NHS Education for Scotland Annual Delivery Plan during February 2026. The Board approved the document's submission to the NHS Education for Scotland Sponsorship Team at Scottish Government. Feedback is currently awaited and the NHS Education for Scotland Board will receive a further iteration of the draft Annual Delivery Plan for approval at its final Board meeting on 19 March 2026.

b) NHS Education for Scotland as an Anchor Institution

National NHS Boards met with Scottish Government colleagues from the Anchors Workforce Workstream (within the Scottish Government Place and Wellbeing Programme) on 27 February 2026 to receive an update on a refreshed Local Employability Partnerships Framework and to discuss roles and opportunities for Boards in this area. An NHS Scotland Health Anchors Summit, hosted by Public Health Scotland and Scottish Government, has also been scheduled to take place in mid-March 2026. The event aims to take stock of national progress in delivering the NHS Scotland Health Anchors Strategy, strengthen strategic coherence, build shared intelligence and confidence, accelerate system impact and position NHS Scotland for the next phase of anchor development (including consideration of the opportunities presented by the Community Wealth Building (Scotland) Bill within the context of NHS Scotland Anchor Institutions).

c) Freedom of Information

As reported in the previous Chief Executive's Report to the Board, NHS Education for Scotland has achieved 99% statutory compliance with Freedom of Information requests, despite a 108% increase in volume since 2021.

KPMG recently completed an internal audit of NHS Education for Scotland's Freedom of Information function, concluding with a 'significant assurance with minor improvements' rating. The audit found that processes, procedures and controls were robust and consistently followed, and clear guidance and training were available to staff. KPMG has made three low-level recommendations to enhance reporting, improve the central log and update documentation. These recommendations will be taken forward into Public Services Delivery Scotland.

NHS Education for Scotland has been monitoring the progress of the Freedom of Information Reform (Scotland) Bill over recent months to ensure we are prepared

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

to comply with the first substantial changes to Freedom of Information law in more than 20 years. In February, the Scottish Parliament voted to endorse the general principles of the Bill but agreed, through an amendment, that reforms should instead be considered in the next parliamentary session. Monitoring will continue in Public Services Delivery Scotland post 1 April 2026.

d) Whistleblowing Performance

During quarter three 2025-2026, no whistleblowing concerns under the National Whistleblowing Standards were received.

Within NHS Education for Scotland, line managers are required to complete the line manager-level training on Turas Learn (this forms part of our suite of 'essential learning'). As of 31 December 2025, our compliance rate was 93% (343/368) - the highest level of performance since the training was launched.

Now in its tenth year, the 'iMatter' staff experience survey is issued to all staff across NHS Scotland health boards. This gives staff the opportunity to feedback on their experiences within their team and at organisational level each year. Since 2023, two optional whistleblowing questions were added to the survey, and these provide further insights into how our employees feel about raising concerns. Once again, in 2025, NES scored the highest from across all NHS Scotland Boards for the whistleblowing statement questions.

4.7 NHS Education for Scotland – Quality Improvement

a) Quality Improvement National Programmes

Promotion of the four open-access Quality Improvement learner pathways continues, with universities and health and care organisations incorporating the learning resources into their existing and development programmes. In the past month the NHS Education for Scotland Quality Improvement Team has met with a number of organisations, including the Medical School at Robert Gordon University and the Strategic Planning and Performance Officers Group to promote the pathways.

The team will also deliver a one-hour seminar on the development and design of the pathways at the National Workforce and Education Conference in April 2026.

4.8 People and Culture

a) NHS Scotland Careers Website – Performance Update

Data for Q3 FY2025/26 shows the careers website is performing effectively and attracting more relevant visitors. Although the site appeared in search results less often, the people who did see it were more likely to engage with it. The number of visitors clicking through to the site increased by 4.1%, and the share of people who clicked after seeing the site rose to 2.40%. Engaged visits, meaning people who spent time exploring the site, increased by 33.1%, reaching 163,867. Performance is now comfortably above the 80,000 engaged-visit target. Overall, the results indicate the website is now reaching a more relevant audience who are more likely to be interested in NHS careers.

b) Leading to Change

Through the Leading to Change programme, the Operational Leadership Success Profile, Leadership SAQ, 360 Feedback Tool and Career Conversations continue to support leadership development across the sector. Activity has focused on live testing, building facilitator capacity, supporting implementation and gathering user insight. A review of 237 Leadership SAQ feedback returns will conclude the live testing phase by the end of February 2026, with further stakeholder engagement planned thereafter. To date, 70 of a potential 114 facilitators have been trained, strengthening delivery capability.

The Senior Leadership Gateway App remains the central access point for senior leaders to access relevant tools and resources. A digital development plan is underway, with work progressing in Q4 2025/26 to improve accessibility and user experience.

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

5.1 Chief Executive Update

a) Staff Engagement

As we approach 1 April, supporting the change process among staff has been an important part of our preparations. We have coordinated internal communications across the organisation, such as staff webinars and information on system changes (e.g. appraisal, payroll etc). We anticipate more of these communications over coming weeks. For the same reason, we will also be holding a final 'NES' webinar this month, celebrating our collective contributions and looking ahead to new opportunities.

b) Population Health Planning

The NHS Education for Scotland Population Health Group continues to meet quarterly, with the next meeting planned for the end of March. Mapping activity continues, supported by Planning, Performance and Transformation Directorate colleagues. Members of the group are considering and providing feedback on Guidance for Educators on Applying a Health Equity Approach in the Design of Education Resources.

5.2 Dental, including Optometry

a) Orthodontic Therapy Training

A significant milestone in strengthening orthodontic services across our rural NHS Boards has been achieved. Three students, one based in NHS Highland and two in NHS Shetland have now completed an extended learning programme through the NHS Education for Scotland Orthodontic Therapy Training Programme. This initiative was developed collaboratively with the Royal College of Surgeons of Edinburgh, the General Dental Council, and employing Boards. Designed as an Earn as You Learn model, the programme supports the professional development of registered dental care professionals and enhances patient access to NHS orthodontic services. The students were successful in the Royal College of

Surgeons of Edinburgh Diploma in Orthodontic Therapy Summative Examinations in December 2025 and will now update their registrant status with the GDC before commencing practice as Orthodontic Therapists. Notably, the programme introduced remote supervision, allowing Specialist Orthodontists to provide effective clinical supervision and support for trainees.

An achievement that reflects our ongoing commitment to embrace innovation solutions to develop a workforce that is sustainable, skilled and highly effective can be demonstrated in the following example: A registered dental nurse from NHS Western Isles relocated to Inverness to fulfil the practical training and clinical supervision requirements within the existing 12-month programme. Upon passing the Royal College of Surgeons of Edinburgh examinations, they have returned to Stornoway to begin practicing as an Orthodontic Therapist.

b) Optometry: Community Glaucoma Service:

The Community Glaucoma Service support team ran a successful face to face Continuous Professional Development Day with content based on prior learner feedback. Feedback from one learner who also delivered a short talk at the event:

‘What stood out to me yesterday was just how supportive everyone is of each other. Over the last few years through attending NHS Education for Scotland events the peers I see regularly at them have become more like friends and the network provides great opportunity for peer review and support, especially important when you work alone.’

c) Optometry: Independent Prescribing:

The NHS Education for Scotland Placements and Skills workstream supports clinicians undertaking the Independent Prescribing (IP) qualification, including delivery of the placement component of the new Postgraduate Diploma in Independent Prescribing programme at Glasgow Caledonian University. Regular Independent Prescribing simulated sessions and Teach and Treat clinics are provided to ensure candidates have safe and standardised opportunities to gain the necessary clinical exposure to evidence the required learning outcomes and support autonomous prescribing for patients close to their home. These sessions are also accredited for Continuous Professional Development to support confidence, reflection and clinical decision-making in qualified Independent Prescribing Optometrists.

d) Optometry Deliver Postgraduate Support for Optometrists in Practice:

A range of Continuous Professional Development events have been delivered to assist the workforce in adapting to recent changes to the General Ophthalmic Services contract to align with service needs. For example, the Spotlight Anterior Eye sessions held across Scotland offer face-to-face training, peer discussion, and interactive 3D case-based learning, which enhance clinical knowledge and support ongoing professional development.

Our 2026 mandatory training for optometrists launched in January 2026, supporting practitioners to explore the principles of realistic medicine and value-based health & care. The module has received excellent feedback, with almost a third of the profession in Scotland having completed it to date. To support and

contextualise some of the learning within the e-learning resource, the postgraduate support team have delivered a realistic medicine-focussed Continuous Professional Development Day around supporting people living with diabetes, featuring those with lived experience. Overwhelmingly positive feedback has been received.

- e) **Optometry: Foundation Training Year Supervisor Engagement Videos**
The Foundation Training Year workstream is developing a series of supervisor engagement videos to promote supervision as a core professional concept across the workforce. The aim is to enhance understanding of the value of supervision and encourage wider participation and ownership within the profession. This work will help build confidence, strengthen professional culture, and increase engagement in supervision ahead of the Foundation Training Year launch, generating interest and enthusiasm across the profession to support future Foundation Training Year students.
- f) **NHS Education for Scotland Glaucoma Accredited Training**
The NHS Education for Scotland Glaucoma Accredited Training workstream is editing the series of onboarding webinar/online events welcoming cohort 5 learners and assessors. The events seek to create and support learner expectations in addition to providing standardisation activities into the rigorous assessor induction. A comprehensive content review and refresh of the online learning materials associated with the programme is heading to completion as we excitedly anticipate the delivery of refreshed lecture materials.
- g) **Dental Vocational Trainers**
Dental Vocational Trainer development sessions were delivered to all current trainers across four areas of Scotland. Content for each programme was tailored to trainers local training needs.
- h) **Dental Specialty Training**
A two-day training event took place on 19 and 20 February at the Royal College of Physicians and Surgeons of Glasgow for the current Dental Specialty Trainees. The programme provided educational content on the core leadership elements of the curriculum and was organised by a small group of the current Dental Specialty Trainees.
- i) **Dental Core and Specialty Training Educational Supervisor Event**
A training event took place on 30 January 2026 for Core and Specialty Training Educational Supervisors, where 27 learners covered topics including supportive and inclusive learning environments in clinical training settings and supporting trainee progression and wellbeing.

5.3 Medical including Healthcare Science

- a) **Healthcare Science**
Work continues on developing resources and delivering webinars to support the undergraduate framework, including establishing a support worker liaison group. Further updates to the Healthcare Science Careers booklet, to encourage young people into the sector are also in progress.

Health boards, the Scottish Government and NHS Education for Scotland are collaborating to create a cohesive programme of events for Healthcare Science Careers Week 2026 (9–13 March).

b) Medical Education Reform

The Medical Education Reform programme seeks to reform medical education in Scotland by enhancing the recruitment, training, retention, and wellbeing of doctors and the education workforce. It also ensures a diverse, skilled, and sustainable workforce that meets the healthcare needs of the population. It encompasses several projects, including improving the transition from Certificate of Completion of Training to Consultant; Distribution of Resident Doctors in Training to meet their own needs and those of the populations they serve; 8-month rotation pilots to improve the experience of Foundation Doctors; and a workstream focused on improving the capacity and wellbeing of our medical educators. The programme is progressing well in line with agreed goals.

5.4 NHS Scotland Academy, Learning, and Innovation

a) Knowledge Management and Discovery

Staff across Knowledge Management and Discovery are continuing to work with the Digital Learning Infrastructure programme. Work in this area is likely to increase for Knowledge Management and Discovery staff in the months ahead as, subject to the approval of the full business case, the programme moves into its delivery phase.

b) Learning and Education Quality

Core and additional learner feedback questions have been agreed for all educational products. These have been shared with all NHS Education for Scotland staff and are available for use immediately, supported by guidance and questionnaire templates. Responses to learner feedback questions will form part of a broader evaluation process for learning products, implemented through a monitoring and review process under the Learning and Education Quality System.

c) Ear Care Programme

The NHS Scotland Academy Ear Care Programme is now live, with the first Cohort of four learners from NHS Highland, NHS Greater Glasgow & Clyde and NHS Ayrshire and Arran. The team continues to promote recruitment to future cohorts by undertaking engagement sessions which have generated interest. Learners are enjoying the hybrid learning on this programme and simulated support delivered within the Skills and Simulation Centre within NHS Golden Jubilee.

d) National Ultrasound Training Programme

A report to the Executive Programme Group highlighted the successes of the first three years of the National Ultrasound Training Programme. Since launching in November 2022, the programme has not only met but exceeded its initial objectives. It has supported accelerated training for 146 learners across eleven NHS Scotland boards and delivered 15 interprofessional masterclasses to 272 delegates. The team's achievements were formally recognised by gaining the

Scottish Radiology Team of the Year 2025 award and NHS Golden Jubilee's 2025 'Our People's Award' for Innovation.

e) **Nursing and Midwifery Council's Objective Structured Clinical Examination Project Closure**

Since launching the Nursing and Midwifery Council's Objective Structured Clinical Examination (OSCE) preparation programme in May 2022, the need for accelerated training has now passed. A proposal to close the project, with an end date of April 2026, was presented to the NHS Scotland Academy Executive Programme Group.

The Academy has developed a suite of high-quality digital resources for learners and educators, published on Turas Learn, to support Board-delivered simulation and mock Test of Competence OSCEs. The programme has made a substantial contribution to Scotland's international recruitment of nurses and midwives. Following the recommendation to close the project, responsibility for its ongoing maintenance will transfer to NHS Education for Scotland.

5.5 Nursing, Midwifery, or Allied Health Professions

a) **Allied Health Professions Public Health**

The Allied Health Professions Public Health Turas site launched in January 2026. It brings together public health learning and resources for Allied Health Professions across Scotland. The site supports practice educators, students and practitioners by offering:

- introductory learning on public health and how it relates to Allied Health Professionals' roles
- access to external education and training
- case studies demonstrating how Allied Health Professions contribute to national public health goals
- links to current policies, frameworks and standards
- interactive modules to build knowledge and confidence.

The site supports the aims of Scotland's Population Health Framework 2025–2035 and the Scottish Allied Health Professions Public Health Strategic Framework Implementation Plan 2022–2027. It helps strengthen Allied Health Professions leadership in prevention, early intervention and reducing health inequalities. More information is available here:

<https://vimeo.com/1152182257?share=copy&fl=sv&fe=ci#t=0> and <https://learn.nes.nhs.scot/80287>

b) **Realistic Medicine and Value Based Health & Care**

The existing 2023-2026 multi-year workplan will come to an end in March 2026, with all objectives and outcomes achieved. As part of this workplan, an Inequalities Learning Resource has been developed, with launch planned for early March 2026. Work is underway by Scottish Government to scope future educational requirements for this area of practice.

c) **Person Centred Care**

Recruitment to cohorts 11 and 12 Compassionate Communication Skills

Programme is now complete, and workshops will commence in April 2026. The Person-Centred Care programme will present at a national event 'Putting the patient into patient safety' on 12 March 2026, in collaboration with the adverse events network and Healthcare Improvement Scotland.

d) Early Learning and Childcare: Chatting Together

During the week beginning 9 February 2026, every Early Learning and Childcare setting in Scotland received a physical copy of each of the Chatting Together posters. These posters share the nationally agreed key speech, language and communication development messages for parents and caregivers, which were developed by the National Early Language and Communication team. Additionally, all settings were signposted to a newly available Chatting Together practitioner guide, which aims to support the multi-agency early years workforce to share these messages with families (from pre-birth). The practitioner guide introduces the key messages, highlighting their importance and how practitioners, across all sectors, can sensitively and constructively share these with families. The guide also highlights additional resources to support practitioners and links to the evidence base behind the development of the messages.

All resources have been made available via the National Early Language and Communication [sharing site](#):

5.6 Pharmacy

a) NHS Scotland Pharmacy First Patient Group Directions

Following the First Minister's announcement in 2025 to expand the range of conditions covered by NHS Pharmacy First Scotland, significant progress has been made in developing education to support the launch of the new NHS Scotland Pharmacy First Patient Group Directions. It is anticipated these will be available in March 2026.

b) Community Pharmacy Workforce Survey

Following data collection in October 2025, the [Community Pharmacy Workforce Report](#) was published in February 2026. This report provides invaluable insights into current workforce trends across the sector, aiding in national planning, identifying development needs, and shaping future workforce strategies.

5.7 Psychology

a) Trauma-Informed Principles in Training – Guidance for Educators

The National Trauma Transformation Programme at NHS Education for Scotland developed a trauma-informed guidance document to help our educators across settings and professions, to create learning environments where people feel safe, respected and able to take part fully. We know that trauma is common, and these approaches can benefit all learners, whether or not, they have experienced trauma. This guide also aligns directly with the NHS Education for Scotland Educator Capabilities Framework.

The trauma-informed guidance shows educators how to embed the principles of Trust, Safety, Choice, Collaboration and Empowerment throughout all stages of

training design, delivery and communication. This helps create predictable, respectful and psychologically safe environments where people can learn effectively and achieve their full potential. It provides practical steps for:

- preparing for training
- introducing and managing sensitive material
- agreeing safe and respectful ways of working as a group
- offering wellbeing resources, such as the NHS Education for Scotland Wellbeing Planning Tool.

These approaches aim to keep everyone feeling emotionally safe, encourage safe participation, build confidence and support high-quality learning outcomes.

By strengthening educators' skills and confidence in trauma-informed practice, this guidance supports the delivery of high-quality education and contributes to a positive workplace culture aligned with NHS Education for Scotland values, where staff feel supported and learners feel safe.

b) Clinical Associates in Applied Psychology

Twenty-eight trainees commenced the Applied Psychology Children & Young People Masters Programme, with a further 48 beginning the Psychological Therapies in Primary Care Masters Programme, both commissioned by NHS Education for Scotland. Trainees deliver clinical services whilst they train, in turn strengthening NHS Scotland's psychology and mental health workforce by expanding service capacity across NHS Scotland. This enables Board services to deliver timely, evidence-based assessment and intervention, including in high-demand areas like neurodevelopmental services. This helps reduce waiting times, supports early intervention, and ensures a sustainable pipeline of skilled mental-health practitioners across health boards.

- c)** Additional neurodiversity training was delivered to 60 of the 2025 Clinical Associates in Applied Psychology trainee cohort between January and March 2026. It has been highly successful, increasing workforce capacity, improving the quality and consistency of neurodiversity assessment and intervention, and receiving strong uptake and positive feedback from NHS Scotland health board partners and trainees. The extension builds on core Clinical Associates in Applied Psychology training, by providing structured, neuro-affirming teaching, with a strong emphasis on applied learning in clinical settings. The programme supports trainees to deepen skills in neurodiversity informed assessment, formulation and psychological interventions, alongside reflective practice and supervised application within local services. Plans are underway to further develop this offer and engage the qualified Clinical Associates in Applied Psychology workforce in this vital training from April onwards.

5.8 Planning, Performance and Transformation

a) Staff Networks

Our staff networks continue to meet regularly. To prepare for the new organisation we are undertaking a short project to identify what is working well and areas for improvement. Plans are also being made with NHS National Services Scotland to

map out each organisation's staff networks and to work with the Chairs to build a strong staff network infrastructure for Public Services Delivery Scotland.

b) Communications update

This month, we have continued to support and promote NHS Education for Scotland educational initiatives and deliver on our year-end commitments, such as publications. Examples include Remote and Rural, Dental, apprentices and human rights.

We have also promoted the upcoming [National Workforce and Education Conference](#), which will be hosted online over 23 and 24 April. Within the programme this year we are pleased to be hosting the Four Nations AI in Education Conference. The conference is for colleagues from all professional disciplines across health and social care with an interest in education and training, workforce development and digital solutions. There will be a number of plenary and parallel sessions run by all professional groups and an opportunity for joint sessions highlighting interprofessional learning.

Ahead of the transition to Public Services Delivery Scotland, we want to keep as much continuity as possible among our existing educational audience and thus have been preparing for a combined NES/NHS National Services Scotland social media presence. This will go live from 1 April and will be further developed over the coming months.

To inform staff, we have worked with our NHS National Services Scotland partners to design and build a new PSD Scotland intranet, which is now live and available to both staff groups. In terms of our current and future audience, we are also building a new Public Services Delivery Scotland external website, to go live from 1 April.

Following Parliamentary approval, we have facilitated essential communications to suppliers already and have plans in place to communicate more widely with our key stakeholders in advance of 1 April. In line with pre-election guidance, we will be taking a measured and appropriate approach to external communications on that date.

5.9 People and Culture

a) Public Services Delivery Scotland Transition – TUPE Consultation

NHS Education for Scotland has undertaken formal consultation with Trade Union partners regarding the transition to Public Services Delivery Scotland and the associated TUPE transfer of staff into the Common Services Agency. The statutory 90-day consultation period ran from November 2025 to 8 February 2026, with engagement focused on clear communication for affected staff, supporting directorates in transition planning, and maintaining effective partnership working. NHS Education for Scotland continues to work closely with the Scottish Government, Staff Side partners, and NHS National Services Scotland colleagues to ensure a coordinated, transparent approach to transfer arrangements and organisational readiness.

- b) **Organisation Development Plan**
Over the next eight months, the Organisational Development Plan will prioritise strengthening organisational culture, enhancing workforce engagement, and building the digital, educator, and leadership capabilities required to support the transition to Public Services Delivery Scotland. Key areas of focus include developing confident leaders and managers, increasing collaboration through a stronger “one team” approach, and ensuring the workforce is equipped with the skills and behaviours needed to deliver effectively during the transition period.
- c) **East Region Recruitment Service**
Ahead of the transition to Public Services Delivery Scotland, recruitment templates are being refreshed and managers have been asked to plan recruitment timelines accordingly. Where possible, managers should schedule start dates either before 19 March or from 23 April onwards to allow safe transfer of payroll, data and systems.
- d) **NHS Education for Scotland Line Managers Network**
Through the NHS Education for Scotland Line Managers Network, a programme of targeted development support has been delivered, including policy deep-dive sessions, facilitated drop-ins on managing change, and leadership identity workshops, all with strong engagement from managers. Key resources have also been strengthened, with learning materials added to Turas Learn, and the Line Managers Handbook updated to include guidance on bias in recruitment, supporting more consistent and inclusive management practice across the organisation.
- e) **Formal Consultation: Westport**
The formal consultation on the planned relocation of staff based at Westport commenced on 16 February 2026 which will last for 90 days until 17 May 2026. The consultation document has been shared with Trade Unions and Professional Organisations. Staff who have Westport as their contractual base have been asked to consider the detail in the consultation and feedback on the plans, including discussing any concerns with their line manager in the first instance. A set of FAQs have also been produced to support the consultation document. The proposed planning assumption is a relocation by 1 July 2026 to the Gyle, allowing time for clearance and safe decommissioning of Westport before lease expiry.

5.10 Social Care & Communities

- a) **Health Inequalities**
The Health Inequalities project will launch two new infographics to support raising awareness across NHS Education for Scotland. Guidance and other materials have been developed to support educators to embed health equity in learning design.
- b) **Knowledge and Skills Framework for Community Link Workers**
Stakeholder engagement activity is underway to develop a Knowledge and Skills Framework for Community Link Workers. This is a multi-agency initiative that will bring greater standardisation to the Community Link Workers workforce across Scotland. A sub-group of the Community Link Worker Advisory Group has been

set up and has met. Terms of Reference and governance arrangements have now been agreed and are in place. The project team are applying evidence from the Literature Review and Data Analysis carried out by Scottish Government colleagues and will lead a workshop to commence the design phase of the Knowledge and Skills Framework.

c) Getting it Right for Everyone

Supported by colleagues from the Nursing, Midwifery and Allied Health Professionals Directorate, [Getting it right for everyone \(GIRFE\) | Turas | Learn](#) has been launched. These resources are to support the health and social care sectors to implement Getting It Right for Everyone and include an introduction, principles and the Team around the Person Toolkit.

6 Partnerships - how we are supporting our partners

6.1 Strategic Partnerships

a) Strategic Engagement

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

6.2 Chief Executive Update

- a)** NHS Education for Scotland works with partners, stakeholders, and our own staff to build careers, lives and the future sustainability of the health and social care workforce. Partnership working is integral to ensuring that NHS Education for Scotland education, training and workforce development is co-designed and shaped by the voice and needs of people with lived experience, as well as the needs of health and social care staff.
- b)** The NHS Education for Scotland Executive Team and Strategic Implementation Group continue to meet formally. Collectively, they focus on strategic matters, strategic scrutiny, cross-organisational leadership, and ensuring the direction of strategy with a focus on our people, partnerships, and performance.
- c)** The Internal NHS Education for Scotland Public Services Delivery Scotland Programme Board continues to meet monthly. The meeting will continue to focus on establishing a clear mechanism to enable NHS Education for Scotland representatives across the Public Services Delivery Scotland project workstreams

to seek guidance and escalate key risks, issues, and challenges for timely resolution.

- d) My engagement with a wide range of key stakeholders across health and social care continues. This includes a wide range of colleagues across NHS Scotland, including Board Chief Executives and other senior colleagues, and as part of the Scottish Government, NHS Board Chief Executives' Private, Strategy and Business meetings.
- e) I regularly meet with Christine McLaughlin, Chief Operating Officer & Deputy Chief Executive, NHS Scotland, Director General for Health and Social Care, to drive forward our shared ambitions in the digital space. These discussions focus on the Digital Front Door Programme, ensuring alignment on governance, delivery priorities, and the integration of national digital services.
- f) As well as my regular meetings with Christine McLaughlin, Chief Operating Officer & Deputy Chief Executive, NHS Scotland, I am a member of the Strategic Leadership Board for Digital and Data Transformation.
- g) I continue to play a leading role in national workforce and strategic reform. I co-chair the Joint Negotiating Committee and act as Co-Chair on contract reform for resident doctors and dentists in training. I also serve as the NHS Board Chief Executives' lead on pay negotiations for consultants, specialty doctors, and resident doctors and dentists in training
- h) On behalf of NHS Board Chief Executives, I continue to support work on the future of the National Care Service, through Gordon Paterson one of our NHS reps, ensuring alignment with wider health and social care reform. Since 1 April 2025, I have held the role of Vice Chair of the NHS Board Chief Executives Group and continue to contribute to national leadership and strategic direction in this capacity.
- i) Engagement with the Scottish Government continues through my regular one-to-one meetings with a number of Scottish Government colleagues, as well as my attendance at wider Scottish Government meetings, which now includes the Public Services Delivery Scotland Programme Board. We continue to maintain strong links with Scottish Government through the Strategic Sponsorship arrangement, involving myself, the NHS Education for Scotland Board Chair, and Scottish Government's Director of Health Workforce.
- j) I actively participate in the 4 Nations NHS CEO Peer Group, which brings together Chief Executives from NHS England, Health Education and Improvement Wales, Northern Ireland Medical and Dental Training Agency, and NHS Education for Scotland. These quarterly meetings provide a valuable forum for collaboration across the UK, enabling us to share strategic priorities, explore common challenges, and align on key workforce and education developments.
- k) In November 2025, the NHS Education for Scotland Board received an update on the implementation of [DL\(2025\)25](#)– Implementation of Sub-National Planning: Co-operation and Planning Directions 2025 and Guidance. This paper outlined the governance arrangements and emerging structures that will support the new

national and sub-national planning model, and NHS Education for Scotland continues to play an active role in shaping and contributing to these arrangements.

- l) NHS Education for Scotland colleagues are engaged across all Sub-National Scotland West and East structures, ensuring appropriate leadership input and alignment with national planning expectations:
- Sub-National Scotland West and East, Strategic Planning and Delivery Executive Group (SPDEG) Meetings are attended by myself with Colin Brown attending when I am unavailable.
 - Sub-National Scotland West and East – Strategic Planning and Delivery Committee meetings (SPDC): attended by Karen Wilson.
 - Scotland West – Finance, Planning, Performance and Workforce Delivery Group: attended by Karen Wilson.
 - Sub-National West – Improving Flow Delivery Group: attended by Christopher Wroath.
- m) In the East Region, structures are still being established following the return of the Regional Planning Lead, and equivalent committees are expected to form in the coming weeks. NHS Education for Scotland will continue to ensure appropriate senior representation, including at the Sub-National Scotland East sub-committees when convened.
- n) In addition to the above, Professor Emma Watson represents NHS Education for Scotland on the Rural and Islands Workstream.
- o) Since the February 2026 Board meeting, I have begun induction meetings with colleagues from across NHS National Services Scotland, holding weekly engagement sessions with the Chair of Public Services Delivery Scotland. On 17 March 2026, the Chair and I had an informal introductory meeting with members of the Public Services Delivery Scotland Board.

6.3 Dental including Optometry

- a) **Qualifications Scotland: Dental Nurse Post Registration**
Qualifications Scotland has recently completed a sector portfolio review of all dental qualifications. Several recommendations have been made, which will include the creation and updating of existing qualifications to support post registration training for dental nurses.
- b) **National Occupational Standards: Dental Nursing Post Registration Review**
A Dental Nursing National Occupational Standards UK Steering Group, led by Skills for Health, was established in September 2025 to develop National Occupational Standards for additional post-registration skills for Dental Nurses. Members from the Dental Care Professional workstream are actively participating in this six-month project. The consultation period closed in December, and the final draft National Occupational Standards are currently advancing through the approval process.

c) Dental Technology Training

NHS Education for Scotland is continuing active engagement with Further and Higher Education institutions towards developing a new education and training pathway for dental technicians in Scotland. In collaboration with a Further Education College and key stakeholders, the National Certificate in Oral Health Care: Preparing for Practice (SCQF 6), which is currently a full-time programme available for individuals considering a career in Dental Nursing, will be adapted to include a new entry route for those considering a career future in Dental Technology. This initiative also aims to widen participation and improve career attraction into the profession. The ambition is to deliver this new programme for the 2026-2027 academic year.

d) Postgraduate Diploma in Independent Prescribing for Optometrists Programme

The Placement and Skills workstream is working in close partnership with Glasgow Caledonian University to support the successful delivery of student placements for the new Postgraduate Diploma in Independent Prescribing for Optometrists Programme. This collaboration ensures that each student completes approximately 90 hours of supervised practice, incorporating a blend of simulated learning, Teach and Treat sessions, and real-world clinical exposure.

As part of this partnership approach, NHS Education for Scotland is supporting students by providing a Designated Prescribing Practitioner. The Designated Prescribing Practitioner oversees each allocated student's placement experience, offering professional guidance, supervision, and review and sign-off of the student's practice logbook.

Together, these aligned efforts between Glasgow Caledonian University, the Placement and Skills Team, and NHS Education for Scotland provide a high-quality, supportive, and structured learning environment that underpins safe and effective development of future prescribers.

Research within this workstream includes work with Aston University on a paper evaluating the impact of simulation-based education for optometrists in Scotland. It also includes a grant application, in conjunction with Stirling University, to evaluate the use of AI avatars and virtual reality in educational delivery for trainee Independent Prescribing Optometrists. If successfully funded this will include psychological safety, AI in neurodiversity, AI biases and how this approach can be scaled up and adapted to other specialities.

e) Optometry Foundation Training Year

Two Short-Life Working Groups have been established: one to inform development of a national digital system for Foundation Training Year applications and transparent, equitable placement allocation, and a second to lead a coordinated communication and engagement strategy to ensure the profession is well-informed and actively involved ahead of launch.

f) NHS Education for Scotland Glaucoma Accredited Training

The NHS Education for Scotland Glaucoma Accredited Training workstream is currently working within the initial phase of onboarding trainees and assessors to

our fifth cohort, with planned enrolment to begin in June 2026. The team have secured high-quality speakers, who have agreed to deliver complimentary webinars in parallel with the taught programme element. This includes NHS Education for Scotland Glaucoma Accredited Training alumni and subject matter experts previously supportive of the programme as VIVA assessors. Over the coming weeks the team will reach out to a variety of health boards looking to secure and facilitate the programme's clinical placement element. As part of the post-course evaluation process, trainee survey results were fed back to the health boards regarding placements to support their quality improvement.

6.4 Medical Including Healthcare Science

a) Healthcare Science

Strategic collaboration with NHS Scotland Academy in developing a range of Healthcare Science programmes. Supported by Developing Young Workforce Live, My World of Work, Skills Development Scotland, Glasgow Science Centre, and the Scottish Universities Life Sciences Alliance, a series of promotional events will be delivered. Ongoing partnerships with universities are driving the development of Audiology and Clinical Physiology programmes, alongside broad collaboration to redesign science-led vocational qualifications

b) “Once for Scotland” approach to embedding Education for Sustainable Healthcare

Professor Emma Watson attended the recent Scottish Parliament meeting on 10 February 2026, which introduced the proposed “Once for Scotland” approach to embedding Education for Sustainable Healthcare across all five Scottish undergraduate medical schools.

The White Paper sets out a coordinated national model, recommending the establishment of a Scottish Sustainable Healthcare Education Board, supported by Scottish Government, NHS Education for Scotland, medical schools and territorial health boards to ensure coherent curriculum integration, shared assessment standards and transparent annual reporting. The proposal aligns with NHS Scotland’s net-zero commitments and GMC requirements, positioning Scotland to become a lead internationally in sustainable healthcare education.

There was consensus that the Royal College of Surgeons of Edinburgh hosted Scottish Clinical Leadership Fellowship, and an NHS Education for Scotland Scottish Clinical Leadership Fellowship would work collaboratively in this space, ensuring alignment between undergraduate education, postgraduate professional standards and service-based sustainability programmes. This collaborative model supports a coherent “Once for Scotland” approach, while maintaining strong links to national policy, clinical leadership and delivery programmes.

c) National Physician Associate & Physician Assistant Conference

The National Physician Associate & Physician Assistant Conference was held on 19 February at CoSLA in Edinburgh. Over a hundred Physician Associates and Anaesthesia Associates attended the event, which covered specialist clinical topics and also career development and ways to build the professions in Scotland. The delegates were very enthusiastic and welcomed the opportunity to meet and

network.

Professor Emma Watson opened the conference with a welcoming and positive message to the professions and Dr Travis Kaufman from the University of Colorado gave the keynote address, which was a very powerful invitation to make the most of their opportunities and to see how they could build the profession. NHS Education for Scotland supported the event in conjunction with the Scottish Physician Associate Network and the Association of Anaesthesia Associates.

6.5 Nursing, Midwifery and Allied Health Professions

a) Support Worker Code of Practice Event

The Support Worker Code of Practice event, hosted by NHS Education for Scotland, took place on 29 January 2026 and represented a significant milestone in advancing professionalism and consistency across the support worker workforce. The new Code explains the standards of behaviour and responsibilities expected from everyone who works as a Support Worker in health and care. It helps ensure that, whatever the role or area of work, care is provided that is safe, effective, and compassionate.

Attendees exceeded 1,200 colleagues via a “town hall” format, with representatives from senior leaders, workforce planners, education staff and support workers, demonstrating a collective commitment to embedding the Code within everyday practice. Key speakers explored aspects of the Support Worker Code, emphasising how the Code underpins high-quality, person-centred care and aligns with national priorities for workforce development and integrated team working. Discussions focused on the strategic role of the Code in strengthening service delivery and promoting parity of esteem for support roles. Participants highlighted the importance of leadership at all levels in modelling the standards set out in the Code and ensuring these principles are consistently reflected in all health and care settings

Feedback gathered during and after the event was highly positive, with many recognising the Code as both a practical tool and a catalyst for cultural change. The Support Worker Code is currently in the final stages of sign-off. Early follow up actions include the development of educational resources, and ongoing engagement sessions to support adoption across teams. The event has successfully positioned the Code as a cornerstone of professional identity for support workers and a key driver for quality improvement and workforce sustainability.

6.6 Psychology

a) eLearning Module: Infant Mental Health – Developing Positive Early Attachments

Positive infant mental health underpins healthy emotional, social and cognitive development. Early relationships are central to this, shaping how infants experience and respond to the world around them. To support practitioners working with infants and their families, NHS Education for Scotland

Psychology has developed the eLearning module, Infant Mental Health: Developing Positive Early Attachments, which is now available on Turas. This refreshed module replaces the previous interactive PDF and reflects current developments in the field.

The updated module introduces the core concepts of infant mental health and serves as the foundation for all subsequent training within the Infant Mental Health Training Plan. It aims to strengthen practitioners' understanding of the factors that influence the development of infant mental health and early relationships. It also builds awareness of practical approaches that support the development of positive early relationships.

In addition, the module highlights how to recognise potential difficulties within early relationships and outlines appropriate sources of support. This is explored within the wider context of the health and social care system, and relevant Scottish policy and legislation

The module requires a Turas log-in and can be found [here](#). It takes approximately 3 hours to complete.

6.7 Social Care and Communities

- a) As part of NHS Education for Scotland's activity to support strengthening partnerships, the Associate Director has engaged with representatives from Further Education Institutions, including Fife College, Glasgow Kelvin College and Glasgow Clyde College, as well as representatives from Colleges Scotland. The Directorate has joined colleagues in the Nursing, Midwifery and Allied Health Professionals Directorate for discussions with Public Health Scotland to explore opportunities for joint work to support the ambitions of the Public Health Framework.
- b) NHS Education for Scotland's Social Care and Communities Directorate continues to support the development, plans for testing and implementation of the [Adult social care support and community health: draft Scottish learning and improvement framework - gov.scot](#). The framework will support an approach to improvement which builds on learning, manages quality, and will track improvement through the outcomes that matter to people.

6.8 NHS Scotland Academy, Learning, and Innovation

- a) **Knowledge Management and Discovery**
Knowledge Services staff are working with the University of Strathclyde to develop and explore possible topics for Masters projects and dissertations in the areas of Information, Knowledge, and Library Services. A final 10 dissertation topics have been drawn up, and we are awaiting outcomes of this work by the end of February 2026.

Partnership working is continuing with The Chartered Institute of Library and Information Professionals for Scotland. We are working to develop a webinar showcasing NHS Librarians work to the wider profession.

b) Pathways and Partnerships

Strategic alignment with the proposed methodology for future focused learner pathways continues to be strengthened through connections with Earn as You Learn initiatives, external standards such as National Occupational Standards and supporting employer engagement between NHS Scotland boards, social care and the Scottish Funding Council. The Pathways & Partnerships team will support the facilitation of employer engagement with the Scottish Funding Council through connection of networks and facilitated discussions with health and social care employers. This is anticipated to start in Spring of 2026.

Partnership working continues to adapt responsively, with a focus on building consensus and strengthening relationships. Engagement with groups such as the NHS Education for Scotland Internal Workforce Data & Planning Group and the Data Analytics and AI Group is enhancing coordination, sharing of best practice, and identification of opportunities to accelerate progress.

c) Accelerated National Innovation Adoption

Collaboration activity has begun across NHS Scotland to provide evidence-based workforce training and education considerations to support value case submission, focusing on innovative wearable devices. Activity continues with programmes in implementation phase; to shape and refine workforce and education resources for service implementation: Type2 Diabetes Remission & Prevention, ECG Patches and Pharmacogenomics.

d) 4 Nations AI in Education Conference 2026

The Research, Innovation and Workforce Diversification workstream is supporting planning for the Spring event, with this session focusing on AI in educational assessment. This event will be hosted within the National Workforce and Education Conference in April, allowing alignment of these two major events in our calendar.

e) SAFXR Project: Education in Suicide Prevention

Collaboration between NHS Education for Scotland, Digital Health and Care Innovation Centre, University of Glasgow and Care Reality is progressing, with initial testing planned for March 2026, and continuing over the Summer towards a product launch in September 2026.

f) Youth Academy

The Youth Academy team is now finalising its report to Government on the Earn As You Learn commission, for submission to Anchors Workforce Strategic Group after 31 March. This will identify and recommend future priorities for NHS Education for Scotland to support NHS Boards in use of apprenticeships, addressing the needs of the non-clinical workforce, and providing co-ordination across Boards to make best use of Earn As You Learn routes in further and higher education/training.

The Enhancing Medical Attraction project team is continuing to pilot new initiatives to support potential medical applicants. This includes trialling online mentoring with Causeway Education, developing an interactive tool to illustrate career pathways, updating our online careers content and finalising the project with

Daydream Believers to create new classroom resources.

Work is also continuing to develop guidance for schools on using simulation learning to develop awareness of health and social care careers, building on expertise in clinical simulation teams.

g) NHS Fellowship in Clinical AI

The Research, Innovation and Workforce Diversification team leads NHS Education for Scotland engagement with this pan-UK programme, developing future leaders in the field. Recruitment for programme entry Summer 2026 is in progress, with successful candidates matching with available clinical projects for six funded places in Scotland.

NHS Education for Scotland is hosting the national April roadshow event in Glasgow, the first roadshow to be held in Scotland. The agenda for the day includes high profile national and global speakers, with Fellows attending from across the UK.

6.9 NHS Education for Scotland Technology Services

a) Accelerated National Innovation Adoption (ANIA)

The Digital Diabetes Remission Programme has advanced to the point where the national service is now accessible for health boards to call off, onboard, and set up locally. One of the early adopting health boards, NHS Borders, has referred its first patients to the programme. This marks a significant milestone for both the programme and the Programme for Government commitment. The progress made is a result of the ongoing dedication of the ANIA Remission Programme team and partners. In addition to this, the NHS Education for Scotland Technology Services ANIA team continue to support the ANIA partnership with other programmes such as Diabetes Prevention, Electrocardiogram Patch Monitor, Sleep Apnoea, and Cardiac Fractional Flow Reserve.

b) Digital Prescribing and Dispensing Pathways

Key activities are progressing at pace, enabling the Programme to re-baseline once the technical delivery partner (confirmed as Storm ID) completes onboarding during February, and to undertake a detailed technical delivery planning exercise to be completed by the end of March 2026. The Programme awaits the official announcement from Scottish Government regarding long term funding, following the confirmation of inclusion within the GP package for Scotland, which is imminently anticipated. Work has continued to progress within the Developer Platform Service Team on maturing the service, so that it meets the needs of Digital Prescribing and Dispensing Pathways and to establish the technical infrastructure to facilitate build of bespoke Digital Prescribing and Dispensing Pathways services. Key activities for the procurement of the Advanced Electronic Signature for identification and authentication purposes are also now underway.

6.10 People and Culture

a) **National Recruitment – GP, Dental and Pharmacy**

The HR Trainee Services Team has delivered significant national recruitment activity across GP, Dental and Pharmacy programmes. This included the successful longlisting of 1,264 applications for GP Specialty Training posts commencing in August 2026, meeting the national December deadline, alongside longlisting 410 applications for the Dental Vocational Training scheme. In addition, 527 applicants entered the Pharmacy Foundation Year matching process in December 2025, with 218 candidates securing a NHS Education for Scotland funded post.

b) **Therapist Vocational Training and Longitudinal Dental Foundation Training**

HR has supported NHS Education for Scotland Dental colleagues to launch recruitment for new Therapist Vocational Training and Longitudinal Dental Foundation Training programmes with longlisting underway. These initiatives align with the Health and Social Care Services Renewal Framework (2025–2035), strengthening delivery in primary care through preventative and skill-mix models. Lead Employer arrangements will be extended, with NHS Education for Scotland acting as employer for Therapist and Longitudinal trainees, enabling greater workforce flexibility across settings and supporting an inclusive and collaborative training environment.

c) **Public Services Delivery Scotland Transition**

Work is progressing across the critical path activities supporting the transition to Public Services Delivery Scotland, with regular cross-team engagement ensuring coordinated delivery. People and Culture colleagues from NHS National Services Scotland and NHS Education for Scotland continue to meet weekly, supported by a joint in-person session in January, which focused on strengthening shared principles for collaborative working and improving understanding of service delivery across organisations.

An Organisation Development plan is being developed to build on this work, alongside wider rollout of the collaboration model across corporate service areas during the TUPE standstill period. This will proceed without changes to roles, responsibilities, or line management arrangements and will be implemented in partnership with Trade Union colleagues.

d) **2026 iMatter**

Preparations are underway for the 2026 iMatter cycle, with NHS Education for Scotland and NHS National Services Scotland agreeing to run separate processes this year to reflect the retrospective nature of the survey.

Joint working between organisational leads is in place to develop a coordinated communications approach, while maintaining aligned survey timelines. Preparatory work is progressing within NHS Education for Scotland to update team structures in the iMatter system ahead of the April deadline, supporting readiness for the June survey window and subsequent action planning phase.

6.11 Planning, Performance and Transformation

a) **Trainer Capability Training**

In February 2026 120 trainers working in health, social care and voluntary sector organisations attended training to build capability in trainers to deliver an anti-racism programme. We will continue to support this cohort in the coming months and to evaluate its impact. In addition to the Train the Trainer Programme, two webinars aimed at leaders in health and social care have been organised (26 February and 30 March) and a podcast is being recorded with the Chief Nursing Officer and Director of Midwifery in NHS Greater Glasgow and Clyde to support learning on anti-racism practice.

b) **Human Rights Capability Building Project**

As part of the human rights capability building project, NHS Education for Scotland held a joint conference with the Improvement Service on 13 March. NHS Education for Scotland's Non-Executive Board Member (and Chair of Public Health Scotland) Ally Boyle chaired the conference. Speakers including the Scottish Human Rights Commission, Scottish Government Equality Unit, NHS Lothian and Professor Alan Miller, former Chair of the Scottish Human Rights Commission and Professor of Practice in Human Rights Law contributed to the programme. NHS Education for Scotland has developed an animation to support our work on building capability and will build on this first year of work in the coming year, supported by Scottish Government funding.

NHS Education for Scotland

NES/26/23

Agenda Item: 08b

Date of meeting: 19 March 2026

NES Board Meeting

1 Title of Paper

1.1 Updated Strategic Risk Log Prior to Transition

2 Author(s) of Paper

2.1 Rob Coward, Principal Educator, Planning, Performance & Transformation
Debbie Lewsley, Risk Manager, Planning, Performance & Transformation

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 updated Strategic Risk Log in advance of the transition into Public Services Delivery Scotland (PSDS) for review and approval.

4.2 The Board is also asked to consider and approve the proposed removal of four additional risks from the Strategic Risk Log as outlined in Section 6.3.

5 Background and Governance Route to Meeting

5.1 The NES Board made a request at the November 2025 meeting that all Strategic Risks be reviewed in Q4 in preparation for the transition into the new organisation. An initial review was undertaken by the Executive Team to determine if the risks should be either –

- Removed from Strategic Risk Log following transition.
- Remain but reworded for transition.
- Remain the same and carried forward into PSDS.

- 5.2 The Executive Team approved the proposal for the removal of Strategic Risk 2 (reliance on high levels of non-recurrent funding) and Strategic Risk 5 (corporate infrastructure to support Transformation work) and for all other risks to be reworded and rescored in accordance with their discussion. This proposed approach was presented and endorsed by the Audit and Risk Committee at their January 2026 meeting and approved by the NES Board at their February 2026 meeting.
- 5.3 Following approval of this approach, all Strategic Risks have been reviewed, reworded and rescored where appropriate by individual risk owners and key stakeholders. The proposed updated Strategic Risk Log was presented to the Executive Team at their 9th March 2026 meeting where it was reviewed and endorsed.

6 Assessment/Key Issues

6.1 NES Strategic Risk Register

- 6.1.1 The existing Strategic Risk Log is presented in Appendix 1 (summary), with the proposed updated Strategic Risk Log presented in Appendix 2 (summary) and Appendix 3 (detail). Strategic Risks have been re-numbered and are referred to as “New Strategic Risk X” for the purposes of this report. All of the existing Strategic Risks have been subject to a review by individual risk owners and key stakeholders. They have been reworded and rescored where appropriate and in accordance with the Executive Team discussions.
- 6.1.2 New Strategic Risk 1 – (relating to NES being unable to fully respond to the evolving needs and expectations of stakeholders during transition to PSD Scotland, given the resulting uncertainty in our future operating environment and strategic direction) previously Strategic Risk 1. This risk has been reworded and the net likelihood rating decreased; this assessment has resulted in the overall net risk rating being decreased from 12 to 6.
- 6.1.3 New Strategic Risk 2 – (relating to the inability to retain sufficiently experienced and knowledgeable people to the Board, Executive Team and senior management establishment), previously Strategic Risk 3. The wording of this risk has been altered slightly and the net likelihood rating decreased, resulting in the overall net risk rating being decreased from 16 to 12, with the overall control now assessed as effective. This risk will continue to be closely monitored with the transition into Public Service Delivery Scotland and the potential impact this may have.

- 6.1.4 New Strategic Risk 3 – (relating to supporting staff morale and preparing staff during organisational change), previously Strategic Risk 4 . The wording of this risk has been refined and the net likelihood rating decreased due to all the controls in place, resulting in the overall net risk rating being decreased from 12 to 9.
- 6.1.5 New Strategic Risk 4 - (relating to Business Continuity arrangements not adequately robust to manage and mitigate disruption to business processes), previously Strategic Risk 6. The wording of this risk has been revised with no change to the net risk score.
- 6.1.6 New Strategic Risk 5 – (relating to ineffective or poorly managed measures in place to adequately protect against breaches of cyber security), previously Strategic Risk 7. The wording of this risk has been modified with no change to the net risk score.
- 6.1.7 New Strategic Risk 6 - (relating to employee training and other operational controls being ineffective in minimising the risk of breaches of Information Governance), previously Strategic Risk 8. The wording for this risk has been rephrased with no change to the net risk score.
- 6.1.8 New Strategic Risk 7 – (relating to NES being unable to produce a balanced financial plan), previously Strategic Risk 9. The wording of this risk has been rewritten and the net likelihood rating decreased due to NES being able to demonstrate that they have a balanced Financial Plan, which will be presented to the March NES Board. This assessment has resulted in the overall net risk rating being decreased from 8 to 4, with the risk now sitting within the Board risk appetite and the overall control rating assessed as effective.
- 6.1.9 New Strategic Risk 8 – (relating to inability to adequately anticipate, accommodate and respond to the impacts of policy, legislative, economic, technological, environmental and societal change), previously Strategic Risk 10. The wording of this risk has been refined and the net likelihood rating decreased due to the number of controls in place, resulting in the overall net risk rating being decreased from 16 to 8. The risk continues to sit within Board Appetite with the overall control assurance reassessed as effective.
- 6.1.10 New Strategic Risk 9 – (relating to learning outcomes or learning experience for our stakeholders being compromised), previously Strategic Risk 11. The wording of this risk has been altered slightly with no change to the net risk score.

- 6.1.11 New Strategic Risk 10 – (relating to insufficient investment in Digital Learning infrastructure Programme and other NES learning platforms), previously Strategic Risk 12. There has been one minor change to the wording of this risk and no change to the net risk score.
- 6.1.12 New Strategic Risk 11 - (relating to the inability to recruit and retain appropriately skilled and experienced staff), previously Strategic Risk 13. The wording of this risk has been altered slightly and the net likelihood rating decreased, resulting in the overall net risk rating being decreased from 16 to 12, with the overall control now assessed as effective. This risk will also continue to be monitored closely with the transition into Public Service Delivery Scotland and the potential impact this may have.
- 6.1.13 New Strategic Risk 12 – (relating to insufficient investment in data and associated technologies to maximise the value of data and information in NES's systems), previously Strategic Risk 15. The wording of this risk has been revised with no change to the net risk score.

6.2 Risks Removed from Strategic Risk Log

- 6.2.1 Following approval by the Audit and Risk Committee at their January 2026 meeting and the NES Board at their February 2026 meeting, Strategic Risk 2 (continued reliance on high levels of non-recurrent funding to support the work of NES) and Strategic Risk 5 (NES does not establish and maintain adequate corporate infrastructure to support the Transformation Route Map) have been removed from the Strategic Risk Log.

6.3 Proposed Risks to be Removed from Strategic Risk Log

- 6.3.1 Risk owners have proposed that the below four risks are also removed from the Strategic Risk Log prior to transition into the new organisation.
- 6.3.2 Strategic Risk 14 – (relating to Inadequate Board governance, systems, processes, and scrutiny of them). It is recommended that this risk is closed and removed from the Strategic Risk Log, as it is no longer a risk to the organisation. Evidence shows that we have robust governance arrangements in place with the recent audit awarding NES a rating of significant assurance with only one low risk finding and one advisory point given.

- 6.3.3 Strategic Risk 17 – (relating to the inability of NES to deliver its Annual Delivery Plan for 2025/26 and to sufficiently plan for the future delivery of its statutory functions due to the uncertainty and resource demands caused by the formation of NHS Delivery). It is recommended that this risk is closed and removed from the Strategic Risk Log due to the 2025/26 ADP being on track for delivery and the risk being superseded by the reworded Strategic Risk 1.
- 6.3.4 Strategic Risk 18 - (relating to NES being unable to resource the work needed to adopt the national Business Systems Replacement Programme). It is recommended that this risk is removed from the Strategic Risk Log. This is a National Level Programme risk and the risk to NES regarding resourcing will be reduced with the transition into the new organisation. The new organisation will have a larger corporate service which will create capacity within corporate areas to support the programme and support the mitigation of this risk. It is proposed that this risk would sit at a Directorate level and escalated through the appropriate route if required in the future.
- 6.3.5 Strategic Risk 19 – (relating to NES being unable to govern and discharge its responsibilities as Lead Employer). It is proposed that this risk is removed from the Strategic Risk Log and managed at a Directorate level, due to progress that has been made to mitigate the risk and the controls now in place. With any actions still requiring to be taken forward to be incorporated into operational business. A paper is scheduled to be presented to the Executive Team on this subject and will include the recommendation for this to be deescalated from a Strategic Risk.
- 6.3.6 This proposal was endorsed by the Executive Team at their 9th March 2026 meeting.

7 Recommendations

The NES Board is invited to:

- 7.1 To review and approve the updated NES Strategic Risk Log and provide any feedback as appropriate.
- 7.2 To consider and approve the proposed removal of four additional risks from the Strategic Risk Log as outlined in Section 6.3.

Author to complete checklist.

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

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

Author name: Rob Coward, Debbie Lewsley, Jim Boyle

Date: March 2026

NES

Summary of Current Strategic Risk Log

Risk No.	Risk Title	Risk Date	Date due for next review	Gross Total	Net Total	Risk Category	Risk Appetite	Risk appetite vs net score	Overall Control Assurance
SR1	NES Strategic Plan does not align with the evolving needs and expectations of stakeholders	19/04/2023	08/03/2026	15	12	Strategic	12-16		Effective
SR2	Continued reliance on high levels of non-recurrent funding to support the work of NES.	19/04/2023	04/03/2026	20	4	Finance	1-5		Effective
SR3	Failure to recruit and retain sufficiently experienced and knowledgeable people to the Board, Executive Team and senior management establishment	19/04/2023	04/03/2026	16	16	People/Workforce	12-16		Acceptable
SR4	NES staff become disengaged	19/04/2023	04/03/2026	16	12	People/Workforce	12-16		Effective
SR5	NES does not establish and maintain adequate corporate infrastructure to support the Transformation Route Map.	19/04/2023	08/03/2026	16	9	People/Workforce	12-16		Effective
SR6	Failure to develop and maintain adequate Business Continuity arrangements to deal with the risk of adverse events and threats	19/04/2023	11/03/2026	16	9	Governance	1-5	Gap 4	Acceptable
SR7	Failure to put in place measures to adequately protect against breaches of cyber security	19/04/2023	11/03/2026	20	15	Governance	1-5	Gap 10	Acceptable
SR8	Failure to put sufficient employee training and other operational controls in place to minimise the risk of breaches of Information Governance	19/04/2023	11/03/2026	20	8	Operational	12-16		Effective
SR9	NES does not put sufficient measures in place to address ongoing cost and funding pressures leading to misalignment with Scottish Government priorities and expectations.	19/04/2023	04/03/2026	25	8	Finance	1-5	Gap 3	Acceptable
SR10	Failure to adequately anticipate and mitigate the impacts of policy, legislative, economic, technological and societal change	19/04/2023	08/03/2026	16	16	Strategic	12-16		Acceptable
SR11	Learning outcomes or learning experience for our stakeholders is compromised.	19/04/2023	09/02/2026	20	20	Operational	12-16	Gap 4	Acceptable
SR12	Insufficient investment in Digital Learning Infrastructure Programme and other NES learning platforms.	19/04/2023	11/03/2026	20	15	Operational	12-16		Acceptable
SR13	Failure to recruit and retain sufficient number of appropriately skilled and experienced staff within NES.	19/04/2023	04/03/2026	16	16	People/Workforce	12-16		Acceptable
SR14	Inadequate Board governance, systems, processes and scrutiny of them.	19/04/2023	08/03/2026	15	4	Governance	1-5		Effective
SR15	NES is not an evidence based data driven organisation, lacking intelligence and insights from its Information Assets.	14/12/2023	11/03/2026	12	6	Governance	1-5	Gap 1	Acceptable
SR16	Inability to meet core responsibilities and objectives due to HR Performance. Nov 2025 - Risk Deescalated to People & Culture Directorate Risk Log.	03/12/2024	Risk Deescalated Nov 2025	20	9	People/Workforce	12-16		Effective
SR17	Inability of NES to deliver its Annual Delivery Plan for 2025/26 and to sufficiently plan for the future delivery of its statutory functions due to the uncertainty and resource demands caused by the formation of Public Services Delivery Scotland.	17/07/2025	08/03/2026	20	8	Strategic	20-25		Effective
SR18	NES will be unable to resource the work needed to adopt the national Business Systems Replacement Programme	17/07/2025	04/03/2026	20	16	Operational	20-25		Acceptable
SR19	NES unable to govern and discharge its responsibilities as Lead Employer.	17/07/2025	04/03/2026	20	16	Governance	1-5	Gap 11	Acceptable

Summary of Proposed New Strategic Risk Log

Risk No.	Risk Title	Risk Date	Date due for next review	Gross Total	Net Total	Risk Category	Risk Appetite	Risk appetite vs net score	Overall Control Assurance
SR1	NES may be unable to fully respond to the evolving needs and expectations of stakeholders during the transition to PSD Scotland, given the resulting uncertainty in our future operating environment and strategic direction.	19/04/2023	26/04/2026	15	6	Strategic	12-16		Effective
SR2	Unable to retain sufficiently experienced and knowledgeable people to the Board, Executive Team and senior management establishment.	19/04/2023	26/04/2026	16	12	People/Workforce	12-16		Effective
SR3	Supporting staff morale and preparing staff during organisational change.	19/04/2023	26/04/2026	16	9	People/Workforce	12-16		Effective
SR4	Business Continuity arrangements are not adequately robust to manage and mitigate disruption to business processes.	19/04/2023	29/04/2026	16	9	Governance	1-5	Gap 4	Acceptable
SR5	Ineffective or poorly managed measures in place to adequately protect against breaches of cyber security.	19/04/2023	29/04/2026	20	15	Governance	1-5	Gap 10	Acceptable
SR6	Employee training and other operational controls are ineffective in minimising the risk of breaches of Information Governance.	19/04/2023	29/04/2026	20	8	Operational	12-16		Effective
SR7	NES unable to produce a balanced financial plan.	19/04/2023	05/05/2026	25	4	Finance	1-5		Effective
SR8	Inability to adequately anticipate, accommodate and respond to the impacts of policy, legislative, economic, technological, environmental and societal change.	19/04/2023	26/04/2026	16	8	Strategic	12-16		Effective
SR9	Learning outcomes or learning experience for our stakeholders is compromised.	19/04/2023	26/04/2026	20	20	Operational	12-16	Gap 4	Acceptable
SR10	Insufficient investment in Digital Learning Infrastructure Programme and other NES learning platforms.	19/04/2023	29/04/2026	20	15	Operational	12-16		Acceptable
SR11	Inability to recruit and retain appropriately skilled and experienced staff.	19/04/2023	26/04/2026	16	12	People/Workforce	12-16		Effective
SR12	Insufficient investment in data and associated technologies to maximise the value of data and information in NES's systems.	14/12/2023	29/04/2026	12	6	Governance	1-5	Gap 1	Acceptable

NEW STRATEGIC RISK 1

Risk no:	SR1				
Risk Short Title:	NES may be unable to fully respond to the evolving needs and expectations of stakeholders during the transition to PSD Scotland, given the resulting uncertainty in our future operating environment and strategic direction.				
Risk Owner:	Karen Reid	Date Added to Register:	19/04/2023		
		Review Date:	26/04/2026		
		Frequency of Review:	Quarterly		
		Committee/Group overseeing	Planning & Performance Committee		
Risk Category(s)	Strategic	Reputational			
Risk impacts on NES Strategy Key Area of Focus :					
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite	Within Board Appetite
26/01/2026	6	Medium		Open	12-16
	-				
	-				
	-				
	-				

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

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

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

Existing control rating: Effective

Cause: The transition to PSD Scotland presents unresolved questions around future organisational priorities, governance structures and resource models. This uncertainty limits NES's ability to fully engage stakeholders and provide clarity on future arrangements.		Effect: Without clear strategic direction and stable operating parameters, NES may be unable to anticipate or adapt to stakeholders' changing requirements, potentially leading to misalignment of priorities, and reduced confidence among partners.	
		Result: If unmanaged, this could lead to reduced ability to deliver high-quality education, training, workforce development, workforce data and technology services across health and social care in Scotland.	
Control:	Effectiveness:	Actions:	Due Date:
1. Adequate NES involvement at all levels of Programme delivery and governance to ensure NES interests and statutory functions are represented.	Effective - Legislation laid in parliament reflects transference of full statutory functions of NES into the CSA.	1. Continue 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. Active involvement in Comms and Engagement workstream to ensure requirements of NES stakeholders are taken into account.	Effective - Communication Plan and Stakeholder Map.	2. Draft ADP 2026/27 and Financial Plan to be presented to NES Board February 2026 for approval prior to transition.	Ongoing Yearly Submission
		3. Ongoing SG engagement in respect of future planning and transition into new organisation as part of both Sponsorship arrangements and delivery the PSD Scotland programme.	Ongoing

NEW STRATEGIC RISK 2

Risk no:	SR2					
Risk Short Title:	Unable to retain sufficiently experienced and knowledgeable people to the Board, Executive Team and senior management establishment.					
Risk Owner:	Sybil Canavan	Date Added to Register:	19/04/2023			
		Review Date:	26/04/2026			
		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
26/01/2026	12	High		Open	12-16	
	-					
	-					
	-					
	-					

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

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:		Effect:	
Unable to retain sufficiently experienced and knowledgeable people to the Board, Executive Team and senior management establishment due to organisational pressures and change.		This would impact the continuity of effective leadership, management and governance of the new organisation.	
		Result:	
		This would result in a deterioration of performance and credibility at all levels and would increase the potential risk of serious failures in governance.	
Control:	Effectiveness:	Actions:	Due Date:
1. There is a wide pool of nationwide talent in terms of non-executive recruitment with robust processes in place and a good track record for attracting high quality candidates when Board vacancies occur.	Effective - Process in place including Aspiring Chair Programme.	1. The final NES Succession Plan for 25/26 was agreed by ET in September. Those identified in the Succession Plan have a Personal Development Plan (PDP) in place to support any areas to develop and this is overseen by their line manager. Given the circumstances of the move towards Public Services Delivery Scotland there is less emphasis and focus on succession planning currently however a firm commitment to development continues. A new Public Services Delivery Scotland Succession Plan will be picked up as part of the planning and arrangements for the new organisation post April 2026.	31/04/2026
2. Executives and senior managers recruited 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.		
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 Dec 2025 – No changes to Board membership anticipated ahead of transition to Public Services Delivery Scotland and skills matrix remains in place and up to date. Succession planning arrangements remain in place for key senior roles.	This action is on hold - completed end of Dec 2026 for NES.
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. Governance workstream within PSD Scotland programme taking forward arrangements for membership of the Board of the new organisation ensuring appropriate skill mix for the business to be conducted.	31/03/2026
5. The non-executive director membership of the Board and the Co-opted membership of the Board Committees, reflects the correct skills and experience required to govern the organisation.	Effective - The Non-Executive Board Skills and Experience Matrix		
6. Members are Co-Opted annually to cover and any skills and experience gaps on the EQC and the PPC.	Effective - ToR's, membership, committee annual reports and minutes of meetings.		

NEW STRATEGIC RISK 3

Risk no:	SR3				
Risk Short Title:	Supporting staff morale and preparing staff during organisational change.				
Risk Owner:	Sybil Canavan	Date Added to Register:	19/04/2023		
		Review Date:	26/04/2026		
		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
26/01/2026	9	Medium		Open	12-16
	-				
	-				
	-				

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:	
Impact on employee health and wellbeing whilst moving through organisational change which ultimately impacts on staff engagement		The effect of this is an impact on employees ability to contribute to the delivery of the strategic plan and individual Directorate Operational Plans during transition.	
		Result:	
		That could result in a significant deterioration in the ability to deliver on those plans.	
Control:	Effectiveness:	Actions:	Due Date:
1 - Strong partnership working arrangements in place and maintained through regular contact with the Employee Director and the Partnership Forum and JCF	Effective - Minutes of Partnership Forum and Change Management Programme Board.	1. iMatter action plans by iMatter Teams are completed and submitted annually. Update Dec 2025 - The National 2025 iMatter data has been published online and preparation for the next cycle is underway	Ongoing Yearly Submission
2 - Communication plan to be a key focus on all organisational change projects.	Effective - Plan approval route recorded in minutes.	2. Continue to monitor attendance at monthly directorate townhalls/webinars. Update Dec 2025 - 110 attended October Speak Up Week Webinar, 181 attended the December CIP All Staff Update and 389 attended the NES All Staff Christmas Webinar. Between 320 and 481 attended the CEO Drop in Sessions that were held in October, November and December 2025.	Ongoing
3 - Strong focus on communication and visibility, both at a corporate and directorate level through, for example, monthly directorate townhalls and executive led webinars enabling 2 way participation.	Effective - Townhalls, webinars and talking heads.	3. Increase all staff communications via intranet. Update Dec 2025 – We continue to communicate with staff via the CEO drop-in sessions, ET on the road sessions, webinars, emails and the intranet. A new shared intranet site for NES and NSS is in development and will be a further channel to engage with staff. 4. NES Comms are given the results of the NES biannual inclusion survey to provide feedback and enable appropriate action. Update Dec 2025 - Comms issued in summer and December survey issued to all staff, analysis by EDI team will be shared in Q4.	Ongoing 31/03/2026
4 - Strong focus on support to line managers through the line managers network.	Effective - Line Managers Handbook - and Line Managers Network	5. Maintain focus through Operational Planning on reasonable expectations of staff in a constrained fiscal environment. Update Dec 2025 - Via the 26/27 Op Plan process Directorates were asked to identify the capability implications of their deliverables and prioritise organisational learning needs. This aligns with the NES Organisation Development Plan 2023–26 which includes an annual “Building our Capabilities” plan.	Ongoing
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. ET, SIG and SOLG Development Days scheduled for November 2024 and February 2025. Update Dec 2025 – Proactive communication activities to support staff engagement continue through regular webinars, townhalls and the use of Viva Engage as well as focussed development sessions for specific staff cohorts.	31/03/2026
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. CEO staff drop in session webinars been established for all staff and regular Employee Director surgeries. Update Dec 2025 - Regular CEO staff drop-in sessions and Employee Director surgeries continue to be facilitated with positive attendance and feedback.	31/03/2026
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.	8. Public Services Delivery Scotland Staff Consultation underway and supporting Trade Unions and individual Directorates and members of staff to participate in consultation. Update Feb 2026 - Staff Consultation concluded and formulating response to comments, questions and responses received.	31/03/2026

NEW STRATEGIC RISK 4

Risk no:	SR4					
Risk Short Title:	Business Continuity arrangements are not adequately robust to manage and mitigate disruption to business processes.					
Risk Owner:	Christopher Wroath	Date Added to Register:	19/04/2023			
		Review Date:	29/04/2026			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	Planning & Performance Committee			
Risk Category(s)	Governance	Operational				
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑, ↔, ↓)	Board Appetite		Within Board Appetite
29/01/2026	9	Medium		Averse	1-5	
	-					
	-					
	-					
	-					

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

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

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

Existing control rating: Acceptable

Cause:		Effect:	
NES does not test and maintain adequate Business Continuity arrangements to deal with the risk of adverse events and threats, both internal and external threats, e.g. national or global pandemics, power supply outages, and other events.		There may be an inability to deliver normal levels of service, or even an inability to deliver services at all in extreme circumstances.	
Control:		Result:	
1. Disaster Recovery Plan and Business Continuity Plans have been approved by the Executive Team.		This could result in failure to achieve strategic outcomes.	
Effectiveness:	Actions:	Date Due:	
Effective - approval recorded in minutes.	1. Evidence of a cloud data recovery to be presented to the NES Assurance Forum Update Oct 2025 - External consultancy has been engaged to catalogue the NES network architecture and associated hypercloud. Report is expected at end of Oct 2025, work on the associated workplan will be completed by the end of November 2025. Update Dec 2025 - Report will be presented to the NES Assurance Forum in February 2026.	31/03/2026	
2. The plans were robustly tested in a desktop exercise and recommendations were considered by the ET and incorporated into the current version of the plans.	Effective - Exercise formally documented and recorded in minutes.		
3. NTS have agreed to an internal audit on BCP on an emphasis on disaster recovery on cloud data, audit to commence September 2024.	Effective - Audit presented to ARC and documented in minutes		

NEW STRATEGIC RISK 5

Risk no:	SR5					
Risk Short Title:	Ineffective or poorly managed measures in place to adequately protect against breaches of cyber security.					
Risk Owner:	Christopher Wroath	Date Added to Register:	19/04/2023			
		Review Date:	29/04/2026			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	Planning & Performance Committee			
Risk Category(s)	Governance	Operational				
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
29/01/2026	15	High		Averse	1-5	
	-					
	-					
	-					
	-					

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: NES does not put in place or manage measures to adequately protect itself against breaches of cyber security.		Effect: 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.	2. Review our early adopter status for the NHSS Security Operations Centre (Dundee). Update Oct 2025 - In progress - Engagement with Cyber Centre of Excellence (CCoE) and adoption of services is ongoing in line with CCoE service capacity and strategic roadmap. NES cyber security attend monthly CCoE operational steering group meetings	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. Comprehensive NES Cyber position completed and NTS Director accepted recommendations and associated action plan being developed with delivery by end of July. Update Dec 2025 - Delivery of plan progressing expected completion date end of February 2026.	31/03/2026
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. Director of NES Technology Service / SIRO will present paper on new structure for NIS Audit to the February 2026 NES Board.	31/03/2026
4. NIS Audit framework used to manage and build on NES' cyber security posture.	Effective - Compliance minuted.		

NEW STRATEGIC RISK 6

Risk no:	SR6					
Risk Short Title:	Employee training and other operational controls are ineffective in minimising the risk of breaches of Information Governance.					
Risk Owner:	Christopher Wroath	Date Added to Register:	19/04/2023			
		Review Date:	29/04/2026			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	Planning & Performance Committee			
Risk Category(s)	Operational	Reputational	Governance			
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
29/01/2026	8	Medium		Open	12-16	
	-					
	-					
	-					
	-					

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

NEW STRATEGIC RISK 7

Risk no:	SR7					
Risk Short Title:	NES unable to produce a balanced financial plan.					
Risk Owner:	Jim Boyle	Date Added to Register:	19/04/2023			
		Review Date:	05/05/2026			
		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
04/02/2026	4	Low		Averse	1-5	
	-					
	-					
	-					
	-					

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

Net Impact (1-5)	Net Likelihood (1-5)
4	1
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 measures in place to address ongoing costs and funding pressures.		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. NES are working with SG to identify how baseline and additional commission activity can be modelled to match reduced funding availability.	Ongoing
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.		
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. Finance Workstream for Public Services Delivery Scotland will bring together the financial plans for both organisations and part of the planning process for this financial year to ensure a balanced plan over the 3year planning period. Update Dec 2025 - Ongoing work.	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		
6. Letter been sent to all staff from CEO directing suspension of discretionary spending where possible.	Effective - recorded		
7. Twelve million of baseline reduction from 2024/25 will now be reinstated.	Effective - recorded		

NEW STRATEGIC RISK 8

Risk no:	SR8					
Risk Short Title:	Inability to adequately anticipate, accommodate and respond to the impacts of policy, legislative, economic, technological, environmental and societal change.					
Risk Owner:	Karen Reid	Date Added to Register:	19/04/2023			
		Review Date:	26/04/2026			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	Planning & Performance Committee			
Risk Category(s)	Strategic					
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑, ↔, ↓)	Board Appetite		Within Board Appetite
26/01/2026	8	Medium		Open	12-16	
	-					
	-					
	-					
	-					

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

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: NES is not able to adequately anticipate, accommodate and respond to the impacts of policy, legislative, economic, technological, environmental and societal change.		Effect: We may be unable to meet the needs of the Health and Social care workforce and maximise the opportunities as well as accommodate and respond to any associated risks with the changes in our operating environment.	
		Result: This could result in a compromise in our ability to deliver on our ADP and future planning arrangements and a failure to meet both current and projected needs.	
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 as part of sponsorship arrangements to ensure policy implications covered in financial and delivery plans	Ongoing
3. Regular Horizon Reporting to Planning & Performance Committee	Effective - Recorded and Minuted	3. Quarterly UK Four Nations Meetings - actions from meetings progressed by NES Chief Executive, Director of NMAHP and Executive Medical Director.	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. NES response to establishment of Public Services Delivery Scotland stood up with identification of Project Lead and key support roles. Engagement in delivery established through Scottish Government led Project Team. Internal governance approach for NES critical areas established from August 2025, this will continue to be evolved inline with project and organisational needs throughout the transition.	31/03/2026
5. Engagement with four nations to pick up national issues that may impact NES or the Scottish context.	Effective - Attendance at four nations working groups minuted.		
6. Transfer of all NES functions taking place through secondary legislation and transfer of all NES staff through TUPE transfer, ensuring continuity of responsibility as well as capacity and capability to deliver.	Effective		

NEW STRATEGIC RISK 9

Risk no:	SR9					
Risk Short Title:	Learning outcomes or learning experience for our stakeholders is compromised.					
Risk Owner:	Karen Wilson	Date Added to Register:	19/04/2023			
		Review Date:	26/04/2026			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	Education & Quality Committee			
Risk Category(s)	Operational	Reputational				
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
26/01/2026	20	Very 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)
4	5
Net Total:	20

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

Existing control rating: Acceptable

Cause:	NES delivers compromised learning outcomes or a poor quality learning experience to our stakeholders. If we are inflexible in evolving the methods of delivery of training and education or our products do not meet the accessibility standards. Uncertainty of timing of move out of Westport and the impact this would have on access and quality of training facilities.		
Effect:	This could lead to the Health and Social Care workforce not having the necessary knowledge, skills or regulatory registrations 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. Implement a corporate improvement programme to support high quality learning and education provision through the Learning & Education Quality System (LEQS). Update Dec 2025 - Work continues at pace, core feedback questions are partially implemented and will provide improved insights into the learner experience.	31/03/2026
2. Ensure Chair is well briefed to manage relationships with other Board/organisational Chairs	Effective - Report presented to every NES Board public meeting.		
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.	2. Implementation of the Learning & Education Quality Policy. Update Dec 2025 - Report received from Business Analysts and will underpin the procurement and development of the technical solution.	31/03/2026
4. Education Governance arrangements in place to ensure quality and performance is monitored and improved where necessary.	Effective - Considered at EQC regularly and minuted.	3. Operational Group and Gold Command established to oversee any required moves. Active scoping of alternative training venues being undertaken. Update Dec 2025 - Further engagement with external partners including Social Security Scotland, Napier University and site visit to Dundee scheduled 11th December 2025.	31/03/2026
5. 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.		
6. Clinical Care Sub Group established.	Effective - Meetings minuted and reports into EQC	4. Establishment of NES Project Management Team to coordinate the programming on venuing activity in regard to Westport move. Update Dec 2025 - Project Management Team established and now in the Project Management stage for relocation to alternative venue.	31/03/2026
7. Learning and Education Framework implemented.	Not Tested		
8. Guidance for digital learning resources that include detailed information on accessibility in place, with TEL and EDI Team available to support	Effective - Documentation in place	5. All NES learning products currently being reviewed against accessibility standards.	31/03/2026

NEW STRATEGIC RISK 10

Risk no:	SR10					
Risk Short Title:	Insufficient investment in Digital Learning Infrastructure Programme and other NES learning platforms.					
Risk Owner:	Christopher Wroath	Date Added to Register:	19/04/2023			
		Review Date:	29/04/2026			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	Planning & Performance Committee			
Risk Category(s)	Operational	Reputational				
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
29/01/2026	15	High		Open	12-16	
	-					
	-					
	-					
	-					

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

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

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

Existing control rating: Acceptable

Cause:		Effect:	
NES do not sufficiently invest in technology that supports learning outcomes including the Digital Learning Infrastructure learning platform as well as other learning platforms provided by NES.		This would lead to the NES being unable to meet the learning needs and expectations of all stakeholders.	
Control:		Result:	
1. A significant amount of time and resource is invested to establish the learning needs of a very wide stakeholder group		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.	
Effectiveness:	Actions:	Due Date:	
Controlled - Fully documented.	1. Transformational Group need to agree Phase 2 outcomes of the Digital Learning Infrastructure Programme. The Digital Learning and Infrastructure Programme Full Business Case in development. Update Sept 2025 - The governance sign off for the Full Business Case will be by end of Feb 2026, to take account of the external review recommendation number 2, to reevaluate the technical approach of only build. External consultants are being procured to report by end of December 2025 and their recommendations will be used to rewrite the economic case before submission to the governance process in February 2026. Update Dec 2025 - Report been drafted and will be submitted to Director of NES Technology Service by end of December 2025.	31/03/2026	
2. Strategic case for investment has been prepared for discussion with the Scottish Government	Effective - OBC approval route recorded in minutes.	2. Discussions on going with regards to investment with NES Director of Finance and SG Health Finance Director of Finance who is supportive of the programme. Update April 2025 - NES Director of Finance has secured agreement with Scottish Government Digital Health and Social Care finance team that 2025/26 NES baseline funding will be restored to the original level and that this return of finance to the NES baseline to be used specifically to fund the Digital Learning Infrastructure Programme. Update Sept 2025 - Ongoing discussions.	Ongoing
3. In light of the standing down of the Transformation Group Programme the Executive Team have requested that the Digital Learning Infrastructure Programme is reported to them directly as part of the Internal Governance of External Programmes.	Effective - Programme reports progress to Executive Team and minutes.		

NEW STRATEGIC RISK 11

Risk no:	SR11				
Risk Short Title:	Inability to recruit and retain appropriately skilled and experienced staff.				
Risk Owner:	Sybil Canavan	Date Added to Register:	19/04/2023		
		Review Date:	26/04/2026		
		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
26/01/2026	12	High		Open	12-16
	-				
	-				
	-				
	-				

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

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:		Effect:	
Due to organisational pressures, change, systems, processes. This may result in a delay to recruit and retain sufficient number of appropriately skilled and experienced staff		Insufficient staff to support delivery of the AOP and Strategic Plan. Uncertainty for staff on various contract types ie FTC and secondments.	
Result:		This could result in reputational damage and impact on stakeholder engagement and staff morale and wellbeing. Risk to ability to deliver on those plans.	
Control:	Effectiveness:	Actions:	Due Date:
1. Power BI charts presented to ET on a monthly basis	Effective - Monthly ET recorded in minutes.	1. Work with Higher/Further Education establishments in Scotland, in addition to targeted Third Sector and related bodies to support greater apprenticeship opportunities and related early career routes. Update Dec 2025 - Work to support the new 20 apprenticeships leading to the digital diploma are underway. We are planning a 3rd round early in the new year, with additional comms and a drive for a further 10 places.	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). Update Dec 2025 - The AFTP programme objectives are being met and reported to the AFTP programme board. Any risks have been identified in the programme risk register and mitigations in place. A key risk during Q2 and 3 was that all placement opportunities were used. All except 3 placements were filled and this was as a result of other boards not being able to fill the placements. We have since repurposed one of the placements to support NES Dew Team and this is out for recruitment currently. All related risks and mitigations around this are picked up in the programme risk register as previously outlined.	Ongoing
3. Monitoring our workforce data to identify actions to improve the diversity of the workforce.	Effective - Annual workforce E&D report published and presented to Board and Governance Committees and recorded in minutes.	3. The NES Equality & Human Rights Team continue to promote and offer learning opportunities to staff on ED&I, including 'conscious inclusion' sessions, anti-racism, cultural humility, promoting of learning and guidance from the business disability forum and also guidance for mitigating bias during recruitment. New EDI Strategy and action plan being produced for 2025-2029. Team completing work in relation to gender equality as part of the Equally Safe at Work accreditation programme. Update Dec 2025 - EDI module and view of slide deck on bias in recruitment now mandatory for all recruitment panels. Line manager training sessions planned for February 2026 on Anti-racism. Progressing actions for Equally Safe at Work accreditation following feedback on evidence submitted. Work underway to establish an incident reporting mechanism for discrimination and harassment in the workplace.	31/03/2026
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. - Dec 2025 update - The final NES Succession Plan for 25/26 was agreed by ET in September. Those identified in the Succession Plan have a Personal Development Plan (PDP) in place to support any areas to develop and this is overseen by their line manager. Given the circumstances of the move towards Public Services Delivery Scotland there is less emphasis and focus on succession planning currently however a firm commitment to development continues. A new Public Services Delivery Scotland Succession Plan will be picked up as part of the planning and arrangements for the new organisation post April 2026.	31/04/2026
5. Risk based decisions regarding termination of temporary staff in the event of uncertainty of funding.	Effective - Decisions recorded in ET minutes.		
6. Workforce planning is integrated in Operational Planning	Effective - Included in AOP documentation.	5. Workforce planning to be carried out across NES as part of the 26/27 Operational Planning process. Update Dec 2025 - A significant volume of business cases have been progressed between September - December 2025 to progress the necessary contract extensions or recruitment to stabilise and confirm arrangements for staff within temporary contract arrangements, including secondments. Line manager sessions have also been undertaken to support line managers with the necessary steps to support their teams and increase awareness of the O4S policy and procedure.	31/03/2026
7. Joint NES and NSS Recruitment Process Established.		6. There will be a 6 month period of stability within the new organisation to allow the organisation to settle and to enable planning for new delivery requirements.	TBC

NEW STRATEGIC RISK 12

Risk no:	SR12					
Risk Short Title:	Insufficient investment in data and associated technologies to maximise the value of data and information in NES's systems.					
Risk Owner:	Christopher Wroath	Date Added to Register:	14/12/2023			
		Review Date:	29/04/2026			
		Frequency of Review:	Quarterly			
		Committee/Group overseeing	Planning & Performance Committee			
Risk Category(s)	Governance	Reputational	Strategic			
Risk impacts on NES Strategy Key Area of Focus :						
Date of Score	Net Score	Current Net Risk Rating: (Priority 1, 2, 3 or 4)	Risk Movement: (↑,↔,↓)	Board Appetite		Within Board Appetite
29/01/2026	6	Medium		Averse	1-5	
	-					
	-					
	-					
	-					

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 level oversight and management of the data and technology infrastructure that supports the information data requirements of the organisation.		NES is not an evidence based data driven organisation, lacking appropriate systems and data management to provide appropriate levels of intelligence and insights from NES's Information Assets. 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. Planned rollout of CoPilot to all NES staff on completion of the pilot. Update Dec 2025 - CoPilot was launched in October 2025, and all licences have been distributed with the assistance of the General Managers. The licences fall into three categories: general use, accessibility, and testing new ways of working. We have requested additional spare licences from WM Reply, which is currently under consideration. We now have a waiting list.	31/03/2026
2. Plans for automation and preparation for artificial intelligence will drive new and improved data collection, storage and management.	Not Tested	2. NTS have agreed to an internal audit on their ability to support a data driven organisation. Update Dec 2025 - Audit taken place and report will be available by end of December 2025.	31/03/2026
3. Outcome of the pilot of the M365 Copilot Application will drive intelligence and knowledge on required improvements and restructuring of all NES data and information.	Effective - recordings of outcomes minuted.	3. Data Analytics and AI Tier 1 Programme, Programme Initiation Document (PID) is in development with the NES Programme Office. This is expected to be agreed in January 2026. Director of Social Care has been appointed Senior Responsible Officer.	31/03/2026

Approved at the 19.02.2026 SGC Meeting

NHS EDUCATION FOR SCOTLAND

NES/SGC/26/02

Approved Minute of the Ninetieth meeting of the Staff Governance committee held on Thursday 06 November 2025, 10:15 – 12:45pm.

The meeting was held in hybrid format via Microsoft Teams and in-person at the NES Westport office in Edinburgh.

Present: Nigel Henderson (NH), Committee Chair
Lynnette Grieve (LG), Non-Executive Director / Employee Director
Shona Cowan (SCo), Non-Executive Director
Gillian Mawdsley (GM), Non-Executive Director, Whistleblowing Champion
James McCann (JMcC), Ex-Officio member, Staff Side (Unison)

In attendance: Sybil Canavan (SCa) Director of People and Culture
Ameet Bellad (AB), Senior Specialist Lead, Workforce (Item 11)
Christina Bichan, Director of Planning, Performance and Transformation
Nancy El-Farargy (NEF), Manager, Planning and Corporate Resources (Item 15)
Ann Gallacher (AG) Planning and Corporate Governance (Minute-Taker)
Janice Gibson (JG), Associate Director, Organisational Development, Leadership and Learning (ODLL)
Katy Hetherington (KH), Equality and Diversity Lead (Item 08)
Laura Liddle (LL), Associate Director of People and Culture
Debbie Lewsley (DL), Planning and Corporate Governance Manager (Item 12)
Drew McGowan (DMcG), Board Secretary & Principal Lead for Corporate Governance (Item 17)
Kieran McKeown (KMck), Cyber Security Operations Lead (Item 18)
Chris Turnbull (CT), Information Security Senior Specialist (Items 20 and 21)

1.	Chair's welcome and introductions	
1.1	The Chair welcomed everyone to the 90 th Staff Governance Committee meeting.	
2.	Apologies for absence	
2.1	Apologies for absence were received from the following regular meeting attendees: Karen Reid, Chief Executive and Accountable Officer and David Garbutt, Chair of NES Board.	
3.	Notification of any other business	

3.1	The Chair reported that the Staff Consultation was an additional item of business.	
3.2	There were no other notifications of any other business.	
4.	Declarations of interests	
4.1	As per the Model Code of Conduct, the Chair asked Committee members if there were any declarations of interest in relation to the business of today's meeting and if so, to clarify to which item this related.	
4.2	There were no declarations of interest.	
5.	Draft Minutes of Staff Governance Committee meeting held on 14 August 2025	NES/SGC/25/52
5.1	The Committee confirmed the minutes were an accurate record of the meeting and approved them.	
6.	Action Status Report and other matters arising	NES/SGC/25/53
6.1	The Committee noted that fifteen actions were marked complete on the Action Log and there were no outstanding actions.	
6.2	The Committee discussed Non-Executive engagement in relation to Viva Engage and NHS Delivery. A discussion on Non-Executive informal engagement will take place post meeting. Action: SCa	
6.3	The Committee noted the typo in relation to Action 7.13. The wording should say "The Executive Team decided that the Equally Safe at Work module should not be included as an appraisal item.	
6.4	The Committee noted that the wording of the actions on the log should be clear for transparency.	
6.5	The Committee approved the Action Log.	
	<u>Lead Executive Report</u>	
7.	Director of People and Culture Report	NES/SGC/25/54
7.1	The Chair invited Sybil Canavan to introduce the Director of People and Culture report.	
7.2	Sybil Canavan introduced the report. She highlighted the following key topics: the Learning at Work Week, the launch of the Digital Diploma and Digital hub, the Human Resource (HR) service desk and payroll improvements, the line manager network and drop-in sessions and the NHS Delivery transition work.	

7.3	The Committee welcomed the Learning at Work Week and asked for information on digital training for business improvements. Janice Gibson responded that digital upskilling has been implemented in NES. Staff self-assess their digital skills to address individual gaps, with a focus on role-specific skills. She added that a new digital hub is being developed to curate resources on artificial intelligence (AI) and a broad range of digital skills.	
7.4	The Committee appreciated the detailed breakdown and transparent statistics of the employee relations figures.	
7.5	The Committee requested clarification on the "NTN acronym noted in the report. Laura Liddle responded that "NTN" is the acronym for the National Trainee Number. The Committee recommended including a glossary of acronyms in future reports. Laura Liddle agreed to provide detailed explanations of acronyms. Action: SCa/LL	
7.6	The Committee noted the well-being analysis from the iMatter survey and highlighted the importance of well-being with the transition to NHS Delivery. Sybil Canavan responded that NES places great emphasis on the well-being framework and well-being hub to promote staff well-being. Janice Gibson added that each directorate has a well-being champion to promote well-being and pick up any themes.	
7.7	The Committee welcomed the support by NES Technology Service (NTS) colleagues to the Protecting Vulnerable Groups (PVG) monitoring system and asked for more information. Laura Liddle responded that NTS colleagues implemented a process for recording all PVG outcomes on a daily basis to support the placement Boards plan appropriately.	
7.8	The Committee asked for information on the Doctors and Dentists in Training (DDiT)s contract terminations number. Laura Liddle responded that the number was due to the annual August changeover and was not a loss of staff. The number reflects trainees completing their training and moving on.	
7.9	The Committee welcomed the improved HR service desk numbers.	
7.10	The Chair thanked all for the work done on the report and the Committee noted the Director of People and Culture report.	
7.11	Katy Hetherington joined the meeting at 10.45am.	
	<u>Performance Items</u>	
8.	NES's Equality, Diversity and Inclusion Mid-Year Report	NES/SGC/25/55
8.1	The Chair welcomed Katy Hetherington to the SGC meeting and asked her to introduce the NES's Equality, Diversity and Inclusion Mid-Year Report.	

8.2	Katy Hetherington introduced the report which detailed the progress from April to October 2025 on the organisation's Equality, Diversity and Inclusion (EDI) Strategy 2025–2029.	
8.3	Katy Hetherington highlighted NES's achievements and engagement activities and the ongoing work to address pay gaps, support for career progression among underrepresented groups, and the development of an incident reporting mechanism for discrimination and harassment.	
8.4	The Committee welcomed the anti-racism work done in the organisation.	
8.5	The Employee Director commended the anti-racism plan and reported that NES embodies the equality and diversity values.	
8.6	The Committee noted the impact of removing DDiTs from the pay gap data figures. Katy Hetherington responded that removing DDiTs from the pay gap calculations caused a noticeable shift and explained that other staff categories outside Agenda for Change (AfC) also affected the figures.	
8.7	The Committee welcomed the planned session with Alan Miller and asked if Non-Executives could attend. Katy Hetherington responded that the session will be recorded for wider access, and a human rights session was planned with Non-Executives.	
8.8	The Chair thanked Katy Hetherington for the report, and the Committee approved the Equality, Diversity and Inclusion Mid-Year Report for onward sequencing to the NES Board.	
8.9	Katy Hetherington left the meeting.	
9.	iMatter Survey Report	NES/SGC/25/56
9.1	The Chair invited Janice Gibson to introduce the annual iMatter Survey Report.	
9.2	Janice Gibson introduced the annual iMatter survey and gave a summary of the staff engagement survey results. She noted the high engagement figures despite organisational changes and highlighted the action planning compliance and Board visibility figures. Janice Gibson will share the national Board comparative data report when it is available. Action: JG	
9.3	The Committee noted the numbers in relation to the concerns being addressed question. The Committee welcomed the efforts made to address concerns.	
9.4	The Committee discussed the partnership working question and noted how difficult it is to understand what is being asked in this question.	
9.5	The Employee Director reported that staff often interpret the partnership working questions as relating to decisions made about them, either at the	

	organisational or team level. She added staff feel involved in local decisions but less involved in wider organisational changes.	
9.6	The Committee noted a review is planned on the iMatter survey questions.	
9.7	The Committee welcomed the number of action plans and asked if this was due to the support given to line managers. Janice Gibson responded that the line managers were supported and encouraged in the process and the line managers networks were instrumental.	
9.8	The Chair thanked Janice Gibson for the report, and the Committee noted the results of the iMatter 2025 Survey.	
10.	Human Resource Transformation Update Report	NES/SGC/25/57
10.1	The Chair invited Sybil Canavan and Laura Liddle to introduce the Human Resource Transformation Update report.	
10.2	Laura Liddle reported that the HR team have made significant progress and gave an overview of the achievements of the HR Transformation Programme. She confirmed that the current model is correct and will continue using it. She advised that the Standard Operating Procedures (SoP)s are almost complete. She thanked colleagues in the Planning, Performance and Transformation team and Organisational Development and Learning team for their help in the process.	
10.3	The Committee welcomed the progress made in the HR team.	
10.4	The Employee Director praised the work done in the HR team and hopes the current model moves into NHS Delivery.	
10.5	The Chair thanked all for the work done on the report.	
10.6	The Committee approved the closure of the HR Transformation Programme with the assurance that the oversight, monitoring and further improvements will be delivered as business as usual by the HR Senior Leadership Team.	
10.7	Ameet Bellad joined the meeting.	
11.	Delegated Strategic Key Performance Indicators (SKPI) Report	NES/SGC/25/58
11.1	The Chair welcomed Ameet Bellad to the meeting and asked him to introduce the Delegated Strategic Key Performance Indicators (SKPI) Quarter 2 Report.	
11.2	Ameet Bellad reported that the SKPI report shows progress in essential learning compliance, performance review completion, and diversity and inclusion. He highlighted the recommendation to revise the vacancy rate threshold for better benchmarking.	

11.3	The Committee noted the staff absence figure and asked if any action is needed. Laura Liddle responded that the increased number is due to improved recording and earlier HR involvement and added that the data is closely monitored by the HR team.	
11.4	Ameet Bellad reported that workforce data is more accessible via interactive dashboards, enabling directorate teams to monitor trends regularly. This transparency, combined with monthly HR reviews, has led to more accurate sickness absence reporting.	
11.5	The Employee Director reported that the work done to support line managers and raise awareness of absence reporting has improved the accuracy of the data.	
11.6	There were no further questions raised at the meeting.	
11.7	The Chair thanked Ameet Bellad for the report and the Committee noted the performance reported in Appendices 2 and 3 and confirmed it provided assurance.	
11.8	Ameet Bellad left the meeting, and Debbie Lewsley joined the meeting.	
12.	Delegated Strategic Risk Report	NES/SGC/25/59
12.1	The Chair welcomed Debbie Lewsley to the meeting and asked her to introduce the Quarter 2 Delegated Strategic Risk Report.	
12.2	Debbie Lewsley reported that one new risk was added to the Strategic Risk log that aligns to the Committee and there was movement to one of the risk ratings. She highlighted the recommendation to de-escalate Strategic Risk 16 to be managed at Directorate level.	
12.3	The Committee noted that the report was clear and provided all the necessary information.	
12.4	There were no further questions raised at the meeting.	
12.5	The Chair thanked Debbie Lewsley for the report.	
12.6	The Committee approved the de-escalation of Strategic Risk 16 and noted the risks relating to the Committee's remit will be managed by directorates.	
12.7	Debbie Lewsley left the meeting.	
13.	2024-25 Annual Workforce Plan Report	NES/SGC/25/60
13.1	The Chair invited Sybil Canavan to introduce the Annual Workforce Plan report.	
13.2	Sybil Canavan reported that NES made significant progress on its Strategic Workforce Plan. She advised that eleven out of the sixteen actions are complete, four actions are still in progress due to budget constraints and	

	capacity challenges, and one action was closed as it was no longer required.	
13.3	Sybil Canavan highlighted the recommendation to close actions 1, 3, and 13 due to the transition to NHS Delivery.	
13.4	The Committee welcomed the clear and informative report and noted the relevance of the actions being recorded.	
13.5	The Committee noted that the absence data highlighted mental health and well-being as leading causes of absence, reinforcing the value of the well-being hub.	
13.6	The Chair thanked Sybil Canavan for the report, and the Committee endorsed the closure of actions 1,3, and 13 from the report.	
14.	Staff Governance Monitoring Return	NES/SGC/25/61
14.1	The Chair invited Sybil Canavan to introduce the Staff Governance Monitoring Return.	
14.2	Sybil Canavan reported that the Staff Governance Monitoring process aims to provide assurance to the Scottish Government that the Staff Governance Standard is being fully and properly applied in NES. The report has been reviewed at various NES groups and committees, including the Executive Team (ET) and the Partnership Forum (PF).	
14.3	The Committee noted the comprehensive detail contained in the report.	
14.4	There were no questions raised at the meeting.	
14.5	The Chair thanked Sybil Canavan for the report, and the Committee approved the Staff Governance Monitoring Return for submission to the Scottish Government on 17 December 2025.	
15.	Quarter 2 Whistleblowing Report	NES/SGC/25/62
15.1	The Chair invited Nancy El-Faragy to introduce the Quarter 2 Whistleblowing Report which provided an update on NES's whistleblowing performance activities from 01 July 2025 to 30 September 2025.	
15.2	Nancy El-Faragy reported that during the last quarter NES received one concern relating to resident doctors in training. Christina Bichan added that some aspects of the concern fall within NES's remit and some do not, there was no cause for concern, and a full report will be provided once the investigation concludes.	
15.3	Nancy El-Faragy highlighted a few key topics from the report including the line manager training completion rate and the increased number of confidential contacts.	

15.4	Christina Bichan reported that the analysis done on managers who have yet to complete the training, highlighted the need for a deeper review and targeted communication. The Committee welcomed this approach.	
15.5	Christina Bichan reported that the Whistleblowing Champion role was valuable, providing visible support that strengthens staff confidence and trust in the process.	
15.6	There were no questions raised at the meeting.	
15.7	The Committee confirmed the Quarter 2 report provided assurance.	
15.8	Nancy El-Faragy left the meeting.	
16.	Non-Executive Whistleblowing Champion Remarks	(Verbal Item)
16.1	The Non-Executive Director, Whistleblowing Champion appreciated the commitment and work done by Christina Bichan, Nancy El-Faragy and the team involved in the whistleblowing process.	
16.2	The Non-Executive Director, Whistleblowing Champion highlighted the Board Chair's praise for the programme and credited staff, the confidential contacts, and the Employee Director for their commitment.	
16.3	The Non-Executive Director, Whistleblowing Champion noted the value of whistleblowing concerns in testing processes and learning. She commended the work done by Nancy El-Faragy and welcomed the increased number of confidential contacts.	
16.4	The Non-Executive Director, Whistleblowing Champion concluded that while 100% training completion is unrealistic, progress is clear, and staff enthusiasm is commendable.	
17.	Annual Review of SGC and Remuneration Committee Terms of Reference	NES/SGC/25/63
17.1	The Chair invited Drew McGowan to introduce the Annual Review of SGC and Remuneration Committee Terms of Reference.	
17.2	Drew McGowan reported that there were minimal changes to the Staff Governance Committee and Remuneration Committee Terms of Reference (ToRs) since they were last reviewed in November 2024.	
17.3	There were no questions raised at the meeting.	
17.4	The Chair thanked Drew McGowan for the report, and the Committee approved the Staff Governance Committee and Remuneration Committee ToRs for onward sequencing to the Board.	
	<u>Policy Items</u>	

18.	Phishing Simulation Use	NES/SGC/25/64
18.1	The Chair welcomed Kieran McKeown to the meeting and asked him to introduce the Phishing Simulation Use report which provided an overview of phishing simulations use within NES.	
18.2	The Committee requested clarification of the acronym "SBAR". Kieran McKeown responded that "SBAR" is an acronym of Situation, Background, Analysis and Recommendation.	
18.3	The Committee asked for the meaning of paragraph 6.5 in the phishing simulation proposal. Kieran McKeown explained that this paragraph sets boundaries for phishing simulations, ensuring they do not use sensitive topics such as salary or monetary rewards, to avoid causing mistrust or distress among staff.	
18.4	The committee noted that phishing is a major threat to organisational cybersecurity and that effective communication with staff about the programme's purpose is essential.	
18.5	The Committee asked if staff would be warned of phishing simulations. Kieran McKeown responded that there will be clear communication and awareness-raising prior to the rollout, and an associated communication to ensure staff understand the purpose of the simulations.	
18.6	The Committee asked if the target implementation date was known. Kieran McKeown responded that the rollout would take place after the NES Assurance Forum review in late January 2026.	
18.7	There were no further questions raised at the meeting.	
18.8	The Chair thanked Kieran McKeown for the report, and the Committee approved the use of phishing simulations, provided that advance communication is prioritised before launching the phishing simulation programme.	
19.	Information Governance Policy	NES/SGC/25/65
19.1	The Chair invited James McCann to introduce the Information Governance Policy.	
19.2	James McCann reported that this was not a full review of the policy but was undertaken to ensure alignment to the new template under the NES policy for controlled documents. There were minor changes to the wording and updated links to current policies and legislation.	
19.3	There were no questions raised at the meeting.	
19.4	The Chair thanked James McCann for the report, and the Committee approved the updated Information Governance policy.	
19.5	Chris Turnbull joined the meeting.	

20.	Corporate Information Security Policy	NES/SGC/25/66
20.1	The Chair welcomed Chris Turnbull to the meeting and asked him to introduce the Corporate Information Security Policy.	
20.2	Chris Turnbull stated that the policy was updated to clarify that logging on to a device and subsequently allowing another individual to use it is considered equivalent to sharing credentials. He added that other minor amendments were required to the policy to ensure consistency with the Information Security Acceptable Use Policy.	
20.3	There were no questions raised at the meeting.	
20.4	The Committee approved the updated Corporate Information Security Policy.	
21.	Information Security Acceptable Use Policy	NES/SGC/25/67
21.1	Chris Turnbull introduced the Information Security Acceptable Use Policy.	
21.2	Chris Turnbull noted minor policy updates reflecting the closure of the 2 Central Quay, Glasgow office, aligning password requirements with Corporate Information Security Policy, and emphasising that devices and logins are for individual staff use only. These changes ensure consistency across policies and were made outside the regular review cycle.	
21.3	There were no questions raised at the meeting.	
21.4	The Committee approved the updated Information Security Acceptable Use Policy.	
22.	Identification of any new risks raised at this meeting	(Verbal Item)
22.1	The Committee noted there were no additional risks identified at the meeting.	
23.	Employment Tribunals	NES/SGC/25/68
23.1	The Committee noted the Employment Tribunal report.	
24.	Reduced Working Week Implementation Plan	NES/SGC/25/69
24.1	The Committee noted the Reduced Working Week Implementation Plan.	
25.	Policy/Scottish Government Director Letters as appropriate to Staff Governance Committee	NES/SGC/25/70
25.1	The Committee noted the Policy/Scottish Government Director Letters report.	

26.	Remuneration Committee List of business by correspondence	
26.1	The Committee noted there was no Remuneration Committee business since the last meeting took place on 18 June 2025.	
27.	Change Management Programme Board minutes	NES/SGC/25/71
27.1	The Committee noted the 12 May 2025 Change Management Programme Board minutes.	
28.	Health, Safety and Wellbeing Forum minutes	
28.1	The Committee noted there has been no Health, Safety and Wellbeing Forum meetings since the last meeting took place on 12 March 2025.	
29.	Partnership Forum 13 March 2025 minutes	NES/SGC/25/72
29.1	The Committee noted the 13 March 2025 Partnership Forum minutes.	
30.	Any other business	
30.1	The Chair invited Sybil Canavan to introduce the Staff Consultation document for the transfer of NES staff to the new organisation from 01 April 2026.	
30.2	Sybil Canavan introduced the Staff Consultation plan and highlighted the document would be issued to staff week beginning 10 November 2025 and the consultation period lasts 90 days. The document received constructive input from staff-side colleagues and oversight from the Project Delivery Group.	
30.3	Sybil Canavan reported that there will be a six-month stabilisation period. Two practical elements still need to be updated in the final consultation paper in relation to an inaccurate diagram and the clarification of employment and tax arrangements following His Majesty's Revenue and Customs (HMRC) guidance.	
30.4	The Committee noted the engagement process and asked if individual staff queries would be addressed. Sybil Canavan responded that main engagement will be through trade unions and the Partnership Forum. However individual staff queries will also be answered. A communications plan will ensure all staff, including those staff hosted elsewhere are kept informed. A Frequently Asked Questions (FAQ) will answer common staff concerns about terms and conditions, pay, holidays, and continuity of service, with multiple communication channels available for further questions.	
30.5	The Employee Director reported that trade unions will raise any member questions, and trade unions will also issue a formal response on the consultation to the Chief Executive.	

30.6	The Committee noted the importance of the six-month stabilisation period.
30.7	The Committee discussed the future organisation's structure and noted that the scope of NHS Delivery is still to be defined.
30.8	The Committee noted that National Services Scotland (NSS) consultation document was different as they are not consulting on the Transfer of Undertakings (Protection of Employment) (TUPE).
30.9	The Chair thanked Sybil Canavan and Laura Liddle for the report, and the Committee noted the Staff Consultation report.
31.	Review of Committee Effectiveness
31.1	The Chair asked, do reports to the Committee communicate relevant information at the right frequency, time, and in a format that is effective? Has the Committee benefited from the right level of attendance from Lead Executive or Directors/Authors/Board Secretary/Others? Are there any areas where the Committee could improve upon its current level of effectiveness?
31.2	The Committee asked for acronyms to be written out in full when they are used in reports.
31.3	The Committee asked that report authors complete the climate change question on the checklist accurately.
31.4	The Committee noted the lateness of the Staff Consultation document and asked that future late reports are flagged to Non-Executives. An email or text message will be issued to Non-Executives personal devices highlighting a late document has been added to the meeting papers.
32.	Date and time of next meeting
32.1	The next meeting of the Staff Governance Committee will be held on Thursday 19 February 2026 at 10:15a.m.
32.2	The Chair thanked all for attending the meeting and for their contributions and closed the meeting.

NHS Education for Scotland

EDUCATION & QUALITY COMMITTEE

4 December 2025 from 10:15am to 12:45pm

Approved minutes of the twenty-first meeting of the Educational & Quality Committee (EQC) held on Thursday 4 December 2025 as a hybrid meeting, in person at the Westport Office, Edinburgh and via Microsoft Teams

Present: Annie Gunner Logan, Committee Chair, Non-executive Director
Olga Clayton (OC), Non-Executive Director
Nigel Henderson (NH), Non-Executive Director
George Valiotis (GV), Non-Executive Director

In Attendance: Rob Coward (RC), Principal Educator, Executive Secretary
Lindsay Donaldson (LD), Deputy Medical Director
Chris Duffy (CD), Senior Admin Officer, Minute-Taker
Jess Elsey (JE), Head of Programme, Organisational Development
David Garbutt (DG), Board Chair
Louise Harker (LH), Boardroom Apprentice
Kevin Kelman (KK), Director of NHSS Academy, Learning and Innovation
Debbie Lewsley (DL), Manager, Planning
William Liu (WL), Manager, Medical
Drew McGowan (DMcG), Board Secretary, Planning
Pam Nicoll (PN), Associate Director, Medical
Gordon Paterson (GP), Director of Social Care and Communities
Ryan Reed (RR), Head of Programme, NHSS Academy, Learning and Innovation
Katherine Stevenson (KS), Principal Lead, Medical
Emma Watson (EW), Medical Director and joint EQC Executive Lead
Karen Wilson (KW), Executive Director of Nursing, Deputy CEO and joint EQC Executive Lead

1. Welcome and Introductions

1.1 The Committee Chair welcomed all to the meeting..

2. Apologies for absence

2.1 Apologies were received from Karen Reid, Chief Executive and Accountable Officer and Janice Gibson, Associate Director, Organisational Development Leadership and Learning (ODLL).

3. Notification of any other business

3.1 The Committee Chair indicated an item of other business for the end of the meeting.

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 11 September 2025

5.1 The Chair invited the Committee to review the draft minutes from the 11 September 2025 EQC meeting.

5.2 The Committee approved the draft minute as an accurate record of the meeting.

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 4 completed actions with 2 actions scheduled for the next meeting.

6.2 The Committee 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. Karen Wilson firstly highlighted to the Committee the significant contributions from psychology, emphasizing the extensive activity and positive developments in that area. Karen Wilson also noted the development and impact of education resources for allied health professionals, referencing the new public health framework and the achievements of the Directorate in reaching these professions. She noted the ongoing progress and the significance of this work for the Scottish population.

7.2 Emma Watson emphasised the breadth, depth and reach of NES' work across NHS Scotland and Social care contained within the report. Emma Watson highlighted the NES Medical Appraisal & Revalidation Quality Assurance (MARQA) Review, noting its effectiveness to pinpoint improvement areas and to inform ongoing quality assurance. Emma Watson also acknowledged the significant output of the healthcare science team, despite their small size and confirmed there are plans to explore additional support for this team.

7.3 The Committee Chair thanked the executive leads for their introductions and opened the report for comments and questions.

7.4 The Committee noted the continued success in including performance data within the report, emphasising the importance of not just reporting successful events but also analysing why they were successful. Specifically regarding the Infection Prevention and Control Webinar, the detailed data was praised. This data will

eventually contribute to SKPI data for the organisation and the Committee valued the inclusion of information on attendance, feedback and impact on practice.

- 7.5 The Committee asked how educational governance groups referenced within the report will feed into the Committee's work. Ryan Reed explained that discussions have started with the Executive Leads of the Committee on aligning the reporting of the educational governance groups with the Education and Quality Executive Group (EQEG), this is focussing on clear alignment of remits and terms of reference. The next step after this will be to determine how EQEG will then report into EQC.
- 7.6 The Committee expressed some concern regarding the limited detail presented within section 3.11 of the report, succession planning. While the section referenced board-level data on aspiring Chief Executives and Directors, succession planning must extend beyond data collection to encompass structured process and oversight. It was noted that leadership, talent management and succession planning groups within the Improving Wellbeing and Working Cultures (IWWC) had not convened for at least two years. The Committee asked for an update on current activity but noted that Jess Elsey who was representing ODLL at the meeting may not be able to provide all the relevant insight. Jess Elsey provided additional context on ongoing activity, noting that support continues for aspiring Directors and Chief Executives, alongside delivery of senior leadership development programmes. The adaptive learning set programme is progressing as is the recently launched Remote, Rural and Island Senior Leaders Programme – both programmes are aimed at strengthening leadership capability and supporting longer-term succession needs. Jess Elsey also noted that discussions are underway regarding development pathways for aspiring Medical Directors and broader clinical leadership roles, with the wider senior leadership offer contributing to succession planning across the system. Gordon Paterson noted that, internally, the organisation has undertaken two years of structured succession planning work. This has involved identifying potential candidates for Director, Chief Executive and other senior roles. The Committee thanked Jess Elsey for the update but noted that the activity described related primarily to talent management rather than the full scope of succession planning and also highlighted that the type of internal model referenced by Gordon Paterson is currently absent at national level. The Committee requested a more detailed report on succession planning.
- Action: JG/JE**
- 7.7 The Committee asked if enough is being done on clinical AI training, some progress was noted but the Committee questioned whether AI is sufficiently prioritised. Karen Wilson explained that Christopher Wroath is developing a programme of work called Digital Data Analytics and AI with Gordon Paterson as the Senior Responsible Officer. The programme will involve all directorates to assess their data analytic and AI needs, aiming to integrate AI into education delivery and workforce planning. Kevin Kelman shared an example of a recent event held in partnership with counterparts from the other UK nations, focussed on AI in healthcare education. This led to a follow-up event on AI and assessment. Ryan Reed confirmed he is preparing a paper on learning, teaching and assessment principles for AI. Ryan Reed described efforts to develop principles

based guidance for the ethical and responsible use of AI in learning, teaching and assessment, noting the lack of clear guidance for educators.

- 7.8 The Committee clarified their concern distinguishing between using AI as pedagogy and upskilling the health workforce to use AI in clinical work. Lindsay Donaldson updated that the clinical AI fellowship has expanded from two to three medical and three non-medical posts, with projects in areas like breast screening and digital dermatology. It was noted that there is ongoing growth and collaboration in this area with other institutions, aiming for continued expansion.
- 7.9 The Committee asked for examples of what a clinical entrepreneur might undertake, expressing difficulty in understanding the term. Kevin Kelman explained that the clinical entrepreneur program is UK-wide, aiming to equip clinicians with skills to work in the entrepreneurial ecosystem, including collaboration with developers, academia, and industry. The program connects participants to NHS Scotland's regional innovation hubs and the national innovation adoption pathway, supporting ideas from inception to implementation.
- 7.10 The Committee noted that in section 5.10 the leading to change table, the "other" category numbers are very large, while social work numbers are quite low, and questioned whether social care includes health and social care partnerships. Jess Eley acknowledged low event attendance from social care and social work, attributing it to sector challenges in releasing staff for learning. She emphasized that events are only one part of their offer, with significant leadership development work happening directly with teams and organizations. Jess Eley mentioned an upcoming leading to change report with case studies and impact examples, and highlighted operational leadership development as a future focus. Jess Eley also offered to provide a breakdown of the "other" category, which includes third sector organizations and health and social care partnerships not specifically defined as health, social care, or social work.
- 7.11 The Committee asked about the development of an incident reporting mechanism for NES staff and trainees. The Committee raised concerns that the system felt opaque and more like a tick-box exercise, noting that it does not adequately support NES's intention to ensure safe and transparent incident reporting. They suggested exploring ways to improve engagement with external organisations for broader expertise and co-production. Karen Wilson agreed to take these comments back to Katy Hetherington to review whether wider external input is being considered and to assess if the chosen tool is the best fit for NES. Lindsay Donaldson shared that NES is in live discussions with Emily Test, an Aberdeen based group supporting work on sexual misconduct, including charters for postgraduate and undergraduate engagement. There is an upcoming meeting planned with Emily Test to explore collaboration. **Action: KH/LD**
- 7.12 The Committee asked about the remit of the "Sustainable Care Education Working Group" seeking clarification on whether it focusses on environmental sustainability or sustaining care. Emma Watson clarified that the group is primarily about environmental sustainability, reducing waste and minimising environmental impact, while also acknowledging broader aspects of sustainability. It was

suggested that a report on this group could be brought to Committee in 6 months time once the group has been established. **Action: EW**

- 7.13 The Committee asked about recent attention on maternity services, referencing the Cabinet Secretary's remarks and a new working group. The Committee inquired whether there is anything NES should be doing regarding learning, education, and training to support ongoing work in maternity services. Karen Wilson responded that NES is involved in all relevant groups considering maternity services and is monitoring education and workforce development needs. Karen Wilson noted NES already runs several maternity programmes and highlighted challenges such as staffing levels and culture, which affect the ability to release staff for development. NES is exploring additional resources and potential new developments to support the sector
- 7.14 The Committee noted that the Social Care and Communities Directorate update was accidentally omitted from the Executive Leads Report. Gordon Paterson confirmed there was nothing of concern to draw to the Committee's attention and the update will be appended to the Committee minutes. **Action: CD**
- 7.15 The Committee confirmed the report provided the necessary assurance.
- 7.16 The Committee Chair thanked all who contributed to this comprehensive report and noted that is an excellent resource that showcases the unique work of NES and the impact the work has.

8. Q2 EQC Strategic Key Performance Indicators Report

- 8.1 The Committee Chair invited Debbie Lewsley to introduce the SKPI Report. Debbie Lewsley presented the Q2 update on the committee's delegated strategic KPIs, noting 48% of KPIs reported with a green status, a slight decrease from the previous period. Four of 23 metrics were reported, with others not due this period. She highlighted positive results in employability collaborations and credit-rated programmes, but noted a red status for dental training vacancies. Eight measures are still in development, with interim solutions and pilot data gathering expected to yield results in Q4. Debbie also proposed expanding SKPI 14 to include more professional groups and introduced a new dashboard format for KPI data. Debbie Lewsley asked the committee to approve the update and amendments, and invited questions.
- 8.2 The Committee noted the imminent availability of data for KPIs 11 and 12—measuring participant feedback and impact on practice—and emphasised that these indicators are critical to the organisation's assurance and oversight processes. The Committee praised the dashboard for its clarity and ease of use, highlighting the ability to cross-reference strategic issues and committee concerns.
- 8.3 The Committee emphasised the importance of ensuring continuity for quality policy work during the transition to the new board, noting that a summary will be prepared for the next meeting to inform the new board and maintain momentum. Karen Wilson stated that efforts have been made to accelerate the learning and education quality system to ensure strong educational governance is in place

before the end of March, so the new organization will have embedded systems and supporting data. The Committee acknowledged that further improvements may be needed as things evolve.

- 8.4 The Committee asked about the impact of the recent demise of SQA on SKPI30, which tracks the number of NES programmes of education and training that are SCQF credit rated. He also inquired about the ownership of SCQF and whether it was an SQA or Scottish Government entity, expressing concern about potential risks for NES due to reliance on SQA-accredited qualifications. Kevin Kelman explained that NES has quarterly strategic meetings with senior SQA colleagues to discuss developments and concerns, and so far, no transition issues have been identified. Kevin Kelman clarified that SCQF is managed by the Scottish Credit and Qualifications Framework Partnership, a separate organization that oversees credit rating body status.
- 8.5 The Committee approved the SKPI report with members expressing satisfaction and commending the development of the new dashboard.

9. Nursing and Midwifery Pre-Registration Performance Report

- 9.1 The Committee Chair invited Karen Wilson to introduce the report. Karen Wilson introduced the nursing and midwifery pre-registration performance report, explaining it is an annual performance management cycle conducted on behalf of the Scottish Government, which commissions and funds nursing, midwifery, and paramedic education and bursaries. All programmes undergo a desktop review, and about half are selected for in-person visits based on a risk-based approach, using both current and previous years' data, and engaging with those involved in recruitment. Karen Wilson highlighted key issues: ongoing recruitment struggles in adult, mental health, and learning disability nursing (with significant cumulative shortfalls), contrasted with over-recruitment in paramedics and children's nursing, and a healthy position in midwifery.
- 9.2 Karen Wilson noted national efforts to support university recruitment and ongoing work to improve marketing for nursing careers and emphasised the importance of articulation routes to help fill gaps. Karen Wilson reported that completion rates are stable, student satisfaction is generally good, and the directorate used the QMPLE tool to measure student experience in practice learning, with efforts to increase participation and reassure students about anonymity.
- 9.3 The Committee Chair clarified that the reports recommendations are for the Chief Nursing Officer (CNO) and Scottish Government not for the Committee, but the Committee is asked to approve the NES process for performance managing the commissioned programmes.
- 9.4 The Committee reflected on global healthcare workforce shortages, noting that responsibility is often unclear and while many organizations do good work, more decisive action is needed. The Committee expressed confidence in NES's reporting and asked if NES should use its influence more strategically—beyond its direct remit—by signaling concerns or leveraging relationships with other bodies, or if NES's current contributions are sufficient. Karen Wilson acknowledged NES is

seen as having a leadership role in this area, even if not officially designated. She described ongoing discussions with the new CNO and executive nurse directors, all of whom are very concerned by the situation. She highlighted that while NES and others feed information into the ministerial-led nursing and midwifery task force, actual progress is hampered by the need for funding and slow action. Emma Watson described collaborative work on enhancing medical attraction. It was suggested that this approach could be extended to nursing.

- 9.5 The Committee raised the issue of why certain areas (e.g., mental health and learning disability nursing) are particularly unattractive, questioning whether working conditions or other factors are responsible, and whether NES or the CNO investigates these root causes. Karen Wilson responded that research is underway to better understand these issues, noting that learning disability nursing is a particularly invisible profession, and that broader factors such as working conditions may also play a role.
- 9.6 The Committee questioned why there was no recommendation to start a nursing apprenticeship system, suggesting it could help attract more people and allow for articulation onto degree programmes if desired. Karen Wilson responded that why there was no recommendation to start a nursing apprenticeship system, suggesting it could help attract more people and allow for articulation onto degree programmes if desired.
- 9.7 The Committee approved the NES Process for managing the commissioned programmes.

10. Update on GMC survey results – Discriminatory behaviours

- 10.1 The Committee Chair invited Emma Watson to introduce this item. Emma Watson introduced the follow-up report on discriminatory behaviours in medical education, noting that while the numbers reported are low, this may reflect underreporting and the true scale could be larger. It was explained that additional data from the GMC was obtained, but analysis was limited to regional level to protect anonymity. Emma Watson highlighted ongoing systemic issues with bias, misogyny, and racism in medical education and care environments. Emma Watson described NES's role in supporting interventions and proposed that future quality processes should ask boards about their work towards initiatives like Equally Safe at Work, seeking committee feedback on this approach.
- 10.2 Lindsay Donaldson highlighted specific interventions in areas where discriminatory behaviour has occurred, noting that some are NES-led or endorsed. Lindsay Donaldson mentioned the team-based quality review process in surgical specialties (commissioned by Scottish Government and delivered by NES) and the Royal College of Physicians and Surgeons in Glasgow's active bystander training for sexual misconduct, developed by NES Clinical Leadership Fellows. NES's role was emphasised, in identifying, supporting, and providing these interventions.
- 10.3 The Committee asked whether the current education offerings are sufficient to address the issues of discrimination identified in the data, expressing uncertainty about whether these interventions alone are adequate. Emma Watson responded

that, on their own, the education offerings are probably not enough. Emma Watson emphasized that these are part of a broader suite of interventions needed across the system. Emma Watson also noted the importance of visible behaviour change and multi-factorial approaches, including ongoing work with medical directors and NES's support for equality, diversity, and inclusion initiatives.

- 10.4 The Committee raised the need for clarity between discriminatory behaviours and sexual misconduct, noting that the GMC survey questions do not directly address unwanted sexual behaviour, yet comments in the data indicate trainees want to report such incidents. The Committee questioned whether the current approach sufficiently captures feedback on unwanted sexual behaviour and emphasized the importance of linking low-level disrespect to potential escalation. Emma Watson clarified that the Scottish Training Survey (STS), unlike the GMC survey, specifically asks about unwanted sexual behaviour. It was explained that while the GMC data is limited to its own questions, NES uses STS results to inform specific action plans when issues are identified. Emma Watson agreed that discriminatory behaviours and sexual misconduct are distinct but related, and NES addresses both through different but connected approaches.
- 10.5 The Committee clarified that a concern was not just about education offerings but also about the sufficiency of NES's broader services and interventions (e.g., leadership training, workforce design) in addressing discrimination. The Committee questioned whether current efforts are enough or if new types of support are needed. Emma Watson stated that as long as data shows ongoing issues, NES's current interventions are not enough, and efforts must continue. She emphasized the need to monitor outcomes and adapt interventions as necessary, viewing this as ongoing work.
- 10.6 The Committee Chair concluded that the committee can take assurance from the report that NES understands the scale and challenge of discriminatory behaviours and is planning relevant activities and development programmes to address them, but will need to revisit the issue based on future data to assess improvement. The Committee will review the next GMC survey data at their September 2026 meeting (Meeting date to be confirmed).

11 National Centre for Remote and Rural Health and Care Update

- 11.1 The Committee Chair invited Pam Nicoll to introduce the report. Pam Nicoll introduced the National Centre for Remote and Rural Healthcare report, noting it covers year 2 (October 2024–October 2025) and represents phase one of the Centre's work, focusing on remote, rural, and island primary care and community services. Pam Nicoll highlighted the Centre's phased approach, ongoing stakeholder engagement, and accountability to communities, with mechanisms for community involvement. It was summarized the Centre's education and training offerings, work in research, evaluation, recruitment, retention, and rural leadership, emphasizing their interlinked nature and the goal of enhancing career opportunities and sustainability for the remote and rural workforce. The Centre collaborates with Scottish Government on policy, especially recruitment and retention, and outlined key programme outcomes, including the first rural

advanced practitioner programme and rural dispensing programme, as well as partnerships with Scottish Ambulance Service and other agencies.

- 11.2 The Committee asked, given the detailed KPIs currently in use and the scope of the Scottish Government–commissioned evaluation, if there is an intention—now or in future phases—to gather evidence directly from rural people and communities regarding the programme’s impact. Current KPIs focus primarily on participants and Health Boards; however, community-level insights may be important in assessing alignment with commitments to involving people and communities. Pam Nicoll responded that in phase one, the Centre is incorporating community engagement as much as possible, including stakeholder reference groups with community members and collaboration with agencies like Scottish Rural Action to improve outreach. She noted ongoing work with primary care and community service stakeholders, identified unmet needs in secondary care and social care, and stated that broader community impact assessment is planned for future phases.
- 11.3 The Committee noted they had originally anticipated social care would be included from the outset of the National Centre’s remit. The Committee observed that the report indicates forthcoming options for secondary care and social care and requested clarification on the specific options being developed for these sectors, whether the initial exclusion of social care was primarily due to budgetary constraints and whether new proposals represent a realistic opportunity for social care to be brought into scope. Pam Nicoll responded the programmes phased approach was due to budgetary limitations with Phase 1 focussed on primary care and community services. The original delivery plan envisaged Phase 2 covering secondary care and Phase 3 covering social care. Work is currently underway to prepare options for submission to the Scottish Government in December, enabling early consideration of next-stage development. The team remains aware of unmet needs in secondary and social care and is aiming to build on the positive progress achieved in Phase 1 to extend impact across wider sectors, subject to financial approval. The preferred direction is to progress as close to a whole-system, whole-team approach as national funding and priorities will allow.
- 11.4 Gordon Paterson added, In remote and rural areas, workforce development needs naturally cut across traditional professional boundaries, making it difficult to separate health and social care in practice. Although funding to date has come solely from the Primary Care Directorate, recent correspondence from the Scottish Government explicitly requests proposals relating to secondary care and social care. There may therefore be greater opportunity to secure broader cross-government investment or agreement to support workforces across all relevant sectors. NES will seek to collaborate across directorates to ensure any future model supports integrated rural workforce needs.
- 11.5 The Committee queried whether the work being led by Paula Speirs at the Scottish Government on remote and rural health services aligns with, or is being integrated into, the work currently being undertaken by the National Centre. The Committee asked specifically whether the outputs of that government-led programme relate to, or inform, the National Centre’s current option-development work. Pam Nicoll confirmed the

work led by Paula Speirs last year was commissioned by the Scottish Government under the Remote and Rural Task and Finish Group, with a specific focus on secondary care provision in remote and rural settings.

The Scottish Government has now formally asked NES to outline how the outcomes of that Task and Finish Group will be reflected in the National Centre's developing programme and associated option frameworks.

NES contributed to this work when it was undertaken, recognising that in remote and rural areas it is often impossible to separate secondary care from primary care and wider rural workforce functions, as the same teams and communities are involved across the full range of services.

The National Centre will therefore incorporate the findings and recommendations from the Task and Finish Group into the proposals that will be taken forward to the Scottish Government as part of the next stage of development.

- 11.6 The Committee confirmed they are assured that progress on the National Centre for Remote and Rural Healthcare is satisfactory and everything is on track.

12 Medical Education Reform update

- 12.1 The Committee Chair invited Emma Watson to introduce this report. Emma Watson explained that the report provides an update on activities over the past year, noting it has been a busy period managed largely through discretionary effort. Emma Watson highlighted the recent appointment of Catherine Stevenson as head of programme, which has already accelerated progress. Emma Watson summarized recent work, including round tables, changes for resident doctors in training (notably longer placements in the north of Scotland, such as full training in Raigmore Hospital), and positive feedback from medical directors in Fife and Borders about the benefits of having more senior trainees for longer periods. It was emphasized that there is a key focus on supporting educators, with feedback from round tables and one-to-ones now feeding into the trainer development collaborative, aiming for a holistic approach.

- 12.4 Lindsay Donaldson highlighted activity around supporting output across Scotland to address vacancies, not only through prolonged placements but also by considering proactive appointments. It was noted that the medical education reform work runs from start to finish, extending to the delivery of consultant and general practice workforce for areas with the greatest need.

- 12.5 The Committee asked whether the medical education reform work is still following a Four Nations approach and how that is progressing. Emma Watson responded that the Four Nations approach remains in place, with their work informing other nations. It was noted that the UK Government's review in England had some similar and some different issues, and that actions taken in England can have significant effects on the other nations. In response, the Scottish Government also conducted a review, but no new issues were identified beyond what was already known or being addressed. Emma Watson explained that these developments have led to some adjustments in priorities and pacing, but the collaborative approach continues.

The Committee asked about the increasing trend of doctors undertaking less than full-time training, combined with absences such as maternity leave, leading to significant gaps (up to 28% in some disciplines) between the number of trainees entering and those available at the end. The Committee questioned how the reform programme is addressing this, suggesting that either more funding or more posts may be needed to compensate for these gaps. Emma Watson responded that the medical workforce is unique in not having built-in expansion to account for statutory leave or sickness, and that the standard working week is longer than other professions. It was explained that even with full recruitment, significant gaps remain due to less than full-time working. Emma Watson noted that NES is working with the Scottish Government to agree on establishment numbers and funding, and has permission to move forward with whole-time equivalent recruitment in key specialties, where gaps can be as high as 45%. Emma Watson highlighted that this shift will improve rota coverage and normalize more sustainable working patterns. Lindsay Donaldson added that this is a live issue, with ongoing meetings with the Scottish Government to secure fully funded establishment numbers. She explained that NES has previously borne a financial deficit due to the funding model, but with improved recruitment, fully funding the establishment would be a significant step forward, allowing for better management of absences such as maternity leave.

13. Medical Revalidation Update

The Committee Chair welcomed William Liu to the meeting and invited him to introduce the report. William Liu introduced the Medical Revalidation report by explaining that medical revalidation is a GMC process required every five years for all UK doctors to renew their license to practise. Most doctors are connected to a designated body (typically their employer), with a Responsible Officer (usually the Medical Director) overseeing revalidation. Central to this process is the annual medical appraisal, a peer review based on GMC Good Medical Practice, managed locally but supported nationally by NES through the SOAR (Scottish Online Appraisal Resource) system. NES is responsible for appraiser training, maintaining SOAR, and supporting stakeholders to ensure a consistent, high-quality approach across Scotland.

The Committee asked what happens to doctors who do not get validated, wondering if there is a process in place for them. Emma Watson responded that deferral is a neutral act, usually to support colleagues in completing requirements like patient or colleague feedback. It was clarified that only a very small number of doctors lose their license due to non-engagement, and that losing a license for non-engagement with appraisal is rare and separate from conduct issues.

Karen Wilson asked if board performance is reviewed and William Liu responded that the report highlights boards that have significantly improved compared to the previous year and includes a table mapping appraisal completion rates for each organization. It was noted that most boards met the 90% threshold, with only one or two not meeting it due to underlying reasons, and that those boards have been contacted for further support.

The Committee noted the progress made in the SOAR redesign project, noted the findings and recommendations in the MARQA report and took assurance from the report.

14. Education & Quality Strategic Risks

14.1 The Committee Chair invited Rob Coward to introduce the report.

14.2 Rob Coward advised that there is 1 strategic risks relevant to EQC. Strategic Risk 11 (relating to poor learning outcomes and learning experience for our stakeholders), the net likelihood risk score has been increased due to the uncertainty of the timing of the relocation of Westport and the potential impact this could have on access and quality of training facilities. There are 35 directorate level risks with 11% outside the boards risk appetite, additional actions are being taken to address these.

14.3 The Committee noted the risk and the potential for it to increase in the next quarter. It was asked when the Committee would see the delegated actions expressing concern that waiting until the next quarter might be too late. Karen Wilson and Rob Coward confirmed that the Board would be updated on accommodation as soon as the situation is clear.

14.4 The Committee noted the report and confirmed that the risks delegated to EQC are managed effectively.

15. Clinical and Care Assurance Group (CCAG) Update

15.1 The Committee Chair invited Emma Watson to provide an update on CCAG. Emma Watson reported that clinical and care assurance group met two weeks prior, with strong support and attendance from EQC members. The group focused on reviewing terms of reference for supporting short-life groups, particularly work led by Ryan Reed. The meeting included a deep dive into the pharmacy directorate and a paper on dental directorate issues, providing a safe space for discussion and collective action. It was agreed that notes from the group will be shared with the Education and Quality Executive Group (EQEG) and then with the EQC in future. **Action: CD**

15.2 The Committee noted the update and confirmed it provides the necessary assurance.

16. Annual Review of EQC Terms of Reference

16.1 The Committee Chair invited Drew McGowan to introduce the Committee Terms of Reference. Drew McGowan explained that the annual review of terms of reference for all committees is scheduled at this time of year. The main substantive amendment is related to the clinical and care assurance group. The Committee were asked to agree to the changes and consider any further amendments, noting that the next steps are review by the Audit and Risk Committee in January and final Board approval in February.

16.2 The Committee approved the Terms of Reference.

Items for noting

17. Consultation Log

17.1 The Committee noted the consultation log.

18. Scottish Government and NES Educational policies

18.1 There were no policies to report at this meeting.

19. Committee Effectiveness

19.1 The Committee confirmed that reports to the Committee had communicated relevant information at the right frequency, time, and in a format that was effective. There was specific praise for the KPI dashboard and the Medical Revalidation presentation. The Committee felt that they had benefited from the right level of attendance. The Committee confirmed the papers were of good standard and quality.

20. Any other business

20.1 The Committee Chair noted that the Education and Quality Committee is likely to continue in a similar format within NHS Delivery, but with some personnel changes due to the new organisation. The Committee Chair announced that they will no longer chair the EQC and that Olga Clayton will take over as chair starting immediately after this meeting. David Garbutt expressed gratitude to Annie Gunner Logan for their leadership and progress made with the Committee, on behalf of the board. Annie Gunner Logan acknowledged Karen Wilson and Emma Watson as fantastic lead executives and praised their reports.

21. Date and time of next meeting

21.1 The next meeting of the Education and Quality Committee will be held on 5 Mar 2026, 10:15am – 12:45pm as a hybrid meeting.

NES
CD
January 2026

Approved by Annie Gunner Logan on 20th January 2026.

Minutes of the Twenty Third NES Audit and Risk Committee held on Thursday 15 January 2026, in Westport Room 5, Edinburgh and via Microsoft Teams.

Present

Jean Ford (JF)	Non Executive Director and Chair	MS Teams
Olga Clayton (OC)	Non Executive Director	MS Teams
Gillian Mawdsley (GM)	Non Executive Director – Whistleblowing Champion and Climate Emergency Champion	In Person

In Attendance

Jenn Allison (JA)	Senior Officer (Minute Taker)	In Person
Christina Bichan (CBi)	Director of Planning, Performance and Transformation (PP&T)	MS Teams Item 08b and Item 11
Jim Boyle (JB)	Executive Director of Finance	In Person
David Garbutt (DG)	Chair of NES	MS Teams
Laura Howard (LH)	Deputy Head of Finance	In Person
Debbie Lewsley (DL)	Risk Manager	MS Teams Item 13 and Item 14
James Lucas (JL)	KPMG, Internal Audit	In Person
Drew McGowan (DM)	Board Secretary and Principal Lead for Corporate Governance	In Person
Karen Reid (KR)	NES Chief Executive Officer	MS Teams
Syed Shah (SS)	KPMG, Internal Audit	In Person
Lorraine Scott (LS)	Manager, PP&T	MS Teams, observing
Richard Smith (RS)	Audit Scotland, External Audit	In Person
Amber Tomlinson (AT)	Audit Scotland, External Audit	In Person
Christopher Wroath (CW)	Director of NTS	MS Teams Item 08c

1. Chair's welcome and introduction

- 1.1 The Chair welcomed everyone to the meeting, particularly Amber Tomlinson, who was attending her first NHS Education for Scotland (NES) Audit and Risk Committee (ARC) meeting from Audit Scotland.
- 1.2 The Committee noted that Christina Bichan, Director of Planning, Performance and Transformation would be in attendance for item 08b, Internal Audit Board Governance report and Item 11, End of year accounts and dissolution of NES, Christopher Wroath would be in attendance for item 08c Internal Audit Information Assets and Data Management report and Debbie Lewsley would be in attendance

for item 13, ARC Delegated Strategic Key Performance Indicator (SKPI) report and item 14, Risk reports.

2. Apologies for absence

- 2.1 Apologies were received from Shona Cowan, Non-Executive Director and Lisa Duthie, Audit Scotland, External Audit.

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. Notification of any other business

- 4.1 No other business items were identified.

5. Audit and Risk Committee Minutes 03 October 2025 (NES/AR/26/02)

- 5.1 The minutes were approved as a correct record.

6. Action Status Report (NES/AR/26/03)

- 6.1 The Committee noted that all of the 10 actions had been marked as complete or closed. Amendments were requested in relation to correcting the language of action updates 13.13 and 13.12, correcting a typing error to 8.28 and to amend the update to 18.5, confirming that although the Public Bodies Climate Change Duties Report was not circulated to the Committee, it was submitted to the NES Board.

7. Matters arising from the Minutes

- 7.1 There were no matters arising from the previous minutes.

8. Internal Audit Reports

a) Core Financial Controls – Accounts Receivable (NES/AR/25/04)

- 8.1 The Chair invited Syed Shah to introduce the report.
- 8.2 Syed Shah informed the Committee that the audit reviewed accounts receivable processes, including customer registration, due diligence, invoicing, credit control and write-offs.
- 8.3 The Committee noted that the audit found robust controls in place, with only minor improvement opportunities identified and that an assurance rating of "significant assurance with minor improvement opportunities (Green/Amber)," was given.
- 8.4 The Committee noted that one medium finding was raised relating to developing a more formal due diligence process and three low-level findings were raised regarding approval thresholds, Service Level Agreements (SLA) for invoice processing,

strengthening data quality and Value Added Tax (VAT) guidance.

- 8.5 Jim Boyle informed the Committee that as NES moves into the new organisation, accounts receivable activities will be consolidated with National Services Scotland's (NSS) and that recommendations from the audit will be incorporated into revised financial instructions and processes.
- 8.6 A query was raised regarding how the customer due diligence risk profile is determined and whether a single approach should be used for all customers. James Lucas explained that all customers undergo a minimum level of due diligence, with additional checks triggered by specific risk factors such as international status or working with private individuals. Syed Shah added that most NES customers are generally low risk, though higher risk customers require closer scrutiny. Jim Boyle explained that foreign currency transactions demand enhanced due diligence, whereas domestic NHS Boards or university customers require a lighter approach.
- 8.7 A further question was raised regarding the frequency of risk profile reviews, given the changing international risks and fraud patterns. Jim Boyle explained that risk assessments are part of a rolling audit programme and that policies are updated as new intelligence on fraud risks emerges, ensuring due diligence processes remain current.
- 8.8 The Committee noted the report, the management actions and the assurance provided.

b) Board Governance

(NES/AR/26/05)

- 8.9 The Chair welcomed Christina Bichan to the meeting, who was in attendance to answer any questions from the Committee. The Chair invited James Lucas to introduce the report.
- 8.10 James Lucas informed the Committee that the audit reviewed NES' governance structures, processes, standing committee operations, terms of reference, membership, reporting, the Board assurance framework, self-assessment, action plans, board skills matrix, appraisals, and diversity and inclusion practices.
- 8.11 The Committee noted that the audit provided an overall assessment of 'significant assurance' (Green) with the report finding NES's governance framework to be mature, well embedded and strongly aligned to the NHS Scotland Blueprint for Good Governance.
- 8.12 The Committee noted that one low risk findings was raised to introduce a formal review schedule when creating the Board Assurance Framework for the new organisation.
- 8.13 James Lucas informed the Committee that one advisory action was also recommended regarding emerging governance best practice suggesting that ARC Chairs should avoid membership of other standing committees to maintain full independence when scrutinising risk and financial statements. The Committee noted that this will be assessed as part of the move to the new organisation.

- 8.14 Karen Reid emphasised that the report represents years of work to strengthen governance across both operational and Board levels, recognising the significant contributions of Christina Bichan, Drew McGowan, Della Thomson and David Garbutt.
- 8.15 The Committee noted the added value of external assessment in confirming the Board's strong governance processes and reinforced that effective governance is not only about having structures in place but ensuring they are implemented well and continuously improved, crediting the whole organisation for this achievement.
- 8.16 The Committee noted that the report has been conducted at a good time to support the development of future organisational governance for the new organisation.
- 8.17 The Committee noted the report, the management actions and the assurance provided.
- 8.18 The Chair thanked Christina Bichan for her attendance and she left the meeting.

c) Information Assets and Data Management

(NES/AR/26/06)

- 8.19 The Chair welcomed Christopher Wroath to the meeting, who was in attendance to answer any questions from the Committee. The Chair invited James Lucas to introduce the report.
- 8.20 James Lucas informed the Committee that the audit reviewed the Information Assets register, pertaining to the Turas Learn and Turas People systems, including assessing documentation management and risk review processes, data processing controls, resource sufficiency and training for information asset owners and administrators.
- 8.21 The Committee noted that the audit provided an overall assessment of 'significant assurance with minor improvement opportunities' (Green/Amber) reporting areas of good practice, including information asset management, data governance policies, cyber and information governance, and training and awareness.
- 8.22 The Committee noted that two medium risk findings were raised regarding improvements to the information asset register and improving capacity and capability of information asset owners. The Committee noted that one low risk finding was raised regarding updating terms of reference for the Assurance Forum to better reflect its practices.
- 8.23 Christopher Wroath confirmed that work is underway to review the asset registers for system criticality. He added that the assurance forum's terms of reference will be revisited at the next meeting to ensure readiness for the new organisation. Christopher Wroath acknowledged that delivering formal training for information asset owners and administrators will be difficult to achieve before the end of the financial year.
- 8.24 The Committee highlighted the risk created by the limited capacity for the training of

information asset owners. Karen Reid confirmed the risk is recognised and that this will remain a high-priority action as NES moves into the new organisation. Christopher Wroath added that he will ensure appropriate training is implemented in advance of and moving into the new organisation and agreed to reflect this risk in the risk register. **Action: CW**

8.25 Karen Reid acknowledged NES' strong information asset assurance and noted the importance of reviewing the combined assurance status as NES and NSS move into the new organisation and that any required actions are addressed quickly.

8.26 The Committee noted the report, the management actions and the assurance provided.

8.27 The Chair thanked Christopher Wroath for his attendance and he left the meeting.

d) Status update Progress Report

(NES/AR/26/07)

8.28 The Chair invited Syed Shah to introduce the report.

8.29 Syed Shah informed the Committee that the 2025/2026 audit plan is progressing well, with all audits on track to conclude by March before the Board is dissolved. Syed Shah informed the Committee that of the seven planned audits, three are complete, two are in the final feedback stages and the remaining two will begin fieldwork next week.

8.30 The Committee noted that of the twenty-six internal audit actions due, three have been closed, sixteen are not yet due, and seven are overdue. Syed Shah informed the Committee that three of the overdue actions are close to completion pending evidence verification, while two relating to the climate change audit strategy will be treated as learning points.

8.31 Jim Boyle confirmed that the outstanding audits will be presented to the NES Board in March, ensuring the new organisation receives a clean set of audits and recommendations.

8.32 The Committee were content that the report provided them with assurance. The Committee were content with the progress of the internal audit plan and progress in implementing the outstanding recommendations.

e) Draft Summary Internal Audit Plan 2026-2027

8.33 The Chair invited James Lucas update the Committee regarding the draft internal audit plan for 2026-2027.

8.34 James Lucas explained that a draft internal audit plan for the new Board cannot be produced due to the ongoing transition and the absence of a formal Board. James Lucas outlined a six week timeline to work with NES and NSS management to shape a draft by the end of March 2026, emphasising that the plan will be flexible and

subject to change once the new organisation becomes operational.

- 8.35 Karen Reid added that the incoming Chief Executive and Accountable Officer will have oversight of the draft plan and that it should account for new risks and opportunities for the new organisation rather than focusing solely on legacy issues.
- 8.36 The Committee raised concerns about the appropriateness of NES Board members approving a joint plan that encompasses responsibilities beyond their remit and suggested that NES Board members should only sign off on NES specific risks.
- 8.37 Jim Boyle confirmed that NES and NSS may provide an advisory audit plan, allowing flexibility for the new Board to shape the final version. Karen Reid reiterated that each organisation can only formally approve risks pertaining to its own remit, with space intentionally left for additional risks within the advisory plan.
- 8.38 James Lucas confirmed that contingency days will be built into the plan to accommodate emerging risks and opportunities, with core assurance requirements covered but sufficient flexibility retained for the needs of the new organisation.
- 8.39 The Committee were content with the update.

9. Draft External Audit Plan

(NES/AR/26/08)

- 9.1 The Chair invited Richard Smith to present the external audit plan for the 2025-2026 audit year.
- 9.2 Richard Smith highlighted the scope of the plan includes financial management, including materiality levels and key risks, sustainability, governance, and best value and that there will also be a focus on developments related to the transition into the new Board. Richard Smith added that Audit fees have now been agreed and will be communicated, with further discussions planned. Richard Smith thanked the NES finance team for their support in preparing the plan.
- 9.3 The Committee noted the provisional timetable aims for account certification by the end of June 2026, with Committee dates still to be agreed.
- 9.4 Jim Boyle expressed comfort with the plan and process, noting ongoing communication with the audit team regarding the transition into the new Board. Jim Boyle emphasised the importance of giving priority to closing NES annual accounts to the usual high standard, ensuring proper governance for account consideration, likely by the new Board.
- 9.5 The Committee approved the external audit plan and confirmed that it provided them with assurance.

10. External Audit Recommendations

(NES/AR/26/09)

- 10.1 The Chair invited Laura Howard to introduce this item and update on the progress of the external audit recommendations.
- 10.2 Laura Howard reported that two recommendations from the previous audit relate to disclosures in the performance report for the 2025-2026 audit and explained that NES are working closely with external audit to prepare the timetable and will ensure compliance with disclosure requirements in the upcoming quarter.
- 10.3 The Committee acknowledged that the recommendations have been addressed as far as possible and that further work will depend on the audit process, expressing hope that preparations will satisfy audit requirements. Laura Howard added that having more historic performance target information will support the development of the required disclosures.
- 10.4 The Committee were content with the report and confirmed it provided them with assurance.

11. End of year accounts and dissolution of NES

(NES/AR/26/10)

- 11.1 The Chair welcomed Christina Bichan to the meeting, who was in attendance to answer any questions regarding planning.
- 11.2 Jim Boyle outlined extensive ongoing work to prepare NES and NSS for the new organisation's launch, focusing on ensuring an orderly dissolution and wind-down of NES. Jim Boyle gave an overview of the governance structure, including a Scottish Government led programme board and a NES implementation oversight group with subgroups for people, operations, governance, communications, leadership, and legislative matters, all working to identify and mitigate key risks for day one readiness.
- 11.3 Jim Boyle informed the Committee that the statutory order for the transition has been finalised and will proceed through the parliamentary process using the negative procedure for efficiency.
- 11.4 The Committee noted that work is progressing well in relation to payroll, finalising NES annual accounts, drafting the Board annual report, and coordinating with HMRC and the bank for final financial wind-down, with procedures and protocols now agreed. Jim Boyle emphasised that work is moving quickly and will continue to evolve as the transition approaches.
- 11.5 The Committee asked where the most significant NES controlled risks remain. Jim Boyle highlighted the ongoing management of payroll migration and financial closedown activities, explaining that both risks have been mitigated to tolerable levels through close collaboration with NSS and the Scottish Government. Christina Bichan added that NES's internal governance remains strong, with most risks now rated green following submission of the assurance statement, aside from one amber

risk linked to the new organisation's name and its impact on staff pay transfer timelines.

11.6 A comment was raised regarding the importance of NES continuing to maintain its own risk records during the transition to ensure nothing is overlooked. Karen Reid confirmed that NES has a clear internal governance structure for tracking risks. The Committee noted that the strategic risk register has been updated and suggested improving visibility of overall programme level risks. **Action: JB**

11.7 The Committee thanked colleagues for the report and confirmed it provided them with assurance.

11.8 The Chair thanked Christina Bichan for her attendance and she left the meeting.

12. Corporate Governance Package - Board Standing Orders, Board Code of Conduct, Board Scheme of Delegation, Board Standing Financial Instructions and Committee Terms of Reference (NES/AR/26/11)

12.1 The Chair invited Drew McGowan to introduce the Corporate Governance Package for annual review and approval for submission to the Board on 05 February 2026.

12.2 Drew McGowan outlined that the Board Corporate Governance Package has been submitted to the ARC for strategic overview and review and advised that minor, largely administrative, changes have been made. The Committee noted the changes as highlighted in the table at 6.2 in the paper and that the package was made up of the following elements:

- Board Standing Orders
- Board Code of Conduct
- Board Scheme of Delegation
- Standing Financial Instructions (SFIs)
- ARC Terms of Reference (ToRs)
- Remuneration Committee ToRs
- Staff Governance Committee (SGC) ToRs
- Education and Quality Committee (EQC) ToRs
- Generic Committee ToRs

12.3 The Committee acknowledged the significant work involved in maintaining and updating the governance documents. The Committee highlighted that the lack of comments reflects strong governance practices and thanked Drew McGowan and the team for their work.

12.4 The Committee approved the Corporate Governance package for onward progression to the 05 February 2026 Board.

13. ARC delegated Strategic Key Performance Indicator (SKPI) report (NES/AR/26/12)

- 13.1 The Chair welcomed Debbie Lewsley to the meeting and invited her to present paper.
- 13.2 The Committee noted the progress of all four of the SKPIs relevant to the ARC for the period Quarter 2, 2025/2026.
- 13.3 The Committee asked if there had been any alignment with NSS regarding performance indicator methodologies, noting the importance of harmonising systems. Jim Boyle confirmed that this would be an early task for the new organisation, with a review of processes and methodologies planned to adopt best practices from both NES and NSS. Karen Reid added that she had reviewed NSS SKPIs and found fundamental differences, especially in how targets are baselined, and offered to update the Chair of NES further in a future discussion. **Action: KR**
- 13.4 The Committee noted that NES would maintain its current SKPIs until directed otherwise. The Committee approved the presented SKPIs and the proposed change to SKPI-34.

14. Strategic Risk

a) Q3 Risk Report, including delegated ARC risks (NES/AR/26/13)

- 14.1 The Chair invited Debbie Lewsley to introduce the Q3 strategic risk update for 2025/2026.
- 14.2 Debbie Lewsley updated that most strategic risks are stable or improving, with several key risks reducing funding, corporate infrastructure, ADP delivery. Debbie informed the Committee that one risk regarding Business Systems Replacement delays has increased and that strategic risk 11, regarding stakeholder learning outcomes remains very high.
- 14.3 The Committee noted that 33% of risks sit outwith Board appetite, mainly in Finance and Governance and were content with the amended scoring and working of strategic risks 2, 5, 17, 18 and 11.
- 14.4 The Committee noted that at directorate level, 30 risks are aligned to ARC, mostly Operational, with the majority now medium rated.
- 14.5 The Committee queried why risk 18 had increased. Jim Boyle explained that programme delays have compressed timelines and heighten resourcing pressures. Karen Reid added that the transition to the new Board may reduce this risk.
- 14.6 A query was raised regarding board involvement in the business systems replacement programme and a concern was raised that there has not been enough consideration regarding artificial intelligence (AI). Jim Boyle confirmed that NES will have greater involvement in this programme of work post-transition and Karen Reid assured the Committee that AI is being factored into future planning.

14.7 The Committee were content that risks are being actively managed. The Committee approved the Strategic risks, scorings and overall control ratings.

b) Annual Review of Strategic Risk, Risk Appetite (NES/AR/26/14)

14.8 The Chair invited Debbie Lewsley to introduce the paper.

14.9 Debbie Lewsley presented the annual review, outlining changes made to the risk register over the year, including new risks, revised titles and scores, and improvements to risk management processes.

14.10 The Committee approved outlined changes including the risk appetite, confirming that the current scoring thresholds in the risk appetite matrix remain appropriate. The Committee approved the proposal to remove strategic risks 2 and 5 and to reword and rescore the remaining risks in preparation for transition to the new organisation. The Committee approved the agreed changes to be submitted to the Board for final approval.

14.11 The Chair thanked Debbie Lewsley for her attendance and Debbie Lewsley left the meeting.

15. Salary Overpayments update and Overpayments Policy (NES/AR/26/15)

15.1 The Chair invited Laura Howard to present the paper.

15.2 Laura Howard reported a 46% reduction in salary overpayments this year. The Committee noted that 58% of salary overpayments have already been recovered and that it is anticipated that a total of 82% will be recovered. Laura Howard explained that the improvements are attributed to actions from the lead employer programme team and internal audit recommendations.

15.3 The Committee noted that all internal actions have been implemented, with evidence of progress shown in the numbers, though some audit evidence is still pending.

15.4 Laura Howard presented the draft Overpayments Policy and informed the Committee that this has been approved by the NES Executive Team and Partnership Forum. The policy clarifies the procedures for under and overpayments with an emphasis on providing the right level of support for staff.

15.5 The Committee asked for more information on the process for writing off high value overpayments. Laura Howard explained that NES makes multiple attempts to contact individuals, involving workforce, legal teams and, if needed, a debt recovery agency, with each case considered individually.

15.6 A concern was raised about continuity during the transition to the new organisation. Laura Howard confirmed that repayment plans will continue without disruption, with all liabilities transferring into the new Board. Jim Boyle added that write-offs do not prevent future recovery if circumstances change.

- 15.7 The Committee asked for more information regarding how staff are supported. Laura Howard explained that staff are directed to external support services when notified of overpayments. Laura Howard confirmed that NES does not give financial advice, people are signposted to appropriate organisations and financial hardship is considered when making decisions.
- 15.8 A further question was raised regarding tax implications and Karen Reid noted that repayments taken through payroll automatically adjust tax, while other arrangements may require individuals to contact HMRC.
- 15.9 The Committee noted the update for assurance and approved the Policy.

16. Counter Fraud Update

(NES/AR/26/16)

- 16.1 The Chair invited Laura Howard to present the paper.
- 16.2 Laura Howard reported that NES continues to strengthen its counter fraud work, with six national fraud alerts issued, two cases referred to Counter Fraud Services and one potential fraud identified through the National Fraud Initiative.
- 16.3 The Committee noted that NES now meets eleven of the twelve Counter Fraud Standard components, with the final element progressing at a national level. The Committee noted that the annual Fraud Action Plan remains on track with no new fraud risks emerging this quarter.
- 16.4 Laura Howard updated that over 1,000 matches were reviewed as part of the 2024/2025 National Fraud Initiative (NFI) exercise, which resulted in one potential fraud case. The Committee noted the ongoing work on outcome based metrics and continued promotional activity, including International Fraud Awareness Week.
- 16.5 The Committee asked about the timing of the annual fraud standard statement Laura Howard responded that it is approved annually and may go to the final NES Board, to the ARC via correspondence or transfer to the new organisation depending on the transition timelines.
- 16.6 The Committee noted the report and confirmed it provided assurance that NES is fulfilling its requirements to Counter Fraud in the NHS.

17. Climate Emergency and Sustainability

(NES/AR/26/17)

- 17.1 The Chair invited Jim Boyle to update the Committee on progress against the NES Climate Emergency and Sustainability Action.
- 17.2 Jim Boyle reported that NES is making steady progress on its Climate Emergency and Sustainability Action Plan, with over half of actions now complete, a third on track, and none rated red.
- 17.3 The Committee noted the key achievements, including the expanded online learning, the strengthened antimicrobial stewardship work, the cloud first digital improvements, and the engagement with suppliers on carbon reduction.

- 17.4 The Committee noted the actions relating to waste reporting and that estate changes remain constrained pending the transition to the new Board.
- 17.5 Jim Boyle highlighted two core areas of NES's climate activity: reducing its own direct emissions and influencing wider NHS Scotland through training and education. The Committee noted that the updated action plan shows continued improvement, with several actions moving from green to completed status.
- 17.6 Jim Boyle updated the Committee on NES's active participation in national events, including the Net Zero NHS Scotland conference and the upcoming Education for Sustainable Healthcare event at the Scottish Parliament. Jim Boyle also confirmed that NES's annual climate report has been submitted and published. The report received positive feedback from the Scottish Government, particularly for the 5.5% reduction in direct emissions.
- 17.7 The Committee requested more detail on the government's positive feedback, asked for a post event update from NES representatives attending the parliamentary session and queried integration with NSS's practical emissions work.
- 17.8 Jim Boyle confirmed combining best practice will be a priority for the new organisation. Karen Reid emphasised the World Health Organisation's view of climate as the largest global health risk and suggested including a summary of the parliamentary event in the Chief Executive's March Board report. **Action: JB**
- 17.9 The Committee confirmed they were content with the report and that it provides assurance.

18. Audit Scotland Reports

- 18.1 The Committee noted the following Audit Scotland Reports:
- a) Financial sustainability and taxes
 - b) Revenue Scotland annual audit 2024/25
 - c) Scottish Fiscal Commission annual audit 2024/25
 - d) Scottish Government: Scottish Consolidated Fund annual audit 2024/25
 - e) NHS National Services Scotland annual audit 2024/25
 - f) Risk Management Authority annual audit 2024/25
 - g) NHS in Scotland 2025: Finance and performance
 - h) Climate change annual report 2024/25

18.2 James Lucas and Syed Shah left the meeting.

19. Private item: Extension to Internal Audit Contract (NES/AR/26/18)

- 19.1 The Chair invited Jim Boyle to present the paper.
- 19.2 Jim Boyle explained that the current internal audit contract with KPMG, held through a consortium of national Boards, includes options for extension and there is broad support for continuing it given strong performance.

- 19.3 The Committee approved the recommendation to extend the contract to ensure continuity as the new Board is established, noting that the audit plan would be recalibrated for the new organisation and that commercial terms would be worked through.
- 19.4 The Committee queried whether NES could approve an extension given it will soon cease to exist. Jim Boyle confirmed that the contract is expected to be novated to the new Board without issue. Karen Reid emphasised that any extension agreed now should be homologated by the new Board at its first meeting. **Action: JB**
- 19.5 The Committee approved the recommendation in principle, noting that final approval will rest with the new Board.

20. Review of Meeting Effectiveness

- 20.1 The Committee agreed that the meeting had been effective, noting productive discussion despite NES being in a transitional phase ahead of dissolution.
- 20.2 A question was raised about how the Committee would formally conclude its business given no further meetings are scheduled. Drew McGowan confirmed that the Committee would not be formally dissolved at this meeting, ensuring it can address any extraordinary business that may arise before NES is officially dissolved, with any remaining business handled via correspondence or at the final NES Board meeting.

21. Date and time of next meeting

- 21.1 It was noted that this meeting would be the last formal meeting of the NES ARC.
- 21.2 It was noted that a private meeting between ARC members and Auditors would take place after the meeting.

NES
January 2026
JA/AG/JF/

NHS Education for Scotland

PLANNING & PERFORMANCE COMMITTEE (PPC)

28 January 2026 from 10:15am to 12:55pm

Draft minutes of the fourth meeting of the Planning & Performance Committee (PPC) held on Wednesday 28 January 2026 as a hybrid meeting, in person at the Bothwell Street Office, Glasgow and via Microsoft Teams

Present: Ally Boyle (AB), Committee Chair
Jean Ford (JF), Non-Executive Director
David Garbutt (DG), Board Chair
Annie Gunner Logan (AGL), Non-Executive Director
Angus McCann (AM), Co-opted Member

In Attendance: Christina Bichan (CB), Director of Planning, Performance and Transformation
Jim Boyle (JB), Director of Finance
Rob Coward (RC), Principal Educator
Chris Duffy (CD), Senior Admin Officer, Minute-Taker
Nancy El-Faragy (NEF), Specialist Research Lead, Planning
Laura Howard (LH), Deputy Director of Finance
Kevin Kelman (KK), Director of NHSS Academy, Learning and Innovation
Debbie Lewsley (DL), Manager, Planning
Stephen McNamee (SM), Head of Corporate Improvement
Jacqueline Melville (JM), Head of Service, Planning
Lorraine Scott (LS), Associate Manager, Planning
Alison Shiell (AS), Manager, Planning
Christopher Wroath (CW), Director of NES Technology Service
Alan Young (AY), Principal Lead, Finance

1. Welcome and Introductions

1.1 The Committee Chair welcomed all to the meeting.

2. Apologies for absence

2.1 Member apologies were received from Nigel Henderson and Olga Clayton.

2.2 Regular attendee apologies were received from Karen Reid, Chief Executive and Drew McGowan, Board Secretary.

3. Declarations of interest

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

4. Previous Minutes of PPC meeting held on 10 November 2025

4.1 The Committee approved the 10 November 2025 PPC minutes as an accurate record of the meeting.

5. Action Log

5.1 The Committee reviewed the 12 actions on the log, noting 9 were marked as complete with 1 scheduled to close after the NES Board meeting. 2 actions were recommended for closure and the Committee agreed that these could be closed.

5.2 The Committee approved the action log.

6. Notification of any other business

6.1 There was no other business identified.

7. Risk

7.1 Q2 Strategic Risk Report

7.1.1 The Committee Chair welcomed Debbie Lewsley to the meeting and invited her to introduce the report. Debbie Lewsley presented the quarter 3 update on the Committee's risk register, summarising 10 strategic risks under the Committee's remit. The following changes in risk ratings was reported, strategic risk 5 and 17 decreased due to improved resource planning and operational progress, while strategic risk 18 increased due to programme delays. Ownership of strategic risks 5 and 19 were transferred to relevant directorates following a review of all risk owners. Debbie Lewsley highlighted that a comprehensive review of all strategic risks will be conducted before the transition to Public Services Delivery Scotland with the approach endorsed by the Audit and Risk Committee, pending Board approval. The report also included an overview of 30 directorate risks aligned to PPC, with a dashboard summary provided.

7.1.2 The Committee Chair opened the report for comments and questions.

7.1.3 The Committee queried the increased net likelihood of strategic risk 18, asking whether the programme delay should be a concern and if it would be discussed further in the meeting. Debbie Lewsley responded, strategic risk 18 is not scheduled for further discussion in this meeting, but the delay is due to procurement issues and a revised contract award date. It was noted that this delay could impact all Boards in Scotland, and increased visibility of the associated risks may be needed at Board level before the end of March.

7.1.4 The Committee asked a further question regarding strategic risk 18, noting that the delay in the programme may be making staff recruitment more difficult, suggesting that Christopher Wroath would be exposed to this risk. Christopher Wroath and

Jim Boyle responded that the executive team is conducting deep dives to review all risks, determine which should be escalated or retired, and clarify how risks will be packaged for the new organisation. They indicated that the wording of most risks will be revisited and that the full package of risks, including this one, will be brought to the Board before the end of March.

- 7.1.5 The Committee asked about the review of strategic risk logs prior to organisational transition, specifically seeking information on work underway to analyse and integrate risks from both Boards. Jim Boyle responded that both legacy Boards will review and determine which strategic risks to transfer to the new organisation, with the new Board and its committees responsible for approving the strategic risk register. He confirmed that this process is being taken forward by the executive team and will be an early priority for the new organisation.
- 7.1.6 The Committee highlighted the significant risk of a lack of joined-up thinking and planning across NHS Scotland, referencing a paper from a sub-national group that omits national boards and suggesting this risk be formally registered. Christina Bichan agreed to raise these concerns at the next national Directors of Planning Group meeting. **Action: CBI**
- 7.1.7 The Committee recommended that future reporting on Directorate risks should include a succinct table showing high and very high risks with their descriptions, so the committee can easily identify which may need to be escalated to strategic risks. **Action: DL**
- 7.1.8 The Committee approved the risk register for onward sequencing to the Board.

8. Executive Leads Report

8.1 Executive Leads Report

- 8.1.1 The Committee Chair invited Christina Bichan to introduce this report. Christina reported the significant progress toward achieving Equally Safe Work accreditation before the transition to the new organisation, emphasising the importance of carrying forward such accreditations. Christina noted the confirmation of the new organisations name (Public Services Delivery Scotland) and that the transition is in week 32 of 40. Christina emphasised the focus on maintaining delivery of the Annual Delivery Plan and organisational priorities, ensuring business continuity and preparing for a smooth transition with active work underway to coordinate efforts over the next weeks and months.
- 8.1.2 Christopher Wroath provided an update on the digital front door project, noting tranche one went live in Lanarkshire on time and without technical issues, with learnings drawn for future phases. A ministerial instruction to move to whole population availability for the April go-live, and the requirement to deliver downloadable native apps alongside the dynamic web app, with recommendations presented to Scottish Government. Christopher Wroath reported confidence in building the apps and going live with the web version but noted uncertainties around App Store approval and secure identity interactions. He confirmed

agreement from the Chief Operating Officer for necessary funding, though written confirmation was still pending and causing some issues. Christopher highlighted completion of the digital learning infrastructure business case, moving to a hybrid model based on government review recommendations. Christopher drew attention to the delivery of the master of CHI API, a key technology for linking health and social care data, with COSLA planning to use CHI as a unique identifier.

- 8.1.3 The Committee queried the take-up of the digital front door in Lanarkshire, noting it was lower than hoped, and asked what actions were being taken to increase uptake. He also inquired about aspirations and plans for national take-up, referencing recent comments by the First Minister and the need for a managed approach as the service expands to the whole population. Christopher Wroath responded that in Lanarkshire, uptake is driven by the dermatology specialty, which manages direct communications with patients. He clarified that the programme team does not currently own responsibility for driving numbers up in Lanarkshire; this lies with the local board. For the national rollout, a comprehensive communications and engagement plan is being developed by the Scottish Government, who will control publicity and engagement. Christopher noted that the programme is cautious about promoting mass sign-up on day one to avoid overwhelming support systems and highlighted risks related to data quality and support capacity. He agreed that for Lanarkshire, higher uptake is desirable for learning and committed to raising the issue with the programme board to seek additional support for increasing uptake locally. **Action: CW**
- 8.1.4 The Committee raised concern that non-executive directors are not receiving enough information to assure themselves about project progress, funding and delivery, especially regarding IT and the digital front door. The Committee Chair acknowledged the issue, suggesting the Committee needs to distil key areas of concern and find a way to present them for assurance without creating unnecessary reporting burden. Christopher Wroath clarified that all relevant information is available in formal reporting structures and that the executive team maintains oversight but agreed to provide any additional information required for assurance. The Committee agreed that the Board Chair will discuss these concerns and the need for improved assurance with Karen Reid, Chief Executive. **Action: DG**
- 8.1.5 The Committee expressed support for the organisation's direction in focusing on population health and the health inequalities fellows initiative, describing it as a great development. They suggested considering how to best utilise public health students for maximum impact, noting that deployment can sometimes be suboptimal.
- 8.1.6 The Committee thanked all for their contributions to the Lead Executives report and confirmed it provided the necessary assurance.

9. Finance

9.1 Q3 Finance Report

- 9.1.1 The Committee Chair invited Jim Boyle to introduce the Q3 Finance report. Jim Boyle presented the quarter three financial report for the 2025/26 year, noting it builds on the November committee report with updated and new information. He reported a forecasted underspend of £3.6 million (0.4% of the total budget), with 46% of the variance linked to budgets reliant on other boards for activity and funding dispersal, and 54% relating to baseline funded activity. Key variances included a £0.9 million underspend in the digital infrastructure project due to business case delays, increased vacancy lag from recruitment delays, and under-recruitment in dental trainees. The main area of pressure was a shortfall in employer National Insurance funding, reduced from £1.9 million to £1.2 million after discussions with Scottish Government. Jim Boyle confirmed all pay awards have been funded except for the final element of the Resident Doctor's Pay award, with government commitment to full funding once resolved. Jim Boyle referenced ongoing monitoring of risks related to Public Services Delivery Scotland, medical act funding, and project completion timelines, and reported strong progress with Scottish Government on outstanding allocations.
- 9.1.2 The Committee asked for clarification regarding the use of Medical Act funding, specifically expressing concern about transferring revenue into capital for Boards with limited capital spend. He questioned the appropriateness of providing capital assets to Boards using Medical Act funds and referenced a past instance where a Board purchased flats for doctors with such funding, seeking assurance on the rigor of project scrutiny. Jim Boyle explained that NES does not have its own capital allocation and relies on territorial Boards, which use capital for asset refresh. He clarified that any capital bids supported by NES must directly enhance training and education, not general asset improvement. NES scrutinises all bids to ensure compliance, and the process involves surrendering revenue to government, which then provides capital cover. Jim acknowledged past issues and assured that processes have since been strengthened, with rigorous scrutiny now in place to prevent inappropriate use of funds.
- 9.1.3 The Committee asked for assurance on whether there were any surprises in the financial run-outs, specifically regarding the accuracy of directorate predictions versus actual financial outcomes, and inquired about the process for identifying issues early. Jim Boyle responded that monthly monitoring is conducted with directorates to identify variances early. He highlighted that significant variances, such as those in the digital learning infrastructure project, are picked up through detailed monitoring and reported to the executive team and the board. Jim Boyle assured that the system in place is effective for early detection and management of financial issues.
- 9.1.4 The Committee approved the finance report with no further questions or objections raised.

9.2 Provisional Financial Planning Update 2026/27 to 2028/29

- 9.2.1 Jim Boyle presented an update to the Committee on the provisional financial planning process, noting that a final financial plan will be brought to the Board at the end of March for consideration and sign-off. He explained that the financial planning is aligned with Scottish Government reporting requirements, with a

provisional update due in early February and final plans to be scrutinized by the principal funder. Jim Boyle highlighted that the report includes the recent budget announcement from Scottish Government, which was largely in line with expectations, and that directorates are working on operational and financial plans in tandem, with a focus on achieving required efficiency savings.

9.2.2 The Committee asked for further information on the national budget context between this year and next year, especially after pay rises, and how this affects the financial position and capacity of health boards. Jim Boyle explained that all boards are expected to deliver a balanced financial plan, but territorial boards have struggled due to ongoing pressures, often relying on non-recurrent savings and brokerage with Scottish Government. He noted that most additional funding is allocated to pay awards, leaving little room for capacity expansion. Jim summarised that the situation remains extremely tight, with national boards generally managing to deliver balance, except for those at the front line like the ambulance service.

9.2.3 The Committee confirmed the report provided the necessary assurance.

10. Performance

10.1 Draft 2026/27 Annual Delivery Plan (ADP)

10.1.1 The Committee Chair invited Christina Bichan to introduce the ADP. Christina Bichan highlighted that the planning process was collaborative with directorates and recognised the unique circumstances of the current year, including the transition to a new organization. It was noted that planning principles were set out in the appendix, and the deliverables for the year ahead were detailed in Appendix 2. Christina Bichan explained that, despite efforts to rationalise, the number of deliverables had slightly increased to ensure clarity and oversight during the transition. It was emphasised that the plan was developed without a formal government planning letter, but the team felt well prepared for the expected requirements given the range of guiding strategic documents published by Scottish Government in recent months, such as the Service Renewal Framework. Christina Bichan also stated that initial discussions had taken place with colleagues in NSS to align planning arrangements, with the expectation that the new Chief Executive would want to move toward a cohesive plan for the new organisation in due course.

10.1.2 The Committee had no questions on the ADP and approved the report as presented.

10.2 Governance of externally commissioned activity

10.2.1 The Committee Chair invited Jacqueline Melville to introduce this report. Jacqueline Melville introduced the paper on internal governance of external programmes, confirming that the final four deep dives (Armed Forces Talent Programme, Centre for Workforce Supply, Social Care/Realistic Medicine and Value Based Health Care, and Digitally Enabled Workforce) had been completed. She reported that no new issues were raised and all improvements are being

taken forward at programme level. Jacqueline Melville outlined that, following the deep dive phase, a next steps session with the executive team was held, with findings and suggestions detailed in the paper. It was highlighted that work to embed improved oversight and methodology was ongoing, with a further session planned in March to consolidate learning and ensure organisational-wide application, focusing on policy alignment, strategic KPIs, and benefits realisation.

- 10.2.2 The Committee asked about the alignment process for governance of externally commissioned activities between NES and NSS, expressing interest in ensuring that learning from both organisations is not lost during the transition to the new body. Christina Bichan responded that initial discussions have started regarding approaches to data and governance, noting that NES and NSS have different thresholds and mechanisms but both are robust. It will be for the leadership team in the new organisation to progress in due course under the direction in of the Chief Executive, and learning from the past year will be valuable in those considerations.
- 10.2.3 The Committee sought clarification on whether the Armed Forces Talent Management Programme extends beyond service leavers to include the wider Armed Forces community, noting that many individuals transition from the services with family members who possess valuable skills relevant to health and social care. Jacqueline Melville responded, the Programme Lead confirmed that the initiative explicitly encompasses the whole Armed Forces community. This includes service leavers, their partners and family members. It was highlighted that comprehensive stakeholder mapping and feedback from across this broader community have been integral to the programme's design and are considered a key strength, providing a rich evidence base to inform ongoing development.
- 10.2.4 The Committee noted the report and the approach being taken to strengthen governance and scrutiny in this area.

10.3 Q3 Whole Board Delivery Report

- 10.3.1 The Committee Chair welcomed Alison Shiell to the meeting to introduce this report. Alison Shiell introduced the Quarter 3 update on NES's delivery performance against the 2025–26 Annual Delivery Plan. It was noted that the report had been prepared prior to confirmation of the new organisational name and all references to NHS Delivery will be updated to reflect Public Services Delivery Scotland. The Committee was advised that, as at the end of Quarter 3, overall ADP delivery stood at 88.5%, with 169 of 191 deliverables completed or on track. This represents a 1.5% improvement since Quarter 2. A total of 21 deliverables were reported as delayed, of which 19 reflect minor delays and two were assessed as significantly off track. Only one delayed deliverable—the Digital Learning Infrastructure Programme—remains contingent on final funding confirmation. The Committee noted that, while the overall number of delayed deliverables has marginally reduced, delays within NTS activity have increased due to resources being diverted to support the Digital Front Door programme. Performance was considered in the context of the wider organisational transition to Public Services Delivery Scotland, with assurances provided that delivery continues to compare favourably with previous years despite this additional

pressure. Two regulatory deliverables were highlighted as delayed due to factors outside NES's control: (1) the University of Aberdeen's decision to suspend dental technician student intake for 2025–26, and (2) issues arising following the go-live of the Medical Devices Data Hub, requiring NTS to prioritise data integrity work. Revised Quarter 4 milestones have been agreed for both. The Committee commended positive position in respect of delivery performance.

- 10.3.2 The Committee sought assurance regarding the delay to Deliverable 26.2, noting that it had arisen from an external decision by a single education provider. The Committee highlighted the wider organisational vulnerability created when key deliverables depend on single provider arrangements—particularly within the public education sector, where financial pressures may lead to sudden changes in provision. The Committee asked how such systemic vulnerabilities are identified early, mitigated, and reflected within the corporate risk framework. The Committee also suggested an enhancement to the reporting format, proposing that future quarterly reports include predicted delivery trajectories. This would allow the Committee to distinguish between minor delays likely to be recovered within the next quarter and delays with material impact on yearend delivery. Alison Shiell and Christina Bichan confirmed that the concern regarding single provider dependency is valid and already observable within dental education, where resilience work is underway. The risk is recognised as one that could recur in other areas. The directorate will therefore take forward further analysis of single provider vulnerabilities at an operational level and consider how best to incorporate this into ongoing risk assessment and planning processes.

Action: AS

- 10.3.3 The Committee approved the Q3 delivery report for onward sequencing to the Board.

10.4 Q3 Strategic Key Performance Indicator (SKPI) Report

- 10.4.1 The Committee Chair invited Debbie Lewsley to introduce the Q2 SKPI Report. The Committee received the Quarter 3 update on the Strategic KPIs prior to submission to the NES Board. It was noted that data was available for 80% of KPIs, with development work continuing for the remaining measures. Interim reporting solutions for several education related indicators are progressing, with full data expected in Quarter 4 or Quarter 1 of 2026–27. During the reporting period, 66% of KPIs were assessed as Green, representing a 6% improvement from Quarter 2 and a corresponding reduction in Red and Amber statuses. A review of KPI ownership was completed ahead of Quarter 3, resulting in the reallocation of several measures to the People & Culture, Planning Performance & Transformation, and NTS Directorates. Data was recorded for 21 metrics. The Committee noted positive progress, including reduced vacancy rates for medical and dental funded trainee placements—both now reporting Green—and confirmation that NES remains on course to meet or exceed all agreed savings plans. Work continues to ensure all outstanding audit actions are completed by March ahead of organisational transition. A decrease in advertised vacancies and an early stabilisation in sickness absence levels were also highlighted. Two amendments to the KPI framework were presented: (1) SKPI 34 to be revised to measure EPC ratings rather than CO₂ emissions, as endorsed by the Audit and

Risk Committee; and (2) expansion of SKPI 14 to cover all training groups, as approved by the Education Quality Committee. Updated measures will be brought forward for final approval in Quarter 4. The Committee also received an update on enhancements to the reporting dashboard, including the introduction of Statistical Process Control charts, with further conversion planned for Quarter 4. The Committee was invited to approve the Quarter 3 update and the proposed amendments.

10.4.2 The Committee Chair thanked Debbie Lewsley for the introduction and opened the report for questions.

10.4.3 The Committee raised concern that the report did not outline how the Strategic KPI framework would transition into Public Services Delivery Scotland, given the substantial development work invested and the importance placed on the framework by the Committee. The Committee sought assurance that the approach would not be lost or diluted during organisational change. In response, Christina Bichan confirmed that there is no intention for the KPI framework to be discontinued. The current NES developed performance measures are recognised as fundamental to understanding organisational performance across NES@s statutory functions and will be retained and carried forward into the new organisation, at least on an interim basis while PSD Scotland arrangements are developed. Christina Bichan further explained that, while governance structures and reporting levels may evolve as Public Services Delivery Scotland establishes itself, the need for an underlying monitoring and measurement system which evidences performance in respect of education, training, workforce development, workforce data and compliance will be maintained. Work to address data gaps and enhance reporting capability will continue during transition. The Committee was advised that planning efforts to date have necessarily focused on ensuring day one operational readiness within very limited timescales. Wider structural and governance arrangements will be developed post 1 April, once the new Chair, Chief Executive and Executive Team are in place.

10.4.4 The Committee approved the Q3 SKPI Report.

10.5 Q3 Complaints Report

10.5.1 The Committee Chair invited Rob Coward to introduce this report. Rob Coward presented the Quarter 3 Complaints Report, noting that a total of six complaints were received during the period, consistent with the low volume typically observed. The majority of complaints related to trainee employment matters, including relocation, pay accuracy, recruitment processes, and job applications. It was confirmed that learning actions had been identified and applied in response to each complaint. The Committee noted that while a small number of cases exceeded the standard handling timescales, the overall caseload remains low and is being managed effectively. The Committee was invited to review the report and seek further detail as required.

10.5.2 The Committee confirmed the report provided the necessary assurance.

11. Horizon Scanning

11.1 Horizon Scanning Report

- 11.1.1 The Committee received the Horizon Scanning Report, which provided a high-level strategic overview of recent national publications relevant to NES's statutory functions and business priorities. It was noted that summaries of the reviewed publications were included in Appendix 1, with full documents available on request. The assessment section outlined key emerging themes and their alignment to NES's strategic planning and transition work.
- 11.1.2 The Committee observed the significant analytical effort invested in synthesising diverse publications into a coherent set of strategic implications for the new organisation. The Committee highlighted the value of this work as Public Services Delivery Scotland is established.
- 11.1.3 The Committee discussed the importance of incorporating not only formal external publications but also softer intelligence—such as insights arising from subnational planning groups and the implications of the new organisational name—into future horizon scanning outputs. It was agreed that such intelligence would be captured more systematically through the Policy and Public Affairs function.
- 11.1.4 The Committee also noted the relevance of the report's themes to digital workforce and learning infrastructure priorities. A suggestion was made that similar strategic analyses would be beneficial for the Board and Executive Team through more extended discussion sessions. Christina Bichan confirmed that the horizon scanning material has been shared with the Executive Team and is expected to inform early strategic development for Public Services Delivery Scotland.
- 11.1.5 The Committee took assurance from the report.

12. Health Inequalities

12.1 Health Inequalities Report

- 12.1.1 The Committee received an update on progress against the five agreed health inequalities objectives. It was noted that funding for the Specialist Lead for Health Inequalities has been extended to March 2027, ensuring continuity during organisational transition. The Committee was informed of sustained awareness raising activity across NES, including Learning at Work Week sessions, Leading to Change seminars, Health Literacy Month contributions, and a well attended all-staff webinar delivered with external partners from the University of Glasgow and Public Health Scotland. Work is underway to strengthen accessible communication, with new infographics nearing completion. Progress was reported in embedding a health equity approach within education and training. A dedicated TURAS Learn page is being developed, now reframed around population health to reflect national direction. A short life working group, with representation from all Directorates, has produced draft educator guidance to support consistent application of a health equity lens in commissioning and quality assurance. In respect of needs assessment and longer term planning, the Committee noted that organisational change will require additional time to establish baseline awareness and define an appropriate ambition for Public Services Delivery Scotland within the wider national policy context. Strong internal and external collaboration continues, including joint work with Equality and Diversity colleagues, contributions to the Digital Front Door EQIA, and engagement with Public Health Scotland and Scottish Government. Further partnership opportunities are being explored.
- 12.1.2 Preparatory work has begun to align future outcomes, indicators and benefits with the strategic KPI framework, recognising that final measures will be shaped by the developing ambitions of the new organisation.
- 12.1.3 The Committee welcomed the progress made, commended the contribution of the Specialist Lead, and discussed the importance of ensuring health inequalities remains central to the remit of Public Services Delivery Scotland. The Committee expressed concern about the potential loss of momentum during transition. Christina Bichan confirmed that health inequalities remains a priority through the commitments made in the 26/27 ADP and given the ambitions of the Services Renewal Framework and Population Health Framework, is expected to be a priority for PSD Scotland.
- 12.1.4 The Committee confirmed the report provided the necessary assurance.

13. Transformation and Corporate Improvement

13.1 Corporate Improvement Highlight Report

- 13.1.1 The Committee Chair welcomed Stephen McNamee to the meeting to introduce this report. The Committee received the Quarter 3 Highlight Report for the Corporate Improvement Programme, which coordinates NES's internal transformation and improvement activity. It was noted that the programme

continues to provide a structured and disciplined approach during a period of significant organisational change and in preparation for transition to the new organisation. It was reported that delivery momentum has been maintained over the quarter, including the navigation of key decision points, particularly regarding digital investment, to ensure that improvements are robust, scalable and transferable. Delivery continues to be guided by the established three and six-month planning cycle, which remains an effective mechanism for prioritisation and sequencing of work within limited resources.

- 13.1.2 The report outlined current progress, governance arrangements and key delivery risks across the portfolio. The Committee noted that risks are actively managed through programme boards and a revised governance structure.
- 13.1.3 The Committee confirmed it was assured by the progress described and the actions underway to maintain programme delivery.

14. Governance

14.1 Public Services Delivery Scotland/TUPE Transfer

- 14.1.1 The Committee Chair welcomed Sybil Canavan to the meeting to present the TUPE Transfer item. The Committee received an update on the governance and progress of staff transfer arrangements to Public Services Delivery Scotland, effective 1 April. It was noted that formal consultation, running from 10 November to 8 February, has been undertaken in partnership with trade union colleagues, providing opportunities for staff to raise questions individually and collectively. Updated documentation, including FAQs and a staff proforma, has been made available on the intranet.
- 14.1.2 The Committee was informed that workstreams are in place to support the transfer, with close collaboration between NES and NSS colleagues through the People Workstream. Key preparatory activity includes compiling Employee Liability Information for submission to the new organisation, identifying any potential measures arising from the transfer, and updating documentation to reflect the new organisational name. No significant employment changes are anticipated during transfer, although some process alignment may be required. It was confirmed that, as set out in the consultation materials, a period of stabilisation will apply from 1 April 2026 to 1 October 2026, during which no formal organisational change will take place other than statutory requirements, including work relating to property changes. Joint teambuilding and familiarisation sessions between NES and NSS corporate functions have already commenced.
- 14.1.3 The Committee was advised that feedback received during consultation will be reviewed following the close of the consultation period. A formal response from Unison has been received, with early themes including concerns regarding capacity to support transition, partnership working, the absence of “NHS” in the new organisation’s name, pay modernisation timelines, and the importance of clear communication.

- 14.1.4 Finally, the Committee noted that, as a safeguard, Scottish Government has confirmed that the Fair Work and Equalities provisions will apply to the staff transfer, ensuring compliance with statutory obligations.
- 14.1.5 The Committee took assurance that appropriate governance and preparatory arrangements are in place ahead of transition.

15. Items for noting/homologation

15.1 Digital Learning Infrastructure Programme Board minutes

- 15.1.1 The Committee noted the Digital Learning Infrastructure Programme Board minutes.

15.2 Digital Learning Infrastructure Programme Board Terms of Reference

- 15.2.1 The Committee noted the Digital Learning Infrastructure Programme Board Terms of Reference.

16. Committee Effectiveness

- 16.1 The Committee Chair stated that the Committee is well served by lead executives and directors, with the right people attending and presenting at the appropriate level. The Committee identified an improvement action earlier in the meeting on how to gain more assurance from digital reporting.

17. Any other business

- 17.1 The Committee thanked Ally Boyle for his role as Chair of PPC.

18. Date and time of next meeting

- 18.1 There is not future meeting planned at the moment.

Approved by Committee Chair, Ally Boyle 12/03/2026.

NES
CD/
Mar 2025

Draft Minute

NHS EDUCATION FOR SCOTLAND

NES/SGC/26/XX

Draft Minute of the Ninety- first meeting of the Staff Governance Committee held on Thursday 19 February 2026, 10:15 – 12:25pm.

The meeting was held in hybrid format via Microsoft Teams and in-person at the NES Westport office in Edinburgh.

Present: Nigel Henderson (NH), Committee Chair
Lynnette Grieve (LG), Non-Executive Director / Employee Director
Shona Cowan (SCo), Non-Executive Director
Gillian Mawdsley (GM), Non-Executive Director, Whistleblowing Champion
James McCann (JMCC), Ex-Officio member, Staff Side (Unison)

In attendance: Sybil Canavan (SCa) Director of People and Culture
Ameet Bellad (AB), Senior Specialist Lead, Workforce (Item 08)
Christina Bichan (CBi), Director of Planning, Performance and Transformation
Nancy El-Farargy (NEF), Manager, Planning and Corporate Resources (Item 11)
Ann Gallacher (AG) Planning and Corporate Governance (Minute-Taker)
David Garbutt (DG), Chair of NES Board
Janice Gibson (JG), Associate Director, Organisational Development, Leadership and Learning (ODLL)
Laura Liddle (LL), Associate Director of People and Culture
Debbie Lewsley (DL), Planning and Corporate Governance Manager (Item 09)
Drew McGowan (DMcG), Board Secretary & Principal Lead for Corporate Governance

1.	Chair's welcome and introductions	
1.1	The Chair welcomed everyone to the 91 st Staff Governance Committee meeting.	
2.	Apologies for absence	
2.1	Apologies for absence were received from regular attendee: Karen Reid, Chief Executive.	
3.	Notification of any other business	
3.1	There were no notifications of any other business.	
4.	Declarations of interests	

4.1	As per the Model Code of Conduct, the Chair asked Committee members if there were any declarations of interest in relation to the business of today's meeting and if so, to clarify to which item this related.	
4.2	The Chair highlighted a connection relating to the TUPE Transfer Progress item on the agenda. This report came to the SGC for noting and he did not need to leave the meeting for this item.	
4.3	There were no other declarations of interest.	
5.	Draft Minutes of Staff Governance Committee meeting held on 06 November 2025	NES/SGC/26/02
5.1	The Committee highlighted a minor typographical error on the minutes.	
5.2	The Committee confirmed the minutes were an accurate record of the meeting and approved them with the typographical error amended.	
6.	Action Status Report and other matters arising	NES/SGC/26/03
6.1	The Committee noted that three actions were marked complete on the Action Log and there were no outstanding actions.	
6.2	The Committee approved the Action Log.	
	<u>Lead Executive Report</u>	
7.	Director of People and Culture Report	NES/SGC/26/04
7.1	The Chair invited Sybil Canavan to introduce the Director of People and Culture report.	
7.2	Sybil Canavan introduced the report. She highlighted the following key topics: Organisational Development Leadership and Learning (ODLL) work, the digital workforce capability and confidence work, the National Trainee Services work, the recruitment activity, and the Scotland Career website.	
7.3	Sybil Canavan thanked everyone in the directorate for all their hard work.	
7.4	The Committee welcomed the report and asked that the climate change question on the checklist is answered correctly going into the new organisation. Sybil Canavan will ensure the climate question is answered correctly in the new organisation.	
7.5	The Committee noted the two new requests in relation to Viva Engage and asked for more information on the special category data. Sybil Canavan agreed to circulate the special category data post meeting. Action: SCa	

7.6	The Committee suggested that Non-Executive Directors are invited to attend Anti-Racism webinars in the new organisation. Sybil Canavan responded that the Anti-Racism webinar was open to all staff.
7.7	The Committee asked about outcomes from the Sexual Misconduct training and how the learning is applied in NES. Sybil Canavan responded that these are addressed through the Once for Scotland Policy routes.
7.8	The Non-Executive Director, Whistleblowing Champion welcomed the progress on equality and diversity and asked how sexual discrimination and harassment would be monitored to ensure whistleblowing is considered.
7.9	Sybil Canavan advised that a robust model is in place, supported by close working with whistleblowing colleagues. Christina Bichan assured the Committee that robust processes are in place to ensure any whistleblowing issues are identified and addressed.
7.10	The Committee recommended that the anonymous incident reporting mechanism for discrimination and harassment is shared nationally.
7.11	The Committee welcomed the digital work underway to build staff confidence and capability and emphasised its importance when supporting the rollout of new platforms in the new organisation.
7.12	The Committee emphasised the need for more in-depth, role-specific training to support all Boards and staff across Scotland.
7.13	The Committee noted that the digital work will be taken forward by the new organisation, may not sit within the SGC remit, and remains an important training and confidence issue for the new organisation Board.
7.14	Sybil Canavan acknowledged the importance of this work and advised that wider support and learning opportunities are being explored. She reported that Gillian Russell, Scottish Government Director of Workforce, highlighted the importance of aligning learning across organisations.
7.15	The Employee Director expressed her appreciation for the effective work undertaken on the HR Service Desk, noted the reduced number of open tickets and the efficiency improvements.
7.16	The Employee Director asked for further information on the payroll discrepancy figure. Laura Liddle responded that a discrepancy could be one missing digit or a missing field when the system pulls the report. This is resolved during the reconciliation process with HR and Finance colleagues.
7.17	The Employee Director welcomed the work done on the Development Plan and noted it will support the transition into the new organisation.

7.18	The Employee Director asked if there was any data to measure this work. Janice Gibson responded that a Short Life Working Group reviews this data.	
7.19	The Committee noted that the Line Manager Handbook is updated with new policies, feedback from live forums and sense checked, and there is scope to further enhance the supporting metrics.	
7.20	The Committee noted that succession planning work has been progressed and implemented at a national level. Janice Gibson reported that succession planning is underpinned by a 360-degree assessment toolkit for Chief Executive, Director and Manager roles and the toolkit is accessed by an APP.	
7.21	The Committee asked if there was any update on changes to the iMatter questions. Janice Gibson responded that this remains a national piece of work.	
7.22	The Committee noted that two iMatter surveys will be undertaken in the new organisation, one for NES staff and one for National Services Scotland (NSS) staff and survey timings have been aligned to run concurrently.	
7.23	The Committee asked about engagement with NSS colleagues on organisational development. Janice Gibson responded that NES works in parallel with NSS colleagues and joins up wherever possible.	
7.24	The Committee noted that NHS ALI is an abbreviation of NHS Academy of Learning and Innovation.	
7.25	The Committee noted that future organisational changes may involve Golden Jubilee staff transferring out and back under TUPE, and the potential impacts of this on staff.	
7.26	The Committee asked in relation to Resident Doctors and Dentists trainees how many applications were received. Sybil Canavan agreed to circulate the GP Trainee statistical data post meeting. Action: SCa	
7.27	The Chair thanked all for the work done on the report and the Committee noted the Director of People and Culture report.	
7.28	Ameet Bellad joined the meeting at 11am.	
	<u>Performance Items</u>	
8.	Delegated Strategic Key Performance Indicators (SKPI) Report	NES/SGC/26/05
8.1	The Chair welcomed Ameet Bellad to the meeting and asked him to introduce the Delegated Strategic Key Performance Indicators (SKPI) Quarter 3 Report from 01 October to 31 December 2025.	

8.2	Ameet Bellad highlighted the workforce retention, vacancies, essential learning and sickness absence figures and the performance dashboard enhancements. Acting-up and secondment levels remain above target but are reducing in line with increased recruitment. He advised that the SKPI04 vacancy threshold number may need to be reviewed.
8.3	The Committee noted the pay equality figures for gender, disability, and ethnicity in SKPI06 following the removal of Doctors and Dentists in Training (DDiT) and asked if this was a concern. Ameet Bellad responded that Katy Hetherington leads on this work, this year's metrics will be reported on the next Employment Equality Monitoring and Equal Pay Report along with the mitigating actions.
8.4	Christina Bichan added that the Equally Safe at Work Group measure and monitor this data. She reported that work has taken place to understand the data and the complex factors that fit outwith it.
8.5	The Committee raised a concern that the data gives a Green and Amber RAG rating but removal of the DDITs gives it a Red RAG rating. Christina Bichan advised that it is a cohort figure and the same data set is used for all reporting. She agreed to review how gender, disability, and ethnicity pay equality data is recorded and reported to ensure consistency. Action: CBI
8.6	Christina Bichan assured the Committee that the data is regularly reviewed, and a report will be completed in the next quarter period.
8.7	The Committee were content that the updated pay equality figures will be presented in a future report coming to the new organisation.
8.8	The Committee noted the sickness absence figure in relation to SKPI05 and that the RAG rating should be Amber.
8.9	The Committee noted in relation to SKPI25 that a different group of service providers utilising NES workforce planning data would produce a different performance figure.
8.10	The Committee asked how many mandatory modules are included in the suite of Once for Scotland statutory and mandatory modules. Ameet Bellad responded that there are 9 statutory and mandatory modules. He advised that NES already has 7 of the essential learning modules and the additional 2 modules relate to Information Governance and Cyber Security.
8.11	The Non-Executive Director, Whistleblowing Champion appreciated the work done to increase whistleblowing compliance and the Committee commended the work done by Chrisina Bichan, Nancy El-Faragy and the whistleblowing team.
8.12	There were no further questions raised at the meeting.

8.13	The Chair thanked Ameet Bellad for the report and the Committee noted the performance reported in Appendices 2 and 3 and confirmed it provided assurance.	
8.14	Ameet Bellad left the meeting, and Debbie Lewsley joined the meeting.	
9.	Delegated Strategic Risk Report	NES/SGC/26/06
9.1	The Chair welcomed Debbie Lewsley to the meeting and asked her to introduce the Quarter 3 Delegated Strategic Risk Report.	
9.2	Debbie Lewsley reported that there was no change to the risks aligned to the Committee, however, Strategic Risk 16 relating to HR Performance was de-escalated to the People and Culture Directorate Risk Log for ongoing management.	
9.3	The Committee welcomed the improvements to the report layout and noted that the charts are clear and helpful. The Committee suggested that this formatting is carried forward into the new organisation.	
9.4	The Committee noted that the head count is at its highest level and asked if Strategic Risk 13 relating to staff retention was acceptable. Debbie Lewley advised that this risk is regularly reviewed and well managed.	
9.5	There were no further questions raised at the meeting.	
9.6	The Chair thanked Debbie Lewsley for the report.	
9.7	The Committee noted the information on risks being managed by directorates and confirmed that the report provided assurance.	
9.8	Debbie Lewsley left meeting.	
10.	Public Services Delivery (PSD) Scotland Update	(Verbal Item)
10.1	The Chair invited Sybil Canavan to provide an update on Public Services Delivery (PSD) Scotland.	
10.2	Sybil Canavan reported that the staff consultation process on TUPE closed on 08 February 2026 and 4 formal responses were received from the Royal College of Nursing (RCN), the British Dental Association (BDA), Unite and Unison. She advised that trade unions were broadly content, supported the legislative approach and would continue partnership working into the new organisation.	
10.3	Sybil Canavan reported that feedback highlighted the importance of pay continuity on day one, clarity on the NHS identity within the organisation name and reassurance on arrangements beyond day one.	
10.4	Sybil Canavan confirmed that people and system workstreams, including eESS and Turas, were progressing well in collaboration with NSS. She	

	assured the Committee that staff will transfer seamlessly, and day one arrangements are on track.	
10.5	The Committee noted the significant resourcing impact of the new organisation activity alongside business-as-usual delivery and the need to continue supporting staff through this period of change.	
10.6	The Employee Director thanked all staff involved in the transition work. She recognised the scale of the activity alongside business-as-usual delivery.	
10.7	Sybil Canavan, Laura Liddle, Christina Bichan, Lynnette Grieve, Drew McGowan and Janice Gibson were commended by the Board Chair for their significant contribution and support to staff during the transition, alongside business as usual delivery.	
10.8	The Committee noted an initial branding approach will be in place on day one, aligned with NSS and NES standards. Light-touch arrangements will be in place to support staff during the six-month stabilisation period, after which decisions on longer-term plans and branding will be considered by the new organisation.	
10.9	There were no further questions raised at the meeting.	
10.10	The Committee showed their appreciation for the work done by NES staff on the transition and business-as-usual delivery.	
10.11	The Chair thanked Sybil Canavan and Christina Bichan for the update.	
11.	Quarter 3 Whistleblowing Report	NES/SGC/26/07
11.1	The Chair welcomed Nancy El-Farargy to the meeting and asked her to introduce the Quarter 3 Whistleblowing Report which provided an update on NES's whistleblowing performance activities from 01 October to 31 December 2025.	
11.2	Nancy El-Farargy reported that during the last quarter NES did not receive any whistleblowing concerns.	
11.3	Nancy El-Farargy highlighted a few key topics from the report including the line manager training completion rate, the increased number of confidential contacts, the iMatter score and the Speak Up week activity.	
11.4	There were no questions raised at the meeting.	
11.5	The Board Chair thanked Nancy El-Farargy and Christina Bichan for the work done in NES since the standards were implemented. He welcomed the detailed update on the Speak Up week activities, that he had recently presented to the Cabinet Secretary which highlighted NES's good practice.	
11.4	The Chair thanked Nancy El-Farargy and Christina Bichan for the report and the Committee confirmed the Quarter 3 report provided assurance.	

11.5	Nancy El-Faragy left the meeting.	
12.	Non-Executive Whistleblowing Champion Remarks	(Verbal Item)
12.1	The Non-Executive Director, Whistleblowing Champion appreciated the commitment and work done by Christina Bichan, Nancy El-Faragy and the team involved in the whistleblowing process since the standards came into place.	
12.2	The Non-Executive Director, Whistleblowing Champion noted the value of whistleblowing concerns in testing processes and learning. She commended the work done by the whistleblowing team, welcomed the increased number of confidential contacts, the increased compliance figure and the high iMatter score.	
12.3	The Non-Executive Director, Whistleblowing Champion appreciated that Speak Up week was embraced by NES.	
12.4	The Non-Executive Director, Whistleblowing Champion advised that there will be no whistleblowing report to the Cabinet Secretary this year.	
12.5	The Non-Executive Director, Whistleblowing Champion advised that NES's attitude and culture made her role easier and hopes that this continues into the new organisation.	
12.6	There were no further questions raised at the meeting.	
12.7	The Chair thanked the Non-Executive Director, Whistleblowing Champion for the update and for her contribution to the Committee.	
13.	Identification of any new risks raised at this meeting	(Verbal Item)
13.1	There were no additional risks identified at the meeting.	
14.	NHSScotland Workforce Policies – Phase 3 Update	NES/SGC/26/08
14.1	The Committee noted the NHSScotland Workforce Policies – Phase 3 Update report.	
15.	Salary Overpayments and Underpayments Policy	NES/SGC/26/09
15.1	The Committee sought assurance on the approach to staff repayment plans. Sybil Canavan advised the Committee that NES adopts a person-centred approach to repayment plans, taking account of individual circumstances and work in collaboration with Finance colleagues.	

15.2	The Employee Director assured the Committee that NES applies a people-centred approach to repayment plans and works with staff to avoid hardship or financial detriment.	
15.3	The Committee welcomed the approach and noted the Salary Overpayments and Underpayments Policy that was approved by the Audit and Risk Committee in January 2026.	
16.	TUPE Transfer Progress	NES/SGC/26/10
16.1	The Committee noted the TUPE Transfer Progress report.	
17.	Employment Tribunals	NES/SGC/26/11
17.1	The Committee noted the Employment Tribunals report.	
18.	Policy/Scottish Government Director Letters as appropriate to Staff Governance Committee	NES/SGC/26/12
18.1	The Committee noted the Policy/Scottish Government Director Letters report.	
19.	Redacted Remuneration Committee 26 November 2025 minute	NES/SGC/26/13
19.1	The Committee noted the redacted 26 November 2025 Remuneration Committee minute.	
20.	Health, Safety and Wellbeing Forum minutes	
20.1	The Committee noted there has been no Health, Safety and Wellbeing Forum meetings since the last meeting took place on 12 March 2025.	
21.	Partnership Forum 18 September and 05 November 2025 minutes	NES/SGC/26/14
21.1	The Committee noted the 18 September 2025 and the 05 November 2025 Partnership Forum minutes.	
22.	Any other business	
22.1	There were no other items of business discussed at the meeting.	
23.	Review of Committee Effectiveness	
23.1	The Chair asked, do reports to the Committee communicate relevant information at the right frequency, time, and in a format that is effective? Has the Committee benefited from the right level of attendance from Lead Executive or Directors/Authors/Board Secretary/Others? Are there any areas where the Committee could improve upon its current level of effectiveness?	

23.2	The Committee were content with the quality of reports, attendance and welcomed the level of detail contained within reports.	
24.	Date and time of next meeting	
24.1	The Committee noted that no future meetings were scheduled due to the transition to the new organisation.	
24.2	The Chair thanked all for attending the meeting, for their contributions and closed the final NES SGC meeting.	

AG/JA/NH/SC
NES
February 2026

NHS Education for Scotland

EDUCATION & QUALITY COMMITTEE

5 March 2026 from 10:15am to 12:15pm

Draft minutes of the twenty-second meeting of the Educational & Quality Committee (EQC) held on Thursday 5 March 2026 as a hybrid meeting, in person at the Westport Office, Edinburgh and via Microsoft Teams

Present: Olga Clayton (OC), Committee Chair, Non-Executive Director
Nigel Henderson (NH), Non-Executive Director
George Valiotis (GV), Non-Executive Director

In Attendance: Kathryn Brechin, Nurse Director, NSS
Rob Coward (RC), Principal Educator, Executive Secretary
Lindsay Donaldson (LD), Deputy Medical Director
Chris Duffy (CD), Senior Admin Officer, Minute-Taker
David Garbutt (DG), Board Chair
Sharon Hilton-Christie (SHC), Medical Director, NSS
Kevin Kelman (KK), Director of NHSS Academy, Learning and Innovation
Debbie Lewsley (DL), Manager, Planning
Pam Nicoll (PN), Associate Director, Medical
Ryan Reed (RR), Head of Programme, NHSS Academy, Learning and Innovation
Emma Watson (EW), Medical Director and joint EQC Executive Lead
Karen Wilson (KW), Executive Director of Nursing, Deputy CEO and joint EQC Executive Lead

1. Welcome and Introductions

1.1 The Committee Chair welcomed all to the meeting.

2. Apologies for absence

2.1 Apologies were received from Karen Reid, Chief Executive and Accountable Officer, Louise Harker, Boardroom Apprentice, Janice Gibson, Associate Director, Organisational Development Leadership and Learning (ODLL), Drew McGowan, Board Secretary and Gordon Paterson, Director of Social Care.

3. Notification of any other business

3.1 There was no other business identified.

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 4 December 2025

5.1 The Chair invited the Committee to review the draft minutes from the 4 December 2025 EQC meeting.

5.2 The Committee approved the draft minute as an accurate record of the meeting.

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 5 completed actions with 2 actions in-progress.

6.2 The Committee sought clarification regarding Action 7.11 – Lead Executive Report on Incident Reporting Mechanism. It was noted that the report had been submitted to the Executive Team (ET) but that further work was indicated as required. The Committee asked what specific issues had been identified by ET and whether any significant matters had arisen during their consideration. Karen Wilson responded that the Committee had previously expressed similar concerns at its last meeting, noting that members had not been content with the report at that time. When the report subsequently went to ET, the same issues were raised. ET considered that the report appeared somewhat of a *tick-box exercise* and were not fully assured that it would deliver meaningful improvement. As a result, ET requested that Katy Hetherington undertake additional work to assess the suitability and robustness of the proposed mechanism. Karen Wilson confirmed that the revised report would be returned to ET for further review before being brought back to the Committee for approval.

The Committee 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. Karen Wilson introduced the Lead Executive Report, noting that it was an extensive submission and that, for this meeting, efforts had been made to summarise key areas and bring matters to a clear conclusion as the organisation approaches closure. Karen highlighted the significant volume of information relating to social care contained within the report, observing that this demonstrated the substantial progress achieved by a small team over a relatively short period. Karen Wilson also drew attention to section 5.7 regarding the Palliative Care and Learning Hub, noting that this work had now reached conclusion, with a suite of resources launched. It was reported that 130 delegates attended the Hub launch event and 300 delegates attended the framework launch.

7.2 Emma Watson highlighted that Healthcare Science Week would take place the following week and that NES teams had been working actively with the Scottish Government in preparation. It was advised that the programme for the week had

been shared. Emma Watson further reported on collaborative work underway between Centre for Workforce Supply and Medical Directorates, particularly in relation to supporting the GP workforce and International Medical Graduate (IMG) colleagues.

- 7.3 Emma Watson also drew attention to the longstanding interest of the Committee in relation to the funding of the training establishment at core and specialty levels, confirming that agreement had been reached, although a funding gap remained due to the absence of full provision for salary uplifts and national insurance. She noted, however, that the organisation was now in a stronger financial position, with substantial progress made towards closing the previously identified £22 million gap.
- 7.4 Finally, Emma Watson advised that enhanced monitoring was now in a much-improved situation compared to the period when 14 cases were active. She reported that three cases remained, with system pressures and alignment between clinical and educational governance continuing to be recurring themes. Engagement with territorial health boards was ongoing to maintain focus on this work.
- 7.5 Kevin Kelman informed the Committee that preparations were underway for the next Four Nations AI Conference, noting that the previous event in November had been successful. He advised that the upcoming conference would be aligned with the NES Conference in April and that its focus would be on the use of artificial intelligence in educational assessment. Kevin Kelman further reported that six colleagues had been recruited to the Clinical AI Fellowship Programme for commencement in summer 2026. It was highlighted as a positive development, illustrating strong growth from the previous cohort of two fellows.
- 7.6 Kevin Kelman drew attention to work within the NHS Scotland Academy, noting that an ear care programme had now been launched to support colleagues in developing skills in microsuction. It was advised that this initiative was intended to help address service challenges relating to ear care across Scotland.
- 7.7 The Committee Chair thanked the executive leads for their comprehensive updates and commended the work undertaken across the organisation. The report was then opened for questions and comment.
- 7.8 The Committee queried the digital learning infrastructure, specifically referencing the proposal to procure a privately hosted learning management system. The Committee sought clarification on what privately hosted implied and how this approach would integrate with Turas. Kevin Kelman advised that the full business case for the digital learning infrastructure had been submitted to the Scottish Government the previous week. It was confirmed that the proposal included a *hybrid model* delivered by an external provider, which would operate in close alignment with Turas, ensuring data flow and interoperability. Kevin Kelman explained that this approach aimed to provide a more advanced and improved system overall. It was noted that Boards had been kept informed as part of the ongoing consultation process, and further updates would be provided at the forthcoming Board Chief Executives meeting.

- 7.9 The Committee asked whether the decision to move to the hybrid model would result in any delay against the original timescale and, if so, what the impact of such a delay might be. Kevin Kelman explained that the move towards a hybrid model followed an external review which highlighted two significant factors, rapid technological advances, particularly in the field of AI, which were outpacing original assumptions and recruitment challenges within the NES Technology Service, where agenda for change roles were proving difficult to attract and retain, making a fully in-house build less feasible. Kevin Kelman confirmed that while the submission of the full business case had been delayed due to this reassessment, the decision to partner with an external provider may in fact accelerate delivery, as such providers already operate fully-developed systems and remain at the forefront of technological innovation. Kevin Kelman further noted that interoperability with Turas would remain a mandatory requirement to ensure consistency of data flow and platform usability.
- 7.10 The Committee sought clarification on the implications of establishing the baseline training posts (4,907) and asked what impact this would have in terms of rollout, including whether any delays or challenges in post appointments were anticipated. Emma Watson explained that receipt of the full training establishment funding would, enable recruitment based on whole-time equivalent reducing distortions caused by less than full time training patterns, it would improve financial flows to territorial boards, it would support increased capacity to employ more training doctors and would substantially reduce the financial gap historically carried within the medical training budget.
- 7.11 The Committee queried how to interpret the information presented regarding trauma and orthopaedics in NHS Grampian, specifically seeking clarity on whether the Committee should have particular concerns regarding patient safety. Emma Watson confirmed that this area remains under enhanced monitoring, NES is assured that NHS Grampian is taking the matter seriously with actions underway and although operational detail sits outwith the Committee, the governance approach is robust and supportive.
- 7.12 The Committee welcomed progress in the AI workstream and requested further detail on the specific outcomes that NES should expect from this programme. Kevin Kelman shared the three conference themes which outlined the intended outcomes and sector-wide impact. Kevin Kelman also advised that planning included engagement with wider education partners, including Higher Education institutions.
- 7.13 The Committee asked how the strong social media engagement reflected in the report would transition into the new PSD Scotland organisation, and what assurances existed to ensure continuity. Karen Wilson confirmed that social media strategy and engagement arrangements are actively being considered as part of the PSD Scotland transition, with a six-month stabilisation period during which a unified approach to communications will be developed.
- 7.14 The Committee referred to the report stating that the new GMC “Recognition of Trainer” functionality was due to be deployed by the end of January 2026. The Committee sought assurance that this deployment had in fact occurred as

scheduled. Emma Watson confirmed that the GMC Recognition of Trainer functionality was successfully deployed on 27 January 2026, providing assurance that the target date had been met.

- 7.15 The Committee observed that several learning hubs and digital resources had recently been launched and asked how NES ensures that the intended audiences can easily locate and access these products. The Committee queried what mechanisms exist to direct learners and professionals towards new hubs and websites. Karen Wilson explained that launch events, targeted social media activity and communications directed at relevant are all used to publicise new products. It was acknowledged that Turas is not currently intuitive for users and explained that this is one of the core drivers behind the Digital Learning Infrastructure programme, which aims to improve findability and searchability within future learning systems.
- 7.16 The Committee drew attention to two significant achievements listed within the report. First the successful introduction of the Paramedic ePAD (electronic Practice Assessment Document), noting that this development had been anticipated by the ambulance service and that its launch represented a positive step forward for the sector. Second, the work of Sandra Ferguson from the Psychology team. The Committee highlighted her receipt of the Bill Ewell Lifetime Award for her contribution to trauma-informed training. It was noted the wide-reaching impact of this programme, observing that every judge in Scotland, along with the Solicitor General and the Lord Advocate, had now completed the training. The Committee remarked that this constituted a tremendous success and that the programme had been well received not only within the health sector but also across the wider justice system.
- 7.17 The Committee confirmed the report provided the necessary assurance.

8. Q3 EQC Strategic Key Performance Indicators Report

- 8.1 The Committee Chair invited Rob Coward to introduce the SKPI Report. Rob Coward introduced the Strategic KPI (SKPI) Report, noting that as this was the final presentation of the report under NES, a small number of slides had been prepared to both summarise current performance and reflect on progress made. It was advised that NES manages 41 Strategic KPIs across its three strategic themes, with 17 KPIs delegated to the Education and Quality Committee. For this reporting period, five KPIs were scheduled for update. Rob Coward highlighted positive movement in several areas, including improved vacancy rates within medical training placements and continued progress in dental training, with no vacancies reported in specialty vocational training.

- 8.2 It was reported that of the 17 delegated KPIs: 14 were rated Green, 2 were paused, having been completed, and 6 remained outstanding, where data quality or completeness had not yet met reporting standards. It was confirmed that addressing these outstanding data issues would be a priority as work transitions into the new organisation. Rob Coward further outlined proposals to: introduce *interim data solutions* for learner reaction measures, expand the scope of SKPI 14 to include psychologists, pharmacists, and other professional groups (subject to

- 8.3 Board approval), and enhance the performance dashboard by introducing theme-based and committee-based views, as well as SPC charts, which would provide a clearer longitudinal picture now that multiple data points are available.

Rob concluded that the organisation is in a strong position to carry its performance management approach forward into the new structure, while recognising that NES and NSS presently operate different reporting methodologies.

- 8.4 The Committee sought clarification on item 6.4.5 Accessing learners from the 20% most deprived data zones and asked if there is a genuine difficulty in accessing learners or if NES was struggling to obtain data on learners backgrounds. Rob Coward confirmed that the issue relates principally to insufficient response rates, not to NES failing to attract learners from deprived areas. NES has been trialling the collection of this data through the Qualifications Scotland (SQA) Centre, but despite repeated encouragement, learners have not been submitting the necessary information. Rob Coward noted that this learning is valuable and that NES will need to reflect on how best to gather this data going forward. It was also indicated that the Digital Learning Infrastructure programme may provide future solutions for improved data capture.

- 8.5 The Committee requested further explanation of what was meant by “sustainability” on item 6.4.6, asking for clarity on the scope and intention behind this measure. Rob Coward clarified that “sustainability” refers specifically to climate and environmental sustainability, not financial or workforce sustainability. The intention is to ensure that NES embeds environmentally responsible practices within its educational products. Rob Coward provided an example relating to Infection Prevention and Control (IPC) training, where NES promotes reduced and more appropriate use of gloves to minimise environmental impact. The KPI therefore reflects the organisation’s objective to incorporate climate-conscious principles within its educational design and delivery.

The Committee queried if the SKPI Dashboard and quarterly updates are made accessible to staff. The Committee suggested that wider visibility could support improved staff engagement with organisational metrics. Rob Coward confirmed that the SKPI dashboard is currently available on the Corporate Hub SharePoint site but the opportunity to increase visibility was recognised. Karen Wilson confirmed that NES would consider ways to increase staff awareness and accessibility of SKPI information. **Action: KW/RC**

The Committee approved the SKPI report.

9. NES Learning and Education Strategy Implementation Report

- 9.1 The Committee Chair invited Ryan Reed to introduce this report. Ryan Reed introduced the report on the implementation of the NES Learning and Education Strategy, noting that while the Committee receives quarterly tabular updates, this submission was intentionally more substantial. It was advised that the aim of the report was to provide a degree of summative reflection on the progress made since the strategy’s launch, recognising that the organisation is approaching transition into Public Services Delivery Scotland.

Ryan Reed explained that the report offered a qualitative assessment of organisational change and internal transformation achieved to date. While NES intends to move towards measuring impact more systematically—aligned with Strategic KPIs—he acknowledged that this is not yet possible across all areas. It was therefore emphasised that the paper captures both progress and areas where additional development will be required. It was noted that there had been notable improvements in several domains of the strategy, placing NES in a strong position to carry this work forward into the new organisation. Ryan Reed advised that, following questions or comments on the overall report, he was prepared to provide additional detail specifically on the Quality Policy, an area where the Committee had previously requested further clarification.

- 9.2 The Committee welcomed the Strategy Report and expressed appreciation for the substantial progress made since the launch of the NES Learning and Education Strategy. The report provided a more detailed picture than earlier iterations and successfully addressed many of the issues previously raised by the Committee. The Committee highlighted the importance of ensuring that key elements of the strategy are carried forward into the new Public Services Delivery Scotland organisation. The Committee emphasised that the report offered a strong foundation for the incoming Board and noted the value of embedding the strategic framework within future decision-making processes. The Committee further observed that the development of the strategy had been crucial in strengthening professionalism across learning and education functions within the organisation.
- 9.3 The Committee noted the reported growth in strategic partnerships, particularly those linked to Theme 4 of the Strategy, and sought clarity on the strategic approach underpinning this work. It was asked how NES determines which partnerships to prioritise, the rationale for selecting partners and how focus is maintained across a growing and diverse partnership landscape. Kevin Kelman outlined that NES has adopted a clear strategic approach to the development of partnerships. It was explained that priority areas include: Building a cohesive learning system across health and social care, involving organisations with shared interests—such as SSSC, sector bodies, and national organisations already contributing to workforce development. Strengthening links with Higher Education Institutions (HEIs) and Further Education Colleges, with partnership responsibilities shared across the Executive Team to ensure systematic engagement. Developing research and innovation capacity, including partnerships with specialist organisations such as St Thomas' NHS Foundation Trust through the Clinical AI Fellowships programme. Kevin Kelman emphasised that the strategic partnerships are not opportunistic but are intentionally aligned with NES's strategic ambitions and the system-wide needs of the health and social care workforce.
- 9.4 The Committee referred to the update that NES was seeking sign-off from NHS Chief Executives on the Digital Learning Infrastructure (DLI) programme, the Committee asked how far this work had progressed and sought an update on the expected decision-making process and engagement with NHS Boards. Kevin Kelman advised that discussions with individual NHS Boards were progressing positively, including those Boards that had either adopted or recently moved away from national learning systems. It was confirmed that NES will attend the Board

Chief Executives Meeting the following week, where a consolidated proposal will be presented. The aim is to secure collective approval for the DLI programme as a Once for Scotland initiative, enabling the next stage of development and procurement to proceed.

9.5 The Committee confirmed the report provided the necessary assurance

10. Annual Report on Externally regulated programmes

10.1 The Committee Chair invited Rob Coward to introduce this item. Rob Coward introduced the Annual Report on Externally Regulated Programmes, noting that this was a recurring and important item providing assurance to the Committee on NES's relationships with statutory regulators and external awarding bodies. He explained that the report covers: Training programmes subject to statutory regulation; Programmes accredited by professional and statutory bodies; and Credit-rated programmes awarded through external bodies, principally Qualifications Scotland. It was advised that the tables within the report demonstrate that NES continues to provide a high level of confidence to regulators, with several areas of commended practice highlighted through recent engagements. It was noted that while a small number of recommendations and requirements had been identified—primarily relating to externality in placement management within dental programmes—these were limited in scope and already being addressed. It was further highlighted that the GMC Annual Quality Assurance Summary for Scotland was very positive, with requirements focused mainly on updates and information provision rather than concerns over educational quality. It was concluded that the overall report indicates NES is a trusted provider of high-quality education and training and is well positioned to progress towards awarding body status within the future organisational arrangements.

10.2 The Committee Chair welcomed the report and noted that while it is a recurring item, the Committee had previously requested greater clarity around improvement requirements. The Committee expressed appreciation that this year's report provided the enhanced transparency sought. The Committee commented that the report was very positive and assuring, and reflected well on the organisation's performance and regulatory relationships.

10.3 The Committee sought clarification on the implications of the forthcoming organisational transition to Public Services Delivery Scotland. Specifically if, the existing accreditations, approvals, and regulatory recognitions held by NES would automatically transfer to the new organisation; or whether NES (and thereafter PSDS) would be required to undergo a re-accreditation or reassessment process with regulators and awarding bodies. Rob Coward advised that he was not in a position to give a definitive answer but indicated that NES's understanding was that accreditations should be able to continue into the new organisation. However, he acknowledged that this may vary depending on the requirements of individual regulators and awarding bodies. The Committee requested that clarification is to be obtained on whether current regulatory accreditations and approvals will automatically transfer to Public Services Delivery Scotland (PSDS), or whether any re-accreditation processes will be required.

10.4 The Committee confirmed the report provided the necessary assurance.

11. Education & Quality Strategic Risks

11.1 The Committee Chair invited Debbie Lewsley to introduce the report.

11.2 Debbie Lewsley introduced the Quarter 3 Strategic and Directorate Risk Report, noting that there had been no movement in the scoring of the Committee's delegated strategic risk during the reporting period. It was confirmed that the risk remained assessed as very high, reflecting the potential impact of the Westport office move, and that this risk continued to be reviewed on a regular basis. The Committee were informed that a comprehensive review of all strategic risks had been undertaken in preparation for transition into Public Services Delivery Scotland (PSDS). It was explained that the Executive Team (ET) had completed an initial review and agreed an approach that had since been endorsed by both the Audit and Risk Committee and the NES Board. Work to finalise the updated strategic risk log was ongoing, with the completed version scheduled for presentation at the March Board meeting.

11.3 It was further highlighted that the report also provided a quarterly overview of the 29 Directorate-level risks aligned to the Committee, supported by a dashboard included at Appendix 3. It was confirmed that all directorate risks had been reviewed and discussed by ET prior to being brought to Committees. It was also noted that, consistent with preparations for organisational transition, all Directorate risk logs were being reviewed and this would be reflected in the Quarter 4 report.

11.4 The Committee Chair commented positively on the development of the organisation's risk management approach. It was noted that the new dashboard was comprehensive and clear, and that the reporting demonstrated strong progress in embedding risk as an active assurance tool. The Committee welcomed the regular review processes in place and commended the clarity with which risks, controls, and planned actions were now being articulated.

11.5 The Committee raised a specific query regarding mitigating actions for Risk 11, which relates to the organisation's capacity to access suitable training venues following the Westport move. The Committee sought further detail on the newly identified action to scope alternative training venues, asking for an update on progress and what this work currently involved. Karen Wilson advised that A working group is actively progressing the review of training venue requirements. NES anticipates that some training activity can be delivered at Gyle Square, reducing overall external venue demand. Procurement colleagues are developing a spot-buy contract to allow NES to secure additional venue capacity when needed. Consultation with universities and colleges across Scotland has taken place to identify potential regional alternatives, recognising that attendees travel from across the country. Several programmes have identified that elements of provision could move online, further reducing venue pressure. Despite progress, the team emphasised that risk levels remained appropriately high until

arrangements were fully secured, particularly given capacity constraints and potential cost implications associated with external venues.

- 11.6 The Committee noted the report and confirmed that the risks delegated to EQC are managed effectively.

12. Clinical and Care Assurance Group (CCAG) Update

- 12.1 The Committee Chair invited Emma Watson to provide an update on CCAG. Emma Watson provided an update on recent activity of the Clinical and Care Assurance Group (CCAG), noting that the Group's work since the previous Committee meeting had been primarily focused on the Digital Front Door Programme, specifically the planned transition of mycare.scot to a whole-population rollout in April 2026. It was advised that the programme had initially been designed as a limited minimum viable product, tested with a small dermatology cohort in NHS Lanarkshire, with manual parallel processes in place. Uptake to date had been limited. Emma Watson reported that following ministerial direction, the scope of the programme had expanded significantly. Mycare.scot would now be made available to the entire adult population of Scotland and would include citizen access to their Emergency Care Summary (ECS). Delivery would be through both the existing dynamic web interface and a new native app, accessible via standard app stores. She highlighted that ECS was originally developed for clinician-to-clinician use rather than for direct patient interpretation, representing a material change to the clinical safety and governance risk profile.
- 12.2 Given the scale and impact of the change, CCAG convened an extraordinary meeting in January to review the revised programme context, governance arrangements and underlying clinical safety assumptions. This was followed by a structured tabletop exercise at the February CCAG meeting involving NES colleagues and territorial health board clinical leaders. The purpose of this exercise was to stress-test governance structures, escalation pathways and incident-management processes. Emma Watson confirmed that work is underway to clarify governance expectations for territorial boards, including identification of board-level clinical safety oversight, guardian roles, and defined processes for addressing patient-reported data accuracy concerns. It highlighted an ongoing challenge in that the programme is owned by the Scottish Government but delivered by NES, noting the need to ensure alignment of technical delivery with clinical safety requirements. It was emphasised that the programme represents a people-focused change, requiring strong integration between technology, clinical governance and user understanding.
- 12.3 It advised that CCAG would meet again the following week to review the outputs of the tabletop exercise and confirm further mitigations. Concerns and proposed mitigation mechanisms have been escalated to the NES Chief Executive and shared with Scottish Government colleagues through digital governance channels. These include the need for: clear public communication on what ECS data is and is not; robust board-level processes to correct inaccurate data; and a national mechanism to recognise, flag and pause rollout should significant clinical-safety issues arise.

- 12.4 The Committee welcomed the update on the Clinical and Care Assurance Group (CCAG) and noted that the matters raised—particularly the expanded rollout of MyCare.scot—presented significant clinical and operational risks. It highlighted the potential for public misunderstanding or anxiety should individuals access Emergency Care Summary (ECS) information not originally designed for direct interpretation. It emphasised that such concerns would inevitably place pressure on services responding to patient queries, and that this required careful mitigation. The Committee further stressed the importance of ensuring clarity over responsibilities between Scottish Government, NES, and (future) PSDS, noting the need for strong governance, clear ownership, and operational readiness given the high-profile nature of the programme.
- 12.5 The Committee noted the update.

Items for noting

13. CCAG Minutes 18th November 2025

- 13.1 The Committee noted the CCAG minutes.

14. Consultation Log

- 14.1 The Committee noted the consultation log.

15. Scottish Government and NES Educational policies

- 15.1 There were no policies to report at this meeting.

16. Committee Effectiveness

- 16.1 The Committee confirmed that reports to the Committee had communicated relevant information at the right frequency, time, and in a format that was effective. There was specific praise for the quality of the Executive Leads report. The Committee felt that they had benefited from the right level of attendance. The Committee confirmed the papers were of good standard and quality.

17. Any other business

- 17.1 Emma Watson raised one item of Any Other Business, advising the Committee that NES had been closely involved in the development and parliamentary passage of a UK Bill concerning the prioritisation of UK medical graduates in recruitment to core and specialty medical training.

Emma Watson informed the Committee that NES had been notified, during the meeting, that the Bill had received Royal Assent earlier that morning. It was noted that the matter had not been included in written reports due to confidentiality requirements throughout the legislative process. Emma Watson explained that the Bill is significant and somewhat controversial, as the UK-wide recruitment system has historically operated on the basis of equitable treatment of all applicants, including international medical graduates (IMGs). It was highlighted that while

IMGs remain a valued component of Scotland's medical workforce—especially during periods of high vacancy levels—there has been growing concern about increasing numbers of UK-trained doctors being unsuccessful in securing training posts. Emma Watson reminded members that NES has already introduced several measures to support UK graduate access and improve overall fairness, including: Scotland-only recruitment routes (e.g., IMT, Trauma and Orthopaedics, Broad Based Training), GMC registration at point of application and Limiting the number of applications a candidate may submit

Emma Watson confirmed that under the new legislation: For this year's recruitment, *post-interview*, UK medical graduates will be prioritised over international medical graduates. IMGs will still be eligible for appointment, but the balance of appointments will shift. NES is currently working with the four nations to develop regulations which will apply from next year's recruitment round, noting that these regulations are likely to be more complex and may attract further debate. Emma Watson committed to bringing an update on the developing regulations and their implications to the first Education Committee meeting of Public Services Delivery Scotland (PSDS). **Action: EW**

18. Date and time of next meeting

18.1 There are no future dates planned at this stage.

NES
CD
March 2026

Approved by Olga Clayton on (TBC)