

AGENDA FOR THE ONE HUNDRED AND EIGHTY-SECOND BOARD MEETING

Date: Thursday 26 September 2024

Time: 10:15 – 11:55

Venue: Hybrid meeting: Microsoft Teams / and
Room 1 and 2, West Port 102, Edinburgh EH3 9DN

1.	10:15 Chair’s introductory remarks	
2.	10:16 Apologies for absence	
3.	10:17 Declarations of interest	
4.	10:18 Draft Minutes of the One Hundred and Eight-first Board Meeting 15 August 2024. For Approval	NES/24/59
5.	10:20 Matters arising from the Minutes and notification of Any Other Business	
6.	10:21 Actions from previous Board Meetings. For Review and Approval	NES/24/60
7.	Chair and Chief Executive reports a. 10:25 Chair’s Report. For Information and Assurance b. 10:35 Chief Executive’s Report. For Review and Assurance	NES/24/61 NES/24/62
8.	Strategic Items a. 10:55 Draft Transformation Route Map. For Review and Approval (C. Bichan)	NES/24/63
9.	Annual Items a. 11:10 Information Governance 2023-2024 Annual Report. For Assurance (T. Gill / C. Wroath)	NES/24/64

	<p>b. 11:20 Feedback, Comments, Concerns and Complaints Annual Report 2023-24. For Approval (R. Coward)</p> <p>c. 11:30 Caldicott Guardian: Annual Report 2023-24. For Approval (D. Felix)</p>	<p>NES/24/65</p> <p>NES/24/66</p>
10.	<p>Governance Items</p> <p>a. 11:40 NES Committee Governance Changes. For Approval (D. Thomas)</p> <p>Significant issues to report from Standing Committees:</p> <p>b. 11:55 Staff Governance Committee 22 August 2024. (N. Henderson, verbal update)</p> <p>c. 11:58 Technology and Information Committee 27 August 2024. (D. Garbutt, verbal update)</p> <p>d. 12:01 Education and Quality Committee 12 September 2024. (A. Gunner Logan, verbal update)</p>	<p>NES/24/67</p>
11.	<p>Items for Homologation or Noting</p> <p>11.1 12:04 NES Standing Committee Minutes:</p> <p>a. Staff Governance Committee, 29 April 2024, Minutes.</p> <p>b. Technology and Information Committee, 13 May 2024, Minutes.</p> <p>c. Education and Quality Committee, 9 May 2024, Minutes.</p>	<p>NES/24/68</p> <p>NES/24/69</p> <p>NES/24/70</p>
12.	<p>12:05 Any Other Business</p>	
13.	<p>12:05 Date and Time of Next Meetings:</p> <ul style="list-style-type: none"> • Board Development Meeting: 24 October 2024 at 10:15 Hybrid meeting. • Public Board Meeting: 21 November 2024 at 10:15 Hybrid meeting. 	
	<p>D. Thomas, Board Secretary. NHS Education for Scotland (NES) e-mail: Chair & Chief Executive's Office ceo.nes@nes.scot.nhs.uk</p>	

NHS Education for Scotland

Draft Minutes of the One Hundred and Eighty First Board Meeting held on 15 August 2024 at 10:15am – 13:23pm

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

- Present:**
- David Garbutt (DG), (Chair)
 - Ally Boyle (AB), Non-Executive Director
 - Jim Boyle (JB), Executive Director of Finance
 - Olga Clayton (OC), Non-Executive Director
 - Shona Cowan (SC), Non-Executive Director
 - Jean Ford (JF), Non-Executive Director
 - Lynnette Grieve (LG), Non-Executive Director / Employee Director
 - Annie Gunner Logan (AGL), Non-Executive Director
 - Gillian Mawdsley (GM), Non-Executive Director / Whistleblowing Champion
 - Karen Wilson (KW), Executive Director of Nursing Midwifery and Allied, Health Professionals / Deputy Chief Executive (Clinical) and deputising for Karen Reid
 - Emma Watson (EW), Executive Medical Director (left the meeting during item 9a)
- In attendance:**
- Tracey Ashworth-Davies (TAD), Director of Workforce / Deputy CEO (Corporate)
 - Christina Bichan (CBi), Director of Planning & Performance (left the meeting during item 9a)
 - Clare Butter (CB), Associate Manager, CE Office (observing as part of induction)
 - Nancy El-Faragy (NEF), Specialist Research Lead (item 9a)
 - David Felix (DF), Postgraduate Dental Dean / Director of Dentistry
 - Nick Hay (NH), Principal Manager – Communications and Engagement
 - Laura Howard (LH), Deputy Finance Director (item 8a)
 - Kevin Kelman (KK), Director of NHS Scotland Academy, Learning & Innovation (left the meeting during item 9a)
 - Debbie Lewsley (DL), Risk Manager (item 8ba and observing as part of succession planning for Board Secretary and career development)
 - Liz Mallinson (LM), Non-Executive Director NHS24 (observing as part of Aspiring Chairs Programme, shadowing David Garbutt)
 - Claire Neary (CN), Policy and Briefings Manager (Social Care)
 - Gillian Nevin (GN), Assistant Postgraduate Dental Dean (observing as part of personal development)
 - David Main (DM), Technician, NES Technology Service providing technological support)
 - Gordon Paterson (GP), Director of Social Care
 - Alison Shiell (ASH), Manager Planning & Performance (items 8c)
 - Lorraine Scott (LS), Associate Manager Chair and CEO Office (minute taker)

Andrew Sturrock (AS), Postgraduate Pharmacy Dean / Director of Pharmacy (left the meeting during item 9a)
Della Thomas (DT), Board Secretary / Principal Lead Corporate Governance
Judy Thomson (JT), Director of Training for Psychology Service (for part of the meeting)
Simon Williams (SW), Principal Educator (items 8c and 8d)

1. Chair's Welcome

- 1.1. The Chair welcomed everyone to the meeting, particularly Liam Mepham, a member of the public from Forrit Technology, Ltd., observing today's meeting.
- 1.2. The Chair also welcomed, Debbie Lewsley, Risk Manager joining as part of succession planning for Board Secretary and career development, shadowing Della Thomas; Liz Mallinson, who is a Non-Executive Director with NHS 24 and a participant on the Aspiring Chairs Programme, shadowing himself; Clare Butter, Associate Manager, CE Office observing as part of her induction; Gillian Nevin, Assistant Postgraduate Dental Dean as part of her personal development and David Main, Technician from NES Technology Service providing technological support for the meeting.

2. Apologies for absence

- 2.1. Apologies were received from Board members Karen Reid, Chief Executive & Accountable Officer and Nigel Henderson, Non-Executive Director.
- 2.2. Apologies were received from regular Board attendees Colin Brown, Head of Strategic Development; Lindsay Donaldson, Deputy Medical Director and Christopher Wroath, Director of NES Technology Service (NTS).

3. Declarations of Interest

- 3.1. There were no declarations of interest made in relation to the business of the meeting.

4. Draft Minutes of the One Hundred and Eightieth Board Meeting - 23 May 2024 (NES/24/46)

- 4.1. The Board advised an amendment at paragraph 11.3 of the minute to correct an inaccuracy relating to the Internal and External Audit Plan updates. This paragraph will be amended to read: "Jean Ford highlighted that the Internal Audit Plan 2024/25 and the External Audit Plan for audit of the 2023/24 accounts were approved and it was confirmed that all External Audit recommendations from the previous year will be closed and reported to 13 June 2024 Audit and Risk Committee (ARC) meeting."

4.2. The Board approved the draft minute of 23 May 2024 meeting following the amendment as noted above.

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. The Chair notified of another item of business and asked that Jim Boyle provide the Board with an update on the progress being made with the Westport office accommodation. The Chair explained that this was an item of business arising from the last Private Board meeting on 27 June 2024 and since there are no commercial sensitivities, he advised that this update can be given in public session and proposed that the meeting took this prior to the Chair and Chief Executive reports. This was agreed.

6. Actions from previous Board Meetings (NES/24/47)

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

6.2. The Board noted that all the actions had been marked as complete.

6.3. The Board requested that the Action Plan from the NES Climate and Emergency Sustainability Group referenced at 8.15 in the Action log be circulated to Board members for information. **ACTION: JB**

6.4. The Board requested that the “Summary of the Learning and Education Strategy Document” referenced in Action number 8.8 be circulated to Board members for information. **ACTION: KK/RR**

6.5. The Action list was agreed.

7. Westport Office Update, Chair and Chief Executive Reports

7.1. The Chair invited Jim Boyle to provide an update regarding the Westport Office.

7.2. Jim Boyle reminded the Board that members had previously been briefed on the proposal for NHS Lothian to occupy space within the Westport offices. He advised that the Chair and Interim Chief Executive of NHS Lothian had recently conducted a tour of Westport, and they expressed their gratitude to the NES Chair for the warm reception received, additionally he advised that the NHS Lothian Executive Team has made visits to Westport.

7.3. Jim Boyle informed the Board that a dedicated implementation team has been formed to facilitate the transition, conducting weekly meetings between NHS Lothian and NES to address any arising concerns, such as reception staffing and IT support.

- 7.4. Jim Boyle indicated that the preliminary plan involves the NHS Lothian Executive Team relocating to Westport, with all other NHS Lothian personnel expected to follow a few months thereafter; however, a specific date has yet to be finalised. He emphasised that the objective is to ensure a smooth transition for both NHS Lothian and NES through collaboration to develop appropriate logistical arrangements.
- 7.5. The Chair invited questions from the Board. There were no questions raised and the meeting proceeded to the next item on the agenda.

7a) Chair's Report (NES/24/48)

- 7.6. The Chair presented his report, which outlines his recent meetings and activity since the 23 May 2024 Board meeting, in his role as Chair of the NES Board and as a member of the NHS Scotland (NHSS) Board Chairs Group (BCG).
- 7.7. The Chair asked members of the Board if they had any questions.
- 7.8. The Board asked if there was an opportunity to contribute to the agenda setting for the meetings with the Cabinet Secretary, and if at the recent meeting on 22 May 2024 there were any discussions in relation to sustainability.
- 7.9. The Chair advised that the meetings with the Cabinet Secretary normally focus on a particular set of topics. He remarked that in this instance the discussion centred on the current priorities of Primary Care and Mental Health. He advised that sustainability was not included in the agenda for the 22 May 2024 meeting but confirmed that it does appear as an item.
- 7.10. The Board referred to 4.4 of the report and the formation of the recent Global Health Leadership Group and asked if sustainability was part of this discussion.
- 7.11. The Chair advised that this group is currently in the initial concept stages, and sustainability is expected to be integrated as it is a key focus for all government departments.
- 7.12. The Board noted the content of the report.

7b) Chief Executive's Report (NES/24/49)

- 7.13. The Chair invited Karen Wilson to introduce the report.
- 7.14. At the request of Karen Reid, Karen Wilson noted the following areas within the report:
- a) NES has received the formal feedback letter from Scottish Government which confirms the approval of the 2024-25 Annual Delivery Plan. This is referenced at 1c in this report and follows at agenda item 11.2 today for noting.

- b) Paragraph 2.2 of the report indicates that 87% of NHS Education for Scotland staff took part in the iMatter survey. While this figure is marginally lower than in previous years, it still represents an excellent response rate. The employment index has decreased by 1 point to 84; however, it is important to note that this remains a commendable score given the current fiscal uncertainties.
- c) The report notes that Dr Robert Farley, Associate Director of Healthcare Science, is retiring. Karen Wilson advised that Karen Reid recognises his considerable commitment and contribution throughout his career with NES, which saw the establishment of the Healthcare Science workstream in 2008.
- d) The report acknowledges the attendance at the recent webinar held on 15 July 2024 where over 433 staff participated in the session, with many colleagues sharing their views and submitting questions.
- e) Karen Wilson reported that Karen Reid also wanted to acknowledge the outstanding efforts being conducted in Dental, highlighting that the Skills Development Scotland (SDS) Quality Assurance report has been published with a summary of the quality assurance reviews. Also to note the NES Scottish Qualifications Authority (SQA) Approved Centre conducted an external verification visit to 9 NES SQA programmes, all of which achieved a rating of 'High Confidence identified in the maintenance of SQA standards within this Verification Group' which is excellent.

7.15. The Chair thanked Karen Wilson for her introduction and opened the meeting to other members of the Executive Team for their introductory remarks.

- a) Emma Watson highlighted the improved induction programme referenced in section 3.1.4 (a), indicating that it is now accessible to all specialties and grades, including all International Medical Graduates (IMGs) commencing their training in Scotland in August 2024. She highlighted that all candidates would receive support from NES, and that this programme has evolved from the previously established STEP Programme, which was offered to General Practitioners (GP) Specialty Training. Emma Watson remarked that this initiative represents progress towards addressing differential attainment and fostering an inclusive environment for all participants.
- b) The Board noted the excellent feedback received from GPs at various stages in training and they acknowledged the positive support received from NES.
- c) Emma Watson highlighted that there are now only 4 sites under enhanced monitoring, advising that 2 of these are legacy sites. She informed members that NES is providing a supportive relationship with NHS Boards to facilitate them overcoming their challenges.
- d) The Chair and the Board congratulated Emma Watson for the improvements made through the enhanced monitoring process and

recognised that NES is now perceived as a supportive entity, ready to assist NHS Boards during these challenging times.

- e) Emma Watson highlighted that the results of the General Medical Council (GMC) National Training Survey were published on 25 July 2024. She emphasised that NES continues to be the leading country among the 4 nations, achieving a high ranking as a Deanery entity. She advised that 33 of the specialty programmes offered have attained the number 1 position in the UK, acknowledging the effective initiatives of teams in refocusing their support on the Doctor-patient environment.
- f) The Chair noted the positive GMC survey results and asked for assurance that there would be active engagement with the small number of areas that were experiencing problems and challenges. Emma Watson advised that this will be considered at the next Medical Faculty Quality Group and an update can be provided to the next Board meeting.
ACTION: EW
- g) Andrew Sturrock highlighted that the training provided to Pharmacy Technicians in Scotland, which was a government-funded scheme, will end in September 2024. He remarked that future plans to continue this scheme with alternative funding are currently being explored. He also highlighted that NES is working with the General Pharmaceutical Council to create new standards for the Initial Education and Training of Pharmacy Technicians and working to develop a career framework. He asked the Board to note that 10% of participants in the SDS apprenticeship report for dental and pharmacy were pharmacy technicians.
- h) The Chair recognised the importance of this scheme and expressed his disappointment at the cessation of the funding. He emphasised the importance of keeping the Board informed on these matters and requested additional details so he can raise the issue with the Ministers or Government colleagues if the opportunity arises.
ACTION: AS
- i) Kevin Kelman asked the Board to note the launch of the NHS Scotland Academy Skills and Simulation Centre on 22 May 2024. He advised that this was hosted by the NES Chair, the Chair of NHS Golden Jubilee, and the Cabinet Secretary. He reported that the 2 ultrasound training rooms, will be complimented by the 2 endoscopy training rooms opening at the beginning of September 2024.
- j) Tracey Ashworth-Davies drew the Board's attention to the Human Resource (HR) Transformation Programme at paragraph 4.1.8 of the report and highlighted the complexity and composition changes in the workforce over the past few years. She advised that the Transformation Programme would focus on stabilisation, recovery and transformation of the processes, systems, and models throughout HR. She remarked that the transformation phase will be supported by NES Technology and the QI Team, and this will play a crucial role in the support of the Programme.

- k) Tracey Ashworth-Davies asked the Board to note that following the success of the first cohort, a second cohort of trainees in Leading Digital Transformation in Scotland Health Care Sectors has been approved.
- l) David Felix provided the Board with an additional verbal update, advising that NES has just recently been granted funding to enhance the number of undergraduate students participating in outreach in Dumfries and Galloway. He advised that the objective is to boost recruitment in the area by encouraging students to undertake placements in Dumfries and Galloway, which will address the longstanding issue relating to dentists and training in the area.
- 7.16. The Chair thanked the Executive Team for their remarks and due to further technology issues in the room called for a short break whilst the technology issues were resolved.
- 7.17. The Chair reconvened the meeting and opened to questions.
- 7.18. The Board asked if there were any specific implications for NES in relation to the UK COVID-19 Inquiry Module 1 noted at 2.1 (d)
- 7.19. Karen Wilson advised that at this point in time there were no implications for NES in relation to the UK Inquiry Module 1, but the NES COVID-19 Inquiry team were keeping a close eye on any developments in relation to both the UK and the Scottish COVID-19 Inquiries.
- 7.20. The Board asked if UK COVID-19 Inquiry Module 3 would have any further impact for NES.
- 7.21. David Felix reported that following the NES Module 3 written witness statement submission, it is highly unlikely that NES will be called to provide oral evidence for this module.
- 7.22. The Board noted at 2.1 National Care Service (NCS) that a call for written evidence has been made and asked if NES would be providing a response.
- 7.23. Gordon Paterson reported that Karen Reid and Fiona Davidson, Chief Executive Officer (CEO) NHS Highland and himself remain members of the tripartite group which also includes Convention of Scottish Local Authorities (COSLA) and Scottish Government on behalf of NHS Scotland. He advised that a response has not been prepared by NES, but a response is being drafted on behalf of the Board Chairs and Chief Executives to which NES will contribute. Gordon Paterson went on to advise that the submission date has been extended and the response submitted on behalf of NHS Board Chairs and NHS CEOs could be shared with the NES Board for information, once it was available.
- ACTION: GP**
- 7.24. The Board commended the quality of the report and asked if the Performance section could come prior to the other sections on People and Partnerships. This was agreed.

- 7.25. The Board acknowledged the innovative initiatives presented by each directorate within the report and asked if more clarity could be included regarding the evaluation and impact to back up the statements made about the success of programmes or projects.
- 7.26. The Chair remarked that this level of detail should be reported through the relevant Committee report but asked that where possible short impact and evaluation information should be included to explain why projects or programmes have been deemed to be successful. **ACTION: KR/ET**
- 7.27. The Board noted that 4.1.3 (b) of the report stated that the review of Quality Policies would be brought to Board Committees over coming weeks and asked for confirmation if this would be the Education and Quality Committee (EQC) or other Committees. **ACTION: KW**
- 7.28. The Board noted the developments in relation to the NHS Scotland Academy Simulation Centre and indicated that a visit would be useful in the future. **ACTION: DT/KK**
- 7.29. The Board asked if the Equality, Diversity, and Inclusion (EDI) plan, referenced at section 3.1.11 (b) of the report, is aimed at NES staff and trainees and asked if there are plans to engage with stakeholders around EDI.
- 7.30. Gordon Paterson advised that at this point the extension of the EDI survey to include trainees has not been considered, however he agreed to pick this up with the Equality Team and Steering Group. **ACTION: GP**
- 7.31. Tracey Ashworth-Davies added that the TURAS refresh would establish the appropriate infrastructure to allow the accurate collection of data from learners, while also mitigating any bias in the training delivery, thereby aligning with the Learning Education Strategies.
- 7.32. Karen Wilson advised that NES are placing increased emphasis on Equality Impact Assessments (EQIAs) and that relevant programmes will have a strong focus on equality and diversity.
- 7.33. The Board noted the success of the “Solihull Approach” referred to at 3.1.9 (a) of the report and recognised NES for its effective delivery of the training programme.
- 7.34. The Chair remarked on the impressive engagement of over 21,000 users in relation to the “Solihull Approach” and asked if we were promoting our successes widely enough. **ACTION: JT/NH**
- 7.35. The Chair expressed his gratitude to the Psychology Directorate for their ongoing efforts and advised of his intention to acknowledge their achievements during discussions with Scottish Government to emphasise the sustained success of the Programmes being implemented.
- 7.36. The Chair noted the Electronic Practice Assessment Document (ePad) integration at 3.1.5 (a) of the report noting that this is also referenced in the Quarter 1 (Q1) Delivery Report presented later in the agenda. He highlighted

that the updates required for physiotherapists may result in a delay in the application process for paramedics. The Chair requested that, given the minimal changes needed for paramedics, this matter should be addressed and progressed as soon as possible. It was also noted that Leicester University is eager to implement this resource and make it available to paramedics throughout other parts of the UK.

ACTION: KW

- 7.37. The Chair asked for clarity on the National Ophthalmology Electronic Patient Record (OpenEyes) referred to at 4.1.5 of the report, as he had previously understood that different equipment was being utilised by different territorial Boards and NES had developed a structure which was intended for universal use.
- 7.38. Emma Watson responded to advise that this piece of work was within the remit of NES Technology. As NES Technology were not represented at this particular Board meeting, the Chair requested that the Board is updated to determine if this system will ensure that all Boards can utilise it effectively and confirmation that roll out will not be held up.
- ACTION: CW**
- 7.39. The Chair acknowledged this is a very comprehensive report and extended the thanks of the Board to Robert Farley for all his excellent work during his time with NES and wished him well for his future retirement.

8. Performance Items

8a) 2024/25 Quarter 1 Financial Report (NES/24/50)

- 8.1. The Chair welcomed Laura Howard to the meeting to support any questions which may arise.
- 8.2. The Chair invited Jim Boyle to present the 2024/25 Quarter 1 Financial Report.
- 8.3. Jim Boyle asked the Board to note that the report sets out the financial performance for Quarter 1 2024/25 financial year plus the financial forecasts for the remainder of the year. He advised that these forecasts are based on current performance and known spending commitments, along with confirmed funding received. As such he reported that it was not the intention to bring the 2024/25 overall budget approved at 28 March 2024 Private Board through Public Board as the most up to date position is included in this report.
- 8.4. Jim Boyle advised the Board that productive budgeting workshops had taken place with Scottish Government colleagues. He drew members attention to table 1 of the report and advised that since the 28 March 2024 Private Board meeting, Scottish Government have confirmed that £7.2m of the 2023-24 allocations have been baselined and he advised that this now reduces the risk that was previously reported at the time of budget setting.
- 8.5. Jim Boyle asked the Board to note that while the early confirmation of funding from the Scottish Government is positive, financial pressures for NES and indeed all NHS Boards, as previously reported to the Board, still exists.

- 8.6. Jim Boyle asked the Board to note that at the end of Quarter 1, NES remains on track to meet its financial targets. He advised that the year-to-date reported position is an underspend of £1.7m, mainly due to phasing of budgets against actual spend, with a full year forecast underspend of £0.5m. He advised that there are factors that could change this situation throughout the year and assured the Board that further quarterly reports would be provided as scheduled.
- 8.7. Jim Boyle asked the Board to note the risks presented at Table 7 in the report remarking that these are currently green and amber. He highlighted that no anticipated allocation for Agenda for Change (AfC) or Medical/Dental 2024/25 Pay Awards have been included in the Quarter 1 report. He advised that once the outcome of the pay discussions is known, then the costs to NES will be calculated. He advised that this figure will be provided to Scottish Government who have confirmed their intention to fully fund. Jim Boyle went on to report that the current forecast position assumes we will receive funding of £0.1m for the impact of the Reduced Working Week which formed part of the 23/24 AfC pay settlement. He advised that this has not been confirmed by the Scottish Government, and there remains a risk that NES will be asked to meet these costs from within existing funding and therefore an impact on projected budget outturn would be felt.
- 8.8. Jim Boyle advised the Board that the Cabinet Secretary for Finance has announced emergency spending limits, and the Scottish Government informed all NHS Boards about the need to take reasonable steps to reduce the financial deficit in NHS Scotland. He remarked that the specific details of this announcement are still to be fully disclosed and may result in additional financial implications for NES. Jim Boyle advised that he is attending a meeting today which may provide more insight on how this will influence funding for the remainder of the financial year, and potentially affect the detail of the risks reported.
- 8.9. Jim Boyle advised that further information will be provided to the Board when available.
- 8.10. The Chair thanked Jim Boyle for his introductory remarks and asked about the non-recurring/baselined status of the commission funding notified by Scottish Government which, at this point in the year, is at £191.2 million.
- 8.11. Jim Boyle replied that this remains an ongoing issue for NES and other NHS Boards as there is significant additional funding beyond baseline which makes planning, particularly on staffing, difficult. He advised that the Scottish Government has confirmed that £103 million has been baselined from the non-recurring funds. He reported that Scottish Government has confirmed 82% of the expected funding, marking a significant improvement from previous years.
- 8.12. Jim Boyle advised that the establishment of this baseline funding provides greater security for fixed-term contracts, particularly following the difficult decisions made earlier in the year regarding contract extensions. He went on to highlight that the report indicates that £37m is still outstanding. Jim Boyle reported that this amount is categorised in the report as green, amber, and red,

with the majority being amber, he advised that whilst verbal confirmation has been received it has not yet been documented in writing.

- 8.13. The meeting experienced further technology issues during Jim Boyles introduction. The Chair recognised that IT colleagues were working on resolving the issue and apologised to members for this but after checking that members were still hearing the audio he opened this item for questions.
- 8.14. The Board acknowledged the information within the report and thanked Jim Boyle for explaining the complexities and referred to the announcement made by the Cabinet Secretary, in relation to discretionary funding, and asked what proportion of the NES Budget is classified as in this way.
- 8.15. Jim Boyle advised that the statement made by the Cabinet Secretary was related to the pay award and that the discretionary spending and other spending restrictions had been implemented to ensure that there was sufficient resource to meet the costs of these awards. He emphasised that there is still a potential risk in funding this year's pay award, however there is no additional information available at this time and as such he has brought this potential risk to the Boards attention.
- 8.16. Jim Boyle reported that the majority of NES's budget is allocated to employment contracts, building leases, and contracts with education providers. He remarked that consequently, the funds available for discretionary spending, which are not legally committed, are quite small. He advised that in November 2023, the Scottish Government requested a halt to discretionary spending. He reported that NES responded by suspending approximately £2.1 million in expenditure, and it is anticipated that a similar amount would be suspended again. Jim Boyle remarked that further guidance is awaited and there may be additional asks about discretionary spending, and the Board would be updated in due course.
- 8.17. Karen Wilson added that, for example, there are staff employed on non-recurring funding who work part-time whose hours can be temporarily increased, and NES tries to maintain flexibility with individual employees allowing individuals to work for a set period of time.
- 8.18. The Board referred to the second risk specified in the report, relating to the underachievement of savings plan or elements of the plan through implementation issues and asked if there had been sufficient progress to impact the reduction of this risk.
- 8.19. Jim Boyle indicated that due to timing this risk hasn't been revised. In light of the recent announcement, however, and once the allocation letters have been assessed there is a possibility that this risk may change. He reported that all risks will be reviewed following the announcement.
- 8.20. The Board asked for clarity on the headings in table 9 in the report. Jim Boyle advised that the headings are graded to give the Board more detail on the status of implementation. He explained that the first column shows the savings which were presented and approved at Board in March of approximately £3.5 million, the second column notes the savings which are at risk of not being

achieved due to specific circumstances within a particular directorate which makes these savings more challenging than initially expected in March. The next 3 columns note the decision not to proceed with particular savings and replace with an alternative action, He advised that the final column is the savings which Scottish Government policy teams asked NES **not** to proceed with, (amounting to £471,000). NES are currently working through how to mitigate the impact. Jim remarked that the number will probably become lower, however this figure is accounted for in the financial plan and projections.

8.21. The Board approved the report.

8.22. The Chair thanked Jim Boyle and Laura Howard for the report and Laura Howard left the meeting.

8b) 2024/25 Quarter 1 Strategic Risk Update Report (NES/24/51)

8.23. The Chair invited Debbie Lewsley to introduce this item.

8.24. Debbie Lewsley presented the first quarter update of the Strategic Risk Register. She reported that this shows no new or escalated risks, nor any changes in risk ratings. She asked the Board to note the additional wording at Risk 9 which dealt with the misalignment of Scottish Government priorities and expectations, and NES being unable to put sufficient measures in place to address ongoing cost and funding pressures. She reported that 5 of the risks categories have been realigned to new categories after a full review by the Executive Team.

8.25. The Chair thanked Debbie for her introduction and opened to the Board for questions.

8.26. The Board referred to Strategic Risk 1 and asked if there was a risk that not all stakeholders have the same needs and expectations of NES and asked if this should be separated in the risk management strategy, emphasising the importance of balancing the differing expectations.

8.27. The Chair asked if more detail could be added to the description as stakeholders are a disparate group and the risk should reflect the differences.

8.28. Debbie Lewsley advised that she would discuss these points with individual risk owners and advised that any amendments would be reviewed by the Executive Team. She confirmed that the Quarter 2 risk report would be updated accordingly. **ACTION: DL**

8.29. The Board commented on the spending restrictions and asked if this was adequately covered in the risk report.

8.30. Jim Boyle reported that the recent announcement of spending restrictions from Scottish Government could indeed have significant impact on NES's Strategic Plan and advised that he would review Risk 1 and determine if it needs to be escalated and if additional actions or controls need implemented. **ACTION: JB**

- 8.31. The Board asked why recent updates to Strategic Risks 3 and 10 had not been included in the register and if this was due to the timing of the report.
- 8.32. Jim Boyle highlighted that this was due to the dynamic and constantly evolving nature of risks and confirmed that he and Debbie Lewsley would review the process to ensure that the information presented to the Board is as current as possible. He advised that should there be any updates following the distribution of the papers a system will be established to communicate this information to the Board.
ACTION: JB/ DL
- 8.33. The Board asked about the methods to measure Strategic Risk 4 as there is a need to determine that progress is being made in this broad risk category. The Board acknowledged that there is ongoing staff engagement, however asked for clarification on the assurance that the communication is effective.
- 8.34. Tracey Ashworth-Davies responded to confirm that Risk 4 quantitative information will be added for the number of people who attend NES Directorate “Town Halls” and all staff Webinars. She advised that she would include information about the effectiveness of communication and include information from the staff inclusion surveys on communication and remarked that the iMatter score is a measure of engagement which could also be included.
ACTION: TAD
- 8.35. The Board asked for clarity when reference to the “Board” is made in the report and whether this relates to is this the NES Board or to NES as an organisation
- 8.36. Debbie Lewsley agreed to review and clarify this within future reports.
ACTION: DL
- 8.37. The Board highlighted that the risk associated with the membership of the Board itself could be updated with current information in relation to the status of non-executive recruitment.
- 8.38. Tracey-Ashworth Davies agreed that this would be updated accordingly in subsequent reports.
ACTION: TAD
- 8.39. The Board asked if Risk 6 and 7 could be reviewed to ensure these were in the right category.
ACTION: JB/ DL
- 8.40. The Board approved the NES Strategic Risk Q1 update and approved the changes to categories aligned to Strategic Risks 3,4,5,8 and 13.
- 8.41. The Chair thanked Debbie Lewsley and Jim Boyle for the report.

Quarter 1 Performance Management Reports

- 8.42. Alison Shiell and Simon Williams joined the meeting.

8c) Quarter 1 Delivery Report

(NES/24/52)

- 8.43. The Chair welcomed Alison Shiell to the meeting and invited her to present the report.
- 8.44. The Chair requested a short break to allow IT to resolve another technology issue that arose during Alison Shiell's introductory remarks. Following resumption, he invited Alison Shiell to repeat her remarks.
- 8.45. Alison Shiell provided an update on NES performance assessing it against the deliverables and milestones outlined in the 2024-25 Annual Delivery Plan (ADP).
- 8.46. Alison Shiell advised that 140 of the 175 deliverables are completed or on target to be completed, 28 milestones are progressing with minor delays, 7 are experiencing significant delays.
- 8.47. Alison Shiell reported that Quarter 1 Performance has a slightly higher proportion of red deliverables than previous reports at this point in the business year and this is due to challenging financial environment and funding delays. She advised that the cover report includes information on red and amber deliverables along with planned mitigating actions for future quarters. She also stated that future delivery reports will include the percentages of deliverables delayed due to funding issues.
- 8.48. Alison Shiell confirmed that the Scottish Government has formally approved the 2024-25 ADP, which is presented to the Board at agenda item 11.2 for noting.
- 8.49. Alison Shiell informed the Board that workshops on deliverables took place in June and July 2024 to clarify NES funding with the Scottish Government, and an agreement has been reached. She advised that changes to milestone narratives will be included in the Quarter 2 delivery report.
- 8.50. Alison Shiell highlighted some key successes including positive feedback received for NMAHP on the Outbreak Simulation Training Programme. which enhances workforce competency in managing healthcare-associated infections. This has been reported in the Journal of Hospital Infection and presentations were given at the NES Annual Virtual Conference and NHS Scotland event in June 2024. Another notable event was the 6,600 completions of NES Pharmacy e-learning resources on TURAS learn, which exceeds the Quarter 1 milestone by 1,000.
- 8.51. Alison Shiell asked the Board to note that there were some outstanding deliverables at the end of 2023-24 Quarter 4 which were rated amber and not incorporated into the 2024-25 ADP. She advised the Board that there were delays in the rollout of the Open Eyes electronic patient record application (app) and integration of the app National Digital Platform by NES Technology Service (NTS). Completion is now expected by the end of August 2024. She asked the Board to note that the Psychology deliverable aimed at health and wellbeing outcomes for people living with dementia, was delayed due to workforce availability to attend training and internal capacity issues. She advised that this

programme has non-recurrent funding and is at risk until confirmation of funding is received, however conversations with Scottish Government continue.

- 8.52. The Chair thanked Alison Shiell for her remarks and opened up to members for questions.
- 8.53. The Board recognised the comprehensive detail provided in the report and requested that future reports include more information on the deliverables that are not funded, and which factors NES can control and which we cannot. The Board asked if the report could include a section on progress with NES delegated duties. **ACTION: ASH/CBI**
- 8.54. The Board noted the statement in relation to the Digital Front Door at ADP Reference No. 4669 and asked how this was being progressed as there seemed to be a possibility of outsourcing the technology development which would have major implications across the Health and Care Systems.
- 8.55. Christina Bichan advised that there is ongoing discussion regarding the delivery model and business case to ensure best value and optimal system utilisation. She remarked that NES Technology Service (NTS) are involved, and the delay is due to these discussions, further updates will be provided to the Board in the next Quarter report and will be discussed fully at the upcoming Technology and Information Committee (TIC) on 27 August 2024.
- 8.56. The Board requested, as part of the report summary, if it would be possible to provide predictions with an indication for the next quarter.
- 8.57. Alison Shiell advised that this has been discussed and it will be taken forward for the Quarter 2 report. **ACTION: ASH**
- 8.58. The Chair noted that ADP Reference No 4361 the Transgender Care Knowledge and Skills frameworks scheduled for June 2024 has been postponed and asked if there is a risk to the completion date of September 2024 due to the delay.
- 8.59. Karen Wilson advised that the framework is complete and that the delay is due to changes in design, however she assured the Board that it is on the digital priority list. She advised that there is a failsafe should it not be finalised in time, but the completion date of September 2024 will be achieved.
- 8.60. The Chair requested further details and explanation on ADP Reference No 4650, which relates to NES Psychology work with Health Board partners to support Educational Infrastructure networks and services. Although the Service Level Agreements (SLAs) for 2024/25 have been drafted, they have not been issued due to pending funding confirmation from Scottish Government (SG). NES Psychology is collaborating with Boards to continue funded services despite the funding uncertainty, and it is expected that SLAs will be issued in Q2 if funding is confirmed early.
- 8.61. Judy Thomson agreed to provide further information to the Board on this. **ACTION: JT**

- 8.62. The Chair asked if the Mental Health Strategy and the excellent work being taken forward by Psychology has been appropriately prioritised amidst the focus on efficiency savings and asked if this was something that he, on behalf of the Board could provide further support with,
- 8.63. Judy Thomson acknowledged that any additional support that the Chair could provide would be welcome and noted that current pressures have meant some programmes have been paused within Mental Health.
- 8.64. The Chair referred to ADP Reference No 4555, the GP workload analysis tool and the evaluation of hybrid education and asked if there was an impact assessment of the decision to halt the project and not to replace the post-holder.
- 8.65. Emma Watson indicated that this is a workstream under NTS. She reported that the digital team is offering a Primary Care programme for the transitioning from bi-annual workforce reporting to a more real-time approach.
- 8.66. Alison Shiell advised that she would liaise with Christopher Wroath to provide more information about why those Programme has been halted and provide an update to the Board. **ACTION: ASH**
- 8.67. The Chair referred to item ADP Reference No 4341 and highlighted the link with the CEO report and the potential issue that the ePads for paramedics would be delayed due to the updates required for physiotherapists. He emphasised the need to prevent any delays in progress.
- 8.68. The Board approved the Quarter 1 Delivery report and noted the amendments made to the 2024-25 NES Annual Delivery Plan.
- 8.69. The Chair thanked Alison Shiell for her report and Alison Shiell left the meeting.

8d) Strategic Key Performance Indicator (SKPI) Report: Revised Board Reporting Sequencing (NES/24/53)

- 8.70. The Chair welcomed Simon Williams to the meeting and asked him to present the report which comes to the Board for approval.
- 8.71. Simon Williams informed the Board that currently, Quarterly SKPI reports are presented at the first Board meeting following each quarter, but due to the timing of the Board, this is not prior to the delegated Committee review. He reported that a recent internal audit recommendation was that SKPI performance data should be reviewed by the relevant standing Committee before being presented to the Board. He advised that this paper proposes a new sequence to implement this recommendation. He went on to report that if approved by the Board, SKPI reports will first be reviewed by the Committees and then presented to the Board. He asked the Board to note that a full SKPI report will be issued by correspondence for their awareness at the first meeting after each quarter. He advised that this change aims to ensure that SKPIs are thoroughly reviewed by the appropriate committee before reaching the Board.

- 8.72. The Chair advised that changing the sequencing would allow for any actions to be undertaken at an earlier stage and be addressed if required. He then opened the meeting for any questions.
- 8.73. No questions were asked, and the report was approved by the Board.
- 8.74. The Chair thanked Simon for the report, and he left the meeting.

9. Triennial Items

9a) 2020-2023 Corporate Parenting Triennial Progress Report (NES/24/54)

- 9.1. The Chair welcomed Nancy El-Farargy to the meeting.
- 9.2. The Chair invited Gordon Paterson to introduce the report.
- 9.3. Gordon Paterson informed the Board that he has recently assumed the Corporate Parenting responsibilities previously held by Judy Thomson, as he supports the work of NES regarding children's rights and the commitments outlined in the United Nations Convention on the Rights of the Child (UNCRC). He asked the Board to note that this initiative is progressed by members of the children's rights subgroup. Gordon Paterson highlighted that the report includes contributions from the NES directorates, and this has been collated by Nancy El-Farargy. He asked the Board to note that the report remains in draft form as they await updates from colleagues on data in response to additional information requested by Karen Reid during the review process, and this is indicated in the report using red brackets.
- 9.4. Gordon Paterson handed over to Nancy El-Farargy for any additional introductory remarks. Nancy El-Farargy drew the Board's attention to the corporate parenting duties NES has regarding the care and wellbeing of children and young people with care-experience, alongside the 6 care responsibilities. She also pointed out the 8 new wellbeing indicators that reflect the obligation to support these children and young people, which are: faith, healthy, achieving, nurtured, active, respected, responsible, and included.
- 9.5. Nancy El-Farargy asked the Board to note that within the 2023-26 NES Strategy there is a commitment to support care-experienced children and young people in collaboration with partners.
- 9.6. Nancy El-Farargy invited the Board to note some successful resources that NES provides, Trauma Informed Practice, Annual Care Experience Week, Work and Preparation of The Children's Right Agenda, The Promise, Essential Learning for Child and Adult Protection Modules
- 9.7. The Chair thanked Nancy El-Farargy for the comprehensive and extensive report which covers a complex area and highlights the significant extent of work across NES.
- 9.8. The Chair opened up to members for questions.

- 9.9. The Board asked how improvement will be recorded and how any actions associated with the report will be progressed.
- 9.10. Gordon Paterson advised the Board that an Action Plan will be developed by the end of March 2025. He reported the importance of the activities which are implicitly for the benefit of looked after and care-experienced children, as these will also benefit those working with young people.
- 9.11. The Board asked how some of these good news stories can be shared publicly in order to highlight NES values and the commitment and determination that NES has to make a difference.
- 9.12. Gordon Paterson advised that once the report is approved, he will link with NES Communications to publish the report on the website. He advised the Board that the report will also be submitted to Scottish Government. Gordon Paterson highlighted that the Children's Commissioner has asked for an introductory meeting with Karen Reid and himself and this will provide an opportunity to demonstrate the work that NES has been doing to support children and young people.
- 9.13. The Board referred to the right of the child to be communicated with and asked if a version of this report will be prepared for children and young people, whether this be an animation or a simplified version.
- 9.14. Gordon Paterson noted this point and agreed to take this forward in future planning. **ACTION:GP**
- 9.15. The Board asked about the development of the action planning process specifically regarding the potential for an impact evaluation and queried what methodologies would be considered.
- 9.16. Gordon Paterson highlighted the challenges associated with transitioning from assessing the effects on learners to demonstrating implementation into practice and the subsequent changes to services. He recommended a shift in focus from activities and productivity to impact and outcomes, which will be incorporated into the discussions concerning the Action Plan.
- 9.17. The Board approved the report.
- 9.18. The Chair thanked Nancy El-Farargy and Gordon Paterson for the report and Nancy El-Farargy left the meeting.

10. Governance Items

10a) Co-opted Member Technology and Information Committee and Chair of the Turas Refresh Programme Board (NES/24/55)

- 10.1. The Chair invited Della Thomas to present the report.
- 10.2. Della Thomas advised the Board that this report is presented for approval to continue the Co-option of Angus McCann to the Technology Information

Committee from 1 September 2024 to 31 August 2025, and the continued Co-option, over the same time period, to the role of Chair of the TURAS Refresh Programme. Della Thomas advised members that Angus McCann is currently a non-executive director at NHS Lothian and will retire from that position on 31 August 2024. She advised that his upcoming retirement will not impact his Co-opted position with NES. Della Thomas reported that the NES Board Standing Orders allow for this Co-opted position to complement the Board's existing skills and expertise, as Angus McCann brings valuable skills and knowledge in the technology and digital areas. She advised that Karen Reid as Accountable Officer has approved this Co-opted role.

- 10.3. The Chair thanked Della Thomas for her introductory remarks and opened the meeting to the Board for questions.
- 10.4. There were no questions, and the Chair thanked Della Thomas for the paper and the Board approved the report.

Significant Issues to report from Standing Committee

10b) Audit and Risk Committee 13 June 2024

- 10.5. The Chair welcomed Jean Ford, Non-Executive Director and Chair of the Audit and Risk Committee to provide a verbal update from the recent Audit and Risk Committee meeting held on 13 June 2024.
- 10.6. Jean Ford summarised the main reports considered at the recent Audit and Risk Committee including the Annual Report and Annual Accounts prior to Private Board on 27 June 2024. She highlighted the Audit and Risk Committee considered all the Standing Committee Annual Reports, including their own Annual Report which also then went forward to the 27 June 2024 Private Board. The Committee also considered the External Audit Report, and she advised that there were no material issues.
- 10.7. The Chair opened to the Board for questions, as there were none the Chair thanked Jean Ford for the update.

11. Items for Homologation or Noting

11.1. NES Standing Committee Minutes

11.1a) Audit and Risk Committee, 24 April 2024 (NES/24/56)

The minutes of this meeting were homologated by the Board.

11.2 2024-25 NES Annual Delivery Plan: Confirmation of Scottish Government sign off (NES/24/57)

- 11.2. The Board noted this paper which had been previously approved during Private Board session.

12. Any Other Business

- 12.1. There was no other business requiring consideration at this meeting other than the additional business that had already been taken earlier in the meeting.

13. Date and Time of Next Meetings

- 13.1. The Chair announced the forthcoming meetings as the Board Development Session on 4 September 2024 and the Public Board Meeting on 26 September 2024 both of which will be hybrid meetings.
- 13.2. The Chair thanked everyone for their attendance and apologised for the technology issues which had arisen during the meeting.
- 13.3. The meeting closed at 13:23 much later than scheduled due to the technology issues experienced.

LS/DT/DG/KW
NES Sept 2024 v03

Agenda Item 6

26 September 2024

Rolling Action List arising from Board meetings

Minute	Title	Action	Responsibility	Date required	Status and date of completion
Actions raised at Board meeting on 15 August 2024					
6.3	Action from Previous Board Meeting	The Action Plan from the NES Climate and Emergency Sustainability Group will be circulated for information.	JB	26-Sept-2024	In Progress The Action Plan will be formally presented for the first time to the Audit & Risk Committee at its meeting on 3 October 2024, and it will then be circulated to the Board for information.
6.4	Action from Previous Board Meeting	The "Summary of the Learning and Education Strategy Document" will be circulated for information.	KK/RR	26-Sept-2024	Complete Circulated on 22 August 2024
7.15 (f)	Chief Executive's Report	Update to be provided on the GMC survey results on active engagement with areas experiencing problems and challenges	EW	26-Sept-2024	Complete Email with information shared 18 September 2024.
7.15 (h)	Chief Executive's Report	Provide the Chair with additional details on the cessation of funding for the Pharmacy Technician training	AS	26-Sept-2024	Complete Information provided to Chair and CEO on 16 August 2024
7.23	Chief Executive's Report	Share the response submitted on behalf of NHS Boards Chairs and NHS CEOs in relation to National Care Service with the Board once this is available.	GP	26-Sept-2024	In Progress The consultation period is extended to 20 September 2024. The response will be shared once submitted and published
7.26	Chief Executive's Report	Short impact evaluation information to be added to future CEO reports to explain why projects or programmes have been deemed successful	KR	26-Sept-2024	Complete CEO has implemented where appropriate for the 26 September 2024 Board. All reports going forward will incorporate impact and evaluation of successful pilots and work.

Minute	Title	Action	Responsibility	Date required	Status and date of completion
7.27	Chief Executive's Report	Confirmation required if the review of Quality Policies would be submitted to Education and Quality Committee or via other Committees	KW	26-Sept-2024	Complete The Quality Policies document was sequenced through the 12 September 2024 Education and Quality Committee (EQC). Any updates or reporting back will be through the EQC.
7.28	Chief Executive's Report	The Board indicated that a visit to NHS Scotland Academy Simulation Centre would be useful	KK/DT	26-Sept-2024	Complete The proposal for a visit the NHS Scotland Academy Simulation Centre at the NHS Golden Jubilee, has been added to the Board Development rolling list and will be arranged in due course.
7.30	Chief Executive's Report	Discuss with the Equality Team and Steering Group if the EDI survey can be extended to include trainees	GP	26-Sept-2024	In Progress Discussion has taken place with the Equality Team and Steering Group and a further progress update will be provided at 26 September 2024 meeting by GP.
7.34	Chief Executive's Report	Review the promotion of the Solihull Approach to share our success as widely as possible	JT / NH	26-Sept-2024	Complete This was circulated by correspondence to the Board on 18 September 2024.
7.36	Chief Executive's Report	Review the requirements for the Electronic Practice Assessment Document (ePad) update for Paramedics and progress the programme for roll out	KW	26-Sept-2024	In Progress ePad is ready for publication, however this aspect is part of the Digital Prioritisation and as such has not been rolled out as yet.
7.38	Chief Executive's Report	Update requested on the equipment for National Ophthalmology Electronic Patient Record (OpenEyes) to ensure utilisation is available for all	CW	26-Sept-2024	In Progress A verbal update will be provided to the 26 September 2024 Board meeting.
8.28	2024/25 Quarter 1 Strategic Risk Update Report	More detail requested to be added to descriptions for Strategic Risk 1 in relation to stakeholders	DL	21-Nov-2024	In Progress This will be reported back to Board in the Quarter 2 Strategic Risk update scheduled for 21 November 2024 Board meeting.

Minute	Title	Action	Responsibility	Date required	Status and date of completion
8.30	2024/25 Quarter 1 Strategic Risk Update Report	Review all Risks following announcement of spending restrictions	JB	21-Nov-2024	In Progress This will be reported back to Board in the Quarter 2 Strategic Risk update scheduled for 21 November 2024 Board meeting.
8.32	2024/25 Quarter 1 Strategic Risk Update Report	Review a method of communication which will provide an update on Risks after Board papers have been distributed to ensure the most up to date information is reported to the Board	DL/JB	21-Nov-2024	In Progress This will be reported back to Board in the Quarter 2 Strategic Risk update scheduled for 21 November 2024 Board meeting.
8.34	2024/25 Quarter 1 Strategic Risk Update Report	Include information on effectiveness of communication and include information from the staff inclusion surveys within Webinars and Town Halls for Risk 4	TAD	21-Nov-2024	In Progress This will be reported back to Board in the Quarter 2 Strategic Risk update scheduled for 21 November 2024 Board meeting.
8.36	2024/25 Quarter 1 Strategic Risk Update Report	Review the 'Board' terminology within the report and differentiate between NES Board or NES as an organisation	DL	21-Nov-2024	In Progress This will be reported back to Board in the Quarter 2 Strategic Risk update scheduled for 21 November 2024 Board meeting.
8.38	2024/25 Quarter 1 Strategic Risk Update Report	Review the risk associated with Board membership and update with current information	TAD	21-Nov-2024	In Progress This will be reported back to Board in the Quarter 2 Strategic Risk update scheduled for 21 November 2024 Board meeting.
8.39	2024/25 Quarter 1 Strategic Risk Update Report	Review Risks 6 and 7 to ensure the correct category	JB/DL	21-Nov-2024	In Progress This will be reported back to Board in the Quarter 2 Strategic Risk update scheduled for 21 November 2024 Board meeting.
8.53	Quarter 1 Delivery Report	Include within the report more information on the deliverables which are not funded, and if this is within NES's control	CBI/ASH	21-Nov-2024	In Progress This information will be included in the 2024/25 Quarter 2 Delivery Report which will be submitted to the Board meeting on 21 November 2024.

Minute	Title	Action	Responsibility	Date required	Status and date of completion
8.53	Quarter 1 Delivery Report	Include within the report a section whether NES has met its delegated duties or not	CBi/ASH	21-Nov-2024	In Progress As per action above.
8.57	Quarter 1 Delivery Report	Include predictions for the next quarter within the report	ASH	21-Nov-2024	In Progress As per action above
8.61	Quarter 1 Delivery Report	Provide the Chair with details and explanation on ADP Reference No 4650 relating to NES Psychology funding	JT	21-Nov-2024	Complete Email provided to Chair on 26-Aug-2024
8.66	Quarter 1 Delivery Report	Provide information on why ADP Reference No 4555 relating to the GP workload analysis tool and the evaluation of hybrid education and why this has been paused	ASH	21-Nov-2024	Complete This information was provided to the Chair by correspondence 19 September 2024.
9.14	2020-2023 Corporate Parenting Triennial Progress Report	Plan for a version of this report to be prepared for children and young people	GP	TBC	In Progress This action has prompted a wider discussion regarding the accessibility of all reports. GP has scheduled a meeting with relevant colleagues to explore this further.

NES / LS / DT
September 2024

NES/24/61
Agenda Item 07a
September 2024



CHAIR'S REPORT

David Garbutt, Chair of NES Board

26 September 2024

1. Introduction

- 1.1. Since the last Board meeting on 15 August 2024, I have attended meetings and events, as well as internal NES meetings, Board and Standing Committees.

2. Summary of Engagement August 2024

- 2.1. On 12 August I attended the introductory meeting of the National Performance Management Committee (NPMC) for the current performance management cycle. During this initial session, we discussed the agenda and planned to consider detailed submissions starting from the meeting scheduled on 21 August 2024. The second meeting, held on 21 August 2024, focused primarily on the review of performance ratings. We engaged in in-depth discussions on how these ratings should be utilised effectively.
- 2.2. On 19 August 2024 I attended a private meeting with other NHS Board Chairs to discuss topics such as cyber security and whole systems governance. Prof Lynda Bauld led a discussion on Population Health Frameworks and how we can move to a prevention-based approach. A discussion followed on what the potential role of Community Planning Partnerships might be. PHS advocated for a complete set of health improvement indicators
- 2.3. On 20 August 2024 I provided a REMCO roadshow training event for NHS Lanarkshire Remuneration Committee. This was followed by a useful Q&A.
- 2.4. I attended the Board Development Reference Group meeting on 26 August. We discussed the 2024/25 performance update, 2024/25 financial report, and the aspiring chairs programme. The Group accepted our proposal to develop a new Board Chair training programme.
- 2.5. On 29 August 2024 I joined the Promise Scotland Directors meeting. This was held in person at the Promise Scotland office at Charlotte House and discussed the new strategy and methods of involving organisations in a more meaningful way. We also discussed the complex Care landscape in Scotland in relation to transformational change and recognised that there around 44 pieces of separate legislation covering this field of activity. It is hoped that a new Bill will be presented in 2025.

3. Summary of Engagement September 2024

- 3.1. On 2 September I attended a meeting with the National Board Chairs and discussed a potential DL on reform and change which had been outlined to the Chairs Group. A meeting with all chairs was agreed and this has been set for later in the month.

- 3.2. On 4 September 2024, as Patron of the Scottish Police Memorial Trust, I was honoured to attend the 20th annual memorial service at the Scottish Police College, Tulliallan Castle. I had the opportunity to meet with the Cabinet Secretary for Justice and with the new Chief Constable to discuss future collaboration.
- 3.3. On 6 September, I travelled to St Andrews Eden Campus and was joined by the Chief Executive and other NES Directors. During the visit, we met with the Chief Medical Officer (CMO), the Dean of the University of St Andrews School of Medicine, and other senior colleagues. The purpose of the meeting was to discuss opportunities for value-based health and care, realistic medicine, learning technologies including clinical simulation, and innovation.
- 3.4. On 10 September I attended the planning meeting for the appointment of a new Non-Executive Director. We considered a range of papers and used the NES skills matrix to identify the appropriate competencies. The advertisement will be issued on 16 September, and we will hold an open evening on Teams for interested applicants on Tuesday 24 September. Interviews will be held in November before consideration by the Cabinet Secretary and we hope the new appointee will be in post at the start of January.
- 3.5. I delivered a speech at the Ministerial Launch of the “One Good Adult” resource on 11 September 2024, emphasising the additional resources developed by NES and multi-agency partners. This is another excellent piece of work by the NES Psychology team and was very well received by the Minister and all the participants on the call.
- 3.6. The Chief Executive and I along with, external stakeholders and senior colleagues from across the NES have participated in the recruitment process for the NES Dental Director position. Interviews were held on 16 September 2024, and we hope to announce the appointment soon.

**David Garbutt
Chair**

Chief Executive's Report

Professor Karen Reid, Chief Executive



Date: September 2024

1. Introduction

- a) The agenda for our September Board meeting includes a key strategic item for the NES Board to approve. The Draft Transformation Route Map has been refreshed to set out some minor revisions and expectations over the next three years and provide a guide to staff on the many elements of the transformation. It sets out the key stages and positive impact this will deliver to the people of Scotland and our partners. The route map strongly illustrates the links between the NES strategy, our Strategic Key Performance Indicators, the Organisational Development Plan, and the Corporate Improvement Programme.
- b) The Board will be asked to approve changes to NES Committee Governance. These changes are to dissolve the Technology and Information Committee by the end of the 2024-25 business year and establish a new Planning and Performance Committee effective from 1 April 2025. The Board is also invited to approve the revised generic Committee Terms of Reference (ToRs), so these can be used for the next annual review of all Committee ToRs during Autumn 2024.
- c) The Board will also receive a number of annual and governance items for review and approval, including the Information Governance and Security Annual Report 2023-24, Feedback, Comments, Concerns and Complaints Annual Report (including Participation Standard & Annual Stakeholder Report) 2023-24. Caldicott Guardian: Annual Report 2023-24

2. Updates and Announcements

2.1. COVID-19 Public Inquiries

- a) NES continues to engage in the regular meetings organised by the Central Legal Office. This provides an opportunity to receive updates on progress of both Scottish and UK Covid-19 Inquiries and resolve queries.
- b) We have not received any recent specific requests for information in respect of both the Scottish and UK Covid-19 Public Inquiries.
- c) The UK Inquiry is currently hearing evidence in relation to a wide range of important issues as part of Module 3 (Impact of the Covid-19 on the UK's healthcare systems). These include how the pandemic impacted people providing and receiving healthcare during 2020 – 2022. It is anticipated that the hearings for this module will conclude in November 2024.
- d) No fault Outcome 10.2 for doctors in training Annual Review of Competence Progression (ARCP) has been in place since Covid. The pandemic caused considerable disruption to the training of many doctors and dentists in training. While a number of measures were introduced to try to mitigate the impact on training progression, some trainees were unable to acquire the necessary competencies at a critical point in their training programme as the training was not available for them. This meant additional training time was required, and they were issued with an Outcome 10.2 at their ARCP. This Outcome will cease as of September 2024 as it is no longer necessary.

2.2. National Care Services (NCS)

- a) Following a jointly written letter to the Health, Social Care and Sport Committee from a range of partners in the sector, the submission date for views on Stage 2 of the National Care Service (Scotland) Bill has been extended to 20 September 2024. NES will not submit its own response however a collective Board Chairs and Board Chief Executives response will be submitted.

2.3. NES Stakeholder Survey

- a) The NES Stakeholder survey closed on 21 August, and we received a total of **1186** responses. The feedback is being analysed, and a report summarising the findings will be presented to the NES Board on 21 November 2024 alongside a refreshed stakeholder map.

2.4. iMatter Action Planning

- a) The iMatter action planning window closed on 27 August 2024. NES achieved an 86% completion rate which marked a 3% increase from 2023.

2.5. NES Ministerial Annual Review

- a) I am pleased to confirm that NES has its Ministerial Review on 15 November 2024. The review will be led by Ms Marie Todd, Minister for Social Care, Mental Wellbeing and Sport. The review will focus on key achievements, the NES Strategy, Medium Term Priorities, and the future sustainability of the health and social care workforce.

2.6. Financial Position

- a) On 8 September, the Executive Team issued guidance to all staff outlining plans for no discretionary spending, non-essential travel, non-essential events, and training and development. This comes in response to the significant implications for all public sector organisations, including NHS Boards, as a result of the announced £0.5 billion savings in the current financial year, as stated by Shona Robison, the Cabinet Secretary for Finance and Local Government.

2.7. Announcements

- a) **NHS Education for Scotland Framework**
The updated framework document, agreed upon by NHS Education for Scotland (NES) and the Scottish Ministers, has been submitted for approval to the Cabinet Secretary for Health and Social Care. It details their collaboration and specifies the roles and responsibilities of the NES Board, Chief Executive and Accountable Officer, the Scottish Ministers, and the Portfolio Accountable Officer within the Scottish Government, who oversees NES. Once approved, it will be posted on our website and will be reviewed in 2027.

b) Recruitment for NES Dental Director

Board members are aware of Professor David Felix’s retirement from his role as NES Postgraduate Dental Dean & Director of Dentistry. The advertisement for this role went live on 10 July 2024 and interviews will be held on 16 September 2024. The successful candidate will have a significant leadership role in the development and delivery of future dental education and training to the NHS Scotland workforce.

c) Dental Guidance Programme Milestone Anniversary

The [Scottish Dental Clinical Effectiveness Programme \(SDCEP\)](#) celebrates the milestone of its 20th anniversary. It was established as part of Scotland’s Dental Action Plan funding within NHS Education for Scotland in 2004 under the direction of Professor Jan Clarkson, Associate Postgraduate Dental Dean and with Dr Douglas Stirling, Programme Development Manager leading guidance development. It is a well-regarded source of user-friendly, evidence-based clinical guidance. Evolving a rigorous methodology has been crucial to SDCEP’s success in providing resources that are both evidence-informed and user-friendly. In 2016, SDCEP became the only dental organisation to gain National Institute for Health and Care Excellence (NICE) accreditation for its guidance development process, which signifies quality and reliability.

3. Our Strategic Themes

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



4. Performance - how we are performing as an organisation

4.1 Climate Change Emergency and Sustainability (CES)

- a) We are currently preparing content to feature on the NES Intranet as part of Scotland's Climate Week, which will be taking place from 23rd September to 29th September 2024 and is organised by the Scottish Government.
- b) The Cabinet Secretary for Net Zero and Energy urged public sector partners to take part through their own organisations by encouraging the following actions and steps:-
 - Facilitating discussions with and among employees, including insights on how individuals, businesses, and organisations are engaging with our efforts towards achieving net zero emissions.
 - Hosting events or activities for staff and the public that highlight your organisations work or celebrate the efforts of individuals, whether they are staff or stakeholders, in supporting our transition to net zero.
 - Promoting climate action through your organisations communication channels using the hashtag **#ScotClimateWeek**.
- c) Throughout Climate Week, the NES Intranet will showcase our environmental initiatives under various themes. On Wednesday, September 25, we'll conduct a webinar on the benefits of Active Travel for the environment and our employees, and the Non-Executive Board Champion has been invited to join.
- d) The NES Climate Emergency and Sustainability Group has also considered the Climate Emergency and Sustainability Action Plan at its most recent meeting on 9 September 2024, and this will be reported on in detail to the Audit and Risk Committee on 3 October 2024.
- e) On 8 July 2024, as part of the launch of the NES Climate Emergency and Sustainability Strategy, the Environmental Sustainability for NHS Scotland e-Learning module was added to Turas Learn. Communications were sent from the Internal L&D mailbox to promote the module, recommending that all staff complete it to support NHS Scotland's efforts in addressing the climate emergency. This module will be further promoted as part of the Scotland Climate Week material.

4.2 Medical Directorate

- a) Following the results of the recent GMC National Training Survey, we have developed an action plan to address the 25 sites identified as GMC priorities. This plan will involve visits, Director of Medical Education meetings, quality engagement meetings, SMART objective meetings, and action plan review meetings.
- b) The action plans are performance managed by the Quality team within Medicine and Education Quality Committee.

4.3 Nursing, Midwifery & Allied Health Professions (NMAHP)

- a) **Transforming Roles** – the Management Report outlining our Clinical Nurse Specialist (CNS) workforce across Territorial and Specialist Boards, fulfilling the first recommendation of [Transforming Role Paper 8](#), has now been produced and was presented to the Scottish Executive Nurse Directors in July.
- b) We asked Boards to identify all Clinical Nurse Specialists (CNS) employed in June 2023 and provide their Pay Number, Specialty, and Subspecialty. We have connected the census data to our current workforce information, allowing us to analyse whole time equivalent, pay bands, and age groups using the census as the definitive source for identifying CNSs in the NHS Scotland workforce. The historical list of specialists has increased from 48 Specialist Fields and 31 Roles and Titles to 50 Specialties and 207 Subspecialties
- c) There is now an improved picture of the CNS staff across our Territorial and National Boards which enables improved visibility of this workforce with contemporary data to support current and future workforce planning.
- d) The work undertaken has continued to raise variations in data held locally and within our national systems—the Standard Workforce Information System Scotland (SWISS) and the electronic Employee System Scotland (eESS).
- e) Work is underway with eESS colleagues to review how we can consistently capture the detail required to identify CNS staff and to clarify levels of practice, including Practitioner, Specialist (Enhanced), Advanced and Consultant
- f) A further Census to be undertaken circa 30 September 2024, to further improve data consistency, with future plans for this to become part of the NES scheduled suite of national reports.

4.4 NES Corporate Improvement Programme (CIP)

- a) The Ways of Working & Property Project continues to coordinate change management activity to support a move to a new and sustainable property footprint. The move of staff in Inverness to a smaller office footprint has been completed, refurbishment works are in planning currently to be completed during the Autumn. An agreement has been reached to extend the Westport office lease and bring NHS Lothian in to use space on the second floor. Fit-out works are now underway for the move from 2 Central Quay to 177 Bothwell Street in Glasgow. Planning for clear staff communications on timelines and the role staff are asked to play in the move are in development. In support of this, information on hybrid working will be included in the Line Manager handbook which will be launched in September.
- b) The Learning & Education Quality System project is progressing at pace. Feedback from the pilot of an Educator Capabilities Framework has been analysed and discussed with Organisational Development colleagues to fill the identified gaps. The review and development of Quality Policies and a Quality Framework for Practice-Based Learning to underpin the quality system continues and will be brought through Board committees over the coming weeks.

- c) The Turas Refresh programme has developed an Outline Business Case (OBC) setting out plans for the future development of the platform. This OBC was presented to the Scottish Government to gain formal backing. Work continues requirements gathering to inform and fully understand the technical build and development elements. The programme team continues to work up detailed programme delivery and resourcing plans which will support the development of a Full Business Case which when approved would signal the commencement of the funded programme properly. This will bring significant cashable and non-cashable benefits to NHS Scotland boards and the workforce.
- d) The Business Transformation programme continues with two projects – Meetings Management and Operational and Financial Planning Reform. Currently, the meetings management project is in the process of testing change ideas. It is also mapping all organisational meetings under a classification framework developed and agreed by their programme board. For Operational and Financial Planning Reform, an early set of workshops have been held to identify an improved and integrated planning process covering operational planning, finance, workforce, and digital prioritisation.
- e) The HR Transformation programme continues at pace. A Project Initiation Document (PID) has been agreed. The first phase of the programme focuses on stabilisation and recovery aiming to document and improve consistency in core HR processes. Phase 2, which is in early development, will focus on the transformation of the HR service. An early output of the transformation workstream will be options appraisal on the available approaches to support NES to deliver its aims through a modern, clear and professional HR function.

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

- a) **Learning Strategy and Collaboration:** Datasets and mechanisms to measure Strategic Key Performance Indicators (SKPIs) for learning and education are being identified through evolving Corporate Improvement.
- b) Efforts are being made to develop and refine the programmes and the reporting approach for the Education and Quality Committee.
- c) The [Learning and Education Quality Systems \(LEQS\)](#) Corporate Improvement Programme continues to progress with the following developments highlighted:
 - New NES Learning and Education Quality Policy going to Education and Quality Committee (EQC) on 12 September for approval.
 - The Learning and Education Hub group has commenced work to develop a central repository for learning and education information and resources.
 - The Quality Framework for Practice Learning is at the design stage ahead of socialisation and external consultation.
 - A User Engagement workshop to engage learners is planned for 23 September.

4.6 Planning and Corporate Resources

- a) Our complaints handling process is closely aligned with the NHS Scotland Complaints Handling Process (CHP). This requires quarterly reporting to the Board via the relevant

standing committee. The Quarter 1 report to EQC confirms that NES continues to receive very few complaints, reflecting our role as a national board with no remit for providing direct care. During quarter 1 2024-2025, NES received three complaints as follows:

- A complainant was not permitted to join a booked course because of lateness and was refused a refund (Not upheld)
- A complainant was seeking repayment of course fees when unable to join workshop due to technical issues (Upheld)
- A group of learners complained about the opinions expressed by a guest speaker at a workshop (Upheld)

Learning and improvements were derived from each of the above complaints.

- b) **Whistle Blowing** - For the first quarter of 2024-2025, covering the period from April 1, 2024, to June 30, 2024, no whistleblowing concerns were received within NES, resulting in a nil return. The Quarter 1 report to Staff Governance Committee highlighted the publication of the third Annual Whistleblowing Report in May 2024 and its subsequent sharing with the Independent National Whistleblowing Officer team in June 2024 as well as the activities of the NES Whistleblowing Steering Group, including plans for the upcoming 'Speak-up week,' and future communications and benchmarking activity. The importance of promoting a culture where speaking up in the public interest is encouraged was also highlighted and it was highlighted that 88% of line managers have now completed the required training on TURAS Learn.
- c) **Operational Planning 25/26** - Detailed guidance and key messages for the 2025/26 operational and financial planning approach have been issued to Directorates to support planning for the next 3 years. The guidance emphasises the importance of aligning efforts with NHS Scotland's strategic priorities and NES's corporate strategy, as well as the need for savings to be identified to enable the Board to deliver a balanced budgetary position. Directorates are encouraged to follow planning principles such as strategic alignment, best value and efficient use of resources, person-centeredness, innovation, and collaboration to optimise resource use, support prevention and early intervention, and promote equity and social justice. The output of the operational planning process will inform the Boards Finance, Workforce and Delivery Plans for 2025/26 and beyond.

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

5.1 Chief Executive Update

I have enjoyed meeting with various NES staff to discuss important NES programs and initiatives or as part of their induction. Since the last Board meeting, I have communicated key strategic messages to NES staff through all-staff webinars. The most recent webinar on NES future priorities was held on 20 August 2024, with 420 colleagues in attendance. We are pleased to see good attendance at these sessions, which provide colleagues with a platform to share their views, raise concerns, and ask questions.

5.2 Dental including Healthcare Science & Optometry

- a) The use of [Scottish Dental Clinical Effectiveness Programme \(SDCEP\)](#) products is not restricted to Scotland, having become recognised as a valuable resource throughout the UK and beyond and used extensively in undergraduate and postgraduate education and adopted in numerous other countries. Going forward, SDCEP has moved to delivering its guidance online, enabling users to access the most up-to-date information. With heightened concerns about the climate crisis, SDCEP now highlights how following guidance recommendations can help practices reduce the environmental impact of oral healthcare. Fundamental to achieving NICE accreditation has been the contribution of SDCEP's partner programme [Translation Research in a Dental Setting \(TRiADS\)](#). Through the work of TRiADS, stakeholder views, current practice and potential barriers to implementation of guidance recommendations are identified and guidance implementation evaluated.

5.3 Healthcare Science (HCS)

- a) We have received notification from Glasgow Caledonian University that the Clinical [Physiology BSc programme](#), which takes place every two years, is being discontinued. The university will continue to support the 26 trainees entering year 4 and the 13 trainees entering year 2. We are currently surveying the physiology workforce to determine their interest in pursuing further education or training
- b) We ran a webinar in August on the recently published [Healthcare Science support worker career and education framework](#). A further discussion with Scottish Government on next steps is anticipated in the light of further commissions to NMAHP on this topic.
- c) Following the Independent Review of Audiology Services in Scotland and a request from John Burns, Chief Operating Officer of the Scottish Government, we have prepared estimated costs for implementing an audiology funded place scheme, similar to the one for physiotherapy.
- d) A replacement Associate Director for Healthcare Science is being interviewed for on 16 September 2024.

5.4 Optometry

- a) Voices with lived experience are critical to the success of the new Foundation Trainee Year (FTY), hence ongoing engagement with key representatives around community clinical supervisors, newly qualified optometrists, community IP optometrists and rural and island practitioners to ensure all voices are heard.

5.5 Medical

- a) **Remote and Rural Credential:** Following the General Medical Council recognition of the remote and rural credential there has been tremendous progress –
- [Recognition Route](#) - 6 doctors e-portfolios are complete and ready to go to the first sitting of the credential panel on the 16 September 2024. This is an

important milestone in the credential journey, and we have several applications for the next round of credential recognition

- **Learner Route** - NES is supporting 3 Learner Champions through the credential starting in October 2024 (1 General Practitioner and 2 Specialty and Associate Specialty grade doctors)

- b) **Artificial Intelligence Fellowship:** The Directorate is delighted to welcome our first two Artificial Intelligence (AI) Fellows. The Fellows started in August and are based within the Radiology Department at NHS Greater Glasgow and Clyde. The AI Fellowship programme, whilst locally based, is part of a 4 nation AI Fellowship programme. These fellowships arose following engagement and collaboration with the NHS Scotland Academy, Learning & Innovation Directorate and the Clinical Lead Health Innovation (CSO ScotGov). We look forward to working and learning with the fellows and hope to offer this fellowship as a multi-professional offering next year.

- c) **Scottish Clinical Leadership Fellowship:** Thirteen new Scottish Clinical Leadership Fellows (SCLF) joined the SCLF programme in August.

- d) **Rural Advanced Practice (RAP) MSc:** Funding has been awarded for 15 practitioners to undertake the Rural Advanced Practice (RAP) MSc, for the 2nd cohort starting September 2024. The RAP MSc programme is delivered by the University of the Highland & Islands (UHI)

- e) **Rural Practice Education and Research Development:** The second round of funding applications is being shortlisted to increase rural practice education and research development. The final submission deadline is 1 March 2025 or on the allocation of available funding.

- f) **Introduction of Welcoming IMGs new to Scotland (WINS):** This regional face to face, all specialties, all grades IMG induction day was offered in Glasgow on 29 August 2024, 3 September 2024 Edinburgh and 5 September 2024 in Aberdeen.

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

- a) Short-term added capacity via NHS National Services Scotland is commencing in early September. This capacity will enable NES internal readiness for delivery of statutory function for GMC regulation of Physician Associate and Anaesthesia Associate which commences December 2024.

- b) As a result of ongoing strategic engagement and the emergent trends in education, pedagogy and learning technology as well as feedback from the Scottish Government on better evidencing the impact that Turas Refresh will have on the Vision for Reform, the Programme vision is being refined. This will include making the Programmes commitment to Personalisation and the user experience more visible.

- c) Informed by the Phase One Discovery Outputs (Cap Gemini Technical Review; Sopra Steria Organisational Requirements Commission; Turas User Survey; analysis of historical data), TURAS Refresh requirements gathering is continuing with a focus on identifying the specific challenges to be addressed with technology. These will be

overlaid to a selection of User Journeys to ensure we remain User Driven (educator; learner and organisation) and allow phasing to be planned.

- d) In the meantime, summary communications on the Phase One Discovery Outputs are being drafted and shared as part of an interim communications plan.
- e) The Outline Business Case consideration by Scottish Government was delayed from August and NES now await a revised timeline for this.
- f) The Learn Content Team continues to work with NHS Lothian to support their migration to Turas Learn at the end of March 2025. Knowledge Services staff are continuing to work with senior and executive colleagues around the tender of the digital library subscription resources. The invitation to tender for journals issued on Monday 8 July 2024 and the invitation to tender for databases followed on Friday 9 August. Once costs are confirmed, a final decision will be made in the autumn around which resources should be procured.
- g) The second meeting was held to further the internal understanding at NES regarding fellowship opportunities. We discussed ways to collect and understand and evaluate the impact of investing in fellowships and how it aligns with NES corporate strategy objectives. We also explored additional activities related to scholarship opportunities, depending on capacity.
- h) Successful recruitment of 6-month Senior Specialist Lead to progress Scottish Government commission for Apprenticeships, commencing in role in September.

5.7 NES Technology Service (NTS)

- a) **National Ophthalmology Electronic Patient Record (OpenEyes):** The Once for Scotland ophthalmic electronic patient record (EPR) is the solution which is supporting the transformation of eyecare services across NHS Scotland. The Cataract pathway will go live on 1 October 2024, following a successful pilot in the New Victoria Hospital last month which demonstrated staff in all locations (clinic and theatre) were able to use OpenEyes, with minimal support, for consent and discharge in day surgery and capturing operation notes and creating post operation letters
- b) **Turas Vaccination Management (VMT):** Respiratory Syncytial Virus (RSV) has been a major cause of hospitalisation in Scotland during past winter seasons. To support the new RSV vaccine program in Scotland, an additional disease type and vaccination product has been added to the Turas Vaccination Management application. Additionally, a new vaccination product has been included to help deliver junior

5.8 Nursing, Midwifery & Allied Health Professions (NMAHP)

- a) On 20 August 2024, NES launched a new Nursing and Midwifery Framework for Clinical Supervision (CS). Developed with stakeholders like Health Boards, RCM, RCN, Scottish Government, HIS, and NES, these frameworks support a 'Once for Scotland' approach to clinical supervision, ensuring nurses, midwives, and support workers are supported and empowered.

- b) Keynote speakers Anne Armstrong, Interim Chief Nursing Officer for Scotland, and Jaki Lambert, Director of the RCM, highlighted the importance of workplace culture, staff well-being, and quality care outcomes. Over 500 attendees learned how the Scottish CS model can improve practice and care quality through real-world experiences.
- c) CS provides professional support, feedback, and guidance, fostering confidence, motivation, and competence in a safe space. This supports professional growth, patient safety, and care quality.
- d) The Nursing & Midwifery Taskforce is exploring ways to promote a positive workforce culture, well-being, and continuous professional development. The new frameworks will guide this effort, working with Health Boards and partners to implement CS for all nurses and midwives.

5.9 Pharmacy

- a) The NES foundation training year (FTY) for pharmacists has been accredited by the General Pharmaceutical Council (GPhC) for a period of six years. This follows a significant programme of work to transform the initial education and training of pharmacists following the introduction of new Standards by the GPhC in 2021. Following successful completion of the NES FTY programme and registration with the GPhC pharmacists from 2026 onwards will be independent prescribers at the point of registration. NES was the first Statutory Education Body to be accredited by the GPhC against these Standards.
- b) 79% of trainee pharmacist sitters from Scotland successfully passed June 2024 GPhC Registration Assessment, compared to national pass rate of 75%
- c) 185 trainee pharmacists have commenced their foundation training year in the 2024-25 cohort; a further 32 trainee pharmacists are expected to commence in November
- d) The launch of NES Pharmacy podcast channel. The Podcast aims to share different insights from guests involved or undertaking pharmacy educational roles within their practice. The introductory episode, with Professor Andrew Sturrock (NHS Education for Scotland, Director of Pharmacy) and Roisin Kavanagh (NHS Ayrshire and Arran, Director of Pharmacy), provides an overview of the changes within pharmacist Initial Education and Training.
- e) Six Pharmacists recruited to the 2024 Scottish Clinical Leadership Fellowship (SCLF) programme. The fellows started on 2nd September and will join their medical and dental colleagues on the programme. This year host organisations include, National Services Scotland, The Royal Pharmaceutical Society, NHS Lothian, NHS Highland, Scottish Government, and Public Health Scotland.
- f) 24 pharmacists recruited for the Pharmacy Pathway to Advanced Practice Programme in Primary Care for 2024/25. Participant numbers remain stable, with 24 candidates currently finishing the 2023/24 Programme.

5.10 Psychology

- a) NES Psychology have been supporting clinicians working in Child and Adolescent Mental Health Service (CAMHS) by facilitating practitioners to train in Cognitive Behavioral Therapy (CBT) for Children and Young people. These courses are delivered by the Psychological Therapies Programme at the University of Edinburgh since 2015, with NES Psychology providing the clinical tutor to specifically support the NHS CAMHS clinicians undertaking the programme.
- b) CBT is one of the most evidence-based effective therapies for working directly with children and young people ([The Matrix 2023](#)). It is highly appropriate for CAMHS where children and young people present with a range of difficulties, from low mood, severe anxiety disorders, neurodivergent presentations with associated mental health problems, trauma, obsessive compulsive disorders (OCD) and complex systemic difficulties. Training more staff in NHS Scotland to deliver this effective psychological therapy has widened access to psychological therapies for children and families who have been referred to CAMHS teams across Scotland.
- c) To date we have trained 86 children's services staff in CBT certificate level and 47 children's services staff have graduated with a postgraduate diploma in CBT. These staff can then progress to gain further skills in further highly specialised CBT interventions provided by NES, such as Trauma Focused CBT and CBT for Eating Disorders. Furthermore, these clinicians can develop into CBT supervisors, to support and sustain the CBT trained CAMHS workforce in Scotland.
- d) In the past year, 23 CAMHS staff graduated from the University of Edinburgh with either a CBT certificate or CBT diploma qualification. These yearlong training programmes involve clinicians working directly with children and young people as part of their work in local CAMHS services. The impact of the training has been evaluated for both clinicians and young people. Clinicians report feeling more skillful and able to offer effective and efficient CBT to young people, and most importantly, the young people report significant improvements in their mental health as measured by routine clinical outcomes measures. A recent testimonial concluded;

'Since attending the CBT course at Edinburgh University, I have developed a wider understanding of mental health difficulties. This course has made me a more confident practitioner when working with young people that have significant mental health difficulties, especially now I have an understanding of how important the basics are, such as an in-depth explanation of the cognitive model and accompanying psychoeducation. These aspects make my practice more collaborative and explorative, compared to it being more prescriptive in the past' (CAMHS Clinician).

'Additionally, the introduction of CBT in my practice has opened up new styles of thinking and I am now a more creative practitioner as well as a better supervisor for the less senior staff members in my team. It has been a challenging and quite stressful process though, returning to academic work, keeping up to date with my portfolio and preparing for CBT sessions has taken a lot of work. My colleagues, manager and mentor have been a huge support throughout this year so far and I look forward to the future challenges that 2nd year will bring' (CAMHS Clinician).

5.11 Social Care Directorate

- a) The Social Care Directorate has recently hired a Senior Educator for our Unpaid Carers programme. Additionally, a preferred candidate has been selected for the Specialist Lead position focused on health inequalities across NES.
- b) The Director of Social Care continued to lead NES' contribution to national efforts to reduce the number of people whose discharge from the hospital has been delayed. Colleagues from NES are now working with a range of other national organisations as part of a National Improvement Support group, one of three workstreams feeding onto the Collaborative Response and Assurance Group (CRAG).
- c) Directorate colleagues are progressing our joint work with Scottish Social Services Council (SSSC) on developing a National Induction Framework and a Career Opportunities tool for social care. This work is supported by the SSSC Project Management Office and reports into the Joint Social Services Taskforce, jointly chaired by Ms Todd, Minister for Social Care, Mental Wellbeing and Sport and Councillor Paul Kelly.
- d) Our work on 'Repurposing Turas Learn Content' for social care learners is being advanced. Through a comprehensive review of learning content on TURAS, colleagues have identified relevant content that can be repurposed to support the educational and training needs of the social care workforce. This aligns with the wider Turas Refresh and the Learning and Education Quality Systems Programmes.

5.12 Workforce

- a) NES has published its [Annual Employment Equality and Diversity Monitoring Report \(2023-24\)](#). It sets out by protected characteristics: workforce composition, staff retention, staff development, recruitment and selection, gender, disability, and ethnicity pay gaps. NES has been successful in its application to the Equally Safe at Work accreditation programme ran by Close the Gap furthering its work in gender equality.
- b) Support to Line Managers and staff is being supported by a NES Hybrid Working Policy, approved by the Partnership Forum and Staff Governance Committee, being issued in September. This aligns with NHS Scotland's flexible working policies and provides useful guidance built on NES's experience of hybrid working in recent years.
- c) An online Line Managers Handbook is being launched in September, providing clear guidance to NES line managers on their roles, responsibilities, key processes and policies. This has been developed in partnership and with wide collaboration across NES.

6. Partnerships - how we are supporting our partners

6.1 Chief Executive Update

- a) NES works with partners, stakeholders, and our staff to build careers, lives, and the future sustainability of the health and social care workforce. Partnership working is integral to ensuring that NES education, training and workforce development is co-designed and shaped by the voice and needs of people with lived / living experience, as well as the needs of health and social care staff.
- b) As Chief Executive, I regularly engage with a wide range of key stakeholders across health and social care. This includes colleagues within NES, NHS Chief Executives (CEs), Scottish Government, Universities, Professional Bodies and NES's counterparts across the UK.
- c) The NES Executive Team (ET), Transformation Group (TG) and Strategic Implementation Group (SIG) continue to meet formally. Collectively these are focusing on strategic matters, strategic scrutiny, cross-organisational leadership and ensuring the direction of strategy with the focus on our people, partnerships, and performance.
- d) Some of the NES Executive Team (ET) recently met with the Public Health Scotland (PHS) ET to develop our partnership working, focusing on working together to ensure data is leveraged across different platforms and services, enabling better public health outcomes.
- e) I am pleased to announce that I will assume the role of Vice Chair of the NHS Scotland (NHSS) Board Chief Executives (BCE) Group from 1 April 2025. The BCE Group reflects the collective effort of all 22 NHSS CEs and the communities we serve, and my role as Vice Chair will further support my ongoing engagement with CEs across Scotland. Alongside the BCE Group, I meet regularly with the NHSS National BCEs (BCEs) and senior colleagues within the Scottish Government. As an Accountable Officer and BCE, I participate in private, strategy, and business meetings and meet monthly with Caroline Lamb, Director-General of Health and Social Care and Chief Executive of NHS Scotland
- f) .I am co-chairing the Joint Negotiating Committee for the medical professions and am the BCE Lead on resident / junior doctor contract reform. I am also the lead NHSS Chief Executive for pay negotiations, specifically for Consultants, Specialty and junior/resident doctors, and dentists in training. I continue to be the BCE co-lead for the National Care Service, working collaboratively with SG and COSLA.
- g) Engagement with the Scottish Government (SG) continues through my regular 121 meetings with a number of SG colleagues and my attendance at wider SG meetings. NES continues to engage with SG through the Strategic Sponsorship Framework involving myself, the NES Board Chair and SG's Director of Health Workforce. The focus of recent discussions has been on funding arrangements and NES priorities.
- h) Myself and colleagues from the NES ET recently attended a Four Nations NHS Chief Executive Peer Group meeting with our UK counterparts, including NHS Health

England, Health & Education Improvement Wales, and Northern Ireland Medical Dental Training Agency. The meeting was very collaborative and provided a useful opportunity for us to come together to present and discuss our 2024/25 priorities.

6.2 Strategic Partnerships

NES continues to develop new strategic partnerships and build on the already established partnerships. Each collaboration will impact the health and social care workforce and achieve improved outcomes. These ambitious collaborations demonstrate NES's commitment to engaging with key partners in order to deliver shared priorities which improve outcomes and create sustainability and value across the health and social care system.

- a) New Strategic Partnership agreements established with the University of Strathclyde, and the University of the West of Scotland. These partnerships will underpin a range of shared deliverables between NES and each academic partner.
- b) Partnership working with Digital Health and Care Innovation (DHI) Centre has progressed specific activity regarding the potential of XR immersive simulation as an educational mode with specific reference to practitioners within the mental health sphere and improving skill and capability for low incidence and higher risk presentations.
- c) Scottish Funding Council joint working is specifically enhancing considerations regarding collaborative working and new learner pathways: the operating department practitioner graduate apprenticeship, which is now approved by the regulator the Health and Care Professions Council (HCPC) is an example of such work.
- d) The Learning and Innovation Team is exploring external funding potential for next cohort of Clinical Artificial Intelligence fellowship, with recruitment commencing November 2024. Continuing collaborative engagement with NHS Clinical Entrepreneurs Scottish contingent and the Chief Scientist Office Innovation fellowships activity, focus on workforce education needs.
- e) Accelerated National Innovation Adoption (ANIA) NES continues its lead technology partner function, informing workforce, education and training considerations. Digital heart failure activity is paused and in review. Both stroke clopidogrel and neonatal gentamicin pharmacogenomics activity is progressing at speed to prepare value case submissions to the Innovation Design Authority.
- f) NES's strategic partnership with NHS Golden Jubilee, in the form of NHS Scotland Academy, continues to deliver training programmes for a range of career grades and professional groups, as we support delivery of services in critical areas of health and social care.
- g) Since the last report, NHS Scotland Academy has released a series of resources to support the Centre for Sustainable Delivery pathway for High Volume Cataract Surgery, supporting step 7 of the pathway: A High Performing Team. To meet demand from service, NHS Scotland Academy has also published two new modules in the Introduction to roles in Health and Social Care resource: skin care and care at the end

of life. Recruitment of learners who will take part in the first cohort of the Accelerated Biomedical Sciences portfolio is underway within Boards across Scotland

6.3 Medical

- a) **Enhanced Monitoring cases:** All 4 sites are engaged in improvement work with the NES teams and NES will continue to support sites with an aim for de-escalation of all sites.
- General (Internal) Medicine, Queen Elizabeth University Hospital
 - General (Internal) Medicine, University Hospital Ayr
 - General Surgery, Ninewells Hospital
 - General Surgery, University Hospital Monklands

6.4 NES Technology Service (NTS)

- a) The NTS ANIA team are working with other ANIA partners and Scottish Government Digital Health and Care, engaging in the initial horizon scanning phase to highlight any potential challenges to national implementation of technology. Providing insight at this early stage will support an informed decision on which innovations to recommend proceeding to the strategic case and ensure NTS and ANIA are focusing on feasible innovations to implement at an accelerated pace and provide the highest impact for Health & Social Care in Scotland.
- b) Work continues on Digital Dermatology in line with the revised delivery timeline with end-to-end testing of the solution well underway. NTS are engaging with NHS Boards to schedule User Acceptance Testing in order to have a fully tested national Digital Dermatology service offering by end of September 2024.

6.5 Nursing, Midwifery & Allied Health Professions (NMAHP)

- a) The implementation of the Learning Disability Nursing Education and Workforce review action plan is ongoing, in collaboration with Higher Education providers and NHS Scotland Boards. It aims to enhance recruitment and retention in remote and rural areas. All three Higher Education providers delivering learning disability nurse education are exploring flexible models or engaging in discussions and tests of change with NHS Scotland Boards. Efforts are also being made to improve access to learning disability programs and student placements. NES is working to influence change in the allocation of learning disability placements within NHS Scotland boards, supported by ongoing dialogue between the learning disability leadership and the Higher Education providers

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

- a) Collaborative engagement with the regional innovation hubs is enhancing understanding of context-specific needs and opportunities, with actions developing. For example, the potential to support regional offers and fellowships.
- b) NES has an ongoing facilitative role to support engagement between Boards and strategic partners to deliver the regulator-approved Operating Department Practitioner

Graduate Apprentice pilot programme. The first learners commence in September 2024.

- c) The Youth Academy team is progressing with a work plan and activity to enhance Scottish-domiciled medical undergraduate recruitment.

6.7 Optometry

- a) The Optometry team has been collaborating with key partners to develop and implement a new FTY for optometrists in Scotland. These partners include the Scottish Government, Glasgow Caledonian University (GCU), and the University of Highlands and Islands (UHI). This specific-to-Scotland, Masters-level qualification (MOptom) will enable optometrists to qualify as prescribers and has recently received approval from the General Optical Council for GCU. The degree program will commence in September 2024, with the first intake into the NES FTY placements from GCU in 2028, and from UHI expected in 2029.
- b) The Scottish Government, NES, Glasgow Caledonian University, and University of the Highland and Islands teams met for a workshop day in August, resulting in positive agreement on assessment strategy. Rural and island-specific considerations are being supported by data shared from National Services Scotland relating to current supervisory provisions that will support decision-making and future planning in that area.

6.8 Pharmacy

- a) Launch of new Pharmacy Simulation Collaborative group to engage and support pharmacists from all over Scotland with simulation-based education innovations for all sectors and stages of practice; inaugural meeting taking place in August 2024. This is supported by the launch of the Pharmacy Simulation Turas page <https://learn.nes.nhs.scot/72986>

6.9 Psychology

- a) **Autism and Neurodiversity Across the Lifespan – Webinar series** the landscape for autism and neurodiversity is rapidly changing, bringing with it positive ways of working to reduce significant mental and physical health inequalities. With this increased pace of change, staff from across the Psychology and NMHAP Directorates have supported work on *Autism and Neurodiversity across the lifespan*, creating webinar resources on a range of important and relevant topics, to support staff understanding of key issues. Webinars are a good way of providing up to date knowledge to staff where things change rapidly, as it is possible to create these quickly as things change.
- b) A foundation webinar is available for all staff wanting to understand more about language and contexts, as well as understanding more about what might be included under the neurodiversity ‘umbrella’, common co-occurrences, practical adaptations to everybody’s practice, and insights from a neurodivergent colleague.

- c) The webinar series was held live in Spring 2024, and recordings are now available on a specific [Turas page](#), along with previous webinars. To date these have been accessed by over 2000 staff.

6.10 Social Care

- a) We are supporting our partners at the Scottish Social Services Council as they begin to lead a UK wide review of the National Occupational Standards (NOS) for Health and Social Care and Childcare Learning and Development. The Social Care Directorate will be represented on the Advisory Group and on the NOS Development Group.
- b) The Associate Director, Social Care and colleague from NMAHP presented an interactive and participatory insight session on NES activities and resources for social care nurses to the Focused on the Future Social Care Nurses conference held at St Paul's and St George's in Edinburgh. This session provided participants with demonstrations and access to the Knowledge Network and Turas Learn as well as information on other ways that NES supports this workforce such as Practice Education and Education facilitators for care homes.

6.11 Workforce

- a) The National Trainee Services team within NES Workforce successfully managed employment checks and contract administration required to support the August 2024 intake of Doctors in Training across Scotland, including 1622 PVGs (Protecting Vulnerable Groups (PVG) scheme) and 501 Certificates of Sponsorship. In addition, they managed pre-employment checks, contract and payroll administration associated with 143 Dental and 131 GP trainees.
- a) [A Digital and Data Capability Framework for Health and Social Care](#) has been developed on behalf of Scottish Government and COSLA by the Digitally Enabled Workforce Team within NES. The framework applies across the health and social care workforce in Scotland and is hosted on the TURAS platform. It identifies the digital skills, knowledge, and behaviours needed across roles. The framework was developed with collaboration and feedback from parties across the sector. Tools under development to support active use of the framework include Learner Pathways and Self-assessment.
- b) Scottish Government funding was available for up to **25 places** as part of the [Care in the Digital Age: Delivery Plan 2024-25](#) and Scotland's [Digital Health and Care Strategy Enabling, Connecting and Empowering: Care in the Digital Age](#).
- c) Recruitment for Cohort 14 of Leading for the Future has led to 96 places being allocated across the health and social care sector. Applicants were given the option of hybrid or wholly online delivery this year. The cohort has a strong cross-section of participants comprising a wide cross-section of NHS Scotland Boards, social care, voluntary and third-sector organisations.

NHS Education for Scotland

NES/24/63

Agenda Item: 08a

Date of meeting: 26 September 2024

NHS Public Board

1. Title of Paper

1.1 Draft Transformation Route Map

2. Author(s) of Paper

2.1 Laura Allison, Associate Director Corporate & Quality Improvement
Janice Gibson, Associate Director ODLL
Nicholas Hay, Principal Manager – Communication and Engagement
Stephen McNamee, Head of Corporate Improvement & PMO
Christina Bichan, Director of Planning & Performance

3. Lead Director(s)

3.1 Karen Reid, Chief Executive

4. Situation/Purpose of paper

4.1 NES's Transformation Group requested a revision of the Transformation Route Map to ensure it reflects the current status of programmes and aligns with strategic communication and organisational development plans. The updated document is presented as Appendix A for review and approval by the Board.

5. Background and Governance Route to Meeting

5.1 The original Transformation Route Map provided an outline of the key deliverables and timelines for the Corporate Improvement Programmes (CIP), the Organisational Development (OD) Plan activity and wider transformation activity for NES. The document serves as a strategic guide, aligning various programmes to the organisational objectives. Since its initial publication in August 2023, significant progress has been made in several areas, necessitating updates to reflect the ongoing work, programme

developments, and changes in communication strategies, 1 year into delivery. Feedback from stakeholders and the Transformation Group has been incorporated into this revised version.

6. Assessment/Key Issues

6.1 Key revisions in the updated Route Map include:

- Updates in various sections to ensure they align with the progress made in the CIP.
- More references to OD initiatives have been integrated throughout.
- Each CIP programme now includes a section summarising Year 1 deliverables and providing a forward-looking view of upcoming actions.
- Introduction of User Stories to highlight what the changes will mean for staff, making the transformation journey more relatable and easier to understand.
- Revised Deliverables for Years 2 and 3 incorporating rewording, where required, to reflect a clearer understanding of timelines and expected outcomes.
- A refreshed Communications section to align with the updated Transformation Communications Plan and includes Year 1 updates in a similar 'We said, We did, What's next' format.

7. Recommendations

7.1 It is recommended that the Board reviews and approves this Refreshed Transformation Route Map for publication.

Author to complete **checklist**.

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

a) Have Educational implications been considered?

Yes

No

b) Is there a budget allocated for this work?

Yes

No

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

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

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

- Yes
- No

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

- Yes
- No

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

- Yes
- No

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

- Yes
- No

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

- Yes
- No

Author name: Stephen MacNamee/Christina Bichan
Date: 18 September 2024
NES

DELIVERING OUR STRATEGY

A Transformation Route Map





Foreword from Karen Reid, Chief Executive

NHS Education for Scotland operates in a unique and privileged position within Scotland's health and social care system.

We provide education, training, workforce development, data and technology for health and social care. The work we do affects everyone who works in and with health and social care services, as well as every person in every community in Scotland.

We design and deliver education, ensure quality and standards, and use technology to enable staff to be skilled, confident, and motivated to provide better outcomes. Through our NES Strategy 2023–26 we outlined a bold ambition to create a workforce that meets people's needs, as well as the needs of staff, carers, and the people of Scotland by working in partnership with our staff, learners and stakeholders.

This refresh of our transformation route map sets out how we intend to deliver on our strategic intent and the changes people will see and experience as we deliver on our priorities. It also outlines what we have delivered in Year 1 and what this has meant for our people.

Our transformation consists of many elements, each individually important. When brought together, these will deliver the significant step-change we seek, to maximise our contribution and the positive impact we can make to the people of Scotland, our partners and in the performance of our organisation.

As we continue to progress through on our transformation journey, I invite you all to engage with us, to help shape tomorrow's NES so we can support a healthier, wealthier, and more sustainable future for all.



Introduction

Our purpose in NES is to be a collaborative, innovative and inclusive learning organisation providing high quality education, training, workforce development, workforce data and technology for Scotland’s health and social care workforce. Our strategic vision is to support better rights-based quality care and outcomes for every person in Scotland through a skilled, capable, and resilient health and social care workforce.

By attracting people to careers in health and social care, we can create jobs and boost the economy.

We are adaptable, creative, and responsive to the needs of the workforce and the communities we serve. We are firmly committed to improving population health, reducing health inequalities, and working nationally and locally with partners to make a positive and lasting impact to improving the wellbeing of the people of Scotland.

We work with the Scottish Government, local government, NHS, Health and Social Care Partnerships, social care providers, academia, regulators, and other strategic partners to create new roles and services and develop new and exciting career pathways for future generations.

Our work programmes ensure that those who work in health, social care and social work are skilled, confident, and motivated to continually improve outcomes for people. We promote and uphold human rights through our education and training and provide challenge where these are not being upheld.

We work closely with the Scottish Government to help shape health and social care policies. We use our expertise to help improve care and reduce inequalities through supporting health and social care reform programmes, such as the Scottish Government’s Care and Wellbeing Portfolio, and the Scottish Government’s commitment to human rights and the delivery of a National Care Service.

In May 2023, we published our corporate strategy for 2023–26, outlining our strategic intent, centred around the themes of People, Partnership and Performance. This was followed by our Transformation Route Map in August 2023 which has now been refreshed to set out progress made in delivering the significant change programme we have embarked on across NES to support and enable delivery of that Strategy, what our staff, learners and partners can expect from us and the key milestones on our transformation journey.

Over the next two years we will work with our staff, learners, partners and stakeholders to deliver our ambitious change programme, using technology and innovation to improve education and learning and create a better and more sustainable future for health and social care. In delivering our outcomes we will be intentional in our approach to collaborate, engage, connect, share knowledge, learn from mistakes and celebrate progress. Our focus is, and will remain, improving people’s health and care outcomes through a competent, confident and skilled workforce while supporting Scottish Government’s policies.

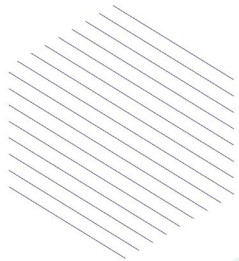


Why do we need a transformation programme?

NES operates within a continually changing environment and a health and social care system which is facing unprecedented challenges.

We are proud to be an organisation which constantly strives to deliver high-quality public services for the people of Scotland. However, we recognise that to be successful in delivering our NES Strategy and maximising our contribution within a health and social care sector which is reliant upon reform to ensure its sustainability, we must work differently as an organisation.

We are therefore committed to evolving, with people and partners at the heart of our transformation, to ensure we can support the health and social care workforce of tomorrow to deliver improved outcomes for our population. This will require a focus on innovation, technological advancements, and new workforce models. Being agile, innovative and able to maximise our potential through collective action and ensuring that we focus our attention and resources on the areas where we can maximise our impact and value is crucial to delivering on our ambition and as such is at the core of our transformation journey.





Tomorrow’s NES – our transformation journey

Transformation describes radical change that goes beyond day to day service improvement, and shifts the way we work as an organisation. NES will achieve this through consistent measured progress and positive outcomes from smaller incremental change, creating the environment, culture and readiness to embed transformation.

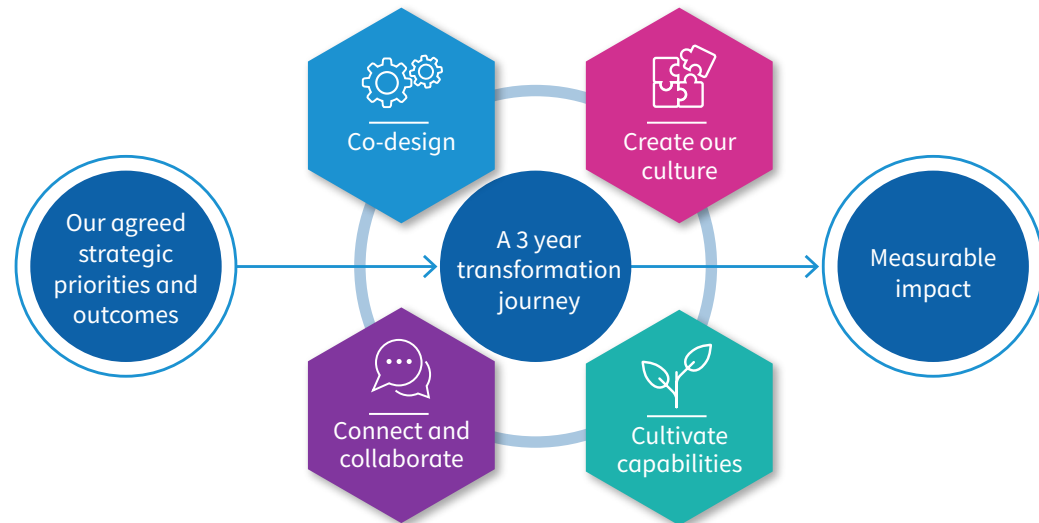
Our NES transformation journey is founded on our commitment to:

- > **co-design quality and excellence**, by working with our partners and those with lived and living experience of health and social care services to shape our education, training, and resources.

- > **connect and collaborate**, by building relationships and extending our reach nationally and internationally to innovate and learn, adding value where it is most needed.

- > **cultivate capabilities**, to build careers and a sustainable workforce which is fit for the future, both within NES and the wider health and social care system.

- > **create our culture**, by being inclusive and reflecting our values and behaviours in all that we do to support, empower, and value our staff, partners and learners.



Through our transformation journey we will create significant and sustainable long-term change by harnessing the energy, motivation and capability of our NES workforce and partner organisations and taking a holistic and integrated approach to service redesign.



Our Corporate Improvement Programmes

To support our transformation, we have developed an initial set of corporate improvement programmes, in the context of our NES Strategy and our Medium-Term Plan for 2023–26.

They are cross-cutting areas of work which impact on all three of our strategic themes – People, Partnership and Performance – and require participation and engagement from all NES Directorates.

As we progress through our transformation, these programmes will be added to and built upon to deliver our strategic intent.

The evolution of our transformation route map continues to be informed as we progress and deepen our understanding of what is most important to our staff, learners, trainees, and partners and how we can maximise our impact on our health and social care system.

Over coming years, we will measure and report publicly on the success of our change activities through our strategic Key Performance Indicators and progress reports against our Annual Delivery and Medium-Term plans. We will also measure and report on the realisation of benefits at a project and programme level.

Our initial corporate improvement programmes and their core components are set out in the following pages.



Programme Title | **Ways of Working & Property**

What is it about?

The Ways of Working & Property programme is designed to align our physical spaces and working practices with the evolving needs of our business and learners. This involves developing a comprehensive NES Wellbeing Framework to support hybrid working, ensuring consistency and effectiveness in how we operate. The programme will focus on making our workspace financially and environmentally sustainable while fostering a culture that supports both staff and learners in a hybrid working environment.

Why are we undertaking this change?

As part of our NES Strategy, we recognise the importance of adapting to the changing needs of our workforce and the health and social care landscape. By reconfiguring our spaces and adopting consistent hybrid working practices, we aim to enhance employee engagement, improve learning experiences, and reduce our environmental impact. This change is essential for maintaining our commitment to being a collaborative, innovative, and inclusive learning organisation.





Ways of Working and Property

What will it deliver?

Optimised Space Usage

- › Reconfiguration of office spaces to meet future business and learner needs in a sustainable manner.
- › Financial and environmental benefits through efficient use of resources.

NES Wellbeing Framework

- › A robust framework that supports the wellbeing of both learners and staff in a hybrid working environment.

Consistent Hybrid Working Practices

- › Implementation of NHS Scotland Workforce Policies. These policies include flexible work location and work pattern guidance. NES Hybrid Working Policy developed and implemented.
 - › Support for first-line managers to effectively implement hybrid working guidance.
-

The difference our people will see

Enhanced Engagement and Experience

- › Improved employee engagement through better-designed workspaces and flexible working options.
- › Positive learning experiences supported by environments that are conducive to both in-person and remote learning.

Adequate Resources and Support

- › Staff will have the necessary time and resources to support their work and professional development.
- › Increased sense of wellbeing among staff and learners due to supportive and adaptive work environments.

Environmental Impact

- › Reduced CO2 emissions from buildings and travel, contributing to our sustainability goals.
-

The difference our partners will see

Flexible and Adaptable Environments

- › Learning and collaboration spaces that can accommodate diverse learner needs.
 - › Enhanced accessibility and usability of our facilities for various stakeholders.
-

 **Ways of Working and Property Milestones | Year 1 (2023–2024)**

We said

> Launch of the NES Wellbeing Framework.

> Rollout of guidance and support for hybrid working within NES.

We did

> Wellbeing framework is approved. Reconstituted Healthy Working Lives Group to oversee implementation of Wellbeing Framework. Refreshed Wellbeing Hub as single point to access all staff wellbeing resources and supports.

> Hybrid Working Policy to be released also Line Manager Handbook in August. Deliverable now part of BAU.

What this means for you

> Wellbeing supports and resources are much easier to find and access. The resources we have now consider hybrid and remote working practices as well as in-office.

> Hybrid working Policy is up-to-date and tailored for NES to support both staff and Line Managers.

Year 2 (2024–2025)

Continued reconfiguration of office spaces to align with learner requirements and future business needs:

- > Move from Ninewells to DDEC.
- > Reconfiguration of office space UHI building in Inverness.
- > Move from 2CQ to 177 Bothwell St.
- > West Port: re-configuration and sharing of space.

Year 3 (2025–2026)

> Ongoing assessment and adjustment to ensure our spaces and practices remain relevant and effective.

Aligned Key Performance Indicators

- > Employee Engagement Index.
- > Proportion of staff who report having the time and resources to support their learning and growth.
- > % of learners who rate their learning experience as 80% or above.
- > Net Promoter Score for stakeholders who rate themselves likely to recommend NES to colleagues and associates.
- > CO2 emissions (Estates).
- > CO2 emissions (Staff and business travel).



User Story | **Sarah, a Specialist Lead**

Background:

Sarah has been with NES for over 10 years, working as a Specialist Lead. She is passionate about professional development and enjoys mentoring junior staff. Sarah has a busy family life and values work-life balance.

Current Challenges:

- › Struggles with commuting, which cuts into her family time.
- › Finds the current office setup lacks flexibility for hybrid work.
- › Feels that the existing wellbeing support is inadequate.
- › Sometimes lacks the resources and time to fully engage in professional development.

How the Changes Will Benefit Sarah:

- › **Enhanced Work-Life Balance:** With the adoption of consistent hybrid working practices, Sarah can work from home on days that suit her family schedule, reducing her commute and allowing more time for family and personal wellbeing.
- › **Wellbeing Support:** The NES Wellbeing Framework will provide Sarah with resources and support tailored to hybrid working, including mental health resources and ergonomic advice for both home and office setups.
- › **Optimised Workspace:** The reconfiguration of office space means that when Sarah does work on-site, the environment will be more collaborative and supportive of her professional needs, offering flexible workstations and meeting areas designed for both individual and group work.
- › **Adequate Resources:** With improved resource allocation and clear guidance, Sarah will have the tools and time she needs to engage in her own professional development, enhancing her skills and job satisfaction.



Programme Title | **Learning and Education Quality System**

What is it about?

The Learning & Education Quality System aims to develop a cohesive, high-quality learning and education framework for NES. This initiative will support the development and delivery of top-tier learning experiences for our staff, learners, partners, and service users, ensuring a consistently excellent experience now and in the future.

Why are we doing the programme?

We are committed to ensuring that our health and social care workforce is equipped with the highest quality education and training. By creating a unified and quality-assured learning system, we aim to:

- › Enhance the consistency and effectiveness of learning resources across NES.
- › Ensure our learners and educators have access to the best possible training and development opportunities.
- › Build public confidence in the skills and capabilities of the health and social care workforce.
- › Foster an inclusive approach by involving those with lived experience in the development of educational materials.





Learning and Education Quality System

What will it deliver?

High-Quality Learning Resources:

- › Easily accessible, co-designed, and consistently quality-assured learning materials tailored to the needs of the health and social care workforce.

Enhanced Learning and Teaching:

- › A learning offer that caters to both learners and educators, improving their skills and practice through well-defined pathways.

Public Confidence:

- › Assurance for the people of Scotland that the health and social care workforce possesses the right skills to meet their needs.
-

The difference our people will see

- › **Improved Learning Experiences:** More learners reporting a positive and enriching learning experience.
 - › **Inclusive Development:** Increased involvement of learners and individuals with lived experience in the creation of educational resources.
-

The difference our partners will see

- › **Enhanced Practice:** Observable improvements in learners' practice and the quality of care they deliver.
 - › **Career Development:** Access to more credit-rated programmes and enhanced skills and career development opportunities across the health and social care sector.
-



Learning and Education Quality System Milestones | **Year 1 (2023–2024)**

We said

- > Launch of the Involving People and Communities Framework.

- > Development of NES Educator Quality Standards through an Educator Capabilities Framework
-

We did

- > Developed a Framework after undertaking internal and external research and a variety of staff engagement. Additionally, we analysed real examples of involving people and communities within NES to develop an appropriate “ladder of engagement” which can be used to provide examples of engagement.

- > Developed a draft Educator Capabilities Framework based on regulatory requirements and staff consultation. Piloted the draft Framework and self-assessment tool which remains available to staff. Amendments based on feedback from the pilot and a final self-assessment tool will be launched for March 2025.
-

What this means for you

- > Colleagues will need to decide what level of engagement is needed for the work being undertaken and share across NES work such as consultation, research, evaluation, engagement so that others are able to gain insight. In time it’s likely we will need to explain why/what measures have been taken if this falls below an expected level i.e. by archetype or if the effort far exceeds the need.
 - > Educators have a framework and tool that they can use to support their personal development and team and line managers are able to create a development plan with new starters quickly to help them gain skills and experience in the necessary domains of knowledge.
-



Learning and Education Quality System Milestones

Year 2 (2024–2025)

- › Implemented the Educator Capabilities Framework
- › Implemented the Involving People and Communities Framework
- › Adoption of NES wide learning and education quality policy
- › Quality of the Practice Learning Framework launched

Year 3 (2025–2026)

- › Launch of the NES Educator career skills pathway.
- › Achievement of credit rating body status for NES.
- › Adoption of quality system for development and delivery of education programmes and learning resources

Aligned Key Performance Indicators

- › % of learners that tell us their education and training will improve their practice.
- › % of learners who rate their learning experience as 80% or above.
- › Funded trainee placements fill rate.
- › Funded trainee placements completion rate.
- › Number of NES programmes of education and training which are SCQF credit rated.



User Story | **Alexis, Health Educator**

Background:

Alexis is an experienced health educator with a passion for delivering high-quality training. She values ongoing professional development and strives to enhance her teaching methods.

Current Challenges:

- › Alexis often finds it time-consuming to locate reliable and up-to-date teaching materials, as resources are scattered across various platforms.
- › While Alexis is dedicated to her role, there are few structured pathways for career progression or professional development that specifically target educators in the health sector.
- › Despite her expertise, Alexis feels disconnected from the process of developing educational content and would like to have a more active role in shaping the resources she uses in her teaching.
- › Alexis feels there is little consistency in how educational programmes are delivered across different departments, which frustrates her as she strives to maintain a high standard of teaching.

How the Learning and Education Quality System Benefits Alexis:

- › **Access to Quality Resources:** With the new system, Alexis can easily access co-designed, quality-assured learning materials that enhance her curriculum. This means she spends less time searching for resources and more time focusing on effective teaching.
- › **Professional Development Opportunities:** The launch of the NES Educator career skills pathway provides Alexis with structured opportunities to advance her skills and career, ensuring she stays current with best practices in education.
- › **Involvement in Development:** Alexis appreciates that she can contribute her expertise and insights to the co-production framework, making her feel valued and ensuring that the educational resources meet the needs of both educators and learners.



Learner | **Ahmed, Trainee Social Worker**

Background:

Background: Ahmed is a trainee social worker eager to learn and grow in his profession. He values engaging and practical training experiences that prepare him for real-world challenges.

Current Challenges:

- › Ahmed has found that the quality and relevance of the training he receives varies significantly across different programmes. This inconsistency leaves him uncertain about whether he's gaining the right skills for his future career.
- › He is aware that SCQF credit-rated programmes offer clear benefits for career advancement, but his current access to such programmes is limited, making it harder to see a clear pathway for progression.
- › He feels that learners like him are not often consulted when educational resources are being developed, leading to content that sometimes doesn't fully prepare him for the practical realities of social work.
- › Ahmed feels there is a lack of visibility around how the training he receives aligns with his long-term career goals, making it difficult for him to plan his future professional development.

How the Learning and Education Quality System Benefits Ahmed:

- › **Consistent Learning Experience:** The new system ensures that Ahmed receives a high-quality learning experience that is consistent across different programmes, helping him build confidence in the skills he is acquiring.
- › **Credit-Rated Programmes:** With access to more SCQF credit-rated programmes, Ahmed can see clear pathways for his education and career progression, making him feel secure about his future opportunities.
- › **Engagement in Resource Development:** The inclusion of learners like Ahmed in the development of educational materials means he can provide feedback that shapes his learning experience, ensuring it is relevant and practical for his future role in social work.



Programme Title | **Turas Refresh**

What is it about?

The Turas Refresh programme aims to establish a Once for Scotland, sustainable, maintainable and future-focused user-centred digital learning and development environment for health and social care. This initiative will deliver resilient learning technology that addresses the needs of learners, educators, partners, and organisational processes. Additionally, it will meet the learning data and learning management information requirements of the health and social care workforce.

Why are we doing this programme?

In an ever-evolving health and social care landscape, it is crucial to ensure that the Health and Social Care workforce has access to high-quality, relevant training resources. In line with feedback from learners on what matters to them, the Turas Refresh programme will enhance the accessibility and effectiveness of learning opportunities, equipping staff with the learning and skills they need to deliver the best possible care to the people of Scotland. This will provide a more personalised and immersive learning experience for individuals.

By investing in a comprehensive learning platform, we aim to empower and invest in H&SC staff; foster continuous professional development and excellence; inform workforce planning and improve access to education. We do this to enhance the quality of health and care for the people of Scotland.

This ambitious programme requires a significant investment. The programme has submitted an Outline Business Case to Scottish Government to secure the investment required. The plans set out in this section will be triggered by that funding. If funding is not forthcoming, NES will reconsider the approach and priorities arising from the Phase One Discovery work.





What will it deliver?

- > **An open and personalised learning and development platform** where the H&SC workforce can easily access and engage with relevant, high-quality learning experiences, regardless of the training provider.
 - > **A collaborative approach that ensures we are driven by user-experience and our offerings are tailored and can evolve** to meet learner, educator and organisational requirements, while keeping pace with evolving technology
 - > **The utilisation of learner activity data** to enable personalisation and facilitate effective workforce planning, allowing skills gaps across the health and social care system to be identified and addressed.
-

The difference our people will see

- > Staff will have access to personalised learning giving them the resources necessary to support their professional development effectively and maximise their time.
 - > Enhanced platform functionality will lead to more efficient ways of working and improved user experience.
-

The difference our partners will see

- > Greater access to a consolidated array of learning resources for the health and social care workforce.
 - > Portable learning records for individuals, alongside appropriate reporting on essential training for organisations.
 - > An improved experience of our services from users and partners, particularly through features like Turas Appraisal.
-



Turas Refresh Milestones | **Year 1 (2023–2024)**

We said


- › Conduct an external review of Turas.

We did

- › The external review was completed by Cap Gemini and found that Turas had solid foundations for future growth. To supplement the Review and ensure a user-focus in our discovery phase, a user survey, and organisational requirements review (the latter undertaken by Sopra Steria was completed). All of the information was collated and analysed to inform planning.

What this means for you

- › In the development of Turas Refresh, the technology will focus on sustainability, maintainability and be future-focused.
 - › Enhancing the User Experience (learner; educator and line manager) will remain a central focus for the ongoing development of the programme.
-



Turas Refresh Milestones

(Commencement of work on Year 2 and 3 milestones subject to confirmation of funding)

Year 2 (2024–2025)

- › Improved Learning Interface for Learners on Turas Platform
- › Functionality for an Individual ‘Staff Passport’ enabling staff to carry key information on core statutory / mandatory training between Boards

Year 3 (2025–2026)

- › A digital staff prospectus offering a ‘shop window’ of available training
- › Improved Reporting Functionality in relation initially to Statutory Mandatory Training
- › A more personal and intuitive Turas experience for users

Aligned Key Performance Indicators

- › Proportion of staff who report having the time and resources to support their learning and growth.
- › Total number of accesses to NES learning products.
- › Number of health and social care staff accessing NES learning products as a % of the health and social care workforce.
- › % of learners who score their learning experience as 80% or above.
- › Uptake of learning products by sector as a % of total reach.
- › % of learners and trainees from the 20% most deprived data zones in Scotland (Scottish Index of Multiple Deprivation (SIMD)).
- › Net promoter score for stakeholders who rate themselves likely to recommend NES to colleagues and associates.
- › % of service providers who report utilising NES provided data workforce data.



User Story | **Moira, Healthcare Professional**

Background:

Moira is a registered nurse working in a busy hospital environment. She is passionate about continuous learning and is always seeking opportunities to improve her skills and provide better patient care.

Current Challenges:

- › Moira often struggles to navigate multiple platforms to access mandatory training and professional development courses, leading to wasted time and frustration.
- › The existing learning environment doesn't cater to her specific role or career aspirations, making it difficult for her to find relevant training that truly engages her.
- › Moira feels that her department lacks the insights needed to identify skills gaps, resulting in missed opportunities for targeted training.

How Turas Refresh Benefits Moira:

- › **Personalised Learning:** With the new personalised learning interface, Moira can easily find relevant training modules that align with her specific role and career goals.
- › **Enhanced Resources:** Consolidated access to a variety of learning resources simplifies her search for essential training, reducing frustration.
- › **Better Planning:** Learner activity data will enable her department to identify skills gaps, allowing Moira to participate in targeted training that enhances team performance.
- › **Streamlined Experience:** Improved platform functionality means Moira can easily track her learning progress, access certificates, and demonstrate her competencies.



User Story | **Sanjay, Student in Health and Social Care**

Background:

Sanjay is a final-year student pursuing a degree in health and social care. He is eager to gain practical experience and develop the skills necessary for a successful career in the field.

Current Challenges:

- › Sanjay often finds it hard to locate courses that match his learning needs and career goals, as existing resources are scattered and not user-friendly.
- › He feels that learners like him are not adequately consulted in the creation of educational materials, which may lead to resources that don't fully address their needs.
- › Keeping track of his achievements and qualifications is cumbersome, making it harder to present his credentials to potential employers.

How Turas Refresh Benefits Moira:

- › **User-Friendly Access:** The open and personalised learning environment allows Sanjay to effortlessly navigate through courses tailored to his needs.
- › **Co-Creation of Learning Resources:** With a focus on co-design, Sanjay has the opportunity to contribute insights, ensuring resources reflect the real needs of learners.
- › **Improved Learning Experience:** Feedback mechanisms built into the Turas platform enable Sanjay to share his experiences, leading to continuous improvements in educational offerings.
- › **Portable Learning Records:** Sanjay can maintain a portable record of his achievements, invaluable for job applications and demonstrating his skills.



Programme Title | **Business Transformation Programme**

Overview

The Business Transformation Programme is designed to enhance organisational efficiency and effectiveness by aligning our operations with the principles of the NES Strategy and fostering a culture of continuous improvement. This programme will take a structured approach to transforming processes and systems, ensuring they are user-focused and conducive to high-quality service delivery.

Programme Objectives

- 1. Streamline Processes:** Simplify and optimise workflows to reduce administrative burdens and increase efficiency, quality and consistency.

- 2. Enhance Strategic and Operational Alignment:** Ensure all activities are aligned with NES's overarching strategic objectives, fostering a cohesive and unified approach and Once-for-NES ways of working.

- 3. Improve Collaboration:** Strengthen communication and collaboration across departments to share resources and knowledge to enhance resilience and effectiveness.

- 4. Leverage Technology:** Implement and upgrade digital tools to support a more agile, efficient and flexible working environment.

Support for Organisational Transformation

By addressing current inefficiencies and enhancing how we work across the organisation, the Business Transformation Programme will support NES in becoming more adaptive and resilient to future challenges. This transformation will enable us to achieve best value in the delivery of our long-term plans, meet the evolving needs of the health and social care workforce, and improve overall service delivery.



What does this mean for you? | **Educator colleagues**

Current Challenges

- > Difficulty in accessing consolidated learning resources.
- > Limited collaboration opportunities with peers.
- > Administrative tasks reducing time available for teaching.

Improvements

- > **Streamlined Resource Access:** Easier access to a centralised repository of learning materials, allowing educators to find and use resources more efficiently.
- > **Enhanced Collaboration Tools:** Improved digital platforms to facilitate communication and collaboration with other educators and stakeholders.
- > **Reduced Administrative Burden:** Automated processes and clearer workflows to minimise administrative tasks, allowing educators to focus more on teaching and mentoring.

What's going to make my working life easier / better?

- > Access to a comprehensive digital library reduces preparation time.
 - > Collaborative tools enable virtual team meetings and peer reviews, enriching the teaching experience.
 - > Automated scheduling and grading systems free up time for direct student interaction.
-



What does this mean for you? | **Technologist colleagues**

Current Challenges

- > Outdated and fragmented digital systems.
- > Inefficiencies in managing and deploying IT resources.
- > Difficulty in aligning technology initiatives with organisational goals.

Improvements

- > **Integrated Systems:** Development and implementation of unified digital platforms to replace outdated systems, ensuring seamless integration and operation.
- > **Efficient IT Management:** Streamlined processes for IT resource management, deployment, and support, leading to reduced downtime and enhanced service delivery.
- > **Strategic Tech Alignment:** Clearer alignment of technology initiatives with NES's strategic objectives, ensuring technology investments support broader organisational goals.

What's going to make my working life easier / better?

- > Unified systems reduce the need for multiple logins and maintenance, streamlining daily operations.
 - > Improved IT management tools allow for quicker issue resolution and proactive system monitoring.
 - > Clarity in technology goals ensures that projects are impactful and aligned with NES's vision.
-



What does this mean for you? | **Business Support colleagues**

Current Challenges

- > Inefficient workflows leading to delays and reduced productivity.
 - > Poor communication across departments hindering effective support.
 - > Lack of clarity on strategic priorities and objectives.
-

Improvements

- > **Optimised Workflows:** Redesign of business processes to eliminate inefficiencies, speeding up administrative tasks and increasing productivity.
 - > **Enhanced Interdepartmental Communication:** Better communication channels and collaboration tools to ensure smooth coordination and support across departments.
 - > **Clearer Strategic Focus:** Transparent communication of NES's strategic priorities, enabling business support staff to align their efforts with organisational goals and contribute more effectively.
-

What's going to make my working life easier / better?

- > Workflow automation tools reduce the manual processing of paperwork, speeding up administrative tasks.
 - > Enhanced communication platforms facilitate better coordination with other departments, improving service delivery.
 - > Clear strategic guidance helps prioritise tasks effectively, leading to better resource allocation and job satisfaction.
-



During the first 12 months we have focused on sharing and building our change story and engaging people with it, building the capacity and capability for change in the organisation and delivering critical building blocks in our strategic journey such as a new Learning and Education Strategy and Organisational Development Plan. It is important to note the iterative nature of the themes on the following pages and our continuous commitment to sharpen and deepen our practice and approaches throughout the transformation process.

How we will achieve our ambition

The first year of our transformation has been critical in inspiring our people, instilling confidence in our stakeholders and creating the momentum to move projects at pace.

This routemap presents a summary of all key milestones relating to our change journey over the next three years, bringing together both our corporate improvement programme activity and critical enabling works.





Create our culture

What is it about?

- › Being clear about the culture that will enable us to most effectively deliver our vision and purpose.
- › Our culture reflects our beliefs, values and motives and is visible through what we do, the way we do it, and the way we work together and with all our stakeholders.

What will it deliver?

- › Staff feel part of an inclusive organisation that values them for their contribution.
- › We integrate behaviours and culture into how we recruit, induct, develop, and manage.
- › We engage with our learners in a person-centred way to develop and deliver quality learning.
- › We reach out to others to understand the outcomes that matter most to them.

The difference our people will see

- › Improved employee engagement.
- › More staff who experience NES as an inclusive organisation.

The difference our partners will see

- › Improved experience of our services from learners and partners.
- › Greater opportunities for collaboration with NES and to work in partnership to support the health and social care system.

Aligned Key Performance Indicators

- › Employee Engagement Index.
 - › Experience of Doctors and Dentists in Training.
 - › % of staff who experience NES as an inclusive organisation.
 - › % of learners who score their learning experience as 80% or above.
 - › Net promoter score for stakeholders who rate themselves likely to recommend NES to colleagues and associates.
 - › Number of education, research and strategic collaborations.
 - › % of technology, data and digital developments which are shaped by staff, learner and partners feedback.
-



Cultivate our capabilities

What is it about?

- › Being clear on the capabilities needed to deliver our vision and purpose.
- › Recruiting and supporting talented, inquisitive, colleagues who understand the skills and knowledge needed for NES to be successful and are supported to proactively and continuously develop them.
- › Learning new things and sharpening our knowledge, skills and capabilities to build our current and future workforce talent pipeline and capability.

What will it deliver?

- › An improved ability to include our learners and those with lived or living experience in design and delivery of our work.
- › A range of resources, planning and support to develop our leaders and managers in NES.
- › A structured set of development supports and opportunities for all staff aligned to individual pathways, with accreditation for those who want it.
- › Clear and easily accessible routes are in place to learn, develop and build on existing and new skills and knowledge.

The difference our people will see

- › Our high reputation as an employer enables us to attract and retain a talented and motivated workforce.
- › More staff feel they have the time and resources available to support their work and development.

The difference our partners will see

- › More learners and those with lived or living experience are involved in the design and delivery of our work.
- › The way that we work increases our flexibility to respond quickly to meet changing needs and expectations.

Aligned Key Performance Indicators

- | | |
|--|--|
| <ul style="list-style-type: none"> › Proportion of staff who report having the time and resources to support their learning and growth. › Staff retention rate (voluntary leavers). › Vacancy rate. › Pay equality. › Diversity of the workforce. | <ul style="list-style-type: none"> › % of staff who experience NES as an inclusive organisation. › % of health and social care workforce who report being confident in using digital ways of working. › Number of NES programmes that can demonstrate active engagement of people with lived or living experience in the development of educational resources designed to support interaction with those who use health and social care services. |
|--|--|



Connect and collaborate

What is it about?

- › We have the most effective means of communication and collaboration to act as ‘one team’ across NES, ‘bringing it all together’ so that colleagues understand the whole picture, are enabled to most effectively contribute, are up to speed on our progress, and celebrate our success.
- › We move on the journey together through regular and authentic engagement with each other.
- › We use simple language and methods to engage with others.
- › Connecting and collaborating is a way of being internally and externally to achieve the best outcomes across the system.

What will it deliver?

- › Internal and external communities of practice and interest to support collaboration.
- › Short term project-based attachments to support collaborative working internally and externally.
- › Create clear engagement channels to gather workforce, learner, and partner feedback through a range of routes.

The difference our people will see

- › Colleagues have an excellent understanding of their role, its contribution to our strategy, and the impact they are making as an employee of NES.
- › Colleagues understand our plans, our measures of success and our progress in achieving them.
- › Increased engagement and involvement of our workforce, learners, partners, and joint trade unions in shaping what we deliver and how we work together.
- › More involvement in innovation initiatives.

The difference our partners will see

- › Improved experience of working with us and of the services we provide.
 - › Greater opportunities for education, research, and strategic collaborations.
 - › More young people participating on a school-based pilot pathway.
-



Connect and collaborate

Aligned Key Performance Indicators

- > Net Promoter Score for stakeholders who rate themselves likely to recommend NES to colleagues and associates.
 - > Number of education, research and strategic collaborations.
 - > Number of innovation initiatives invested in, including in collaboration with other stakeholder organisations.
 - > Number of young people participating on school-based pilot pathway.
-



Co-design quality and excellence in all that we do

What is it about?

- > We actively seek opportunities to co-design our delivery around lived experience.
- > We are proactive in sharing our experience and looking for ways to shine a light on good practice.
- > What we co-design and deliver makes a positive difference and achieves the intended impact for all stakeholders.
- > We are inclusive and create the conditions where co-design is actively encouraged in all we do.

What will it deliver?

- > A greater understanding of the needs of our learners and the communities they work in.
- > Meaningful engagement with our learners, the wider workforce and the communities they serve.
- > A broadened reach across the health and social care sector focused on improving the outcomes that matter most to all of our partners.

The difference our people will see

- > More learners tell us their education and training will improve their practice.
- > More learners rate their learning experience as 80% or above.
- > More staff, learner and partner feedback that states technology, data and digital developments meet their needs.

The difference our partners will see

- > More NES programmes that can demonstrate active engagement of people with lived or living experience in the development of educational resources.

Aligned Key Performance Indicators

- | | |
|--|--|
| <ul style="list-style-type: none"> > % of learners that tell us their education and training will improve their practice. > % of learners that score their learning experience as 80% or above > Funded trainee completion rates. > % of learners and trainees by protected characteristics as compared to the population of Scotland. | <ul style="list-style-type: none"> > Number of NES Programmes that can demonstrate active engagement with people with lived or living experience in the development of educational resources designed to support interaction with those who use health and social care services. > % of technology, data and digital developments that are shaped by staff, learner and partners feedback. |
|--|--|
-

What you will see

Through our change activities you will see our current strengths being preserved and built upon, and people at all levels of our organisation being developed and involved.

We will follow a clear and structured methodology and engage proactively with all involved to encourage collective ownership and management as we seek to streamline processes and systems, cutting across functional boundaries and creating a ‘Once for NES’ approach.

The key milestones on our transformation journey are shown in the following tables:



People

Year 1 (2023–2024)

- › NES Wellbeing Framework launched.
- › Guidance and support for hybrid working within NES.
- › Refreshed behaviours and culture.
- › Recruitment and staff development refreshed to further integrate behaviours and culture.
- › Workforce development fund refocused in alignment with NES annual capabilities plan.

Year 2 (2024–2025)

- › Adoption of NES Educator Quality Standards.
- › Improved Learning Interface for Learners on Turas Platform
- › Development of NES Anti-racism Plan
- › National eRostering solution implementation.
- › Refreshed NES Stars awards launched.

Year 3 (2025–2026)

- › NES Educator career skills pathway launched.
- › NES Project Support career skills pathway launched.
- › Create opportunities to deliver accredited internal learning.



Partnerships

Year 1 (2023–2024)

- › Publication of NES Learning and Education Strategy.
- › Co-production Framework launched.
- › Communities of practice and interest created to support and enable collaboration.

Year 2 (2024–2025)

- › Reconfiguration of office space to meet learner requirements and future business needs.
- › Publication of Research Strategy.
- › Publication of Innovation Plan to harness innovation and creativity for improvement.
- › Functionality for an Individual ‘Staff Passport’ enabling staff to carry key information on core statutory / mandatory training between Boards.

Year 3 (2025–2026)

- › Career skills pathways for health and social care workforce delivered.
- › NES achieves credit rating status as an organisation.
- › Improved Reporting Functionality in relation initially to Statutory Mandatory Training.



Performance

Year 1 (2023–2024)

- › New NES planning process implemented.
- › External review of Turas functionality.
- › Adoption of Quality system for development and delivery of education programmes and learning resources.

Year 2 (2024–2025)

- › NES Business Support career skills pathway delivered.
- › Short term project-based attachments launched.

Year 3 (2025–2026)

- › New NES HR service delivery model implemented.
- › Implementation of new NES integrated planning platform.



Getting involved

Since launching our transformation activity, we have developed a communications approach which ensures our staff and stakeholders understand how we are improving services through our Corporate Improvement programme, how they can be involved in our transformation activities and what impact it will have on them.

We are focused on the overall societal impact that we make and how we can support improved health and wellbeing for individuals, whilst contributing to local careers and communities, and making a positive impact on our environment.

We will continue to explore how working collaboratively, with partners at local, regional and system levels we can broaden our reach and contribution to improve outcomes for the people of Scotland.

A significant amount of communications work has been undertaken to support the Transformation Route Map/Corporate Improvement Programme. To date since the inception of the Transformation programme, we have focused mainly on internal communications, helping to keep staff informed and involved in developments related to each strand of the Transformation programme.

A focus going forward will be centred on how this transformation helps the lives of individuals and communities across Scotland, by telling human stories, communicated in simple terms.

We will also concentrate on what the change means for staff, based on the 4 Ps of change communications:

- › **Purpose** – why are we doing what we are doing
- › **Picture** – what will the change look like and feel when achieved
- › **Plan** – communicate how will we get there
- › **Part** – tell people what they need to do to help make the change a success

The following communication objectives support the delivery of the NES Strategy 23-26 and refreshed Transformation Route Map 2024.

- › To continue to engage staff and increase their understanding of what it means for them and support for the Corporate Improvement Programme.
- › To provide regular updates and progress reports to keep staff informed and involved.
- › To foster a positive and inclusive organisational culture and support delivery of the NES Organisational Development Plan.



Key Messages for Transformation

The following is an overarching set of Transformation key messages for staff.



We are committed to evolving to ensure we can support the health and social care workforce of tomorrow to deliver improved outcomes for our population.



To be successful in delivering our NES Strategy and maximising our contribution, we must work differently as an organisation.



That's why we are lending extra coordination and resource to selected projects which will either transform the way we work or are essential to our future success.

What does it mean for staff?

We will use the narrative noted above for each transformation programme when communicating to staff and stakeholders.

- › We'll have ways of working and a sustainable office estate and working practices that are better suited to modern working life.
- › We'll have a cohesive, high-quality learning and education framework for NHS Education for Scotland (NES). This will support the development and delivery of top-tier learning experiences for our staff, learners, partners, and service users, ensuring a consistently excellent experience now and in the future.
- › We'll have a learning platform that is sustainable, maintainable and future-focussed - a user-centred digital learning and development environment for health and social care.
- › We'll have improved organisational efficiency and effectiveness by aligning our operations with the principles of the NES Strategy and fostering a culture of continuous improvement.

What we did

- › Created a Transformation section on the intranet.

-
- › The Bright Ideas page was redeveloped to make it easier for staff to engage and submit their ideas.

-
- › Developed a series of monthly Webinars.

-
- › Produced a standardised PowerPoint presentation for monthly Directorate Town Hall meetings.
-

Why did we do this

- › We created a ‘hub’ for communications across NES: an area on the Intranet where we can post links to documentation and updates.

-
- › We created an intranet site for NES staff to submit innovative ideas to enhance our services, as well as helping them feel part of the improvement transformation journey.

-
- › We have held monthly webinars to hear more about Corporate Improvement Projects and provide an opportunity for staff to post questions/feedback on engagement with various topics and celebrate milestones.

-
- › We produced a standardised monthly PowerPoint presentation, ensuring the organisation’s messages are consistent, timely and adaptable. Each Directorate now has their own monthly Townhall meeting taking place from the middle of each month to highlight relevant messages in relation to the Corporate Improvement Programme.
-

What we will do next

- › Continue to develop and update the Transformation section of the intranet, ensuring each Corporate Improvement Project updates their section on a regular basis, as well as housing Townhall presentations, recordings of webinars, etc.

-
- › We will continue to promote the Bright Ideas page and ensure it is updated on a regular basis.

-
- › We will continue to hold organisational webinars, stand-ups and townhall meetings to provide consistent communications and provide an opportunity for staff to engage in a conversation.

-
- › We will continue to use the standardised PowerPoint as a channel to communicate corporate improvement programme updates and change.
-

What we did

- › Created a series of Talking Heads videos

-
- › Use Viva Engage as a two-way communications channel with staff.

-
- › Established a Transformation Communications Group.
-

Why did we do this

- › We have developed a number of Talking Head videos, highlighting key updates for specific projects within the Corporate Improvement Programme.

-
- › A Working Group has been established to ascertain how Viva Engage can be used as a channel for communication for the organisation to ‘generate discussion and engagement among a wider staff group’. A Viva Engage project plan is in place and membership of the project team has been identified - the first meeting takes place on 10th January 2024.

-
- › A Transformation Communications Group meets regularly each month to discuss upcoming communications and highlight key successes and roadblocks.
-

What we will do next

- › We will continue to use Talking Head videos a method of informing staff, ensuring we tell human stories that focus on the benefit to individuals and communities across Scotland.

-
- › We will use Viva Engage to tailor messages to particular groups to consider different levels of understanding. Viva Engage will be a useful tool to understand staff readiness, and acceptance of communication messages.

-
- › The Group will be used as a mechanism to promote our narrative of what the Transformation Programme means for staff.
-

If you would like to be involved in our transformation journey, please contact our Corporate Improvement Team at NES.PMO@nhs.scot for more information.

Appendix 1: NES Strategic Key Performance Indicators





OUR STRATEGY 2023–26

People, Partnership, Performance

ALTERNATIVE FORMATS

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



NHS EDUCATION FOR SCOTLAND

Westport 102
West Port
Edinburgh EH3 9DN

www.nes.scot.nhs.uk

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NHS Education for Scotland

NES/24/64

Agenda Item: 09a

Meeting Date: 26 September 2024

NES Public Board

1. Title of Paper

1.1. Information Governance 2023-2024 Annual Report

2. Author(s) of Paper

2.1. Tracey Gill, Principal Analyst

3. Lead Director(s)

3.1. Christopher Wroath, Director of NES Technology Service

4. Situation/Purpose of paper

4.1. The purpose of this report is to provide an annual overarching update on Information Governance to the NES Board for assurance.

5. Background and Route to Meeting

5.1. The Assurance Forum receives a quarterly Information Governance Report, providing both assurance and highlighting key issues that the forum needs to consider.

5.2. The annual Information Governance Report was endorsed at the NES Assurance Forum in April 2024.

5.3. The annual Information Governance Report was endorsed by the NES Assurance Forum and reviewed at the 27 August 2024 Technology & Information Committee and is now sequenced to the NES Board as per the agreed NES governance process.

6. Assessment/Key Issues

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

- 6.1 In 2023-2024, NES received 94 FOI requests, one less compared to 2022-2023. The responsibility for the FOI function was successfully transferred from NTS to Planning & Corporate Resources in February 2024.
- 6.2 2023 saw the start of the second three-year cycle of audits commissioned by the Scottish Health Competent Authority (SHCA) under the NIS regulations. NES' compliance status increased to 85% in 2023.
- 6.3 96 incidents were recorded on the IG&S incident log for 2023-2024, with a breakdown of 40 security incidents, 46 privacy incidents.

7. Recommendations

- 7.1. The Board is asked to confirm that this report provides satisfactory assurance.

Author to complete **checklist**.

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

a) Have Educational implications been considered?

- Yes
 No

b) Is there a budget allocated for this work?

- Yes
 No

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

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

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

- Yes
 No

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

- Yes
 No

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

- Yes
- No

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

- Yes
- No

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

- Yes
- No

Author name: Tracey Gill

Date: September 2024

NES

INFORMATION ASSURANCE 2023-24 ANNUAL REPORT

CONTENTS

1. Executive Summary	3
2. Information Governance & Security Audits:	4
2.1 NIS Regulations Compliance Review:	4
2.1.1 NIS Recommendations/actions Summary:	6
3. Information Requests:	7
3.1 Freedom of Information Requests:	7
3.1.1 Request Statistics:	7
3.1.2 Requests Received compared to other NHS Boards:	8
3.2 Subject access requests:	11
4. Incidents / Data Breaches:	12
4.1 Issue/Incident Log:	12
4.2 Information Security Incidents	13
4.3 Incidents Reported to SHCA:	14
4.4 Personal Data Breaches:	14
4.5 Data Breach report to ICO:	16
5. Penetration Testing:	17
7. Information Governance Assessments and Agreements:	17
8. Training & Awareness – Essential Learning:	18
9. Improvement:	19
9.1 Information Asset Register:	19
9.2 Information Assurance Registers:	19
9.3 NTS Assurance Compliance Scores:	20

1. EXECUTIVE SUMMARY

2023-24 was a busy and productive year for the Information Governance & Security, a sub-business unit of Data & Assurance, which is a business unit of the NES Technology Services Directorate. It should be noted that the sub-business unit is currently undergoing a rebranding to Information Assurance rather than Information Governance & Security to reflect the broader remit and scope as result of the Data & Assurance business unit.

NES underwent an audit of its compliance to the Network & Information Systems (NIS) Regulations in May 2023. The audits are commissioned by the Scottish Competent Authority, and 2023-24 saw the start of second three-year cycle of audits. NES achieve an 85% compliance rate, and received an auditor's comment, that NES is a high-performing board with well-defined security policies and procedures in place.

In 2023-24 the number of information requests received by the NES was comparable with 2022-23. NES received 94 Freedom of Information (FOI) requests in 2023-24 compared to 95 in 2022-2023, and 13 Subject Access Requests (SARs), with 98% and 100% of requests responded to within the statutory timescale.

The annual report this year also features a comparison of the number of requests NES has received in the first three quarters of 2023-24 compared to other NHS Scotland Boards. NES was recorded as the Board with the third lowest number of requests, compared to NHS Greater Glasgow & Clyde who received the highest number of requests.

NES recorded 40 information security and 46 data breach incidents in 2023-24, with one incident reported to the Scottish Health Competent Authority (SHCA) and the Information Commissioners Officer (ICO) for awareness only. The incident was due to 'copy and paste' functionality not working as expected in the OpenEyes application, resulting in clinical measurements disappearing from previous recorded events. Patient data was not lost or compromised, but data should have been sitting in two examination events on different dates instead of only one event.

62 Information Assurance Support Requests were received from Directorates during 2023-2024 (this is only one method to request IG support), and there are currently 75 programmes/projects on the Information Assurance workplan as of 31 March 2024. This is only a snapshot in time of workload and capacity across the team, as new requests for information assurance support are received on a weekly basis.

As of 31 March 2024, 81% of NES staff had completed the Safe Information Handling essential learning module. The Information Assurance team continues to work with Workforce to ensure that all staff complete the module as required.

A number of improvements to processes and procedures were introduced in 2023-24, including a refreshed and modernised Information Asset Register, supplementary Information Asset Owners (IAO's) and Information Asset Administrators (IAAs) training, Information Assurance Registers, and NTS Assurance Compliance Scores.

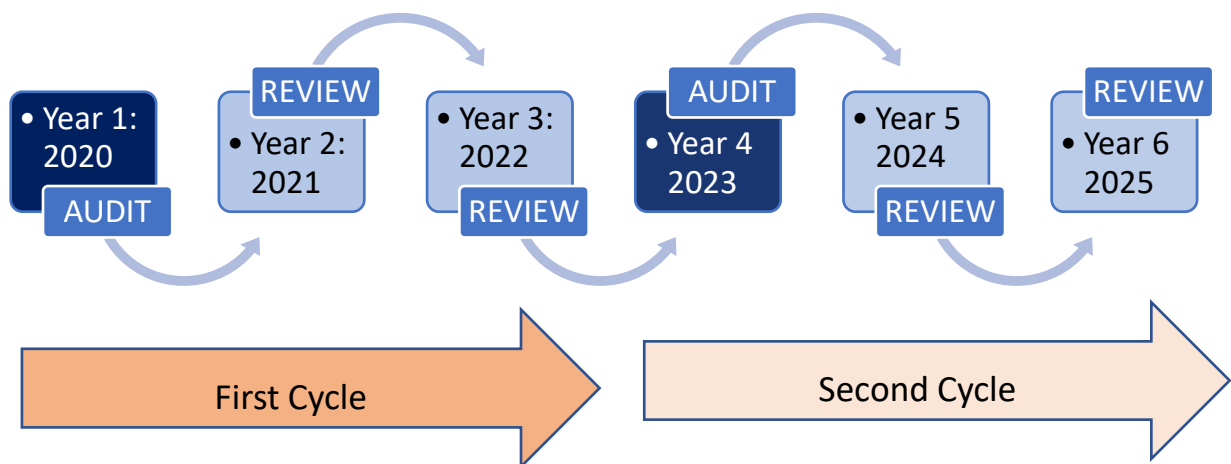
2. INFORMATION GOVERNANCE & SECURITY AUDITS:

In 2023-24 NES was audited by the Scottish Health Competent Authority (SHCA) as an operator of essential services under the Network & Information Systems (NIS) Regulations.

Audit Date:	Audit Scope:	Audit Body:
08 May 2023	Network & Information Systems Regulations – Onsite Audit	Cyber Security Scotland on behalf of the Scottish Health Competent Authority

2.1 NIS REGULATIONS COMPLIANCE REVIEW:

2023 saw the start of the second three-year cycle of audits commissioned by the Scottish Health Competent Authority (SHCA), to evaluate NHS Scotland Boards compliance against the Network & Information Systems (NIS) Regulations.



NES was audited in May 2023, which included for the first time, an on-site audit of the NES West Port Office. The audit was aligned to the updated Scottish Government Public Sector Cyber Resilience Framework (CRF). Key changes to the framework included:

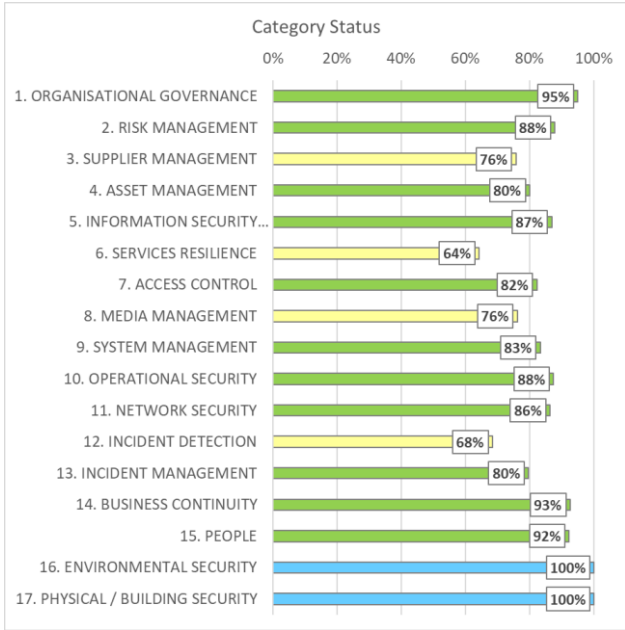
- Structure of the framework segmented to reflect areas of responsibility, emphasising that information/cyber security is an organisation-wide responsibility and not just a technical matter.
- Controls split into two tiers rather than the previous three tiers. Both tiers are in scope for all NHS Scotland Boards.
- The number of controls reduced from 436 to 427; 11% were new or revised controls.
- New subcategories on Cloud and the Internet of Things (IoT) were introduced.

NES received its final audit report in July 2023, and achieved an overall compliance rating of 85%.

COMPLIANCE STATUS 2023						
OVERALL	CATEGORY (17)		SUB-CATEGORY (68)		CONTROLS (427)	
85%	100%	2	100%	25	Achieved	322
	≥ 80%	11	≥ 80%	24	Partially	52
	≥ 60%	4	≥ 60%	11	Not Achieved	40
	≥ 30%	0	≥ 30%	6	N/A	13
	<30%	0	<30%	1		
	< 10%	0	< 10%	1		

Key messages taken from the audit report were:

- NES is a high-performing board with well-defined security policies and procedures in place.
- This was reflected in the data analysis, which shows:
 - An overall compliance of 85%,
 - 11 categories and 49 sub-categories rated at 80% compliance or above, and
 - 322 out of 427 controls were achieved.



2.1.1 NIS RECOMMENDATIONS/ACTIONS SUMMARY:

39 recommendations or actions was identified for NES to report against in subsequent review audits for 2024 and 2025.

CATEGORY STATUS RATING	DEFINITION	PROPORTION OF CONTROL REQUIREMENTS FULFILLED
BLACK	Critical	Compliance analysis <10%
RED	Urgent	Compliance analysis ≥ 10%
AMBER	Important	Compliance analysis ≥ 30%
YELLOW	Attention	Compliance analysis ≥ 60%
GREEN	Guidance	Compliance analysis ≥ 80%
BLUE	Complete	Compliance analysis = 100%

CATEGORY	AUDIT CATEGORY STATUS		
	2023	2024	2025
1. Organisational Change	Green		
2. Risk Management	Green		
3. Supplier Management	Green		
4. Asset Management	Green		
5. Information Security Management	Green		
6. Services Resilience	Yellow		
7. Access Control	Green		
8. Media Management	Yellow		
9. System Management	Green		
10. Operational Security	Green		
11. Network Security	Green		
12. Incident Detection	Yellow		
13. Incident Management	Green		
14. Business Continuity	Green		
15. People	Green		
16. Environmental Security	Blue		
17. Physical / Building Security	Blue		

A breakdown of all actions and recommendations is available on request. The NES Assurance Forum is updated on progress against the actions/recommendations identified on a quarterly basis as part of the NTS Audit Report.

3. INFORMATION REQUESTS:

3.1 FREEDOM OF INFORMATION REQUESTS:

NES has a statutory obligation to respond to freedom of information requests within 20 working days. A statistical report, on the number of requests, compliance rate and exemptions used is submitted to the Scottish Information Commissioner on a quarterly basis.

3.1.1 REQUEST STATISTICS:

In 2023-2024, NES received 94 Freedom of Information (FOI) requests, of which 98% were responded to within the statutory timescales.

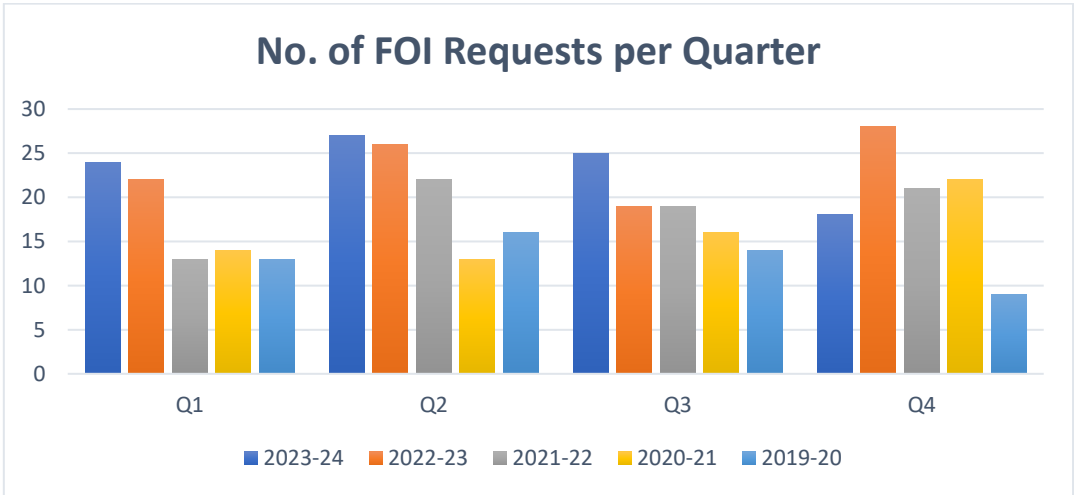
FOI Requests – 2022/23					
	Q1	Q2	Q3	Q4	Total
Number of FOI requests received	24	27	25	18	94
% response within statutory timescales	100%	93%	100%	100%	98%
% breached statutory timescales	0%	7%	0%	0%	2%
Number of requests for review of original response	1	1	0	0	2
Number of reviews by the Scottish Information Commissioner	0	0	0	0	0

FOI requests by Directorate	Number of requests
Dental	0
Finance & Procurement	12
Finance & Procurement - PFM	4
Healthcare Science	0
Learning & Innovation/NHS Scotland Academy	0
Medical	13
NMAHP	1
NTS	12
NTS – Data Group	13
Optometry	1
Pharmacy	0
Psychology	1
Planning & Corporate Resources	4
Social Care	0
Workforce	11

Multiple Directorates*	22
Total	94

*Multiple Directorates includes any FOI request which required a coordinated response from more than one NES Directorate.

Financial Year:	Number of requests received:
2023-2024	94
2022-2023	95
2021-2022	75
2020-2021	65
2019-2020	50



3.1.2 REQUESTS RECEIVED COMPARED TO OTHER NHS BOARDS:

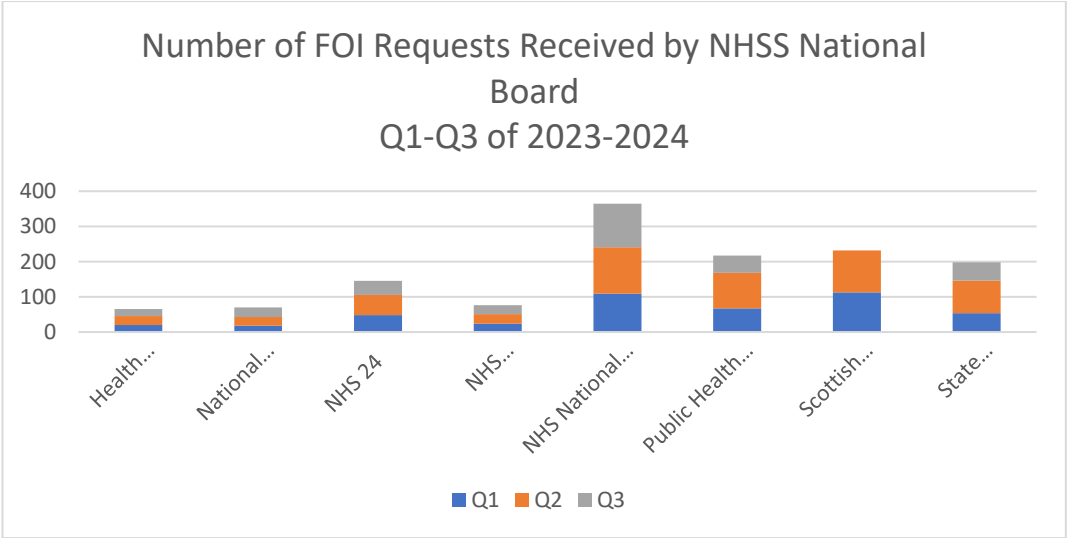
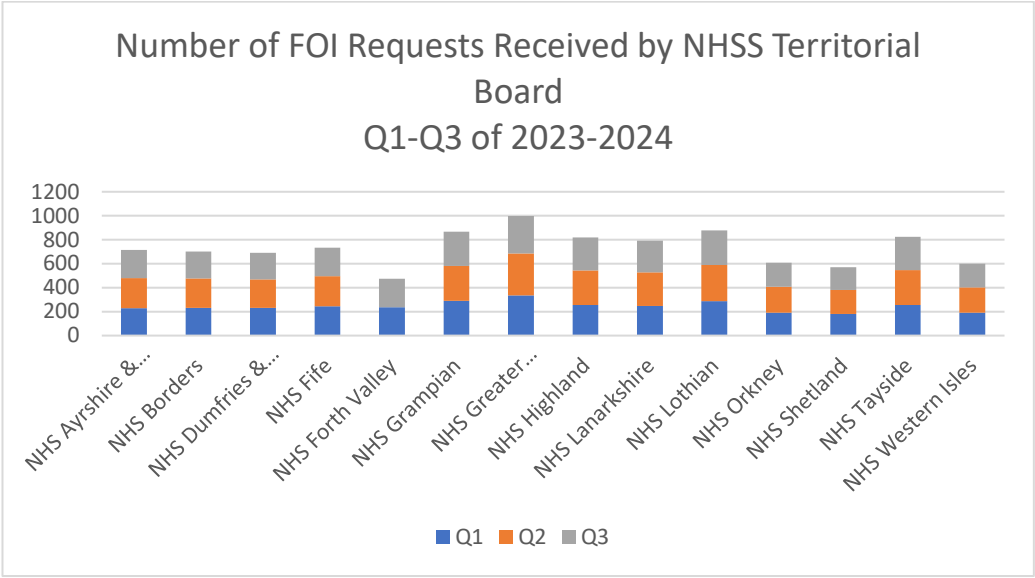
Following the last annual report, it was requested that a section was included within future reports regarding the comparison of the level of FOI requests received across all NHS Scotland Boards.

For 2023-2024 the Scottish Information Commissioner has only published statistical data for the first three quarters of 2023-24 as of 4 April 2024. Data for quarter four will not be available until approximately mid-June 2024.

Number of FOI Requests Received across NHS Scotland for Q1-Q3 of 2023-2024				
NHS Scotland Board	Quarter 1	Quarter 2	Quarter 3	Total Q1-Q3
NHS Greater Glasgow and Clyde	336	349	314	999
NHS Lothian	287	303	287	877
NHS Grampian	289	296	285	870
NHS Tayside	255	292	278	825
NHS Highland	255	288	275	818
NHS Lanarkshire	246	281	265	792
NHS Fife	244	253	236	733
NHS Ayrshire and Arran	229	251	235	715
NHS Borders	231	245	225	701
NHS Dumfries and Galloway	231	237	223	691
NHS Orkney	192	215	200	607
NHS Western Isles	191	212	198	601
NHS Shetland	181	199	190	570
NHS Forth Valley	237	*	238	475
NHS National Services Scotland	109	132	124	365
Scottish Ambulance Service	113	119	*	232
Public Health Scotland	67	101	49	217
State Hospitals Board for Scotland	54	92	52	198
NHS 24	48	57	40	145
NHS Education for Scotland	24	27	25	76
National Waiting Times Centre Board	18	25	27	70
Healthcare Improvement Scotland	20	25	20	65
Total number of requests received across NHSScotland	3,857	3,999	3,786	11,641

*NHS Forth Valley did not submit figures for Q2 and Scottish Ambulance Service did not submit figures for Q3

NES received 76 FOI requests for the statistical period available from the Scottish Information Commissioner, making NES the board with the third lowest number of requests received across NHS Scotland.



The responsibility for the FOI function was successfully transferred from NTS to under the management and responsibility of Planning & Corporate Resources in February 2024. This will be the final report where freedom of information is included within the wider Information Governance quarterly and annual reports. Planning & Corporate Resources will be responsible for submitting compliance reports going forward.

3.2 SUBJECT ACCESS REQUESTS:

NES has a statutory obligation to respond to all individual personal data requests within one calendar month, under UK GDPR and the UK Data Protection Act 2018.

Individuals have the right to make a request to an organisation on the following bases:

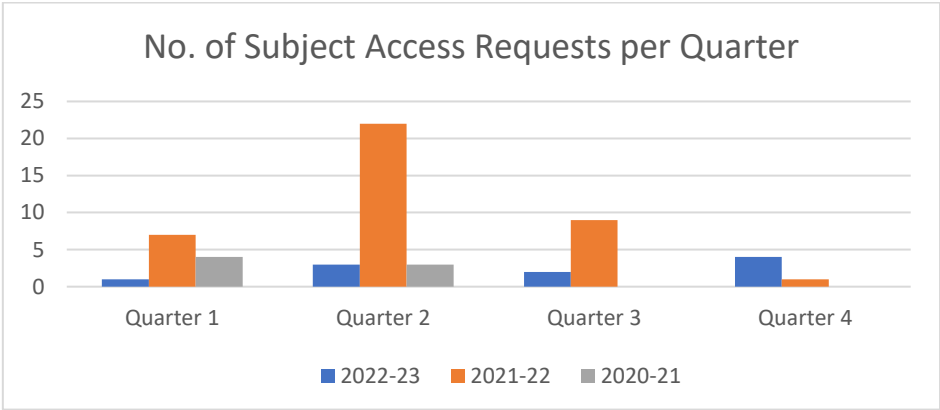
Subject Access Request (SAR):	to obtain a copy of their personal data as well as other supplementary information
Rectification:	to have inaccurate personal data rectified
Erasure:	to have personal data erased. This is not an absolute right and only applies in certain circumstances
Restrict Processing:	to restrict the processing of their personal data in certain circumstances
Data Portability:	to receive personal data, they have provided. This only applies in certain circumstances
Object:	to object to the processing of an individual’s personal data at any time. This only applies in certain circumstances
Automated Decisions:	to request human intervention or challenge a decision made by automated means

NES is on average seeing a continue increase on the number of SAR requests received over the last five years. This is with exception to 2021-2022 where there was a significant spike in the number of SAR’s received due to the number of requests for proof of Covid-19 vaccination and rectification of incorrect or incomplete vaccination records within the National Vaccination Management Tool managed by NES, or the National Vaccination Scheduling System managed by NHS National Services Scotland.

Data Subject Requests under Individual Rights – 2021-22					
	Q1	Q2	Q3	Q4	Total
Number of subject access requests received	3	3	3	3	12
Court order to release personal data	1	0	0	0	1
Total number of requests	4	3	3	3	13
% response within statutory timescales	100%	100%	100%	100%	100%
% breached statutory timescales	0%	0%	0%	0%	0%
Number of requests for review of original response	0	0	0	1	1

For the financial year 2023-2024, all Subject Access requests were responded to within the statutory 20 working days timescales.

Financial Year:	Number of requests received:
2023-2024	13
2022-2023	10
2021-2022	39
2020-2021	7
2019-2020	5



4. INCIDENTS / DATA BREACHES:

4.1 ISSUE/INCIDENT LOG:

[The Information Governance & Security Issue/Incident Log](#) provides a detailed breakdown of all NES incidents, and can filter incidents by the following categories:

- Incident – Security (where a security incident has occurred)
- Issue – Security (where an issue has occurred but is not defined as an actual incident)
- Data Breach (breach to personal identifiable data)
- Breach of Policy/Procedure (breach to a NES Information Governance & Security policies and procedures)

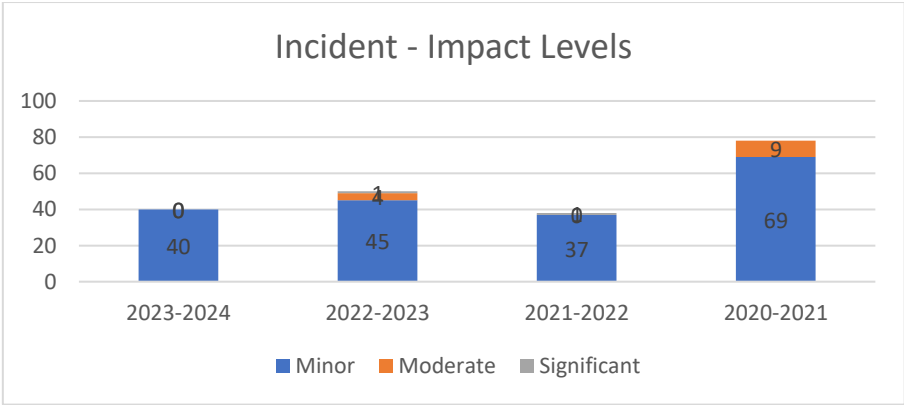
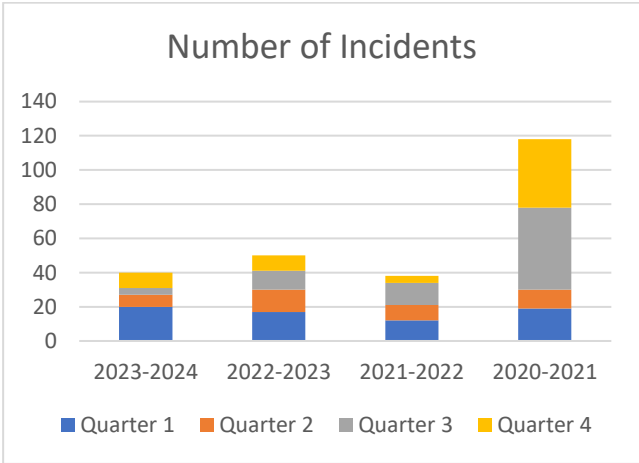
4.2 INFORMATION SECURITY INCIDENTS

An Information Security incident is “an event that could lead to loss of, or disruption to NES’s operations, services or functions”.

Details of all recorded Information Security Incidents are detailed in the Information Governance & Security Issue/Incident Log.

Incidents – 2023 - 2024					
Impact Level*	Q1	Q2	Q3	Q4	Total
Minor	20	7	4	9	40
Moderate	0	0	0	0	0
Significant	0	0	0	0	0
Total					40

[*link to impact level descriptors](#)



4.3 INCIDENTS REPORTED TO SHCA:

NES has an obligation to report information security and cyber security incidents that meet a certain reporting threshold to the Scottish Health Competent Authority (SHCA) under the requirements of the Network & Information Systems (NIS) Regulations.

NES reported one incident for awareness to the SHCA. Details regarding the incident is noted below under reports to the Information Commissioner’s Office (ICO), as the incident was also reported to both regulatory authorities for awareness.

Data Breaches – 2023 - 2024					
	Q1	Q2	Q3	Q4	Total
N° of Breaches	3	15	12	16	46
Reported to ICO	0	0	1	0	1

4.4 PERSONAL DATA BREACHES:

A Personal Data Breach is defined as:

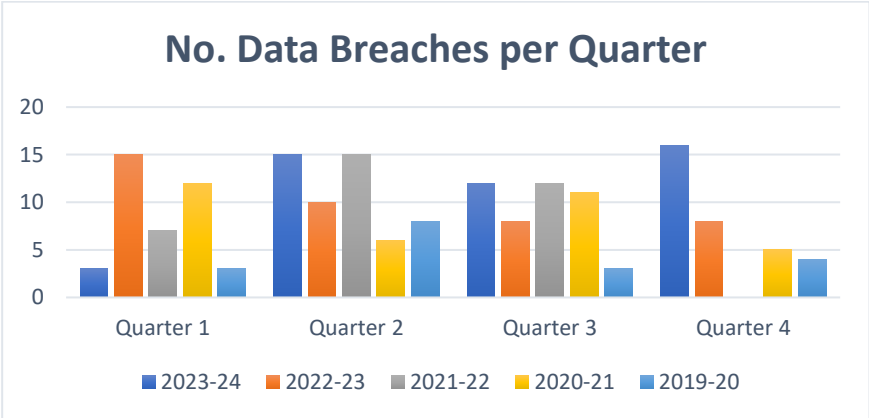
“a breach of security leading to the accidental or unlawful destruction, loss, alteration, unauthorised disclosure of, or access to, personal data transmitted, stored or otherwise processed”¹

Personal data breaches can include:

- access by an unauthorised third party.
- deliberated or accidental action (or inaction) by a data controller or data processor.
- sending personal data to an incorrect recipient.
- computing devices containing personal data being lost or stolen.
- alteration of personal data without permission, and
- loss of availability of personal data.

Under Data Protection legislation, a notifiable data breach of personal identifiable information that is likely to result in a high risk to the rights and freedoms of an individual, is required to be reported to the Information Commissioner’s Office within 72 hours of NES becoming aware of it.

¹ <https://ico.org.uk>



Type of Data Breach	Number of Breaches
Unauthorised access to personal data	3
Disclosure of personal data	4
Email – sent/received by wrong recipient/bcc function not used	24
Incorrect merger of accounts	2
Technical functionality resulting in disclosure/live data used in production	6
MS Forms / MS365 functionality (new)	4
Controller requested backfill of data resulting in duplicated records	1
Equipment lost / not returned – risk to personal data	2
Total	46

Breaches by Directorate – 2023-2024	
Directorate	No: of Breaches
Dental	7
Finance	1
Medical	8
NMAHP	3
Pharmacy	4
Planning & Corporate Resources	2
Psychology	2
NES Technology Service	12

Workforce	8
Total	46

Details of all recorded personal data breaches are detailed in the [Information Governance & Security Issue/Incident Log](#).

4.5 DATA BREACHS REPORT TO ICO:

2023-2024 saw one incident reported to the Information Commissioner’s Office (ICO) for awareness only. It was also reported to the SHCA as detailed above.

13/10/2023	19/10/2023	<p>Ref Number: 2023-Q3-067 Directorate: Technology Services Classification: Minor</p> <p>Eyecare data copied into new patient event leaves previous event partially empty. When a new eyecare examination event is created, the option is given to copy certain data fields (elements) from a previous examination. This works as ‘copy and paste’ so the information stays in the old event, and also appears in the new event where it can be edited.</p> <p>Eyecare User (clinician) reported that when they copied ‘cover test’ element from a previous examination the measurement data copied over along with the written comment but that the measurement data disappears from the previous event – comments noted remained.</p> <p>Patient data is not lost but should be sitting in two examination events at different dates instead of one. No other reports of this issue have been received. Clinician user noted issue immediately.</p> <p>The issue only effects users of ‘copy’ function. When data is entered manually it acts as expected and remains in the new and old event.</p> <p>ACTION TAKEN: There are a number of ‘elements’ that can be copied. Testing undertaken and a bug was found in three elements. Cover test, Ninth position and Refraction. GGC Orthotists who use Cover test element were advised not to use the copy function. Supplier of software TKL identified a fix for the bug, and this will be available in a later release.</p> <p>The patient was not informed as patient care was not affected.</p>	<p>Reported for awareness 01/11/2023.</p> <p>ICO responded that no further action required on this matter.</p>
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5. PENETRATION TESTING:

Trustmarque as of July 2024 are contracted by NES to carry out independent external Penetration (Pen) Testing, ensuring security assessments are undertaken on all key information processing systems. The aim is to annually test each system, and where additional testing should be carried out after major changes to its infrastructure or functionality. The status of testing and links to assessment reports can be found in the [Penetration Testing Tracker](#).

Due to financial pressures a decision was taken in the last quarter of 2023-24 that only the remaining products or services that had not been pen-tested in the calendar year of 2023 would be tested before the end of March 2024. Those that were not tested are scheduled to be tested as early as possible in quarter one of 2024-25 to ensure that NES maintains a robust penetration testing schedule across all products and services.

7. INFORMATION GOVERNANCE ASSESSMENTS AND AGREEMENTS:

The core Information Governance and Security assessments and agreements are:

Data Protection Impact Assessment (DPIA):	A DPIA is legally required where there is high risk processing to assess to identify potential risks that may arise when processing personal identifiable information, and to minimise and mitigate against those risks as early as possible.
Data/Information Sharing Agreement (DSA/ISA):	A DSA/ISA is an agreement between data controller to data controller setting out the lawful basis for the use of personal data, including a common standard for the processing and handling of the information shared, including quality, retention and security considerations.
Data Processing Agreement (DPA):	A DPA is a legally required and binding agreement between a data controller and a data processor and sets out the rights and obligations of each party concerning the protection of personal data.
System Security Policy (SSP):	A SSP is a document that sets out how the organisation plans to protect its physical and information technical assets, defining security requirements for that system to ensure the secure management of data.

The 2022 Information Governance Project Initiation Template for requesting Information Governance support, was updated in early 2024 and renamed to Information Assurance Support Request. It should be noted that the template is not used by the NTS Directorate to request information assurance support for the majority of NES Technology Services commissioned work. 2023-2024 saw 62 Information Assurance Support Request Templates received.

The Information Assurance business unit utilises Azure DevOps to manage programmes of work that team is supporting. An Epic is created for each programme or project allowing the team to have a comprehensive overview of the team's workload. It should be noted that an

Epic will then be broken down into core information assurance tasks that may be required to be completed.

IG&S Workload - Current number of Programme/Project Epics as of 31 st March 2024	
Directorate	No. Active (currently working on)
Dental	3
Dental – Optometry & Healthcare Science	3
Finance – Properties & Facilities	1
Medical	4
Medical – Pharmacy	2
NMAHP	8
NMAHP – Psychology	3
NTS – Data Group	7
NTS – Education, Training & Workforce	7
NTS – Health & Social Care	10
NTS – National Digital Platform	11
NTS – Operations	6
Planning & Corporate Resources	1
Social Care	2
Workforce	7
Total	75

8. TRAINING & AWARENESS – ESSENTIAL LEARNING:

The ‘Safe Information Handling’ e-learning module is part of a suite of NES core essential e-learning modules that all new employees should complete within the first month of joining NES. Staff are required to refresh their safe information handling training on an annual basis.

As of 31st March 2024 81%, of staff had completed the Safe Information Handling module, which is comparable to March 2023.



Directorate	Completed	Not completed
Dental	78%	22%
Finance	86%	14%
Medical	80%	20%
Technology Services	81%	19%
NHS Scotland Academy	90%	10%

NMAHP	87%	13%
Planning & Corporate	83%	17%
Psychology	69%	31%
Social Care	100%	
Workforce	82%	18%

9. IMPROVEMENT:

2023-24 has seen the Information Governance and Security business unit merge and consolidate as part of the Data and Assurance, a sub-directorate of NTS when the Associate Director came into post April 2024. This has also seen the scope of the business unit broadened to cover the wider discipline of information assurance, rather than just the traditional information governance disciplines such as data protection, information security, records management, and freedom of information. The assurance aspect is directly aligned to the delivery of NTS technological solutions and is not a service that team provides on a corporate basis.

Below outlines the areas of improvement that have been introduced by the Information Governance & Security Lead / Data Protection Officer.

9.1 INFORMATION ASSET REGISTER:

The NES Information Asset Register (IAR) has been reviewed and refreshed, ensuring that the terminology used is up-to-date and that the format of the register accurately reflects the information assets held by NES. The reviewed design of the IAR is intended to allow NES to be able to evidence that it understands and knows what information assets are held, the type of data processed, the categories of individuals whose data is processed and lawful basis for processing, and who the data is accessed by or shared with.

Training and awareness sessions was also rolled out in 2023-24 for Information Asset Owners (IAOs) and Information Asset Administrators (IAAs), supplementing the already published guidance and procedures on the Information Governance Hub.

9.2 INFORMATION ASSURANCE REGISTERS:

The final cohort of Information Governance registers were implemented in 2023-24. The registers detail the core information assurance documentation that NES has in place. The set of registers include:

- [Data Protection Impact Assessment Register](#)
- [Data/Information Sharing Agreement Register](#)
- [Data Processing Agreement Register](#)
- [Privacy Notice Register](#)
- [System Security Policy Register](#)

The Privacy Notice Register is currently being reviewed and updated, due to some recent changes in the format of the register. Once this is completed the registers will be made available on the Information Governance Hub for all staff to be able to access and search.

9.3 NTS ASSURANCE COMPLIANCE SCORES:

As mentioned above, the scope of the original Information Governance & Security team has broadened in 2023-24 to cover the wider spectrum of information assurance for the delivery NTS technical products, applications, and services. The scope now includes ensuring that NTS delivery and development teams adhere to obligations under:

- Data Protection
- Information/Cyber Security
- Supplier Assurance
- Accessibility
- Clinical Safety
- Software as a Medical Device
- Equality and Diversity
- NHS Scotland governance applications for example to the Public Benefit and Privacy Panel (PBPP) or for the use of CHI through an internal application, or via the CHI Management Board

It should be noted that the Information Assurance team are not professional experts for disciplines out with information governance but provide a service through the recruitment of Assurance Officers. The Assurance Officers act as a conduit between subject matter experts across NES and NTS Product and Delivery teams to ensure all assurance requirements are addressed appropriately.

NTS Assurance Compliance Scores were introduced by the Information Governance & Security Lead / Data Protection Officer in quarter four of 2023-24, to allow an overarching visual picture of compliance against information assurance requirements at any specific point in time.

The assurance compliance scores are calculated on the percentage of completed assurance activities that can be evidenced to internal and external auditors or to our stakeholders/customers when requested. For example:

- GREEN – documentation has been completed, approved/sign-off, and can be evidenced to auditors.
- AMBER – documentation is either in progress of being drafted/completed or is going through a review cycle.
- RED – there is no evidence of documentation being completed or in progress. Evidence cannot be provided to auditors.
- GREY – the assurance element is not applicable to the project/application. A justification of why n/a is recorded as evidence for auditors.

An example of the Assurance Compliance Score for ReSPECT is below.

Domain		Health & Social Care		Assurance Score	
Product/Application/Service:		ReSPECT		92%	
Product/Delivery Manager:		Alistair Ewing; Catriona Kerr			
Date Updated:					
Status		Live			
Data Protection		Security		Broader Assurance	
Data Protection Impact Assessment		System Security Policy/Risk Assessment		Information Asset Register	
Data Processing Agreement		Penetration Test		Product Risks Register	
Data/Information Sharing Agreement				Supplier Assurance	
Privacy Notice/Information Leaflet		Governance Applications		Accessibility	
		CHI Application		Clinical Safety	
		PBPP Application		Service Level Agreement	
				Software as a Medical Device	
				EQIAs	

The assurance compliance scores will be maintained by NTS Assurance Officers, providing support to NTS Product and Delivery Managers in ensuring that all associated assurance tasks are completed for products or services delivered by NTS prior to 'go live'. Scores will be reported to monthly NTS Domain Meetings and the NTS Senior Delivery Operational Group monthly.

The Information Governance & Security Lead / Data Protection Officer will also use these scores to escalate and discuss assurance concerns with the NES SIRO, for example where there is a risk that a product/application or service is about to 'go live' without the appropriate assurance in place.

April 2024

Tracey Gill
Data Protection Officer (DPO)
Principal Analyst – Information Governance & Security

NHS Education for Scotland

NES/24/65

Agenda Item: 09b

Date of meeting: 26 September 2024

NHS Public Board

1. Title of Paper

1.1 Feedback, Comments, Concerns and Complaints Annual Report 2023-24

2. Author(s) of Paper

2.1 Rob Coward, Principal Educator, Planning & Corporate Resources

3. Lead Director(s)

3.1 Christina Bichan, Director of Planning and Performance

4. Situation/Purpose of paper

4.1 Feedback, comments, concerns and complaints are considered by the Scottish Government as an important performance indicator, and a mechanism for driving continuous improvement. This is reflected in the requirement for all NHS Boards to publish an annual Feedback, Comments, Concerns and Complaints (FCCC) report as specified by the 2017 Patient Rights (Feedback, Comments, Concerns and Complaints (Scotland)) Directions and national complaints guidance. This states that relevant NHS bodies should prepare an annual report summarising action taken as a result of feedback, comments and concerns received. NHS Boards are also required to provide an annual return to NHS National Services Scotland (NSS) confirming complaints figures which are included in the NHS Complaints Statistics publication.

4.2 Following consideration by the Education & Quality Executive Group, the report was then approved by the Education & Quality Committee on 12 September 2024. The Board are invited to consider the report prior to publication on the NES website and sending to the Scottish Public Services

ombudsman and Scottish Government. The report is due to be published by 30 September 2024.

5. Background and route to meeting

5.1 The report, which was reviewed by the Education & Quality Executive Group on 21 August and approved by the Education and Quality Committee on 12 September 2024, provides a summary of the feedback and complaints reported via our directorates, or directly received by our Planning and Corporate Resources team. It also outlines how we have used complaints and feedback to evaluate and improve our programmes and services and is based on information supplied by each directorate. This report will be published to our website by the end of September 2024 and will also be submitted to the Scottish Government and the Scottish Public Services Ombudsman (SPSONHS).

6. Assessment/Key Issues

6.1 Complaints received

6.1.1 NES continues to receive a limited number of complaints requiring investigation using the agreed corporate complaints handling process. There were 16 such complaints received during the year (marginally down from 17 in 2022-23), plus two expressions of concern which were investigated by the Complaints Team. Of these complaints, seven were fully upheld with a further five partially upheld. Seven complaints were not upheld. None of the complaints covered by the report were whistleblowing cases.

6.2 Feedback and comment

6.2.1 The draft report includes information on the different ways in which we encourage feedback and comment from our service users and partners in our work. This is designed to provide assurance that our education and training is informed by a range of important perspectives including those of end service users, trainees and other learners and service partners. Case studies have been used to illustrate the different approaches to engagement and feedback collection methods used by our directorates.

6.2.2 The draft report emphasises that partnership working with stakeholders and service users is a key feature of all our developments and that the collection and use of learner feedback is a vital aspect of educational governance arrangements for all directorates and programme teams.

6.2.3 As required by the Patients Rights Directions, the report includes commentary on methods used to engage with equalities groups (Part 1, section 2). The report details several of the ways in which equality and inclusion is considered in the context of our education and training activities.

6.3 Positive feedback

6.3.1 The report includes a selection of positive comments received from learners and other individuals. While NES receives a significant amount of positive comment and feedback, we have no systematic arrangements for collating this information at a directorate or corporate level.

7. Recommendations

7.1 The Board is asked to approve the annual FCCC report before it is published and submitted to the Scottish Government and Scottish Public Services Ombudsman.

Author to complete **checklist**.

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

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

Yes

No

Author name: Rob Coward

Date: 29 August 2023

NES

NHS Education for Scotland

Feedback, Comments, Concerns and Complaints Annual Report 2023-2024

September 2024

NHS Education for Scotland (NES) is an education and training body and a national health board within NHS Scotland. We are responsible for developing and delivering healthcare education and training for the NHS, health and social care sector and other public bodies. We have a Scotland-wide role in undergraduate, postgraduate and continuing professional development. We are a national NHS Board, which works in partnership with the Scottish Government, NHS Health Boards, local authorities and a host of other stakeholders to support health and social care services in Scotland. We do this by providing education, training and workforce development; supporting recruitment and strengthening career pathways. NES also supports health and care providers through the development and maintenance of digital infrastructure.

The summary table below precedes the full Feedback, Comments, Concerns and Complaints report and provides brief details of the complaints and expressions of concern we received between 1 April 2023 and 31 March 2024.

Table 1: Summary of complaints received and outcome 2023-2024

Subject of complaint	Outcome of Complaint	Lessons learned
1. Deletion of trainee's @nhs.scot email account (NES Technology Service)	Upheld	Need for early communication of staff rotation between boards. Working with board colleagues to improve the communication process.
2. Deletion of trainee's @nhs.scot email account (NES Technology Service)	Upheld	Need for early communication of staff rotation between boards. Working with board colleagues to improve the communication process.
3. Unfair selection for Dental Vocational Training trainer post (Dental)	Partially upheld	<ul style="list-style-type: none"> • Review of timelines for DVT trainer recruitment ensuring early communication of outcomes. • Development of a contingency plan in case of delays in process. • Screening out applicants who will be unable to meet the essential criteria before mentoring visit takes place.
4. Dissatisfaction with conduct of GP Specialty Trainee (Medicine)	Not upheld	Complaint investigated locally by GP practice – complainant referred to Scottish Public Services Ombudsman

Subject of complaint	Outcome of Complaint	Lessons learned
5. Patient dissatisfaction with conduct of NES staff member in clinical role (Medicine)	Not upheld	Referred to Health Board for local resolution
6. Delay in providing sponsorship information for trainee (Medicine/Workforce)	Not upheld	<ul style="list-style-type: none"> • Implementing changes into planning to better incorporate the helpdesk within allocation of resources. • Better process for queries – involving communication with the Home Office and person involved.
7. Delay in processing information for Tier 2 visa application (Workforce)	Upheld	<ul style="list-style-type: none"> • Better management of service desk queries. • Training more staff in the team with the skills required to independently support the sponsorship service desk (queries).
8. Scoring of application for Specialty Training post (Medicine)	Not upheld	Issues addressed by UK Medical and Dental Recruitment and Selection team at Health Education England
9. Dissatisfaction with selection process for post (Workforce)	Not upheld	No issues identified requiring remedial action or improvement.
10. Delay in processing expense claims for trainee (Finance)	Upheld	<ul style="list-style-type: none"> • Review and refresh of webpages. • Review issue with digital colleagues. • Clarification/learning with staff.
11. Delay in processing expense claims (Finance)	Upheld	<ul style="list-style-type: none"> • Review base locations to ensure that these reflect a central point for the programme locations. • Consider cover arrangements for leave and staff absences.
12. Inability to revisit completed e-learning modules on Turas (NHSSA, Learning & Innovation)	Upheld	Technical issue identified. A solution is now in place.

Subject of complaint	Outcome of Complaint	Lessons learned
13. Delay in processing mileage claim for trainee (Finance)	Not upheld	Need for improved guidance in submitting travel claims.
14. Reimbursement of relocation expenses (Finance)	Upheld	<ul style="list-style-type: none"> • Need for clearer policy, guidance and process for reclaiming relocation expenses. • Significantly improve customer service in handling requests
15. Dissatisfaction with decision to remove learner from course (NMAHP)	Not upheld	Need to communicate attendance requirements for Family Nurse Partnership courses more clearly
16. Request for part repayment of Dental Bursary (Dental)	Partially upheld	Need for earlier communication with former trainees regarding decision on bursary repayments.
CONCERN: Discrepancy in one-off payment to trainee pharmacists (Pharmacy)	Not upheld	<ul style="list-style-type: none"> • Need to update Pharmacy training handbook • Collect further information on pension discrepancies
CONCERN: Access to SDCEP and other learning resources and events (Dental)	Not upheld	Consider further extending the range of materials and recorded learning sessions available through Turas Learn and Portal.

Contents

Introduction

Part 1. Feedback, Comments and Concerns

- 1. Methods for gathering and using feedback**
- 2. Engaging with equalities groups**
- 3. Supporting service users in providing feedback**
- 4. Systems for collecting and using feedback, comments and concerns**
- 5. Using feedback alongside other information to identify opportunities for improvement.**

Part 2. Managing and using complaints

- 1. Learning from complaints (Indicator 1)**
- 2. Complaint process experience (Indicator 2)**
- 3. Staff awareness and training (Indicator 3)**
- 4. Complaint outcomes (Indicators 4, 5, 6, 7, 8 and 9)**
- 5. Accountability and governance**

Part 3. Positive feedback and compliments

Further information

Introduction

Welcome to our annual report on feedback, comments, concerns and complaints for 2023-2024. The report is required by the 2017 Patient Rights (Feedback, Comments, Concerns and Complaints (Scotland)) Directions, which specifies that relevant NHS bodies should prepare an annual report at the end of each year summarising action taken as a result of feedback, comments and concerns received in that year.

The first part of the report provides summaries of our progress in collecting and using feedback from our service users. The summaries include case study materials to illustrate our diverse approaches to feedback collection and the difference this information has made to our work. Part 2 comprises a summary of the complaints and concerns received from our service users during the year and the outcomes from these complaints. It also provides brief information regarding our progress in handling and learning from complaints in accordance with the nine indicators set out in the Scottish Government's guidance to health boards.

The report relays some of the positive feedback and comments received from our service users, including trainees and other health service staff. It also highlights some areas where learners, stakeholders or service users have identified areas for improvement.

While the case studies and data presented in our report reflects the importance of engagement with our service users, we are committed to making further improvements in this area. To this end NES has developed a new Involving People and Communities Framework; an enabling document setting out our expectations for service user engagement and clarifying the key purposes and processes. The Framework, which is to be implemented from 2024-2025 will be supported by more detailed policy and procedural information.

Part 1. Feedback, Comments and Concerns

1. Methods for gathering and using feedback

All our services are planned, developed and reviewed in partnership with stakeholders, including health care professionals in training and other health and care staff who rely on NES educational support to provide excellent patient care. Our approach to collecting feedback focuses on the 'user experience' of our diverse training programmes and products, ensuring they are accessible and fit for purpose. Feedback on learner/service user satisfaction provides a key metric for the engagement of learners, which provides valuable insight into the impact of our educational programmes and resources. Learner feedback is also essential in enabling us to improve the accessibility and quality of our training. The case studies featured in this report provide some examples of how feedback has been used to identify opportunities for improvement. The collection and use of learner feedback is a key focus for our quality management activities, which are monitored at senior levels within the organisation.

Feedback from health care professionals in training remains an essential component of our approach to quality management at NES. This feedback is invaluable in enabling us to evaluate educational quality, identify opportunities to improve learner experiences, and provide stakeholders with vital assurance that Scotland's significant investment in training for health and social care is effective. We organise regular feedback activities, such as the annual Scottish Training Survey in postgraduate medical education, or support UK surveys including the General Medical Council's annual Training Survey and the General Dental Council's annual surveys of Dental Foundation/Vocational Training and Dental Specialty Training. The data collected through these trainee surveys is analysed closely and forms an important part of a rich dataset used to improve education quality.

In addition to our Educational Governance processes, a *Contact Us* page on our website provides an online form for feedback (positive or negative) about any aspect of our work. Further information, including examples of these processes and how we use feedback is provided below.

Case study 1: Use of QR codes to obtain feedback from supervisors of pharmacy trainees

Supervisors who are not yet qualified independent prescribers were trained on assessing basic physical assessment skills required to undertake a NEWS2 score for the diagnosis of sepsis.

Supervisors of trainee pharmacists are very experienced individuals but some have yet to complete the independent prescriber course. It is important to continue to keep this group engaged in supporting trainee pharmacists whilst the profession transitions to newly qualified pharmacists being prescribers from 2026 onwards.

Following the course's pilot, NES evaluated the extent to which it gave participants sufficient confidence in their abilities to conduct and complete supervised learning forms. These are to assess trainee pharmacists' physical assessment skills.

A pre- and post-course QR code was incorporated into the presentation slides which linked to an online survey (using the Questback survey package) to evaluate any change in confidence to conduct and assess the physical assessment skills covered. Participants were encouraged to complete the survey on their phone immediately after faculty introductions and again at the end. This had the effect of markedly increasing the number of participants providing feedback. This was helpful in confirming the utility of the course and highlighting areas for enhancement.

Case study 2: Facilitation of Learning Toolkit

Our Facilitation of Learning Toolkit is designed to support educators to effectively facilitate learning in practice, either with service users or practitioners. We conducted a survey of users of the Toolkit to find out:

- how the resource is being used
- how the toolkit could be improved
- understand users experience in using the toolkit

Questback was used to collect feedback from stakeholders which contained both closed and open-ended questions. Users of the toolkit were invited to provide feedback using a Questback link located on the home page of the toolkit hosted on TURAS Learn. To further prompt feedback we posted on X and emailed all education leads in the territorial boards to encourage stakeholder engagement.

The feedback received has enabled changes to the toolkit to ensure that it is fit for purpose and supports them to deliver an evidenced based programme in the future.

1.1 Our approaches to gathering and using feedback, including how we publicise opportunities for providing comments

Our service users play an important part in reviewing and improving education initiatives by providing informed feedback. In this respect learners and trainees are uniquely placed to provide expert insight into their experience. The development, commissioning and quality management of education and training is informed by stakeholder participation in consultation exercises, focus groups, reference groups, steering groups, programme boards, and the valuable feedback we elicit from learners, Health Boards and others. The importance we attach to this aspect of our work is reflected in our efforts to publicise and encourage feedback from learners and others involved in our work.

Across our extensive portfolio of education activities there are numerous examples of service users or learners participating in the ongoing review and enhancement of our programmes. This includes the following:

- Scottish Training Survey – an opportunity for doctors in training to reflect on their training experience at the end of each posting.
- Notification of concern process for doctors in training - Managed by the Deanery, this is process by which doctors in training, trainers or other staff can report concerns outwith the usual survey processes.
- Quality Management pre-visit questionnaires for trainers and doctors in training - Coordinated by the Postgraduate Medical Deanery within the six weeks before a quality management visit is conducted.
- Dental Care Professionals (DCP) – Collection of feedback data from participants and employers following induction, study days and at the end of the programme.
- Pharmacy – The use of focus groups to gather user insights on new e-learning modules and ‘exit questionnaires’ for learners completing education programmes. In addition to these feedback sources, the Pharmacy team embeds feedback tools on each e-learning resource to gather user views on completion.

Case study 1: CPD Connect, Practice Manager Programme and Network, GP Nursing Pathway

NES coordinates a range continuing professional development (CPD) activities and programmes for General Practice and primary care through our Medical Directorate. We were keen to ensure that the learning met their expectations, needs and to explore whether any improvements could be made.

Online evaluation forms were gathered in different ways depending on the format of the education. In eLearning resources, an online form was embedded at the end of the resource. At online workshops or webinars, links and QR codes were shared on screen/in chat and emailed after the session to participants. At face to face training, learners were encouraged to scan QR codes in real time before leaving the session, significantly increasing the completion rate, as well as having this sent in email form afterwards.

Practice Based Small Group Learning (PBSGL) members have access to a website where their group facilitator can submit a logsheet after each meeting to review the module studied and to record learning, reflections and onwards commitments to improvement. This is also used for appraisal and revalidation evidence.

When writing any kind of module, feedback is sought at all stages of the creation of an eLearning module, from having an expert review stage, primary care reviewers and proof reading both internally and externally.

Case study 2: Supporting learners and clinical supervisors in Clinical Psychology training

NES works with universities and NHS health boards to train clinical psychologists in Scotland. A short survey was created to gather feedback on the work of the Clinical Tutors in supporting learners and their NHS practice placement supervisors.

The aim was to help us review, reflect on and improve the service we offer as individual clinical tutors to trainees and supervisors. In addition, the feedback has been aggregated across the whole team so we can reflect together on the feedback and consider themes as well as monitor progress. The survey covered areas such as responsiveness, supportiveness, approachability, time and sensitivity to any issues or difficulties, helpfulness of input and sensitivity to equality, diversity and inclusion. This was a new process to collect feedback on the work of the Clinical Tutors. It will be repeated every 2 years.

The Clinical Psychology team was very pleased with the response to the survey with forty-three trainees and fifty-one supervisors completing it. Each clinical tutor has reflected on and discussed the feedback as part of their appraisal. We were encouraged by the generally positive feedback. From the trainee responses, 91% of the ratings were “Good” or “Excellent” across the eight questions. Particular strengths were support for trainee development, understanding of individual circumstances and approachability. From the supervisor responses, 95% of the ratings were “Good” or “Excellent” across the eight questions. Other specific strengths were approachability, sufficient time to consider issues, and helpfulness of input. Themes we are reflecting on as a team is how we further support supervisors in their development as supervisors and how we continue to develop sensitivity to Equality, Diversity and Inclusion in our work with trainees.

1.2 How we publicise opportunities for providing comments

Given the importance of feedback for our work, we use several different methods to encourage comment from trainees and other learners. These range from targeted communications for training grades in Medicine, to the provision of an open comments mailbox for Healthcare Science trainees and the use of social media to invite feedback from Pharmacists. In eliciting feedback, we observe the key principles of preserving the anonymity of individuals submitting comments and being prompt to act on specific suggestions. Where possible we provide named contacts for communications, but also offer generic contact email addresses.

Case study 1: Armed Forces Talent Development Programme (AFTP)

The Armed Forces Talent Programme is an NHS Scotland-wide recruitment initiative for the armed forces community. It supports service leavers, veterans, spouses,

partners, dependants, reservists, cadets, and cadet forces adult volunteers to enter our workforce. We engaged with learners, the Armed Forces Community (AFC) and NHS Boards to confirm what we were delivering is useful, pitched at the right level and is at times and through means suitable for our target audience to attend.

As part of our engagement, we provided QR codes in presentations with time to allow for completion. The QR code took people to short MS Forms that took less than two minutes to complete. Previous examples of feedback were given at the start of the session to illustrate the positive improvements resulting from participation in the programme. It was verbally reinforced how much it would help with user experience.

Previous examples of feedback were given at the start of the session to show how it was presented, verbal confirmation of type of feedback collected and how long it would take were reiterated at the start of the session and prior to asking for feedback. Multiple options for providing feedback were suggested. These included an MS Forms questionnaire, waiting at the end of sessions for participants to give verbal feedback and the sharing of links/email addresses for those without smart phones to voice their thoughts.

2. Engaging with equalities groups

We actively collect feedback on equality, diversity and inclusion, at directorate level through a variety of mechanisms, including engagement with stakeholder groups, educational delivery and participation in project steering groups. Through our training and support for Equality Impact Assessments we help ensure that projects and programmes have demonstrated the consideration of the impact on groups of people who share a protected characteristic. This includes gathering and analysing feedback from learners and data on who is benefitting from the learning opportunities we offer to identify any inequalities in access.

The extent and impact of engagement with diverse learners and service users is a focus for discussion of Equality & Human Rights Steering Group meetings and reviews, which seek to share intelligence and learning from programme and directorate-level feedback and engagement. The Steering Group identified the need to disaggregate feedback data by protected characteristics to improve our understanding of how different equalities groups access our education programmes, differences in satisfaction, educational attainment, etc. It is anticipated that new approaches to feedback and evaluation through our emerging Learning and Education Quality System will help us to identify specific barriers to inclusion. This is part of our commitment to inclusive learning as highlighted in our Inclusive Education and Learning Policy.

Our complaints log enables us to code complaints and concerns thematically as being relevant to equality and diversity at both directorate and corporate level.

Complaints and concerns are reviewed annually by the Steering Group within the context of our equalities review, providing another source of data which can be triangulated to inform policy and strategy development and to measure our progress delivering our equality outcomes and equality mainstreaming priorities.

Case study 1: Family Nurse Partnership education programme

Our Nursing, Midwifery and Allied Health Professions directorate supports a well-established education programme for Family Nurses working in partnership with young mothers from disadvantaged backgrounds. The Family Nurse Partnership (FNP) team engaged with family nurses and supervisors because we have an ethos of continuous quality improvement. As educators we wish the participants to have a rich education which will in turn benefit the FNP clients and their children.

We collected information over time to understand how the participants were feeling about their educational experience, what their learning was from the education and how this is impacting on their clinical practice. Through the supervisor learning forum and the FNP education forum, family nurses and supervisors are also able to feedback any emerging learning needs that they wish considered in education.

There are a range of methods to encourage feedback including: an activity to explore 'what helps us learn', QR code for feedback from participants and educators, MS Forms for reflective feedback, family nurse representative within the education forum, supervisor feedback through a learning forum, and an evaluation channel on MS Teams.

FNP clients (young first-time mothers) are recognised nationally as a disadvantaged group. Client's input to the education programme has been achieved through engagement with their thoughts on the family nurse role in supporting breastfeeding and in supporting young fathers. During this process the clients were encouraged to share their thoughts about family nurses and the FNP programme. Educators also spend 1-day every year shadowing a family nurse in practice. This provides an opportunity to ask the clients if there is anything they feel the family nurses need education/training on. In the year 2023-24 clients we met shared that their relationship with the family nurse was the foundation of the work undertaken in the FNP programme. Therapeutic relationships and the underpinning psychological theories which underpin this, is threaded through the education programme in its entirety.

Case study 2 Raising awareness of neurodiversity in the workplace

We are currently developing a new learning resource to raise awareness and understanding of neurodiversity in the workplace. This resource is being developed as a direct consequence of feedback from colleagues across the health and social

care sector who recognise that there is an unmet learning need. Furthermore, we have a number of people on our working group who are neurodivergent to ensure that this resource reflects lived experience and engages learners in real life scenarios where they can reflect on their own practice. We are currently engaging with a number of disability and neurodiversity staff networks to further enhance the authenticity of this new learning resource: NHS Grampian; NHS Greater Glasgow and Clyde, NES, Doctors and Dentists in Training.

3. Supporting service users in providing feedback

Given the high value that we place on our service-user feedback, we encourage comment in a variety of ways (as described at 1.2 above). While there are no formal mechanisms for supporting the provision of feedback, we offer a wide range of access points for comment. These include generic mailboxes to provide named or anonymous feedback, online questionnaires or named contacts within each of our programme teams. We advertise the opportunity to provide comments on our products and services in our learning resources and websites, including the 'Contact Us' webpage on the NES corporate website. For all our trainee surveys, regular reminders are circulated to emphasise the importance of providing feedback. This is reflected in the high response rates from trainees.

Case study 1: Transgender Care Knowledge and Skills Framework

NES was commissioned by the Scottish Government to develop a Transgender Care Knowledge and Skills Framework for all clinical and non-clinical NHS staff at all levels of practice. The aim was to support staff development in this area, leading to improved standards of care for transgender patients.

We engaged with wide range of health and social care staff, including nonclinical staff, educators, a variety of professions, e.g. health visiting, nursing, medicine, pharmacy, psychology, people with lived experience, Royal colleges, 3rd sector organisations, PHS, Health Improvement Scotland, NSS, Scottish Government, joined a development group that co-produced the framework. We also integrated a person with lived experience into the NES project team and consulted with 3rd sector organisations, UK wide subject matter experts.

We wanted to understand the needs of all NHS staff and those with lived experience using health care services and explore what was important to them. Four levels of knowledge and skill were identified as important, from essential – what everyone needs to know or be able to do, through to expert level - the domain of clinicians providing gender identity/transgender health care.

- We held a full day in person workshop for our development group at the very start of the project. This helped to familiarise the group with the project, the topic and to enable everyone to share their thoughts about what should be included in the four levels.

- We used an MS Teams meeting to develop each level of the framework with our development group. We shared a linked to an MS Teams form and worked through each statement so that members of the group could respond from their laptops -agree/disagree/comment/suggest amendments anonymously by poll and request to discuss if wished. All members were able to see the responses and engage in real time. We found this very interactive method very helpful, and the anonymity was important with such a sensitive subject.
- Focus groups were used to engage staff and with people with lived experience with the framework as it was developing and use their feedback to inform the framework.
- Once we had a final draft of the framework, we used a consultation process to include a wider reference group. A three month time frame was given for the reference group to respond and we drew up a response summary sheet so that all responses could be discussed and addressed by the project team.
- Meetings were also held with representatives from other organisations, such as third sector organisations, staff from gender identity services in Scotland, England and Wales.

4. Systems for collecting and using feedback, comments and concerns

NES employs a range of systems and processes for collecting and using feedback and comment from our service users. These systems include the collection of feedback using online tools such as Questback questionnaires and Microsoft Forms. Such tools enable us to easily share examples and good practice between directorates and programme teams.

NES's systems for collecting feedback from learners, faculty and other stakeholders are currently under review and enhancement is expected in this important area of our practice.

Case study 1: Clinical Skills Managed Education Network

NES's Clinical Skills Managed Education Network (CSMEN) delivers essential training for health care professionals primarily in remote and rural settings. CSMEN uses various modes of delivery including the mobile skills unit, multi-professional online resources and medical simulation training.

We gather feedback from participants and trainers to evaluate the education and training delivered via Medical Simulation, Mobile Skills Unit and online learning resources. Participants provide information relating to their training to ensure it remains relevant and of high quality.

Trainers and facilitators evaluation data provide information on their own sessions as well as helping to develop the medical simulation strategies and co-ordinate training for doctors in training. For our resources the information helps to develop and update clinical skills resources. Information collected was from the general evaluation questions (the agreed national CSMEN simulation evaluation questions as a minimum plus course specific questions as well as questions relating to the impact of training on clinical practice).

Several different methods are used, some are anonymous, some anonymised and others gain a certificate of attendance once the evaluation has been completed. We have moved away from using paper forms and we now use QR codes for the Mobile Skills Unit forms to enable easy access to the online forms. We have the QR codes clearly displayed within the Mobile Skills Unit for participants and facilitators to scan and we also share the codes with MSU Hosts and Trainers prior to their Mobile Skills Unit visit.

For online resources a link to the Questback evaluation was embedded into the resource and the Turas Learn feedback automatically opens at the completion of the resource. For medical simulation we use QR codes where possible which are put on the sign-in sheet to link straight to the electronic feedback. When this isn't possible (for example the venue has made their own sign-in sheet) we email the electronic feedback form to trainees. Reminders are sent to trainees after 1 week to remind all to complete the feedback.

Providing a certificate of attendance once an evaluation form is completed can encourage participants to provide feedback. We have also found that allocating time for feedback during the programme creates a higher completion rate and we are moving towards doing this for all training. The use of QR codes makes it easier for participants to quickly scan and complete using their phones and means that feedback is completed on the day when still fresh in the trainee's mind.

5. Using feedback alongside other information to identify opportunities for improvement.

Feedback from trainees and other learners is one of many elements that contribute to quality improvement at NES. On occasions this feedback is a trigger for further investigation, as with the data from our trainee surveys. In other contexts, feedback is used as part of wider evaluations encompassing use of analytic data, peer review, site visits (now in virtual formats) etc. In our Dental and Medical directorates, feedback forms an important component of our comprehensive Quality Management Framework and the annual review process for training programmes. This supports

decision making on any required quality management activities such as a Training Programme enquiry, training location visit etc.

Case study 1: Healthcare Science training

Trainee healthcare scientists are issued with a national training number whose progression is monitored as part of our quality monitoring process. Predominantly, these are clinical scientist trainees, postgraduate bursary awardees and clinical physiology practitioner trainees. All are NHS employees.

NES has national oversight of the state of training for Healthcare science. Our QA process is a necessary activity for some of these trainees for regulatory purposes. Engaging and harmonising oversight across the wider healthcare science community is important for demonstrating parity and consistency. It has been a longstanding approach to bind the identity and expectations of this diverse workforce.

We use an Annual Review of Competency Progression (ARCP) process that summarises trainees' state of progress. ARCPs are reported to us using a standard MS Form questionnaire. This was issued at the end of March 2024 to 239 national training number holders and 70 training centres. We have achieved a 90% *satisfactory* response to requests from trainees for Annual Review of Competency Progression.

In addition, we run a trainee voluntary annual survey to help triangulate the state of training with ARCPs and supervisors feedback. Of the 306 trainees invited to participate, 158 responded, resulting in a response rate of 51.6%.

Trainees were asked if they were encouraged to suggest improvements to the training programme with 70.6% reporting that they were, and 4.9% reporting that they were not. Trainees were also asked if they were encouraged to raise concerns, with 75.9% reporting that they were, and 24.1% reporting that they were not. Some trainees who felt encouraged to raise concerns, felt these were not being listened to or acted upon.

10.1% of trainees reported facing bullying or harassment, either within their training department or external training department. This is a concerning figure, and the HCS Core Team at NES will investigate the possible circumstances surrounding this and implement more training to counteract it.

Trainees reported their overall satisfaction with their training experience, with 74% reporting a feeling of satisfaction and 10% being dissatisfied with their training experience. 85% of respondents said that they would recommend their training programme to others, although 2% of those would not recommend carrying it out within their department. Unfortunately, 13% of respondents said they would not recommend their training programmes, with comments including lack of support and the unachievable expectations of the training. The NES HCS Core Team are working more closely with training departments to assist them in providing the required level of support.

Part 2. Complaints Performance Indicators

1. Learning from complaints (Indicator 1)

As in previous years, NES received very few complaints or expressions of concern (18 in total), but each one was used as an opportunity to learn and improve. Information about each complaint or expression of concern is held centrally by our Planning and Corporate Resources Team. Summaries of complaints received, timescales for investigation and outcomes are presented in Tables 1 and 2.

Table 1 above sets out the specific learning points and improvements made in response to complaints handled by directorates and the corporate Complaints Team. The table contains brief information about the responses to complaints, which range from reviews of process and policy, to staff training and enhancements of communications practice. Enhancements were made or reviews conducted following complaints, including several where the complaint was not upheld, only partially upheld or where NES had no locus of responsibility. The outcomes of each complaint were reported to senior managers in the directorates subject to complaints with the expectation that recommendations would be taken forward. Most of the recommendations for enhancement related to specific programmes or areas of business and were therefore not considered applicable to wider organisational quality improvements.

A total of 16 complaints were handled by the corporate Complaints Team, with two further expressions of concern considered. This is one fewer than the previous year (17 complaints with two expressions of concern). These concerns were fully investigated and led to an apology and corrective action where NES was found to be at fault. Investigations of concerns do not lead to a final judgement but stimulate reviews of policy, process, practice or provision.

2. Complaint process experience (Indicator 2)

Individuals and organisations dissatisfied with NES services or staff can communicate with us through a variety of routes. These include the [Feedback, Comments, Concerns and Complaints mailbox](#) on the NES corporate website, directly to the NES Chief Executive or Director of Planning and Corporate Resources by email or through local directorate staff, such as educational supervisors or quality management staff. The Medical Directorate also reviews expressions of concerns from medical trainees through its Notification of Concerns process. In addition to these processes, NES reviews the Care Opinion website, which is used by service users to comment and complain about health and care services. Although education and training was mentioned in some of these posts, there were no specific references to NES warranting investigation and response.

NES has a clear two-stage process for receiving and investigating complaints as set out in our [Complaints Procedure](#), which may be accessed on the website. This explains our standards for investigating complaints, including the timescales for

investigation and the support available to complainants. A report is produced for each complaint investigated by the corporate Complaints Team, which is presented using an agreed template. The report summarises the complaint and sets out the evidence reviewed. It concludes with the final judgement which is supported by the investigating team's reasoning for its conclusions.

Complainants are invited to provide us with feedback on their experience of the NES complaints process. This invitation asks complainants to comment on issues such as the time taken to conduct the investigation, the thoroughness of the investigation process, support provided by the Complaints Team and the clarity of the final report. We received no feedback from complainants about their experience during the year, although one complainant indicated their dissatisfaction with the complaint investigation outcome by seeking review by the Scottish Public Services Ombudsman (SPSO). The SPSO declined to review the complaint as this was received outwith their time limit.

Our complaints handling procedures and practice was the subject of an internal audit in November 2023. This confirmed that NES's complaints handling practice is effective and meets Scottish Government requirements. The auditors, KPMG, identified several areas where current practice could be enhanced and the Complaints Team have made several improvements in response. These enhancements include an increase in the frequency and scope of complaints reports to the NES Board (via the Education & Quality Committee), development of clear criteria for the escalation of complaints for Stage 2 investigation, development and implementation of a new complaints tracking and recording system and new guidance on the obtaining legal advice in relation to complaints.

3. Staff awareness and training (Indicator 3)

Staff involved in complaints handling are trained in the principles and practice of effective complaints handling (including learning from complaints). Several NES staff have completed NES's own Complaints Handling online learning, which was developed to support the health and social care sectors in Scotland. All four members of our corporate Complaints Handling team hold the Level 5 Professional Award in Complaints Handling and Investigations awarded by Pearson.

Members of the corporate Complaints Team maintain their development and awareness of current practice in this aspect of their work through attendance at occasional events and reading reports from the Scottish Public Services Ombudsman and other authoritative sources of guidance.

4. Outcomes from complaints investigations (Indicators 4, 5, 6, 7, 8 and 9)

The outcomes from each of the complaint investigations conducted in 2023-2024 are summarised in Tables 2 to 5 below. This indicates that 16 complaints were received during the year, plus a further two expressions of concern, which were investigated. None of the complaints received were whistleblowing cases. Of the sixteen complaints received, eight were fully upheld, two were partially upheld and six were not upheld.

In addition to the complaints and concerns, NES also received several emails from individuals expressing dissatisfaction with clinical or care services. These individuals were referred to the relevant complaints contacts with health boards or contractor organisations. The number of such enquiries has decreased following the provision of clearer information on the NES Feedback and Complaints mailbox redirecting individuals with complaints about clinical services to local Health Boards.

Most complaint handling was conducted in accordance with the NHSS National Standards, including the timescales for acknowledging complaints, investigating complaints and reporting back to complainants with the complaint investigation outcomes. In several cases an extension to the timescale for responding to a complaint was required to complete the investigation. These extensions were required to schedule meetings with complainants and other individuals involved in the case. Complainants are kept informed about the progress of the investigation and any extensions required.

Tables 3 to 5 refer to Stage One and Stage Two complaints. Stage One complaints are those that are resolved locally. Stage Two complaints are referred (or 'escalated') to the corporate Complaints Team.

From the beginning of 2023-24, we instituted a quarterly report on complaints received to our Education & Quality Committee. This report provided summary information about each complaint received across nine quality indicators.

Table 2. Feedback, Comments, Concerns and Complaints Register - Year to 31 March 2024

Source (1)	Summary (2)	File reference (3)	Suitable for frontline resolution?	Date of receipt	Acknowledged (A) and response dates (R)	Outcome (4)	Was the complainant satisfied with frontline resolution?	Lessons learned / improvements (5)
NHS Staff	NHS.Scot email deleted	20230413 Email	Yes	13 April 2023	13 April 2023 (A) 17 April 2023 (R)	Upheld (and shared complaint with local board)	Unknown	Working with board colleagues to resolve and ensure that it doesn't happen again. Looking to ensure improvements in the communication process. Contacted local board.
NHS Staff	NHS.Scot email deleted	20230414 Email	Yes	14 April 2023	14 April 2023 (A) 17 April 2023 (R)	Upheld (and shared complaint with local board)	Unknown	Working with board colleagues to resolve and ensure that it doesn't happen again. Looking to ensure improvements in the communication process. Contacted local board.
NHS Staff	DVT mentoring application	20230424 Dental Vocational Training	No	22 April 2023	24 April 2023 (A) 16 May 2023 (R)	Partially upheld	Partially	Review of timelines for DVT recruitment. Development of a contingency plan in case of delays in process. Screening out those applicants who will be unable to meet the essential criteria before mentoring visit takes place.

Source (1)	Summary (2)	File reference (3)	Suitable for frontline resolution?	Date of receipt	Acknowledged (A) and response dates (R)	Outcome (4)	Was the complainant satisfied with frontline resolution?	Lessons learned / improvements (5)
NHS staff	Disparity in pay settlement	20230626 Pharmacy concern	Yes	15 June 2023	20 June 2023 (A) 28 July 2023 (R)	Not upheld	Unknown	Concern: Update trainee handbook. Collect further information re pension discrepancies. Liaise with Chief Pharmacist.
Member of public	Issues with GP trainee	20230627 GP trainee practice	Yes	27 June 2023	27 June 2023 (A) 03 July 2023 (R)	Not upheld – out of scope	Unknown	Note: this case was already investigated by the GP practice.
Member of public	Issue with staff member	20230711 Medical conduct	Yes	11 July 2023	11 July 2023 (A) 15 August 2023 (R)	Not upheld.	Unknown	No recommendations.
Potential NHS employee	Delay in information to Home Office	20230713 Visa and COS CONCERN	Yes	13 July 2023	14 July 2023 (A) 17 July 2023 (R)	Upheld	Unknown	Implementing changes into planning to better incorporate the helpdesk within allocation of resources. Better process for queries – involving communication with the Home Office and person involved.

Source (1)	Summary (2)	File reference (3)	Suitable for frontline resolution?	Date of receipt	Acknowledged (A) and response dates (R)	Outcome (4)	Was the complainant satisfied with frontline resolution?	Lessons learned / improvements (5)
Trainee (NHS Staff)	Delay in information to Home Office	20230728 Tier 2	Yes	28 July 2023	28 July 2023 (A) 28 July 2023 (R)	Upheld	Unknown	Apology given for the delay. With respect to learning/improvement: <ul style="list-style-type: none"> • Better management of service desk queries. • Training more staff in the team with the skills required to independently support the sponsorship service desk (queries).
Trainee (NHS Staff)	Dissatisfaction with scoring for training post	20230912 Scoring	Yes	12 Sept 2023	12 September 2023 (A) 18 September 2023 (R)	Not upheld	Unknown	No recommendations.
Member of the public	Dissatisfaction with recruitment process.	20230920(18) Recruitment	Yes	17 Sept 2023	20 September 2023 (A) 30 Oct 2023 (R)	Not upheld	Unknown	Email sent to MS (and cc'd to CAM) 20 Oct 23. (AL – response expected from 30 Oct 23) Reminder sent on Tue 07 Nov 23.
Former trainee	Communication issue and delay in receiving expenses claims.	20230922 Expenses	Yes	22 Sept 2023	22 September 2023 (A) 27 September 2023 (R)	Upheld	Yes	Review and refresh of webpages. Review issue with digital colleagues. Clarification/learning with staff.

Source (1)	Summary (2)	File reference (3)	Suitable for frontline resolution?	Date of receipt	Acknowledged (A) and response dates (R)	Outcome (4)	Was the complainant satisfied with frontline resolution?	Lessons learned / improvements (5)
Trainee (NHS staff)	Address update and the process for handling expenses.	20230928 Expenses	Yes	28 Sept 2023	02 October 2023 (A) 20 October 2023 (R)	Upheld	Yes	Review base locations to ensure that these reflect a central point for the programme locations.
NHS staff	Record of completion of TURAS modules.	20231010 Completed TURAS modules	Yes	10 Oct 2023	11 October 2023 (A) 12 October 2023 (R)	Upheld	Unknown	Response from complaints: 12 October 2023 (R). Fix in place regarding new issue identified and is being addressed. Complainant being kept up to date with developments (16 November 2023).
Trainee (NHS staff) and another NHS staff member	Process for expenses and delay.	20231024 Expenses	Yes	24 Oct 2023	24 October 2023 (A) 24 October 2023 (R)	Not upheld	Unknown	No recommendations. Can consider further information.
Trainee (NHS staff)	Experience of claiming relocation expenses	20231117	No	17 Nov 2023	17 November 2023 (A) 15 December 2023 (R)	Upheld	Unknown	<ul style="list-style-type: none"> • Need for clearer policy, guidance and process for reclaiming relocation expenses. • Significantly improve customer service in handling requests

Source (1)	Summary (2)	File reference (3)	Suitable for frontline resolution?	Date of receipt	Acknowledged (A) and response dates (R)	Outcome (4)	Was the complainant satisfied with frontline resolution?	Lessons learned / improvements (5)
Dentist	Access to Dental webinars	20231120	Yes	18 Nov 2023	20 November 2023 (A) 24 November 2024 (R)	Not upheld	Unknown	Consider further extending the range of materials and recorded learning sessions available through Turas learn and Portal.
NHS staff	Dissatisfaction with removal from course (NMAHP)	20240205	No	04 Feb 2024	07 February 2024 (A) 29 February 2024 (R)	Not upheld	No – referred to SPSO	Clearer communication of attendance requirements to participants
Dentist	Dissatisfaction with request for part repayment of dental bursary	20240226	Yes	26 Feb 2024	28 February 2024 (A)	Partially upheld	Unknown	Earlier communication with dental staff regarding decisions on repayment of dental bursary

Guidance Notes:

(1) Source: Indicate the status of the person e.g., “FYI Trainee,” “External Contractors,” “Educational Institution,” “and Professional Organisation.” For the purposes of logging, returns should be anonymous with the proviso that further information may be sought, as necessary.

(2) Summary: Provide a brief outline covering the core substance of the feedback indicating whether it is a comment, a concern or a complaint.

(3) File Reference: Use your local identifier such that each case can be found, as necessary.

(4) Outcome: Indicate status if the issue has not been resolved, or indicate, in the case of complaints, whether it has been upheld, partially upheld or rejected and the grounds for that outcome.

(5) Improvements: Outline learning opportunities or improvements identified because of issue raised, either locally or corporately.

Table 3: Total number of complaints closed by NES during the period¹

Number of complaints closed by the NHS Board	Number	As a % of all NHS Board complaints closed (not contractors)
5a. Stage One	13	81%
5b. Stage two – non escalated	3	19%
5c. Stage two - escalated	-	-
5d. Total complaints closed by NHS Board	16	100%

Table 4. Stage One complaints by outcome

	Number	As a % of all complaints closed by NHS Board at stage one
Number of complaints upheld at stage one	7	54%
Number of complaints not upheld at stage one	5	38%
Number of complaints partially upheld at stage one	1	8%
Total stage one complaints outcomes	13	100%

Table 5. Stage Two complaints by outcome (non-escalated)

	Number	As a % of all complaints closed by NHS Boards at stage two
Non-escalated complaints		
Number of non-escalated complaints upheld at stage two	1	33%
Number of non-escalated complaints not upheld at stage two	1	33%
Number of non-escalated complaints partially upheld at stage two	1	33%
Total stage two, non-escalated complaints outcomes	3	100%

¹ Does not include expressions of concern.

Table 6. Stage Two complaints by outcome (escalated)

Escalated complaints	Number	As a % of all escalated complaints closed by NHS Boards at stage two
Number of escalated complaints upheld at stage two	0	0
Number of escalated complaints not upheld at stage two	0	0
Number of escalated complaints partially upheld at stage two	0	0
Total stage two escalated complaints outcomes	0	0

Table 7. Complaints closed in full within the timescales

This indicator measures complaints closed within 5 working days at stage one or within 20 working days at stage two.

	Number	As a % of complaints closed by NHS Boards at each stage
8a. Number of complaints closed at stage one within 5 working days.	10	77%
8b. Number of non-escalated complaints closed at stage two within 20 working days	1	33%
8c. Number of escalated complaints closed at stage two within 20 working days	-	-
8d. Total number of complaints closed within timescales	11	69%

Table 8. Number of cases where an extension is authorised

This indicator measures the number of complaints not closed within the CHP timescale, where an extension was authorised* .

	Number	As a % of complaints closed by NHS Boards at each stage
9a. Number of complaints closed at stage one where extension was authorised	3	23%
9b. Number of complaints closed at stage two where extension was authorised (escalated and non-escalated complaints)	2	66%
9c. Total number of extensions authorised	5	31%

5. Accountability and Governance

As indicated above, we have increased the frequency and scope of reports to Board committees on complaints received. Quarterly reports detail all complaints received and their outcome. We continue to share the draft annual FCCC report with our Executive Team for comment and the Education and Quality Committee for comment and approval.

Recommendations arising from complaints are followed up by our corporate Complaints Team. The [annual report](#) is published on our website each year and sent to the Scottish Government and the Scottish Public Services Ombudsman (SPSO).

During the 1 April 2023 – 31 March 2024 reporting period, the Education & Quality Committee (EQC) monitored and reviewed our educational activities. A key focus for assurance is the collection and use of learner feedback to enhance education quality. A formal minute of EQC meetings was reported to the Board as a routine and regular agenda item.

Part 3. Positive feedback and suggestions for improvement

NES has no formal corporate or local systems specifically designed to elicit and report positive feedback and compliments from our service users. Despite this, we regularly receive endorsements of our work from a range of individuals and organisations. These are usually received through our processes for collecting feedback from learners and others, or through other quality management activities. On occasions we have received unprompted commendations.

The case studies presented below are typical of the positive comments received. They also include suggestions for improvement provided by learners and others.

Case study 1: Supervision skills for Pharmacy Independent Prescribing and Clinical Skills training

Commendations

“Great course, full of really good information and lots of opportunities to put learning into practice. Not only will it help me support my trainee it will help support me in my own practice.”

“I felt that having the safe space to ensure our own skills level was up to standard has given me the confidence to go back and assess my own trainee. In addition, I felt that the scenarios helped me think about where I could use this in my day-to-day practice.”

Suggestions for improvement

“[Include] Several written examples of good examples of SBAR Socrates fever pain score etc case studies/answers etc to take away and work upon.”

"I think this has been a very useful day. I think another thing that would be helpful is a manual BP practice session. This is a useful skill to have as a prescriber as automatic one is not as helpful for patients with AF. Using a stethoscope is also helpful for respiratory rate."

Case study 2 – Clinical Skills Managed Education Network

Commendations:

Mobile Skills Unit:

"The teaching was excellent. Altogether a great tool for professional and personal development."

"Practical, real-time training is far more beneficial than online, or paper led learning"

"It gave a good insight of the work the retrieval team undertake and how teams work together"

Online resources:

"Section one has been very informative and opened my understanding to how various types of practice can be delivered to health care workers/medics and surgeons to practice, discuss and improve care delivery in a simulation setting and bring those skills back into the workplace with confidence"

Medical Simulation Training

- *"All scenarios really relevant to us and our training."*
- *"All highlighted a structured approach which will hopefully help us feel a bit less anxious about dealing with difficult situations."*
- *"Excellent safe learning environment and faculty"*
- *"Great to include the ambulance and involve paramedics and ICU nurses in the course - increased realism"*
- *"Simulation was extremely realistic. Use of a real ambulance. Structured but also good coverage of lots of topics brought up by trainees. Friendly and approachable faculty."*
- *"Good use of simulation training with mix of home training simulators and in person courses."*
- *"I found boot camp both extremely enjoyable and educational - it is something that makes the Scottish CST programme stand out from others and something to be proud of."*

Case study 3 – CPD Connect, GP Nursing Education Pathway, Practice Manager Programme and Network

“I thought it was a really useful format to learn. Learning from seeing how others consulted, doing the scenarios myself in a comfortable setting, and all the debrief conversations afterwards. There was a good mix of patient presentations – all realistic.”

“Actors were superb. Environment was very supportive and non-judgemental with excellent detailed debrief which cemented key learning points.”

“Loved the peer-to-peer learning as missed opportunities for this in Covid and really valuable to discuss specific issues.”

“The scenarios were well planned and really well acted. It was an interesting premise for a teaching session with some great learning points. Wonderful team who were very constructive with their feedback.”

“Useful course and I liked the way the hyperlinks took you straight to the relevant information so you could read it there and then and print if useful to practice.”

“Brilliant programme and very informative. Really enjoyed it and learned loads.”

Case study 4 – Developing trauma skilled practice (Psychology)

“Every person in Scotland should complete this.”

“Having this knowledge will allow me to be a more sensitive, more effective and impactful professional. And probably, in some ways, I will be a nicer human being too...”

“I wish I'd had access to this earlier in my life. This course should be widely available”

“Absolutely brilliant course. Well-structured and with great learning. Inspiring!”

“I have twenty years' experience working with children and young people with trauma ... and I still found this accessible and enlightening.”

“Very insightful session. It has helped me understand my adopted child far better and to know how to help her and myself particularly my window of tolerance and connection before correction.”

“I was very impressed and at points found it quite moving especially exploring the positive things adults can do.”

Case study 5: Family Nurse Partnership

“I cannot thank you all enough for the training, in 23 years of nursing I have never received such high-quality training. Not only have I made new FNP friends for life, but I am able to do a job that I love, and I am passionate about. All round fantastic - thank you”.

“Thank you to the Educators for making the FNP learning such an enjoyable experience. I am sad it has come to an end!”

“FNP is an amazing programme which I feel very humbled and proud to be part of. I have enjoyed being taught by a very passionate team of FNP educators. Sometimes it was overwhelming developing into the role of FNP on the job with the training but during the training the educator’s enthusiasm and experience helped alleviate that stress.”

“The FNP learning programme provides the education at the right time, in a positive learning environment where your contribution feels valued.”

“Overall I thoroughly enjoyed the training and found out it greatly beneficial to my role as a FN and being able to consolidate my learning in practice.”

“...the education team have all been excellent, approachable and clearly passionate about what they do”

“...the education team consistently provide such a positive learning environment and go out of their way to ensure they meet our needs as learners.”

Case study 6: Scottish Multiprofessional Maternity Development Programme (SMMDP)

“The course presenters were knowledgeable and presented in a way that made me feel like the scary unmanageable is quite manageable. venue was suitable and the mannequins realistic enough. Good mix of chat and videos and they weren’t afraid to shy away from the reality of the less pleasant aspects of the job.

The course tutoring was very professional and knowledgeable, I enjoyed this course. :)

Excellent course-I thoroughly enjoyed the clinical practice and felt it help consolidate my knowledge and give me more confidence in my clinical ability and skills.

Overall, I was highly impressed with this course. I felt a little intimidated with the idea of coming but the instructors and course organisers were so welcoming. I felt you all created a very positive and supportive learning environment. I left feeling far more confident in my knowledge and skills. I have been recommended to colleagues!

Excellent expert teaching from the midwifery faculty. Great workshops giving plenty time for each candidate to practice. A very supportive atmosphere. All aspects of the day helped me immensely. good lectures, following on from the pre-course reading needed to be done prior to attending the 2 study days.

Further information

For further information about NHS Education for Scotland’s processes and performance in collecting feedback and handling complaints please contact:

Rob Coward, NHS Education for Scotland, Westport 102, Edinburgh EH3 9DN

Tel: 07794218816, rob.coward@nhs.scot

To make a specific complaint or comment about any of our products and services please contact our corporate Complaints Team at: complaints@nhs.scot or use our [Complaints Mailbox](#).

NHS Education for Scotland

NES/24/66

Agenda Item: 09c

Date of meeting: 26 September 2024

NHS Public Board

1. Title of Paper

1.1. Caldicott Guardian: Annual Report 2023-2024

2. Author(s) of Paper

2.1. Tracey Gill

3. Lead Director(s)

3.1. David Felix

4. Situation/Purpose of paper

4.1. To provide the NES Board with assurance regarding NES compliance with the Caldicott Principles.

5. Background and Route to Meeting

5.1. The Caldicott Guardian has responsibility for reflecting patients' interest in the use of their data, ensuring that their information is shared appropriately and securely, and to advise on options for the lawful and ethical processing of patient identifiable data.

5.2. The annual Caldicott Guardian report was endorsed at the NES Technology and Information Committee in August 2024.

6. Assessment/Key Issues

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

6.1. The Caldicott Guardian report provides:

- 6.2. Confirmation that no new patient data processing was undertaken in 2023-24.
- 6.3. Overview of incidents and information breaches that involved patient identifiable data.
- 6.4. A review of activity across NES Directorates with regards to the management and processing of patient identifiable data.

7. Recommendations

- 7.1. The NES Board is asked to approve the content of the report.
-

Author to complete checklist.

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

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

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

Yes

No

Author name: Tracey Gill

Date: 11 September 2024



Caldicott Guardian 2023-2024 Annual Report

Contents

- Introduction: 3**
- New patient identifiable data processing – 2023-2024: 3**
- Incidents involving patient identifiable data:..... 4**
- Directorate Updates:..... 12**
 - All Disciplines: 12**
 - Technology Services..... 13**
 - Medicine 23**
 - Dental 24**
 - Optometry..... 27**
 - Pharmacy..... 27**
 - Psychology: 28**

Introduction:

1. *“The Caldicott Guardian plays a key operational role in ensuring that NHSScotland and partner organisations satisfy the highest practical standards for handling patient identifiable information.”¹*
2. The Caldicott Guardian acts as the ‘conscience’ of the organisation and has responsibility for reflecting patients’ interests in the use of their data, ensuring that their information is shared appropriately and securely, and to advise on options for the lawful and ethical processing of patient identifiable data.
3. 2023-2024 saw a continued expansion in NES’s role and responsibilities regarding the processing of patient identifiable data. This Caldicott Guardian report will provide:
 - an outline of all new patient identifiable data processing undertaken within NES in 2023-2024;
 - overview of incidents and information breaches that involve patient identifiable data;
 - review of activity across NES Directorates with regards to the management and processing of patient identifiable data.

New patient identifiable data processing – 2023-2024:

4. For all new processing of patient identifiable data, Directorates are required to complete the appropriate Information Governance documentation before the system goes live. Two core assessments must be completed, a Data Protection Impact Assessment (DPIA) and a System Security Policy (SSP).
5. The DPIA aims to identify and minimise any data protection risks associated with a project, and will:
 - describe the nature, scope, context and purpose of the processing;
 - assess necessity, proportionality and compliance measures;
 - identify and assess risks to individuals; and
 - identify any additional measures required to mitigate those risks.

¹ [NHSScotland Caldicott Guardian’s Principles into Practice](#)

6. The SSP is designed to address technological risks, and to demonstrate that the appropriate technological security controls and measures are in place to ensure the safe and secure processing of patient-identifiable data.
7. The appropriate Information Governance impact assessments have been completed for the programmes of work detailed in this report.
8. NES is identified as either a 'Data Controller' or a 'Data Processor' for each of the systems within this report.

GDPR Article 4(7) defines a 'Data Controller' as *"...the natural or legal person, public authority, agency or other body which, along or jointly with others, determines the purposes and means of the processing of personal data..."*²

A 'Data Processor' is defined as *"...a natural or legal person, public authority, agency or other body which processes personal data on behalf of the controller."*³

9. There were no new systems or applications within NES for 2023/2024 which resulted in new processing of patient identifiable data.

Incidents involving patient identifiable data:

10. A Personal Data Breach is defined as:

*"...a breach of security leading to the accidental or unlawful destruction, loss, alteration, unauthorised disclosure of, or access to personal data transmitted, stored or otherwise processed"*⁴

Personal data breaches can include:

- access by an unauthorised third party;
- deliberate or accidental action (or inaction) by a data controller or data processor;
- sending personal data to an incorrect recipient;

² GDPR Article 4(7)

³ GDPR Article 4(8)

⁴<https://ico.org.uk>

- computing devices containing personal data being lost or stolen;
- alteration of personal data without permission; and
- loss of availability of personal data.

11. NES had 40 personal data breaches recorded in 2023/24 which is comparable with 2022/2023 which saw 41 recorded breaches. Of those 40 personal data breaches eight involved patient identifiable data. Non-patient breaches are reported to the Information Security Forum and Audit and Risk Committee on an annual basis.
12. A decision on whether or not to report to the Information Commissioner's Office (ICO) is determined by consideration of whether there is a personal data breach which is likely to impact on the rights and freedoms of individuals and is guided by advice from the ICO website. Only those data breaches which are regarded as having a high risk are reported. No data breaches reached the threshold for reporting to the ICO.

Personal Data Breaches Involving Patient Identifiable Information – 2023-2024				
Ref No:	Date of Breach	Description	Reported to ICO	Notes
2023-Q2-025	11 April 2023	NHS GG&C received a fair-warning notification that a NES Medical Trainee based at the Board had accessed their patient record 8 times in a 5-minute period (1:40pm – 1:45pm). Exposure of data: 5 minutes	No – threshold for reporting not met.	Medical Postgraduate Dean spoke to NHS GG&C about the seriousness of the trainee accessing their own records. NHS GG&C confirmed that the trainee had been reminded that this is not permissible and was required to retake IG training.
2023-Q2-033	16 May 2023	An individual who was looking to change COVID-19 vaccination appointments for themselves and another patient, posted two letters from the vaccination service to a NES staff member in the hope they could change their appointments. The letters contained patient data including name, address and CHI numbers. Exposure of data: 1 day	No – threshold for reporting not met.	Reported to Information Assurance. Staff member confirmed disposal of the information.
2023-Q2-035	19 May 2023	Incident related to the way a patient's current address is chosen and assigned by the NextGate EMPI service which NES procures from a third party called Rhapsody. Upon being told of a discrepancy with a patient's record between Forth Valley's	No – threshold for reporting not met.	Rhapsody undertook testing of an resolution to the issue. NES then reseeded the Nextgate EMPI to resolve all records updated prior to the fix being put in place. The re seeding will also resolve historical records for the postcode issue (2023-Q2-040).

		<p>clinical portal (TrakCare) and the NES ReSPECT application (which uses NextGate EMPI), the project investigated the patient data in NextGate. In the patient's "single best record" in NextGate does have the patients old address on it. However, NextGate has access to the new address, as the project could see it, but it's not presenting it as the current address. This was presumably related to the NextGate matching/merging configuration i.e. how it chooses/assigns a patient's current address.</p> <p>Issue time period: May – September 2023</p>		<p>In addition to the above, NES switched the NDP EMPI Service to use an NSS demographics provider as the primary source which does not have this issue.</p>
2023-Q2-040	19 June 2023	<p>Turas FNP application team were notified that one of their users could not register a patient to the app as the postcode provided by the patient could not be matched on the EMPI service. Subsequent investigation by the NDP Engineering team revealed that this patient's postcode was incorrect within EMPI. The patient had recently moved residence to an address with postcode 'G33 5PA'. NextGate has stored the updated address correctly but with postcode rendered, incorrectly, as 'G33 35P'. A second patient with a similar issue was discovered by the Turas FNP team on 21 June. Both patients have recently updated records within NextGate, probably because they recently changed address. It should be noted that the records were updated on</p>	No – threshold for reporting not met.	<p>The postcode issue was resolved in that the processing was changed by Atos to mitigate against invalid postcodes being received. New 'update' records will be processed correctly.</p> <p>NES reseeded the Nextgate EMPI to resolve all records updated prior to the fix being put in place.</p> <p>In addition, NES has switched the NDP EMPI Service to use an NSS demographics provider as the primary source which does not have this issue.</p>

		<p>different dates – the first in late April and the second early in May 2023.</p> <p>The error can be summarized as follows: Where a postcode has 6 characters e.g. 'G33 5PA', the third character '3' is duplicated in the 4th position whilst the final character (in this case, 'A') is truncated so the postcode is stored by NextGate as 'G33 35P'.</p> <p>Issue Time Period: June – September 2023</p>		
2023-Q3-058	25 February 2023	<p>Vaccine Management Tool (VMT) to the National Clinical Data Store (NCDS) export bug This was discovered when investigating a data issue for a Health Board</p> <p>Five vaccination events that had been correctly recorded in the Vaccination Management Tool (as is the correct process), had not been passed to NCDS . These events were stuck in a queue waiting for upload. All vaccination events before and afterwards appear to have done so correctly.</p> <p>Affect NHS Boards NHS GGC, NHS Lanarkshire, NHS Lothian</p> <p>Since the vaccination events had not been passed to NCDS they will not have progressed to other downstream systems as they should have. This means those</p>	No – threshold for reporting not met.	<p>The five vaccination events that were affected were manually pushed to NCDS. The three health boards that had vaccinated the 5 citizens affected were notified. Each of the three Health Boards involved was only given data for the citizens that they had vaccinated: CHI, vaccination centre, date and any suitability notes recorded. Public Health Scotland were also notified as the owners of the vaccination programme for the products involved. The wider VMT community were given a general summary of the problem.</p> <p>The source of the bug that caused the events not to be passed to NCDS has not been located but an additional check has been added by the developer to see the oldest event in the queue. This would enable us to see if the incident has reoccurred.</p>

		<p>individuals may have been invited for another vaccination unnecessarily. The vaccination events were still visible on VMT (hence a vaccinator raised a query locally, which got passed to us to investigate).</p> <p>Time period of issue: 25 Feb 2023 – 11 Sept 2023</p>		
2023-Q3-067	13 October 2023	<p>Eyecare User (clinician) reported that when they copied 'cover test' element from a previous examination (29 May) the measurement data copied over along with written comment but that the measurement data disappears from the previous event. Comments noted remain.</p> <p>Patient data is still available in the new examination event on 12 October.</p> <p>Patient data is not lost but should be sitting in two examination events at different dates instead of one.</p> <p>Time period of issue: Not known</p>	No – threshold for reporting not met.	<p>There are a number of 'elements' that can be copied. Testing has been undertaken and to date this bug has been found in 3 elements. Cover test, Ninth position and Refraction.</p> <p>GGC Orthoptists who use Cover test element have been advised not to use copy function within Cover Test.</p> <p>Supplier of software TKL have identified a fix for bug in Cover test and was available in a later release.</p>
2023-Q3-071	28/09/2023	<p>NES undertakes ad-hoc data backfills for vaccination information on behalf of the boards and PHS (controllers). NES uploads the data to NCDS, which is the trusted source for VMT.</p> <p>PHS sent NES a backfill file which was intended to cover the period October 2022 to August 2023. However, the file also</p>	No - The incident was remedied by NES but is the result of a faulty data set sent to NES by PHS. PHS is	<p>NES wrote queries to identify the duplicates, and to update their status from 'complete' to 'entered in error'. This will make the records unavailable to users of VMT and essentially hide them. The priority was to restore trust in the integrity of VMT.</p> <p>By tagging the duplicates that sit on VMT, the duplicates on NCDS cannot be pulled through to VMT a second time.</p>

		<p>contained records for a period prior to October, which had previously been sent to NES and uploaded.</p> <p>As a result, this upload caused there to be circa 22k duplicate records on NCDS. These duplicates were then pulled through to VMT.</p> <p>There is low risk to patients – (was confirmed it is better to have the information in twice than not at all). However, there was an important data integrity issue.</p> <p>Due to the large scale of the duplicate information, the boards advised that they did not trust the information held in VMT for Shingles vaccinations. Some boards suggested they may need to pause their vaccination schedule.</p> <p>Issue time period: September – November 2023</p>	<p>co-ordinated the after event actions with boards, and made the decision if reportable or not.</p>	<p>In relation to NCDS and VMT, NES acts only under the instruction of PHS and the boards. The final removal of duplicates will take place after suitable instructions are agreed by PHS and the boards, that can be implemented by NES. NES was advised by PHS not to delete the duplicate records once identified.</p>
2024-Q1-008	10 January 2023	<p>NHS Forth Valley have integrated TrakCare with OpenEyes as part of their digital eyecare rollout. The sending of messages from Trak to OE was switched on the afternoon of 10 Jan. It was noted that messages were being received for suspected non-ophthalmology specialities when NES team were expecting ophthalmology only. FV were informed and those particular messages were stopped.</p>	<p>No - FV as controller determined not reportable</p>	<p>FV informed as soon as messages noticed. FV modified their system to ensure messages were no longer sent. Meeting arranged with FV eHealth to discuss. FV confirmed that they have local IG agreement which covers all FV TrakCare database to be available to OpenEyes.</p> <p>NHS Forth Valley have taken the decision to leave the additional patients in the system in line with the governance arrangements they have in place.</p>

		Issue Time Period: 1 day		
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Directorate Updates:

Function/Activity:	NES use of, exposure to, patient data	Controls	Planned Actions 2024/2025
All Disciplines:			
TURAS Portfolios and Significant Event Analyses	Risk of inadvertent inclusion of PII within TURAS Portfolio content, placement logs, case studies or similar.	<p>Trainees and practitioners made aware of the requirement to exclude PII in TURAS Portfolio content, placement logs, case studies or similar products for reflective practice.</p> <p>Trainers/Mentors raise incidents of inappropriate PII use with trainee.</p>	<p><u>Dental:</u> Continue to explore opportunities to reduce exposure to PII. For example, this can be easily incorporated into guidance given to the VDPs at the beginning of training. To be taken forward in the VT workstream. Continue reinforcing to Core and Specialty trainees in induction and educational events.</p> <p><u>Medical:</u> Reminder to all trainees to exclude PII when using e-portfolio by adding an article to the Deanery newsletter in August 2024 when new trainees will be starting in programme.</p>
Sessional and seconded clinical staff in NES	There is no additional access to PII by sessional staff (access to shared files is restricted).	<p>Management and use of patient data are governed by the Caldicott and Information Governance controls of relevant Health Board.</p> <p>Clinicians are subject to professional ethical codes including relevant patient confidentiality</p>	<p><u>Medical:</u> No further action should be required as seconded staff governed by employing Health Board.</p> <p>General information around governance discussed at TPD</p>

			and APGD induction and training days.
Trainees in Clinical Environments	Trainees in clinical environments employed by NES.	It is clear that governance of the PII data in those environments is a matter for the organisation responsible for the clinical care.	<p><u>Dental:</u> As VDPs are now NES employees, there is merit in requesting details of Information Governance arrangements from training practices in which they will work, prior to commencement of training. A SOP is to be created for the management of this.</p> <p>Continue to follow the placement health board information governance policies for Dental Core and Specialty trainees.</p> <p><u>Medical:</u> Reminder to all trainees in Deanery newsletter (as above) but the governance around this sits with the Health Boards.</p>
Technology Services			
Turas – FNP Scotland	Two members of NES Technology staff are the national system administrators for Turas FNP. This role allows them to view all patient records within the system.	1) There is a full audit database which records every instance of a record being created, edited, deleted and <i>viewed</i> by	Due to staff resignations the staffing profile of this project is being reviewed for 2024/25, with more resource being put towards Data Engineering. Roadmap for

	<p>This is necessary to support the resolution of helpdesk tickets and the addition of new nurses or delivery teams within the system. One member of staff also produces analytical reports in response to ad hoc information requests from NHS Boards delivering the programme.</p> <p>A very limited number (2) NES Technology staff developing the application or providing technical responses to the most complex helpdesk requests have access to the live database.</p>	<p>every system user. This database can be queried on demand.</p> <ol style="list-style-type: none"> 2) The system administrator role can only view patient records 3) All helpdesk tickets requiring technical staff to view or make changes to patient records are logged as items on Microsoft Azure DevOps – NES Technology’s work tracking system. 4) All NES Technology staff interacting directly with patient data are required to undertake annual IG training (e-learning Safe Handling Module) 	<p>24/25 to be confirmed but there will be additional reports developed.</p>
<p>Turas – FNP England</p>	<p>Two members of NES Technology staff are the national system administrators for Turas FNP. This role allows them to view all patient records within the system. This is necessary to support the resolution of helpdesk tickets and the addition of new nurses or delivery teams within the system.</p> <p>A very limited number (2) NES Technology staff developing the application or providing technical responses to the most complex helpdesk requests will have</p>	<ol style="list-style-type: none"> 1) There is a full audit database which records every instance of a record being created, edited, deleted and <i>viewed</i> by every system user. This database can be queried on demand. 2) The system administrator role can only view patient records 3) All helpdesk tickets requiring technical staff to view or make changes to patient records are logged as items on Microsoft 	<p>Due to staff resignations the staffing profile of this project is being reviewed for 2024/25, with more resource being put towards Data Engineering. Roadmap for 24/25 to be confirmed but there will be additional reports developed.</p>

	<p>access to the live database. This will be on a just-in-time basis in response to a logged request from the FNP England Programme.</p>	<p>Azure DevOps – NES Technology’s work tracking system.</p> <p>4) All NES Technology staff interacting directly with patient data are required to undertake annual IG training.</p>	
<p>Turas Clinical Assessment Tool</p>	<p>The Turas Clinical Assessment Tool is used across paramedic, emergency department, specialist assessment and treatment area, clinical assessment centre contexts to improve situational awareness, decision making, safety and handover.</p>	<p>1) There is a full audit database which records every instance of a record being created, edited, deleted and viewed by every system user. This database can be queried on demand.</p> <p>2) The system administrator role can only view patient records.</p> <p>3) All helpdesk tickets requiring technical staff to view or make changes to patient records are logged as items on Microsoft Azure DevOps – NES Technology’s work tracking system.</p> <p>4) All NES Technology staff interacting directly with patient data are required to undertake annual IG training.</p>	<p>This application was taken offline in Q3 FY22/23, full decommission requires the deletion of data however this cannot be completed until the C-19 Inquiry completes as the CLO has advised that NES must retain all data until this is concluded.</p>

<p>Turas Clinical Assessment Tool for Care Homes (TCATCH)</p>	<p>The purpose of TCATCH is to provide a consistent and structured symptom checking and assessment tool, which provides guidance on symptoms and informs local operational decision-making, aiding communication in situations where external clinical support is required.</p> <p>While care homes currently use a range of approaches based on paper and some digital tools to support and facilitate assessment of residents and escalation to external clinical support, this tool provides a reliable and consistent data set, collection method and service model.</p> <p>TCATCH provides:</p> <ul style="list-style-type: none"> • Safe, consistent and timely assessment and decision-making about care of suspected or confirmed COVID-19 cases in care homes. • Early detection of deterioration, and appropriate management, monitoring, and escalation of suspected or confirmed COVID cases. • Consistent, timely provision to GPs (and in NHS 	<ol style="list-style-type: none"> 1) This was a limited scope pilot project with three sites and a restricted number of users. 2) All NES Technology staff interacting directly with patient data are required to undertake annual IG training. 	<p>This application was taken offline in Q3 FY22/23, full decommission requires the deletion of data however this cannot be completed until the C-19 Inquiry completes as the CLO has advised that NES must retain the data until this is concluded.</p>
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	GG&C, participating Advanced Nurse Practitioners (ANP)) of the full range of relevant information they require to give advice and make recommendations about escalated, suspected or diagnosed COVID-19 cases.		
Turas Vaccination Management Tool	The Turas Vaccination Management Tool (VMT) is a point of care, digital vaccination management and data recording tool. It establishes a standardised, national approach to the recording of vaccination data in real time with a national agreed dataset, with completed records stored in the National Clinical Data Store (NCDS), that supports local and national reporting, analysis and research to inform responsive, clinical/public health intervention strategy.	<ol style="list-style-type: none"> 1) There is a full audit database which records every instance of a record being created, edited, deleted and viewed by every system user. This database can be queried on demand. 2) All helpdesk tickets requiring technical staff to view or make changes to patient records are logged as items on Microsoft Azure DevOps – NES Technology work tracking system. 3) All NES Technology staff interacting directly with patient data are required to undertake annual IG training. 	Product is running on a BAU basis, with updates to vaccination products as requested by the programme. The programme is still determining the future roadmap of this product, it may be extended to include respiratory syncytial virus (RSV).
National Clinical Data Store – Vaccinations	The NCDS is a database that holds information about vaccinations given to citizens. Currently, this only relates to	<ol style="list-style-type: none"> 1) There is a full audit database which records every instance of a record being created, 	In 2024/25 new vaccinations will continue to be added to NCDS, thus widening the scope of the patient data held. NES Assurance

	Covid-19, Flu, Pneumococcal, Shingles and Pertussis. Further vaccines will be added in 2022/23.	<p>edited, deleted and viewed by every system user. This data can be queried on demand.</p> <p>2) All helpdesk tickets requiring technical staff to view or make changes to patient records are logged as items on Microsoft Azure DevOps – NES Technology’s work tracking system.</p> <p>3) All NES Technology staff interacting directly with patient data are required to undertake annual IG training.</p> <p>4) Any changes made directly to the database due to quality issues from source systems are logged in confluence with a date, time and reason.</p>	are involved to ensure this is properly managed and data is processed in a safe and secure manner.
Shielding for vulnerable citizens	The Shielding SMS Service facilitated support to Scotland’s most vulnerable citizens during the pandemic (Shielded Group circa 150k). The system has now been hibernated.	1) Demographics and contract details are no longer processed by NES following decommissioning of the SG shielding service.	Decommissioned as a service. Data retained as part of the Covid Inquiry.
Eyecare	The Scottish Government’s National Ophthalmology Workstream (NOW) recognised the need for an ophthalmology Electronic Patient Record (oEPR) to reform eyecare services and to	1) There is a full audit database which records every instance of a record being created, edited, deleted and viewed by	Eyecare will look to model a subset of the application’s data in OpenEHR this year. Should this work be completed the next step would involve storage of this data in a Clinical Data Repository.

	replace largely paper-based records. The electronic capture of clinical, audit and follow-up data were noted as vital to eliminating irreparable sight-loss by patients on waiting lists, and to facilitate greater shared care across the primary and secondary eyecare interface.	system user. This database can be queried on demand. 2) All NES Technology staff interacting directly with patient data are required to undertake annual IG training plus additional annual advanced IG training.	NES Assurance Forum will remain involved throughout this process to ensure patient data is handled correctly by the new system.
Emergency Anticipatory Care Planning	Anticipatory Care Planning is about individual people thinking ahead about their care preferences should they become unwell and unable to express their wishes. The Essential ACP is a web based form designed to capture an individual's preferences for care. It is available via the internet but is intended to capture the data during a conversation between a care professional and the individual to whom the data relates.	N/A	Now renamed to Future Care Planning. Project is in discovery phase, possibility of realignment with DFD/ISCHR programme. Once MVP scope is confirmed following initial discovery, work on drafting DPIA and other relevant assurance documentation will begin.
ReSPECT	The eACP product is being replaced by the ReSPECT application. The application is based on the Resuscitation Council UK's process and form⁵ .	1) There is a full audit database which records every instance of a record being created, edited, deleted and viewed by every system user. This database can be queried on demand.	This product will be deprecated and brought under the umbrella of Future Care Planning.

⁵ Resuscitation Council UK ReSPECT - <https://www.resus.org.uk/respect>

		2) All NES Technology staff interacting directly with patient data are required to undertake annual IG training plus additional annual advanced IG training.	
Nextgate EMPI* *Enterprise Master Patient Index	The Nextgate EMPI is a NES-wide resource. It can be used to support multiple clinical applications and services that sit either in the Turas platform or the National Digital Platform (NDP). Applications access this resource by calling the NDP EMPI Service.	1) Access to the Nextgate EMPI is governed by the NES quarterly updates to CHIAG. 2) All NES Technology staff interacting directly with patient data are required to undertake annual IG training plus additional annual.	Nextgate EMPI data and resources were deleted on 29 January 2024. Process was followed with approval from deputy Caldicott Guardian, Senior Information Risk Owner and Data Protection Officer. CHI management board were notified of the decommissioning in the April update.
NDP EMPI Service	The NDP EMPI Service provides a gateway for products using the National Digital Platform to access demographic data from the NextGate EMPI deployed within NES AWS infrastructure. The Service only allows read access to the data stored in the NextGate EMPI.	1) Calls to the Service are logged by the NDP Audit Service. 2) All NES Technology staff interacting directly with patient data are required to undertake annual IG training plus additional annual.	Expected that more applications will use this Service to access patient demographics during 2024/25. In 2024/25 there is planned integration between NDP EMPI service and a new authentication service. Systems that use the new authentication service will benefit of on behalf of user level authentication giving more granular user level auditing for NDP EMPI service.

SCI Diabetes	SCI Diabetes provides a comprehensive clinical support tool for the management of diabetes and for reporting of national diabetes care outcomes.	<ol style="list-style-type: none"> 1) There is a full audit database which records every instance of a record being created, edited, deleted and viewed by every system user. This database can be queried on demand. 2) All NES Technology staff interacting directly with patient data are required to undertake annual IG training. 	<p>There are three planned releases in the year, June 2024, September 2024, and February 2025.</p> <p>The SCI-Diabetes Oversight Group and the Scottish Diabetes Group help to define the priorities of work.</p> <p>Scheduled to migrate the system from Atos hosting to MS Azure hosting during 2024/25. The migration plan, testing, controls, and rollback will be shared with the Health Boards as Controllers. The MS Azure environment will be subject to vulnerability testing prior to the live data being migrated.</p> <p>DPIA and SSP are up to date. Pen test for the application scheduled for July 2024.</p>
NDP Routing Service	This service facilitates the movement of information between NHS Scotland systems of record (clinical and administrative systems) on the SWAN network and digital service providers who offer applications located on the internet. The service allows information to flow in both directions from Health Boards to third party service providers and from third party service providers to Health Boards.	<ol style="list-style-type: none"> 1) Health Boards and NSS are sighted on use of the NDP Routing Service. 2) Applications making use of the service are required to have updated all of their compliance documentation before sending patient data. 	In 2024/25 NES it is expected that most services will use the NDP Routing Service which will lead to more patient data passing through, but governed in a sustained, safe and secure manner.

<p>Severe Acute Respiratory Infection (SARI)</p>	<p>As an extension of the Scotland response to the global coronavirus pandemic, this SBAR-style assessment tool was developed for use as a pilot in the Queen Elizabeth University Hospital (QEUH), Glasgow in a number of specialist areas e.g. Emergency Department (ED), Specialist Assessment and Treat Area (SATA), Acute Receiving Unit (ARU), to improve the assessment and treatment of patients who present with respiratory issues that are not Covid-19 related.</p> <p>The Turas SARI application will act as a data collection tool in the clinical areas for a six month research project being undertaken between October 2021 – March 2022; the research team are staff members of NHS Greater Glasgow & Clyde, the University of Glasgow and Public Health Scotland (PHS).</p> <p>The research teams will be reviewing the data on an ongoing basis and a final data extract will be passed (to Safe Haven) to the research team of final analysis and write up.</p>		<p>This application was taken offline in Q3 FY22/23, full decommission requires the deletion of data however this cannot be completed until the C-19 Inquiry completes as the CLO has advised that NES must retain all data until this is concluded.</p>
<p>Weight Management Tool</p>	<p>The application provides a solution for the collection, collation and reporting of the Core Dataset for</p>	<p>1. There is a full audit database which records every instance of a record being created,</p>	<p>There are plans to undertake very limited development of the Tool during the 2024/25. The scope of</p>

	<p>Tier 2 and Tier 3 Weight Management Services for Children/Young People and Adults for weight management services across 13 Health Boards and The State Hospital (excluding NHSGGC).</p> <p>The data collection is for statistical and public health reporting. It is not intended that the data are used for clinical purposes.</p>	<p>edited, deleted and viewed by every system user. This database can be queried on demand.</p> <p>2. All NES Technology Staff interacting directly with patient data are required to undertake annual IG training.</p>	<p>the development is dependent on available Scottish Government funding.</p> <p>DPIA and SSP are up to date. Last penetration test took place in March 2023. A new one is to be scheduled for around October 2024.</p>
Medicine			
<p>General Practice Training – Consultation Peer Review</p>	<p>Consultation peer review, with the educational emphasis on patient centred consulting, is an important part of teaching both for doctors in training and established doctors returning to NHS practice.</p> <p>It has been incorporated into both GP Trainer Entry Course (GPTEC) and is a component of the NES Returners to General Practice Scheme.</p> <p>Consultations are viewed in the surgery, but occasionally these files are taken to district training sessions or calibration meetings elsewhere.</p>	<p>Following GMC guidance, all patients who have their consultations recorded are informed and sign a consent form both pre and post consultation. They can ask the GP/GPST to delete their consultation at any time thereafter.</p> <p>The data files are encrypted and delivered for peer review by a trusted hand or sent by registered post.</p> <p>GPs use standard digital video recorders and transfer the information to their secure NHS computers for this purpose. The digital recording is then transferred to an encrypted memory stick.</p>	<p>GMC Reflective practitioner guidance was circulated to all Educational Supervisors and Trainees and is highlighted at Inductions every year.</p> <p>Training practice guidance on storage and handling of recorded consultations has been updated and incorporates checks on sharing this at learning events.</p>

	GP returners are required to submit 4 consultations to the National GP Peer Review process.	All GPs and GPSTs making digital files of their consultations are made aware that they are responsible for the security of these files. GP returners follow the same processes. Practice data protection policies are reviewed as part of practice approval on a 3-yearly basis.	
Dental			
Dental Care Professionals: Orthodontic Therapy	Video recordings of a range of clinical orthodontic procedures being provided to patients by the dental team.	DPIA completed by the IG team and approved by NES DPO June 2021. Patient Information Leaflet created. Written consent obtained from patient and staff involved in video using NHS Consent Form. Video stored securely on SharePoint. Access to files are restricted. Videos will not be made available to attendees at any point, and only will be shown during live training sessions. Videos removed after three years or removed earlier if requested by patient.	DPIA to be reviewed annually.
Significant Event Analyses	On rare occasions, the final report submitted for an enhanced Significant Event analysis (eSEA)	Significant event analysis does not require the presentation of identifiable information, and only	Senior Admin Officer from CPD workstream provides guidance to SEA reviewers on examples of

	<p>project may include information which has the potential to identify a patient, or practice. It may even name a patient, a practice or a member of the dental team.</p>	<p>very rarely would such a situation occur.</p> <p>Reviewers/advisers would return such projects to the author, suggesting modification to the content which would eliminate identifiable information.</p>	<p>potential identifiable information, and to outline the process for returning such submissions for modification. In line with PORTAL, TURAS pages to be modified to include guidance on submissions not including PII.</p>
<p>Trainees/dentists in Clinical Environments</p>	<p>In the course of study days/CPD events, delegates will often be encouraged to share experiences, particularly when these events are held face to face, and these discussions have the potential to identify a patient.</p> <p>Additionally, CPD and VT events often involve participants bringing examples (radiographs/models etc) from practice, and these should both be anonymised and stored in anonymised folders.</p> <p>Transport of such materials to the event should be through encrypted media or secure email (e.g. nhs.scot)</p> <p>Orthodontic Therapy trainees: Case Presentations include photographic images (including extra oral images). Written Patient Consent is obtained, and documentation is reviewed during the Practical Appraisal process.</p>	<p>CPD and VT Advisers are often included in these events as moderators and will give guidance to participants on the use of anonymised examples to illustrate points made.</p>	<p>Senior Administrative Officer from VT to draft written guidance for CPD and VT Advisers in relation to moderation of discussions. This would also be circulated to any other person facilitating a teaching event at which these types of discussion would be likely.</p>

	Cases are accessed via the OrthodonticTherapy MS teams private channel, so they are secure. They are then submitted to RCSEd via a secure link as a component of the summative assessment.		
Presentations in CPD Events	A significant number of CPD/VT/DCT/Optomety speakers are not NES employees, and may use slides depicting clinical situations. Depending on the subject matter of the images, these have the potential to contain patient identifiable information	The majority of presenters are professional registrants (e.g. GDC, GOC) and are already aware of their responsibilities in relation to protection of sensitive information, but issues may arise through innocent mistakes. CPD, VT and DCT Advisers, along with Optometry Postgraduate Tutors, are expected to communicate with their speakers to ensure that they are aware of their responsibilities.	Information sheet to presenters/contributors and code of conduct has been produced and will be shared with presenter/contributor by Adviser/Tutor prior to contract being issued to ensure responsibilities are understood in advance. Any handouts shared with trainees are in PDF format and have PII removed. If recorded and presentations do contain any PII, recordings are edited to remove this and the original file recording is deleted.
Remediation Support	On rare occasions, the reports/audits/case-based discussions submitted for reflection and completion of a remediation support package may include information which has the potential to identify a patient, or practice. It may even name a patient, a practice or a member of the dental team.	Reviewers would return such documents, suggesting modification to the content which would eliminate identifiable information.	Refresh guidance for mentors supporting remediation to include similar details to the CPD/DWD documents around PII.

Optometry			
Presentations in CPD Events/Design of CPD Events	As per dental a significant number of CPD speakers/creators are not NES employers and may include slides with clinical conditions. Dependent on images/cases used there is the potential to contain patient identifiable information.	The majority of presenters are health care professionals and registered with a professional body and aware of their responsibilities in terms of patient information. However, errors can arise. Those working with externals are expected to communicate the necessary requirements in material creation.	Published material will be checked by the lead involved. Lead to ensure responsibilities are understood in advance. Handouts verified by lead.
Postgraduate trainees in teach and treat clinics	Optometrists in teach and treat clinics for CPD/Independent Prescribing placement or NESGAT placement manage and treat patients. For additional qualifications (NESGAT and IP) these cases are required to be logged in the appropriate log book to ensure enough patient episodes or that learning outcomes have been achieved.	Log books are checked by the appropriate educational supervisor and any identifiable supervisor and any identifiable information can be highlighted and removed. Optometrists are registered with GOC and have professional responsibilities regarding patient information.	Educational supervisors and leads check log books for PII.
Pharmacy			
Trainees in Clinical Environments	Trainees in clinical environments are not employed by NES.	Pharmacy Foundation Training Year (previously PRPS) trainees, as part of core training approaches, are continually reminded that any case study material brought from practice and discussed at tutorials must have all PII removed. Tutorial Facilitators undertake proactive screening for any PII.	

		<p>Trainee pharmacists are reminded that collated patient feedback must be anonymous, destroyed correctly and not be uploaded to ePortfolio.</p> <p>Trainees and supervisors are reminded that assessment tools including Supervised Learning events must not include PII.</p> <p>The employers agreement with NES confirms that clinical governance responsibility lies with the employer for the trainee pharmacist.</p>	
Psychology:			
Psychology of Parenting Project (PoPP)	<p>PII held on the PoPP database includes data on the children and families enrolled in the national programme. The data is required to assess impact and reach.</p> <p>Arrangements are in place between the NHS National Services Scotland (NSS), Public Health Scotland (PHS) and NES regarding storage and use of PoPP data held in the PoPP Database. The data is owned by NES, and the database has been built and maintained by NSS/PHS and is in the process of being moved from PHS to NES.</p>	<p>PII can only be accessed via a password protected role-based user account.</p> <p>Relevant staff are aware of their responsibilities to maintain confidentiality and have completed all necessary IG/Security training.</p>	There are no changes in relation to PoPP.

<p>Physical Health</p>	<p>Videos of staff interviewing patients are embedded within a suite of PATH and BASU e-learning modules.</p> <p>We also have videos on Vimeo of a patient volunteer who plays an actor in our suite of AsSET Videos.</p> <p>A patient focus group holds recordings of patient discussing ideas for a new learning resource (PIPER project).</p> <p>A single patient engaged in a focus group for a new learning resource in Chronic Pain (FAWT resource).</p>	<p>Filming and consent procedures for both projects were fully approved by Business staff and Information Governance staff. The consent forms and audio recordings are stored in the Restricted drive on the Physical Health Workstream SharePoint site, as per protocol, and these files are only accessible by a small cohort of staff in Psychology Directorate.</p>	<p>There are no planned actions for any patient data to be stored in the financial year 23-24.</p>
<p>Multisystemic Therapy (MST)</p>	<p>A single member of staff employed by NES but works in partnership with MST UK & Ireland to provide consultation and quality assurance to MST teams. The staff member has access to PII via internet-based sharing systems administered and upheld by MST UK & Ireland, MST services or Local Authorities in which teams are imbedded. Has access to and stores limited PII on NES systems in the following ways:</p> <ul style="list-style-type: none"> • The staff member has been using MS Teams and Skype for Business to undertake 	<p>NES and MST UK&I have Information Sharing Protocols in place with Local Authorities implementing MST. MST data reports and clinical documents are accessed through a secure web portal administered and upheld by MST UK and MST Services. Consultation recordings are uploaded to a secure web portal and then immediately deleted from the device and NES laptop; files remain available in the recycle bin for 90 days then become unrecoverable. The use of MS Teams and Skype for business to</p>	

	<p>weekly consultations with MST teams, there are recorded on a digital recorder and uploaded using NES laptop to an MST UK administered website then deletes recording from device and laptop.</p> <ul style="list-style-type: none"> • Accesses clinical paperwork (limited PII) via internet-based system administered and upheld by MST UK&I and then produces handwritten clinical notes - <i>During COVID-19 restrictions these have been held in a locked filing cabinet, in a locked home office</i> – these will be digitised and uploaded to NES OneDrive for archiving and paper notes will be disposed of when access to the office is permitted via confidential waste. • Develops and stores supervision development plans with staff identifiable information on OneDrive. <p>During Covid-19 restrictions, the staff member has been using MS Teams and Skype for Business to undertake weekly consultations with MST teams. These calls are recorded and then uploaded to the internet-based system administered and upheld by MST</p>	<p>support home working during Covid-19 restrictions has been agreed by all parties involved and is compliant with current local and National guidance. PII is shared only with the minimum required information. Staff member completes the mandatory ‘Safe Information Handling’ course annually. Regular contact with the NES Information Governance Manager takes place where any guidance is required in the processing of information requests.</p>	
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	<p>UK&I and immediately deleted from NES laptop.</p>		
<p>EPP Consultations with patients</p>	<p>Patient consultations are video recorded for review by EPP Trainees during and following training in their workplace. This is an important part of learning for EPP who are training to be or are qualified practitioners with educational emphasis on patient centred consulting.</p> <p>Peer reviews of consultations and recording of consultations of patients is carried out in line with Once of NES Standard Operating Procedures compiled with NES Digital and Information Governance approval of technology, processes and documentation.</p> <p>Caldicott requirements and Code of Conduct on Confidentiality are elements of the EPP education programme (Module 1 Engagement & Assessment of Common Mental Health Problems). EPP trainees and tutors are advised that any submissions, paper or electronic, do not include PII. Caldicott requirements and Code of Conduct on Confidentiality will be</p>	<p>Patients sign a consent form (based on GMC guidance) pre and post consultation and are free to ask the EPP Trainee to delete their consultation at any time thereafter.</p> <p>A new process has been agreed with NES Technology and Information Governance.</p> <p>EPP trainees are continually reminded that any case study material brought from the practice and discussed at tutorials must have all PII removed. Tutorial facilitators undertake proactive screening for any PII.</p>	<p>All learners will be:</p> <ul style="list-style-type: none"> • Provided with guidance on Information Governance and Caldicott requirements as part of clinical governance within their roles, and the submission on their assessments within the programme. • Taught skills in obtaining informed consent and are clear on the procedures for developing, sharing and storing consultation recordings as academic submissions. • Admin staff and Educators will regularly check compliance with governance arrangements and ensure no PII is included in academic submissions.

	formally covered in trainee and tutor training.		
CYP-EPP Course	<p>Patient consultations are video/audio recorded for review by EPP Learners during their training in the workplace. This is an important way in which clinical competencies are developed and evaluated.</p> <p>Assessed academic components of the course include 2 x case studies and 2 x recorded patient consultations.</p>	<p>EPP Learners are instructed to follow local health board policies in relation to obtaining informed consent as well as in relation to the correct procedures when making, storing, and submitting recordings for review. Children, young people, and their families will be made aware they have a right to refuse or withdraw consent at any time. Their consent will be formally documented in writing in accordance with health board policy.</p> <p>It is made clear to EPP Learners through verbal instruction and the Course Handbook that any case study material and video recordings must have all PII removed. The course team will undertake proactive screening for any PII during review of submitted coursework.</p> <p>Caldicott requirements and Code of Conduct on Confidentiality and Consent are formally covered elements of the EPP course (Module 1) and are also outlined in the Course Handbook.</p>	<p>There are no changes in relation to the PI process in EPP-CYP and the description from last year's report is current.</p>

		<p>A new process has been agreed with NES Technology and Information Governance in relation to standardised procedures for review of patient consultations, including approval of technology, processes and documentation.</p> <p>All course staff are aware of their responsibilities and follow NES procedures in relation to data protection, confidentiality and privacy.</p>	
Trainees in Clinical Environments	None	<p>Management and use of patient data are governed by the Caldicott and Information Governance controls of the relevant Health Board or Practice. Trainees in all disciplines are required to complete appropriate IG training by employing/hosting Board.</p> <p>(Psychology) Trainees are given guidance centrally by the Programme before moving to the clinical environment including confidentiality, data protection, record keeping etc. Further guidance given within Board mandatory induction training. Governance is delivered through Board IG systems, further enhanced through regular checks by the Programme with clinical supervisors on trainee adherence</p>	Continue current controls.

		(recording of notes etc). Trainees engaging in evaluation/research will seek advice directly from Board Caldicott for advice/direction on use of information.	
Portfolio	Risks of inadvertent inclusion of PII within ePortfolio content, placement logs, case studies or similar.	<p>Trainees and practitioners made aware of the requirement to exclude PII in TURAS Portfolio content, placement logs, case studies or similar products for reflective practice.</p> <p>Trainers/mentors raise incidents of inappropriate PII use with trainee.</p>	Continuation of current practices to manage risk of inadvertent inclusion of PII in TURAS Portfolio.

NHS Education for Scotland

NES/24/67

Agenda Item: 10a

Date of meeting: 26 September 2024

NHS Public Board

1. Title of Paper

1.1. NES Committee Governance Changes

2. Author(s) of Paper

2.1. Della Thomas, Board Secretary and Corporate Governance Lead

3. Lead Director(s)

3.1. Christina Bichan, Director Planning and Performance

4. Situation/Purpose of paper

4.1. This paper invites the Board to approve the dissolving of the Technology and Information Committee at the end of the 2024-25 business year and approval for the formation of a new Committee, the Planning and Performance Committee, to be formally constituted 1 April 2025.

4.2. The paper also invites the Board to approve the revised generic Committee ToRs, so that these might be used as the basis for the next annual round of Committee ToRs review.

5. Background and Governance Route to Meeting

5.1. The background work and proposals have been discussed at an informal meeting of non-executive directors on 4 September 2024 and at the Executive Team 10 September 2024 meeting.

5.2. Two pieces of desk-based work have been progressed as part of due diligence from December 2023 - July 2024. This has provided assurance

that the Board and the Committees are scrutinising reports as per the NHS Corporate Governance Blueprint requirements and as per legislative duties and Scottish Government reporting requirements.

- 5.3. The Internal Audit into the NES Complaints Handling Process (2024) has recommended that complaints are scrutinised by the Board and at a delegated Committee more frequently than annually. Quarterly reporting through the Board and a Committee is being now being progressed, but we are reflecting on the current delegation of complaints reporting through the Education and Quality Committee (EQC), as this Committee is not remitted to scrutinise complaints that sit outwith their remit for example any technology or digital related complaints.
- 5.4. The Internal Audit into NES Performance Management (2024) has identified that as we have now delegated Strategic Key Performance Indicators (SKPIs) to Committees for scrutiny and active governance, it is not appropriate to bring the quarterly reports through Board before each of the Committees has had the opportunity to scrutinise them. This has implications for the scheduling of the Committees for 2025-26.
- 5.5. The Technology and Information Committee (TIC) (originally formed as the Digital Committee) was established as a “short life” Committee at a time when NES had two quite disparate areas of digital work to govern. This included the digital work delivered by NES staff and also the delivery work of a Scottish Government Team devolved to NES. Both entities were managed and staffed separately. Over time this service has now become an integrated whole and greater clarity exists on its activities, budget and performance and the NES Technology Directorate is functioning well.
- 5.6. As per the NES NHS Corporate Governance Blueprint Improvement Action Plan, there is a requirement to mitigate any risks associated with clinical and care assurance. A proposal to create a Clinical and Care Assurance Sub-Group of the EQC was considered at the 12 September EQC Meeting.

6. Assessment/Key Issues

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

- 6.1. In line with rationale detailed in paragraph 5.5 of this paper, it is proposed that the TIC should be dissolved, and a new “Planning and Performance Committee” created. This Committee would be scheduled prior to the Board and receive the quarterly SKPI report to scrutinise in advance of the Board.
- 6.2. The other standing Committees would still receive their more detailed delegated SKPI reports for active governance.

- 6.3. The new Planning and Performance Committee would also take the Quarterly Complaints reports and Annual Feedback Comments Concerns and Complaints Report prior to the Board, instead of EQC.
- 6.4. The Planning and Performance Committee **proposed** role is summarised as follows:
- Strategic review of SKPIs prior to the Board
 - Quarterly review of SKPI reports prior to the Board
 - Review of draft Annual Delivery Plan in advance of the Board and the scrutiny of the impact of the associated outcomes
 - Scrutiny of quarterly complaints reports and Annual Feedback Comments Concerns and Complaints Report prior to the Board
 - Strategic overview of innovation (with delegation to the EQC as appropriate)
 - Horizon scanning
 - Information governance and business continuity
 - Assurance on the NES Scottish Government commissions and transformation work.
- 6.5. The Board is invited to note that Planning and Performance Committee Terms of Reference (ToRs) are currently being drafted and a shadow meeting of the Planning and Performance Committee will be convened in Quarter 4 of this financial year to review the ToRs and also the Schedule of Business, so that the Committee can begin its work as of 1 April 2025.
- 6.6. The Planning and Performance Committee membership will be the existing Committee Chairs and the current TIC Co-opted member (until the period of Co-option ends). The Chair of the Committee will be Ally Boyle, non-executive director.
- 6.7. As the NES approach to Remuneration Committee membership is for all Committee Chairs to be members, Ally Boyle will also become a member of the Remuneration Committee as of 1 April 2025.
- 6.8. Executive Leads for the Committee are proposed as Karen Reid, CEO and Accountable Officer and Christina Bichan, Director of Planning and Performance; with input from Christopher Wroath, Director of NES Technology.
- 6.9. Unlike some of the other Committees, the EQC ToRs do not allow for the EQC to form Sub-Groups or Sub-Committees.
- 6.10. Currently the Committee generic section of the ToRs (applicable to all Committees), does not include a paragraph on the formation of Sub-Groups or Sub-Committees. It is proposed that this is added. It is also proposed that a paragraph is added to allow the Audit and Risk Committee (ARC) and

the Planning and Performance Committee (PPC) to delegate to other Committees. For ARC, this would be in relation to Internal Audit Actions follow up and for PPC this could be in relation to complaints or SKPI reporting.

- 6.11. These revisions have been tracked into the generic ToRs as per Appendix 1 of this paper.

7. Recommendations

7.1. The Board is asked to:

- Approve that the TIC is dissolved as of 31 March 2025
- Approve the formation of the new Planning and Performance Committee as of 1 April 2025
- Approve the non-executive director membership and Chair of the Planning and Performance Committee
- Note Ally Boyle's membership on the Remuneration Committee from 1 April 2025
- Approve the amendments to the generic Committee ToRs, so that these might be used as the basis for the review of all Committee ToRs, which is about to begin at the Autumn 2025 Committee meetings.

Author to complete **checklist**.

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

a) Have Educational implications been considered?

- Yes
 No

b) Is there a budget allocated for this work?

- Yes
 No

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

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

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

- Yes
- No

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

- Yes
- No

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

- Yes
- No

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

- Yes
- No

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

- Yes
- No

Author name: Della Thomas
Date: September 2024
NES

Terms of Reference: Standard headings for all Committees

1. Constitution/context
2. Role
3. Membership
4. Quorum
5. Attendees
6. Private Member Meetings
7. Frequency of Meetings
8. Authority
9. Responsibilities and Duties
10. Reporting arrangements
11. Review
12. Conduct of Business

Generic Terms of Reference: applicable to all NES Committees

4. Quorum

- 4.1 Three Non-Executive members will constitute a quorum.
- 4.2 All Committees will have a membership of a minimum of four non-executives.
- 4.3 In determining whether a quorum is present the Committee Chair must consider the effect of any declared interests. This consideration shall be minuted.
- 4.4 If a member, or an associate of the member (i.e. family, friend or business associates), has any pecuniary or other interest, direct or indirect, in any contract, proposed contract or any other matter under consideration by the Committee, the member should declare that interest at the start of the meeting or at any other part of the meeting.
- 4.5 A 'conflict of interest' is considered to be any connection or association with a third party that is (or appears to be) against the best interests of NES, or which could enable the member reasonably to be suspected of using their position within NES to gain an unfair advantage for or from a third party.
- 4.6 This applies whether that interest is already recorded in the Board Members' Register of Interests. Following such a declaration, the member shall be excluded from the Committee meeting when the item is under consideration and will leave the meeting for that item. The member will not be counted as participating in that part of the meeting for quorum or voting purposes.
- 4.7 When a quorum is not present, the only actions that can be taken are to either adjourn to another time or abandon the meeting altogether and call another one. The quorum should be monitored throughout the conduct of the meeting in

the event that a member leaves during a meeting, with no intention of returning.

5. Attendees

- 5.1 Board members (non-executive or executive members) who are not members of the Committee may attend a Committee meeting and have access to the meeting papers. However, if the Committee elects to consider certain items as restricted business, then the meeting papers for those items will normally only be provided to members of that Committee. The person presiding at the Committee meeting may agree to share the meeting papers for restricted business papers with other Board members.
- 5.2 The Committee Secretary will attend meetings. The Board Secretary may attend, in agreement with the Committee Chair.

6. Private Member Meetings

- 6.1 The Chair has the right to call a private meeting of Committee members to deal with matters that may arise from their Terms of Reference.

8. Authority

- 8.1 The Committee is authorised to:
- Ensure compliance with due process relating to any investigation of activities which are within the terms of its responsibility and duties. In doing so, is authorised to seek information it requires from any Board member or employee, paying due regard to professional responsibilities and personal data rights. All members and employees are expected to co-operate with reasonable requests made by the Committee;
 - Approve matters as described within its responsibility and duties;
 - Request the attendance of any employee or contractor of NES (as/if agreed on their engagement), as may be required;
 - Establish such Sub-Committees or Sub-Groups it considers appropriate to ensure its work is suitably informed and supported;
 - The Audit and Risk Committee and the Planning and Performance Committee may delegate certain aspects of work to other Committees for more in-depth scrutiny and active governance as / if appropriate.

10. Reporting Arrangements

- 10.1 The names of members present at a meeting of the Board Committee, shall be recorded in the minute of the meeting. The names of other persons in attendance shall also be recorded.

- 10.2 The Board Secretary (or his/her authorised nominee) shall prepare the minutes of meetings of the Committee. The Committee shall review the draft minutes at the following meeting. Any amendments, as agreed by the Committee will be made and the person presiding at that meeting shall sign the final version of the approved minute.
- 10.3 The approved minute will be brought to the next public Board meeting for noting and be published on the Board's external website. The Remuneration Sub Committee will be the exception to this.
- 10.4 In the interim, a verbal report on relevant matters can be given by the Chair to the Board. Additional reports, as appropriate, will be provided to the Board as required to ensure it is informed of current issues.
- 10.5 The Standing Committee Chair will report to the Board, and will submit an Annual Report on its activities, outcomes and effectiveness to the Audit and Risk Committee. The Remuneration Sub Committee will submit their annual report through the Staff Governance Committee. It is then the responsibility of the Audit and Risk Committee to review and recommend approval to the Board. This will also give relevant assurance to the Board and Accountable Officer relating to the Governance Statement.

11. Review

- 11.1 The Committee will review its Terms of Reference annually and these will be submitted as part of the corporate governance package to the Board for approval on an annual basis.

12. Conduct of Business

As per the [Board Standing Orders](#)

- Etiquette and Standards;
- Conduct at meetings;
- Appointment and Review

Della Thomas, Board Secretary
NES, [September 2024](#) ~~[February 2022](#)~~

Approved Minute

NHS Education for Scotland

NES/SGC/24/32

Minutes of the Eighty Fourth Meeting of the Staff Governance Committee held on Monday 29 April 2024, 10:15 - 12:28pm

***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
David Garbutt (DG), Board Chair and acting as Committee member for this meeting
Gillian Mawdsley (GM), Non-Executive Director, Whistleblowing Champion
James McCann (JMcC), Ex-Officio member, Staff Side (Unison)

In attendance: Tracey Ashworth-Davies (TAD), Deputy Chief Executive (Corporate)/ Workforce Director
Ameet Bellad (AB), Senior Specialist Lead, Workforce (For item 09)
Christina Bichan (CB), Director of Performance and Planning (For items 11 and 12)
Nancy El-Faragy (NEF), Manager, Planning and Corporate Resources (For item 11 and 12)
Ann Gallacher (AG), Senior Admin Officer / Committee Secretary (Minute-Taker)
Katy Hetherington (KH) Principal Lead, Equality, Diversity and Human Rights (For item 08)
CarolAnne Keogh (CK), Head of Service, Human Resources (HR) (For item 07)
Thomas Lamont, Associate Postgraduate Dental Dean (Observer)
Debbie Lewsley (DL) Planning & Corporate Governance Manager (For item 10)
Liz Mallinson, Non-Executive Director, NHS 24 (Observer as part of the Aspiring Chair Programme)

1.	Chair's welcome and introductions	
1.1	The Chair welcomed everyone to the 84 th Staff Governance Committee (SGC) meeting and highlighted that this was his first meeting as Chair of SGC since Anne Currie retired in February 2024.	
1.2	The Chair noted that as Lynnette Grieve was unwell and there is a vacancy for another Non-Executive member to be appointed to SGC, the	

1.3	<p>meeting was not quorate. The Chair, therefore, proposed that in order to remain quorate the meeting would utilise section 9.4 of the Board Standing Orders, allowing a temporary member to be nominated to enable the meeting to go ahead as quorate. David Garbutt, agreed to take on a membership role to allow the meeting to go ahead as quorate.</p> <p>The Chair welcomed Thomas Lamont, Associate Postgraduate Dental Dean who attended the meeting as part of his induction and Liz Mallinson, Non-Executive Director, NHS 24 who was Shadowing the Board Chair as part of the Aspiring Chair Programme.</p>
2.	Apologies for absence
2.1	Apologies for absence were received from the following Committee member: Lynnette Grieve, Non-Executive Director / Employee Director.
2.2	Apologies for absence were received from the following regular Committee meeting attendees: Karen Reid, Chief Executive, Della Thomas, Board Secretary & Corporate Governance Principal Lead (Corporate Governance), Janice Gibson, Associate Director, Organisational Development, Leadership and Learning (ODLL) and Rob Coward (RC), Principal Educator.
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 new Model Code of Conduct, the Chair asked Committee members if there were any declarations of interest in relation to the business of today's meeting and if so, to clarify to which item this related.
4.2	There were no declarations of interest.
5.	Draft Minutes of Staff Governance Committee meeting held on 22 February 2024
5.1	<p>The Committee highlighted minor typographical errors on the minutes and the paragraph points to be emailed to Ann Gallacher for correction.</p> <p style="text-align: right;">Action: AG</p>
5.2	<p>The Committee noted that at section 7.12 of the minute, it states that the Employee Director will provide her view on themes and actions. However, an analysis of employee cases, numbers, themes, and associated learning will be provided by Human Resources.</p> <p style="text-align: right;">Action: CK</p>

5.3	The Committee confirmed the minutes were an accurate record of the meeting and were happy to approve the minutes with the typographical errors amended.	
6.	Action Status Report and other matters arising	NES/SGC/24/16
6.1	The Committee noted that five actions were marked as complete on the action list and one action was in progress.	
6.2	The Committee noted that Action 9.5 in relation to the SGC Ex-Officio member had been closed off on the action list. Human Resources are progressing this action with the BMA.	
6.3	In relation to Action 7.12 the Committee noted that the Employee Director will feedback on any themes from the Employee Relation cases as actioned, however Human Resources (HR) will provide an analysis of employee cases, numbers, themes, and associated learning to the next SGC meeting. Action: CK	
6.4	The Committee approved the completed actions and confirmed that the progress made with open actions provided satisfactory assurance.	
	<u>Lead Executive Report</u>	
7.	Director of Workforce Report	NES/SGC/24/17
7.1	The Chair invited Tracey Ashworth-Davies to introduce the Director of Workforce Report.	
7.2	Tracey Ashworth-Davies introduced the report and highlighted the following key topics to the Committee: Line Managers development and support work, Succession Planning, the reduced working week and the Lead Employer work.	
7.3	The Committee welcomed the work that has been done on the Line Managers Handbook and asked how knowledge and skills related to whistleblowing, sustainability and climate change, and trauma informed practice were being dealt with. Tracey Ashworth-Davies will discuss this with Janice Gibson to ensure this is addressed in relation to Line Managers, whether in the Handbook or via alternative mechanisms. Action: JG	
7.4	The Committee asked that the link in section 1.4 Learning at Work Week 2024 in the report is updated. Action: Pamela Renwick (PR)/Stuart Caulfield (SC)	

7.5	<p>Tracey Ashworth-Davies highlighted that the Workforce Service Desk (WSD) has been a priority area of work and reported on the work taking place to reduce risk and stabilise the service. She also explained issues arising from the Lead Employer (LE) Model for Doctors and Dentists in Training. The Committee noted the complexities of the issues and asked if the Board and Audit and Risk Committee (ARC) were sighted. Tracey Ashworth-Davies responded that related risks have been logged on the Workforce Directorate Risk Register. A short life Lead Employer Working Group will be set up comprising workforce, finance and medical colleagues and Tracey Ashworth-Davies will confirm the timescale for this.</p> <p style="text-align: right;">Action: TAD</p>
7.6	<p>The Committee suggested that those aspiring to Cohort 1 (Executive roles) have the opportunity to meet with the Board Chair as part of their Development Plan. Tracey Ashworth-Davies welcomed this suggestion and will ask Janice Gibson to execute this action.</p> <p style="text-align: right;">Action: TAD/JG</p>
7.7	<p>The Committee suggested a minor wording change at Section 10 - External Commissions. Tracey Ashworth-Davies agreed to change the wording in the report.</p> <p style="text-align: right;">Action: TAD/PR</p>
7.8	<p>The Committee asked if the reports on the Leading for the Future are sequenced through the Education and Quality Committee. Tracey Ashworth-Davies will confirm the governance route for the reports with Janice Gibson.</p> <p style="text-align: right;">Action: TAD/JG</p>
7.9	<p>The Committee asked if the Wellbeing Resource Hub will be evaluated. CarolAnne Keogh responded that work is taking place with Ameet Bellad to measure the level of traffic, types of resources that have been requested and the number of requests that have gone through the Hub.</p>
7.10	<p>In relation to the number of participants that accessed the Leadership in Practice Scotland programme, the Committee asked if time constraints were an issue for other Boards. Tracey Ashworth-Davies will confirm the outlook forecast for participant numbers and routes and report back to the Committee.</p> <p style="text-align: right;">Action: TAD/SC</p>
7.11	<p>The Committee noted that the Hybrid Working Update is going to the May Joint Consultative Forum (JCF) meeting and will not be sequenced through the NES Board. The Turas Refresh Progress report is going to the next Technology and Information Committee (TIC) meeting.</p>
7.12	<p>The Chair thanked Tracey Ashworth-Davies and the team involved for the detailed report.</p>

7.13	The Committee approved the Director of Workforce report and confirmed that it provided the Committee with satisfactory assurance.	
	<u>Performance Items</u>	
8.	Equality & Diversity End of Year Report	NES/SGC/24/18
8.1	The Chair welcomed Katy Hetherington to the meeting and asked her to introduce the Equality and Diversity Report.	
8.2	Katy Hetherington introduced the report which provides an end-year progress report on NES's equality, diversity and inclusion work. It also outlined the planned activities for 2024-2025 and an update on the recent policy and legislative developments, including meeting statutory requirements by April 2025.	
8.3	The Committee asked if the anti-racism work had a Once for Scotland approach and if it linked with the Anchors work and NES's strategic priorities. Tracey Ashworth-Davies responded that Anti-Racism Plans were not being developed on a Once for Scotland basis, but that NES intended to work with other national boards in gaining synergy. The Plan will consider other work such as the Anchors Plan so that activity is well integrated.	
8.4	The Committee noted the typographical error in relation to Outcome 5 on page 6. The new essential learning module was launched at the end of December 2023 and not at the end of December 2024.	
8.5	The Committee asked if anti-racism is included in the 2024-2025 equality and diversity objective. Katy Hetherington responded that the same wording has been used as last year and there is an objective for all-staff to include anti-racism, equality, diversity and inclusion within their personal review and planning for 2024-2025.	
8.6	The Committee queried the short 'pulse' survey wording in the report and noted this means a quick survey based on collecting views at a moment in time.	
8.7	The Committee asked if Doctors in Training attend the staff network sessions and if the sessions are hitting the target audience. Katy Hetherington responded that there is a separate network for this group and that whilst numbers attending are currently low, there is work ongoing to promote it. She added that the Under-represented Minority Ethnic Staff Network and the LGBTQ+ Networks are looking for new Chairs.	
8.8	The Committee asked for more information on the new Equal Pay Statement. Katy Hetherington responded that the statement is renewed every 4 years in line with legislation.	

8.9	The Chair thanked Katy Hetherington for the detailed report. The Staff Governance Committee noted the key activities progressed over 2023-2024, the progress made on NES's Equality Outcomes and the 2024-2025 priorities.	
8.10	The Staff Governance Committee approved the report for sequencing to the 23 May 2024 Board meeting.	
8.11	Katy Hetherington thanked the Committee and left the meeting.	
8.12	Ameet Bellad joined the meeting.	
9.	Delegated SGC Strategic Key Performance Indicator (SKPIs) Report	NES/SGC/24/19
9.1	The Chair welcomed Ameet Bellad to the meeting and asked him to introduce the Delegated SGC Strategic Key Performance Indicator (SKPIs) report.	
9.2	Ameet Bellad introduced the Quarter 4 performance report (January to March 2024) on organisational performance in relation to Strategic KPIs intended to provide assurance to the SGC that the Staff Governance Standard is being applied in NES.	
9.3	The Non-Executive Director, Whistleblowing Champion noted the essential learning compliance figure and the work that has taken place to increase compliance.	
9.4	The Committee queried the Amber SKPI04 vacancy rate and asked how this measures staff wellbeing as a lower number of vacancies could be due to recruitment freezes and conversely a higher number of vacancies could be due to new work and increased activity. Ameet Bellad responded that the RAG status was based on a presumption that lower vacancy rate is a proxy for staff wellbeing given that unfilled roles risk other staff being impacted. Tracey Ashworth-Davies agreed that it was intended to be primarily a measure of wellbeing but that needed to be taken alongside other data e.g. sickness absence given that the Committee was right in its observations.	
9.5	The Committee asked if the target figure for staff acting up/seconded on Appendix 3, was a Scottish Government (SG) target or a NES target. Ameet Bellad responded that the figure was not set by SG and was historically set by NES to provide opportunities for staff development.	
9.6	The Committee noted that the word "target" indicated an acceptable range for this measure.	
9.7	The Chair thanked Ameet Bellad for the clear and easy to read report and the Staff Governance Committee noted the performance data in Appendices 2 and 3 of the report.	

9.8	Ameet Bellad left the meeting and Debbie Lewsley joined the meeting.	
10.	Delegated SGC Strategic Risk Report	NES/SGC/24/20
10.1	The Chair welcomed Debbie Lewsley to the meeting and asked her to introduce the Delegated SGC Strategic Risk Report.	
10.2	Debbie Lewsley introduced the report and asked the Committee to comment on the individual risks that were set out in the summary at Appendix 1 and 2 of the report and confirm it provided the necessary assurance.	
10.3	The Committee noted that the risk explanation appendices would be uploaded to Admin Control post meeting.	
10.4	There were no further questions on the report.	
10.5	The Chair thanked Debbie Lewsley for the report. The Staff Governance Committee confirmed the report provided assurance and approved the report.	
10.6	Debbie Lewsley left the meeting.	
11.	Quarter 4 Whistleblowing Report	NES/SGC/24/21
11.1	The Chair invited Christina Bichan and Nancy El-Farargy to introduce the Quarter 4 Whistleblowing Report. In line with the requirements of the National Whistleblowing Standards, this paper provided an update on the whistleblowing activities for the quarter four period from 01 January 2024 to 31 March 2024.	
11.2	Christina Bichan reported that there were no whistleblowing concerns received during the 01 January 2024 to 31 March 2024 period and highlighted the increased compliance figure for Line Manager whistleblowing training to the Committee.	
11.3	There were no further questions raised by the Committee.	
11.4	The Chair thanked Christina Bichan and Nancy El-Farargy for the report and the Committee confirmed the report provided assurance.	
12.	Whistleblowing Annual Report 2023-2024	NES/SGC/24/22
12.1	The Chair invited Christina Bichan and Nancy El-Farargy to introduce the Annual Whistleblowing Report from 01 April 2023 to 31 March 2024.	
12.2	Christina Bichan introduced the third annual report in line with the National Whistleblowing Standards, which requires all NHS Scotland Boards to	

	publish an Annual Whistleblowing Report setting out their performance in handling any whistleblowing concerns.	
12.3	The Committee welcomed the report and noted all the good work that has taken place over the year, including the increased number of confidential contacts.	
12.4	The Non-Executive Director Whistleblowing Champion will update the Committee at agenda item 13.	
12.5	The Chair thanked Christina Bichan and Nancy El-Faragy for the report and the Staff Governance Committee approved the Annual Whistleblowing Report 2023-2024 for onward sequencing to the 23 May Board meeting for final approval.	
13.	Non-Executive Whistleblowing Champion Remarks	(Verbal Item)
13.1	The Non-Executive Director Whistleblowing Champion reported that the Cabinet Secretary asked for direct assurance from Whistleblowing Champions this year instead of a letter of assurance. This was due to Scottish Government pressures and the 'Letby' case.	
13.2	The Non-Executive Director Whistleblowing Champion thanked Christina Bichan and the team for the work they have done since the standards came into place three years ago.	
13.3	The Non-Executive Director Whistleblowing Champion endorsed the progress work the team had done during 2023-2024 that ensure effective systems are in place and work effectively and efficiently whenever a concern is received.	
13.4	The Non-Executive Director Whistleblowing Champion commended the work that has taken place on whistleblowing compliance figures, training and the 'Speak Up Week' work and the increased number of confidential contacts.	
13.5	The Non-Executive Director Whistleblowing Champion acknowledged the pressures on the team due to the Covid enquiry and the scope of the work.	
13.6	The Non-Executive Director Whistleblowing Champion confirmed the report provided assurance to the Staff Governance Committee.	
13.7	The Chair thanked the Non-Executive Director Whistleblowing Champion for the update and the Staff Governance Committee confirmed it provided the necessary assurance.	
	<u>Governance Items</u>	

14.	2023-2024 Annual SGC Report and 2023-2024 Annual Remuneration Committee Report	NES/SGC/24/23
14.1	The Chair invited Tracey Ashworth-Davies to introduce the 2023-2024 Annual SGC Report and 2023-2024 Annual Remuneration Committee Report.	
14.2	Tracey Ashworth-Davies introduced the report which invited the SGC to review the work of the Committee for 2023-2024 financial year, noting that the Audit and Risk Committee (ARC) changed the format of all Annual Reports this year making them more streamlined. As per the Staff Governance Standard and the delegated remit of the SGC by the Board, the SGC also review and approve the Remuneration Committee Annual Report which has received quorate approval from the Remuneration Committee by correspondence.	
14.3	<p>The Committee asked that a form of words is added to section 9.1 of the SGC Annual report to highlight that the Ex-Officio member action is being taken forward by Human Resources and the Employee Director.</p> <p>Section 9.1 should read: There is an outstanding matter relating to the second nomination of Ex-Officio member to the Staff Governance Committee from the Partnership Forum which is being taken forward by Human Resources and the Employee Director.</p> <p>This will be passed to the Board Secretary.</p> <p style="text-align: right;">Action: DT</p>	
14.4	<p>In relation to the Remuneration Committee Annual Report, the Committee asked if Nigel Henderson should be recorded as a member of the Remuneration Committee from 01 March 2024. Tracey Ashworth-Davies will confirm this with the Board Secretary.</p> <p style="text-align: right;">Action: DT</p>	
14.5	The Staff Governance Committee were content to approve the 2023-2024 Staff Governance Committee Annual Report with the minor amendment and confirmed it provided satisfactory assurance.	
14.6	The Staff Governance Committee were content to approve the 2023-2024 Remuneration Committee Annual Report with the minor amendment and confirmed it provided satisfactory assurance.	
14.7	The approved reports will be sequenced to the June ARC as part of the Board's Annual reporting process.	
15.	Partnership Agreement and Partnership Forum ToRs	NES/SGC/24/24
15.1	The Chair invited Tracey Ashworth-Davies to introduce the Partnership Agreement and Partnership Forum Terms of Reference (ToRs).	

15.2	Tracey Ashworth-Davies reported that the Partnership Agreement and Partnership Forum ToRs were approved by the Partnership Forum at the 04 March 2024 meeting and were presented to the Staff Governance Committee for noting and assurance purposes.	
15.3	In relation to the Partnership Forum ToRs, the Committee queried the wording at sections 3.8 Membership and 4.2 Quorum and asked if this was a duplication error or if the same wording is needed at both sections of the report. Tracey Ashworth-Davies will confirm with the Board Secretary if the same wording is required at both sections of the report. Action: DT	
15.4	The Committee discussed British Medical Association (BMA) and Royal College of Nurses (RCN) membership and attendance at PF meetings and noted the length of time the BMA deputy action has been outstanding. Tracey Ashworth-Davies will confirm the position of RCN attendance with the Board Secretary. Action: TAD/DT	
15.5	The Staff Governance Committee noted the Partnership Agreement and Partnership Forum Terms of Reference and confirmed they provided the necessary assurance.	
16.	Identification of any new risks raised at this meeting	(Verbal Item)
16.1	The Committee noted there were no additional risks identified at the meeting.	
	<u>Items for Noting</u>	
17.	Employment Tribunals	NES/SGC/24/25
17.1	The Non-Executive Director Whistleblowing Champion asked if any lessons could be learned from the issues raised. Tracey Ashworth-Davies responded that NES follows Central Legal Office (CLO) advice on tribunal cases and reported out of c. 450 Vocational Dental Trainer applications over the last 3 years, it was her understanding from the Postgraduate Dental Dean that only one appeal had been received in addition to the case at employment tribunal. Christina Bichan added that discussions with CLO included consideration of the appropriate route for handling and that there were no whistleblowing aspects identified in the complaint.	
17.2	The Chair assured the Staff Governance Committee that the H v NES case had been brought to his attention and that the Board Chair was also aware of the case.	

18.	Policy/Scottish Government Director Letters as appropriate to Staff Governance Committee	NES/SGC/24/26
18.1	The Committee noted the Director Letters update and that the Health and Care (Staffing) (Scotland) Act 2019 may impact on NES's workload as an Annual Report is now required.	
19.	Remuneration Committee items of business taken by correspondence	NES/SGC/24/27
19.1	The Committee noted the Remuneration Committee items of business taken by correspondence.	
20.	Change Management Programme Board, 18 March 2024 minutes	NES/SGC/24/28
20.1	The Committee noted the Change Management Programme Board minutes.	
21.	Health, Safety and Wellbeing Forum, 20 March 2024 minutes	NES/SGC/24/29
21.1	The Committee noted the Health, Safety and Wellbeing Forum minutes.	
22.	Partnership Forum, 31 August 2023 minutes	NES/SGC/24/30
22.1	The Committee noted the Partnership Forum minutes from the 31 August 2023 meeting.	
23.	Any other business	
23.1	There were no other items of business discussed at the meeting.	
24.	Review of Committee Effectiveness	
24.1	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?	
24.2	The Committee discussed the risks to being quorate at Committee meetings and questioned the need for a contingency plan. This will be passed to the Board Secretary. Action: DT	
24.3	The Chair thanked all for attending the meeting and closed the meeting at 12:28pm.	

25.	Date and time of next meeting
25.1	The next meeting of the Staff Governance Committee will be held on Monday 22 August 2024 at 10:15a.m.

AG/LS/NH/TAD
NES
May 2024

Approved at the SGC meeting on 22 August 2024 – Nigel Henderson, SGC Chair

Minutes of the Twelfth NES Technology and Information Committee held on Monday 13 May 2024 10:15 – 12:45 via Microsoft Teams.

Present: David Garbutt, Non-Executive Director and Chair of TIC
Ally Boyle, Non-Executive Director
Shona Cowan, Non-Executive Director
Jean Ford, Non-Executive Director
Angus McCann, Ex-Officio Member and Non-Executive Director, NHS Lothian

In attendance: Jenn Allison, Senior Officer, Board / CEO Office
Tracey Baxter, Associate Director, NTS
Tracey Ashworth-Davies, Director of Workforce
Ijeoma Azodo, Associate Director, NTS (item 13)
Colin Brown, Head of Strategic Development
Paula Baird, Principal Lead, Workforce (item 11)
Jim Boyle, Executive Director of Finance
David Felix, Postgraduate Dean, Dental (Caldicott Guardian)
Katy Hetherington, Principal Lead, Equality & Diversity (item 13)
Kevin Kelman, Director of NHS Scotland Academy, Learning and Innovation (item 12)
Debbie Lewsley, Risk Manager (item 14)
Liz Mallinson, Non-executive, NHS24 (Observer)
Jacqueline Melville, Head of Programme, NHS Scotland Academy, Learning and Innovation (item 12)
Jackie Sweeney, Finance Manager
Marisa Wedderspoon, Senior Specialist Lead, NTS
Christopher Wroath, Director of NTS

1. Welcome and introductions

1.1 The Chair welcomed everyone to the meeting, particularly Liz Mallinson, Non-executive, NHS24, who was observing the meeting as part of the aspiring Chairs programme.

2. Apologies for absence

2.1 Apologies were received from Karen Reid and Della Thomas.

2.2 Jean Ford apologised that she would need to leave the meeting at 11:30am for half an hour.

3. Declarations of interest

- 3.1 The Chair asked Committee members if there were any declarations of interest in relation to the business of the meeting and if so, to clarify which item this related to.
- 3.2 Angus McCann informed the Committee that he has been invited to join the Digital Health and Care Innovation Centre Board. David Garbutt noted that this will be added to the permanent declarations of interest record along with Angus McCann's attendance on the Turas Refresh Programme Board.
- 3.3 The Committee confirmed there were no other declarations of interest in relation to the business on the agenda of the meeting.

4. Notification of Any other Business

- 4.1 There was no other business raised for discussion.

5. Minutes of the meeting 13 February 2024 (NES/TI/24/11)

- 5.1 The minutes were approved as an accurate record.

6. Committee Rolling Action Log (NES/TI/24/12)

- 6.1 The Committee noted that 7 of the 9 actions have been marked as complete or closed. The Committee noted that the Directorate risk review is still in progress and that an update regarding the NTS delivery plan will be provided during the meeting, with plans to submit the full plan to the next meeting.

7. Executive Lead Officer's Report (NES/TI/24/13)

- 7.1 The Chair invited Christopher Wroath to make any introductory remarks in relation to the Executive Lead Officer's Report, and provide the Committee with an overview of progress on delivery since the last meeting in February 2024.
- 7.2 Christopher Wroath informed the Committee that no allocation letters for financial year 2023-24 have been received. The Committee noted that this is currently preventing work in relation to prescribing and dispensing from progressing at pace and there is a risk this could delay the due date of this work.
- 7.3 Christopher Wroath informed the Committee that work in relation to the Digital Front Door Programme has also stalled and that it is expected that the Digital Health and Care Directorate (DHAC) at SG will confirm further requirements for Digital Front Door in due course. The Committee also noted there is uncertainty regarding the requirements of the National Care aspects within the DHAC portfolio.

- 7.4 The Committee raised concerns that there continues to be uncertainty in relation to the scope of SG commission to NES as well as in relation to funding streams. Jim Boyle added that confirmation of funding is pending across the Organisation, however it is expected that allocation letters will start to come through in due course.
- 7.5 Jim Boyle informed the Committee the NES Executive Team recently took the decision to extend all short-term contracts to the requested extension period, despite funding not being confirmed for a number of areas. The Executive agreed it was important that strategic areas of work continue with the expertise required as well as being cognisant of the wellbeing of staff on fixed term contracts.
- 7.6 The Committee noted their support of fixed term contracts being extended. The Chair informed the Committee that he and the Chief Executive would be meeting with SG soon and that he intends to express his concerns regarding the lack of clarity in relation to commissions and budget.
- 7.7 The Committee asked if NTS colleagues are working on other programmes of work until further clarity regarding requirements for 2023-34 is confirmed. Christopher Wroath assured the Committee that NTS colleagues both continue to work on preparatory work for SG Strategic areas of work as well as on other programmes until confirmation is received from SG.
- 7.8 The Committee raised a query regarding the roll out of real time staffing tool. Christopher Wroath confirmed that this tool is available in all 1300 locations.
- 7.9 The Committee noted the progress of the NTS Internal Audit Actions and that actions are expected to be closed by the agreed delivery date.
- 7.10 The Committee noted that Tracey Gill, NTS Information Governance Officer has been appointed at the National Lead for the NHS Information Governance Agreement. The Committee were pleased that this would help to move this forward. The Committee asked what the expected trajectory was of this. Christopher Wroath informed the Committee that there is a clear statement of intent in relation to the National Information Governance Agreement and it is anticipated that this work will now be accelerated.
- 7.11 The Committee asked about progress of the National Digital Platform. Christopher Wroath informed the Committee that although it is not as far advanced as he would like it to be, he is satisfied with the services already on the platform. Christopher added that Greater Glasgow and Clyde have provided excellent support in implementing services.

7.12 Christopher Wroath informed the Committee that David McColl will begin to return to his substantive post in NES as Deputy Director of NTS in June 2024.

7.13 The Committee noted the information contained within the report and agreed it provided them with satisfactory assurance.

8. NTS Consolidated Delivery Plan Update 2024-25 (Private and Confidential) (NES/TI/24/14)

8.1 The Chair invited Christopher Wroath to update on the development of the NES Technology Service (NTS) consolidated delivery plan for 2024-25, noting that the paper had been marked as Private and Confidential.

8.2 Christopher Wrath informed the Committee that development of a NTS delivery plan is underway and there is ongoing engagement with DHaC to agree the priorities. Planning is focussed on defining work around three core programmes: National Digital Platform (NDP); Digital Prescribing and Dispensing Pathways Programme (DPDP); and Digital Front Door (DFD).

8.3 Christopher added that the NES Executive Team will review the proposed digital priorities as defined by NES Directorates at the 21 May 2024 meeting and noted that the full NTS Delivery Plan will be submitted to the 27 August 2024 TIC meeting.

8.4 The Committee asked if there were still aspects that can be delivered despite uncertainty to funding. Christopher Wroath advised the Committee that NES deliverables are continuing, as agreed with Directorates and preparatory work is also underway in relation to anticipated SG workstreams.

8.5 The Committee suggested it may be helpful to hold a Board Development session in relation to NTS delivery. **Action: CW**

8.6 The Committee noted the information contained within the report and agreed it provided them with satisfactory assurance.

9. Cyber Security (NES/TI/24/15)

9.1 The Chair invited Christopher Wroath to introduce the paper and highlight any key areas relating to Cyber Security in NES.

9.2 Christopher Wroath informed the Committee that NES continue to work closely with the NHS Scotland Cyber Security Centre of Excellence Group.

9.3 The Committee noted that DHaC issued an update to Boards in relation to the Dumfries and Galloway Cyber Attack. The Committee noted that NHS Scotland Cyber Security Centre of Excellence Group were able to prevent action, however information provided to Board has been limited as this is an ongoing Police investigation.

9.4 The Committee stressed the importance of user knowledge and understanding in relation to Cyber Security matters, particularly in relation to protecting passwords. Christopher Wroath reminded the Committee that Safe Information Handling is an essential learning for all NES staff and that regular communication campaigns go out to all NES staff. Christopher Wroath added that an additional communication campaign focussing on colleagues' individual responsibility in relation to Cyber Security will be taken forward in the summer. **Action: CW**

9.5 The Committee noted the information contained within the report and agreed it provided them with satisfactory assurance.

10. Accelerated National Innovation Adoption (ANIA) Programme (Private and Confidential) (NES/TI/24/16)

10.1 The Chair invited Christopher Wroath to update on the ANIA Programme (Digital Dermatology) and noted that the paper had been marked as Private and Confidential.

10.2 Christopher Wroath updated the Committee that Digital representation at Health Board engagement sessions is ongoing to ensure the project team understand processes within Territorial Boards to be ready for implementation. Health Board eHealth teams are being supported in preparation for testing the end-to-end solution and the discovery for implementation for go live in September 2024.

10.3 The Committee noted that NES are working in partnership with National Services Scotland (NSS) and the Centre for Sustainably Delivery. Christopher Wroath informed the Committee that a further update on progress will be submitted to the August TIC meeting. **Action: CW**

10.4 The Committee noted that a challenge in relation to this work may be Board readiness in terms of implementing this new technology.

10.5 The Committee noted the information contained within the report and agreed it provided them with satisfactory assurance.

11. Digital Skills and Leadership Programme

(NES/TI/24/17)

11.1 Jean Ford left the meeting.

11.2 The Chair welcomed Paula Baird to the meeting and invited her to provide an update on progress of the Digital Skills and Leadership Programme.

11.3 Paula Baird informed the Committee that the programme of work is on track and on budget with the exception of embedding Viva Engage into the M365 Skills Hub.

11.4 The Committee asked about the impact of the master's programme. Paula Baird updated the Committee that the impact can be difficult to measure, however that survey data is reporting that it is having a positive impact. Paula Baird explained that Executive Sponsors are responsible for creating opportunities and monitoring the progress of participants. She added that the University of Edinburgh will be producing an impact report.

11.5 The Committee noted that a full business case has been developed for SG, requesting approval to progress with a second cohort of the masters programme, starting in September 2024.

11.6 The Committee noted the information contained within the report and agreed it provided them with satisfactory assurance.

11.7 Paula Baird left the meeting.

12. Turas Refresh Programme Outline Business Case (Private and Confidential)

(NES/TI/24/18)

12.1 Jean Ford returned to the meeting.

12.2 The Chair welcomed Kevin Kelman and Jacqueline Melville to the meeting and invited them to present the Turas Refresh Programme outline business case. The Committee noted that the item had been marked as Private and Confidential.

12.3 Kevin Kelman informed the Committee that the outline business case will be submitted to the SG in mid-May. Following approval from SG a full business case will be developed which will include a detailed programme plan to be submitted to SG for approval in August-September 2024.

12.4 The Committee noted that the Phase 1 discovery Phase is complete and noted the recommendation to move into delivery for Phases 2 and 3, which include

working with specialist Health Economist resource and work up a more detailed delivery plan to include key milestones and deliverables.

12.5 The Committee asked that wording in relation to inequalities, the fairer Scotland duty and widening access is strengthened. **Action: KK**

12.6 The Committee approved the outline business case for submission to SG and supported the recommendations in the report.

13. 2023-24 Annual Equality and Diversity Outcomes Report (NES/TI/24/19)

13.1 The Chair welcomed Katy Hetherington and Ijeoma Azodo to the meeting and invited them to present the 2023-24 Annual quality and diversity Outcomes report.

13.2 Katy Hetherington informed the Committee that NES continue to meet requirement against equality outcome 6, which is relevant to the remit of the TIC.

13.3 The Committee noted the key activities progressed over 2023-24 and noted the priorities for 2024-25, including plans to meet statutory requirements by April 2025.

13.4 The Committee felt that our approach to conducting Equality Impact Assessments (EQIA) is exemplary and it was suggested that further improvements could be made to complete EQIAs at an earlier stage.

13.5 The Committee approved this report to inform the Board's end of year report due at its May 2024 meeting. Katy Hetherington and Ijeoma Azodo left the meeting.

14. TIC Delegated Strategic Risk Report (NES/TI/24/20)

14.1 The Chair welcomed Debbie Lewsley to the meeting and invited her to provide an update regarding the 5 strategic risks delegated by the Board to the TIC.

14.2 Debbie Lewsley informed the Committee that the Strategic Risks have been subject to a recent review by individual risk owners. She explained that since the February TIC, the net likelihood of Strategic Risk 8 (relating to NES failing to put sufficient employee training and other operational controls in place to minimise the risk of breaches of Information Governance) has been decreased due to the implementation of mandatory training.

14.3 The Committee noted that this assessment has resulted in the overall net risk rating being reduced from 12 to 8 and that the risk still sits out with the Boards appetite for risks in the "Governance" category.

14.4 There have been no changes to other risks aligned to TIC within this reporting period.

14.5 The Committee also noted an update in relation to Strategic Risk 13 (relating to NES's failure to recruit sufficient numbers of appropriately skilled and experience staff), which sits under the Staff Governance Committee's delegated risks. The net risk rating has been increased from 8 to 12, due to the increased likelihood of the risk materialising as a result of the uncertainty created by high proportions of non-recurrent funding. The risk continues to sit within the agreed Board appetite; however, an additional action has been identified on advising the Chief Executive on risk-based decisions regarding termination of temporary staff, this will help to further control the risk.

14.6 The Committee commented that the cover paper is an excellent example of what Committee and the Board expect in a cover paper, as it is concise and clearly explains Strategic alignments.

14.7 The Committee suggested that risks 6, 7 and 8 may be better aligned to Operational risk category, as apposed to the Governance category. Debbie Lewsley will review this with risk owners. **Action: DL**

14.8 In relation to Strategic Risk 6, the Committee asked about plans in place to progress an updated Business Continuity Plan. Christopher Wroath agreed to update the Committee at the next meeting on action plans in relation to producing an updated NES Business Continuity Plan, as part of the Cyber Security report.

14.9 The Committee noted the information contained within the report and agreed it provided them with satisfactory assurance.

15. TIC Delegated Strategic Key Performance Indicator (SKIPs) Report

(NES/TI/24/21)

15.1 The Chair invited Christopher Wroath to introduce the report, which shows progress against SKPIs delegated to this Committee as of Quarter 4 2023-24.

15.2 The Committee noted that four of the five SKPIs, delegated to this Committee, have a Green RAG status. Data for the fifth SKPI is scheduled to be presented for the first time at the end of 2024-25 Quarter 2.

15.3 The Committee noted the information contained within the report and agreed it provided them with satisfactory assurance.

16. Annual TIC Report to Audit & Risk Committee 2024-25 (NES/TI/24/22)

16.1 The Chair invited Christopher Wroath to present the 2024-25 TIC Annual Report, which has been streamlined into a new template format from last year.

16.2 The Committee noted that once approved by the TIC, the report will be submitted to the Audit and Risk Committee (ARC) on 13 June 2024 as part of the Annual Reporting sequencing of the Board.

16.3 The Committee noted that improvements to the format of the TIC attendance will be made in advance of Annual Committee reports being submitted to the June ARC meeting.

16.4 The Committee approved the TIC Annual Report.

17. Turas Refresh Project Minutes and ToRs

17.1 The Committee noted the minutes and ToRs. It was noted that appendix Project Initiation Document (PID) was not included in the papers. Christopher Wroath will forward this on to the Committee for information. **Action: CW**

18. Identification of any new risks emerging from this meeting

18.1 The Committee felt that further controls could be included in relation to the risk regarding uncertainty of Finances and commitment to SG commissions. Jim Boyle added that this will be reviewed by the Executive Team during the forthcoming Risk deep dive session. **Action: JB**

19. Review of Effectiveness of Meeting

19.1 The Committee agreed that papers were well written and provided good triangulation. They stressed the importance of ensuring the language is understandable and felt it would be helpful to include more information in relation to predictions in terms of work expected in advance of the next meeting, where appropriate.

20. Any Other Business

20.1 No other business was raised for discussion.

21. Date and time of next meeting

21.1 The next meeting of the Technology and Information Committee will be held on Monday 27 August 2024 via Microsoft Teams at 10:15.

NES, June 2024, JA

Approved by David Garbutt at TIC Meeting on 27 August 2024

NHS Education for Scotland

EDUCATION & QUALITY COMMITTEE

9 May 2024 from 10:15am to 12:20pm

Approved minutes of the fifteenth meeting of the Educational & Quality Committee (EQC) held on Thursday 09 May 2024 as a hybrid meeting, in person at the Westport Office, Edinburgh and via Microsoft Teams

Present: Annie Gunner Logan (AGL), Non-Executive Director (Chair)
Olga Clayton (OC), Non-Executive Director
Shona Cowan (SC), Non-Executive Director
Peter Donnelly (PD), Co-opted Committee Member
Nigel Henderson (NH), Non-Executive Director

In Attendance: Rob Coward (RC), Principal Educator, Executive Secretary
Chris Duffy (CD), Senior Admin Officer, Minute-Taker
David Garbutt (DG), Board Chair
Clair Graham (CG), Head of Programme, NHS Scotland Academy (NHSSA), Learning & Innovation
Kevin Kelman (KK) Director of NHSSA, Learning & Innovation
Thomas Lamont (TL), Associate Postgraduate Dean, Dental (Observing)
Ryan Reed (RR), Head of Programme NHSSA, Learning & Innovation
Della Thomas (DT), Board Secretary and Principal Lead for Corporate Governance
Jeanette Stevenson (JS), Associate Director, NHSSA Learning & Innovation
Karen Wilson (KW), Executive Director of Nursing, Midwifery and Allied Health Professions (NMAHP), Deputy CEO (Clinical) and joint EQC Executive Lead

1. Welcome and Introductions

1.1 The Committee Chair welcomed everyone to the meeting.

2. Apologies for absence

2.1 There were no apologies received from members of the Committee.

2.2 Apologies were received from regular Committee attendees, Emma Watson, Executive Medical Director and joint EQC Executive Lead, Janice Gibson, Associate Director, Organisational Development Leadership and Learning (ODLL), Gordon Paterson, Director of Social Care, Lindsay Donaldson, Deputy Medical Director and Karen Reid, Chief Executive and Accountable Officer

3. Notification of any other business

3.1 There were no notifications of any other business.

4. Declarations of interest

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

5. Draft Minutes of the meeting held on 7 March 2024

5.1 The Chair invited the Committee to review the draft minutes from the 07 March 2024 EQC meeting.

5.2 The meeting noted that at 10.16 there was an action that wasn't recorded on the action log. Therefore, an action will be added to the log to record a dashboard on the implementation of the learning and education strategy. **Action: CD**

5.3 The Committee approved the draft minute, subject to the above amendment.

6. Action Status Report and other matters arising

6.1 The Chair invited the Committee to review the action status report and asked the Committee to note that it contained 6 completed actions with 7 actions in progress.

6.2 The Committee noted the updates within the report and approved the action status report.

7. Education & Quality Executive Leads Report

7.1 The Committee Chair remarked that this was an informative report, providing a breadth and depth of the activity within NES relating to the remit of the EQC. The Chair invited Karen Wilson to introduce the report.

7.2 Karen Wilson advised that the report is provided to Committee for assurance, and it highlights the key strategic issues and updates relating to education and quality. Karen Wilson highlighted the following areas for the Committee to note. The innovative work at 5.2.1.2 Brief Behavioural Activation for Depressed Adolescents, 5.2.1.8 Career Development Framework for Non-Medical Endoscopists, 5.2.2.5 Healthcare Science education and training strategy, 5.2.2.6 Diploma in Family Nurse Partnership external verification, 6.1 Supporting Strategic Key Performance Indicators (SKPIs) under the auspices of EQC through a sub-group of Education and Quality Executive Group (EQEG), 6.2 Learning and Education Quality System (LEQS) and Postgraduate Medical Education and Training – Enhanced Monitoring update.

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

7.4 The Committee asked a question in relation to 5.2.1.7 in the report, Leading to Change – NHS Scotland Senior Executive Talent Management and Succession

Planning. The Committee asked if this work is able to continue despite the fact the main leadership product has been paused? Karen Wilson responded, the work is continuing but a more detailed update and a fuller response to this question will be provided in the next Executive Lead report. **Action: JG**

- 7.5 The Committee asked what NES are aiming to achieve by partnering with the Glasgow School of Art (5.2.2.2). Karen Wilson responded, NES are systemising the approach to collaborative partnerships, there are memorandum of understandings with the Scottish Funding Council (SFC) and Scottish Social Services Council (SSSC). More recently there are partnership agreements with St Andrews, the Open University and Digital Health Innovation (DHI). The partnership with Glasgow School of Art is part of the DHI partnership and is also linked in with the Accelerated National Innovation Adoption (ANIA) pathway.
- 7.6 The Committee noted the Technology Enhanced Learning Update (5.2.3.9) and requested a further sight of the evaluation report on the pilot programme of short sessions providing guidance on effective use of technologies for learning for NHS Greater Glasgow and Clyde. It was agreed that the link to report will be included in the next Executive Leads report. **Action: RC**
- 7.7 The Committee commended the work on the Diploma in Family Nurse Partnership external verification noting it is the first academic award developed for family nurses in the world.
- 7.8 The Committee asked, who are the designated bodies referred to in the Medical Appraisal & Revalidation Quality Assurance (MARQA) Review 2023-24. Karen Wilson agreed to clarify this by correspondence after the meeting. **Action:KW/EW**
- 7.9 The Committee noted the Senior Leadership Gateway app launched at the end of April 2024 and asked how people outside the health service access the app. Karen Wilson agreed to clarify this by correspondence after the meeting. **Action: JG**
- 7.10 The Committee referenced the knowledge network re-launch and asked how well used the knowledge network is? Karen Wilson replied confirming data is held on usage and the network is very popular with professionals. Kevin Kelman added, the redesign sits in the learning and innovation directorate and there are a team of clinicians meeting with the knowledge management team to take the digital library forward.
- 7.11 The Committee discussed TURAS Refresh and consultations taking place internally and externally. The Committee asked if the range of stakeholders involved in consultations could be shared. **Action: PMO**
- 7.12 The Committee briefly discussed the Leading to Change update and noted that the Committee are due to receive the Organisational Development, Leadership and Learning Annual Report at the September EQC Meeting. The Committee asked that more context is included in this report. **Action: JG**

- 7.13 In relation to section 5.2.1.8, specifically the reference to the training of non-medical endoscopists, the committee asked whether there may be a risk for NES/NHS Scotland Academy in the context of the ongoing challenges around the introduction of Physician Associates, especially in England (agenda item 5.2.2.3 refers). Karen Wilson advised that this would not be a risk in Scotland.
- 7.14 The Committee referenced the Remote and Rural Credential (Unscheduled and Urgent Care) Launch and asked if an Annual Report on Remote and Rural work could be considered for the schedule of business. **Action: EW**
- 7.15 In relation to item 5.2.3.5, the committee noted that the credential “will play a pivotal role in ensuring the health & wellbeing of rural communities”, and asked how this will be evaluated. Karen Wilson confirmed that this will be included in the annual report coming to this committee in due course. **Action: EW**
- 7.16 The Committee noted that NHS Scotland Academy Dashboard contained a number of acronyms and requested that these are written out in full or a glossary/lexicon is provided. **Action: KK/JS/CG**
- 7.17 The Committee noted the Lead Executive Report and confirmed that it provided satisfactory assurance with the quality, performance and management of education and training activities.
- 7.18 The Committee Chair thanked all those who had contributed to the report.
- 8. NHS Scotland Academy Education and Quality Governance Annual Report**
- 8.1 The Committee Chair invited Kevin Kelman, Jeanette Stevenson and Clair Graham to introduce this report.
- 8.2 Kevin Kelman delivered a short PowerPoint presentation to introduce the report which provided an Annual Review of the work of the NHS Scotland Academy, giving assurance to the partner Boards that appropriate educational governance is in place across NHS Scotland Academy programmes.
- 8.3 The Committee Chair thanked Kevin Kelman for the introduction stating that it was a very impressive report that shows the education provided was of good quality with both learners and patients benefitting. The report was then opened for questions.
- 8.4 The Committee requested more context in relation to the learner numbers provided within the report. Jeanette Stevenson confirmed that programme numbers are carefully considered as part of the initiation process and it is recognised that each programme is different. Certain programmes are working to tight commissions where the workforce needs are known and these numbers can be more targeted. The Committee noted that it would be helpful to include more of this context in next years Annual Report, in light of risk and financial constraints. There are currently discussions ongoing at Board level if the number of attendees at NES educational offerings should be considered a risk and extra context in this report would help these discussions. **Action: KK/JS/CG**

- 8.5 The Committee asked about learner feedback. Jeanette Stevenson replied, feedback is overwhelmingly positive. Constructive feedback is picked up as part of the annual review process. The Committee again asked for further context in next years report. **Action: KK/JS/CG**
- 8.6 The Committee asked if the Academy has completed any work with the Promise Scotland, linking care experienced children and the work of the youth academy. Kevin Kelman responded, noting that there hasn't been a specific workstream in this area but a discussion with the Promise team in Scottish Government will be considered subject to workload availability. **Action: KK**
- 8.7 The Committee made an observation that certain people were named in the feedback and asked why. Clair Graham confirmed that the named individuals consented and provided testimonials that the academy team can use as part of a marketing strategy.
- 8.8 The Committee asked what process does the academy go through when considering a future project. Kevin Kelman confirmed that there is a well developed system for considering and approving future projects. Firstly the project is considered at a Clinical Assessment Group (CAG) which has both Medical and NMAHP representation, plus other stakeholders. If the new project meets the approval of the CAG it then goes to the Executive Programme Group (EPG) in the form of an Situation, Background, Assessment, Recommendation (SBAR) paper. If the EPG approve the SBAR paper this then requires a full business case to be written up which then comes back to EPG for final approval. EPG has a wide membership including both Chief Executives of NES and NHS Golden Jubilee.
- 8.9 The Committee confirmed the report provided the necessary assurance.
- 8.10 The Committee Chair thanked everyone involved in preparing this report and congratulated them for an excellent report.

9. End of Year Equality and Diversity Report 2023-24

- 9.1 The Committee Chair invited Katy Hetherington to introduce the report which provided the Committee with an end of year report on equality work. Following approval by the EQC the report will inform the end of year report to the Board on 23rd May 2024.
- 9.2 Katy Hetherington advised that the areas to highlight were the focus on anti-racism and the developing action plan in response to a request from Scottish Government. Educator competence is recognised as an important way for NES to mainstream all staff Personal Development Plan (PDP) activity. Plus, the Equality team have released a range of new equality and diversity learning products on TURAS, this includes the launch of the sexual harassment module at the end of April.

- 9.3 The Committee noted that there is a process to review the way the outcomes are articulated in the future. As an activity report the report was very impressive and the Committee commended the cultural humility work.
- 9.4 The Committee referenced the amount of engagement with refugees and asked if more context could be provided on this area. Katy Hetherington confirmed an answer would be provided by correspondence as more information would need to be sought from NHS Scotland Academy colleagues. **Action: KK**
- 9.5 The Committee asked a question in relation to Observed Structured Clinical Examination (OSCE) preparation enquiring if students were still required to travel to Northern Ireland. Karen Wilson confirmed that Scottish nurses have prioritised places in Northumbria now.
- 9.6 The Committee approved the report for onward sequencing to the NES Board.
- 9.7 The Committee Chair thanked Katy Hetherington for the report.

10 Quarterly Complaints Report

- 10.1 The Committee Chair invited Rob Coward to introduce this report which detailed the complaints received, adherence to complaint handling standards and the complaint outcomes for quarter four 2023-2024.
- 10.2 The Committee confirmed the report provided the necessary assurance.
- 10.3 The Committee Chair thanked Rob Coward for the report.

11 Strategic Key Performance Indicators: Education & Quality Committee

- 11.1 The Committee Chair invited Rob Coward to introduce this report which asked the Committee to consider the EQC SKPIs where data is currently available. Committee members were also invited to note progress towards the development of measures and data sources where these are not currently available.
- 11.2 Committee members noted the update but requested that the development of measures and data sources where it is not available is complete by the next EQC meeting in September. Also, the Committee asked for confirmation that the strategy implementation “dashboard” would be presented at the September meeting. **Action: RC/SW**
- 11.3 The Committee confirmed the report provided the necessary assurance at this stage with an action to provide further assurance.

12. EQC Strategic Risk Report and identification of any new risks emerging from this meeting

- 12.1 The Committee Chair invited Rob Coward to introduce the report.

- 12.2 Rob Coward advised that there are 2 strategic risks relevant to EQC and there have been no significant changes to the report since it was last reviewed by EQC.
- 12.3 The report was opened to the Committee for questions.
- 12.4 No questions were raised, and the Committee noted the report and confirmed that the risks delegated to EQC are managed effectively.
- 13. Draft EQC Annual Report 2023-24**
- 13.1 The Committee Chair invited Della Thomas to introduce this report which came to the Committee to review the work of the Committee over the last financial year. The Committee were asked to offer any amendments and to approve the report.
- 13.2 The Committee asked that the missing data relating to SKPIs is captured under the outstanding matters section of the report. **Action: DT**
- 13.3 The Committee also commented on the layout and formatting of the attendance section of the report and asked that the attendance section is reviewed and standardised for all the Committee Annual Reports. **Action: DT**
- 13.4 The Committee approved the report on the basis that the two actions listed above are incorporated.
- 13.5 The Committee Chair thanked Della Thomas, Rob Coward and Chris Duffy for the report.

Items for noting

14. Medical ACT Sharing of Information – Internal Audit

- 14.1 The Audit and Risk Committee have delegated the responsibility of this report to EQC.
- 14.2 The Committee asked that the action plan for this internal audit is placed on the agenda for the September EQC meeting. **Action: CD**

15. Consultations Log

- 15.1 The consultations log was noted.

16. Scottish Government and NES Educational policies

- 16.1 The Committee noted that there were none for this meeting.

17. Committee Effectiveness

- 17.1 The Committee confirmed that reports to the Committee had communicated relevant information at the right frequency, time, and in a format that was effective.

The Committee highlighted improvements to reports by adding more context and writing acronyms out in full. The Committee felt that they had benefited from the right level of attendance. The Committee discussed any aspects where effectiveness could be improved and noted the areas for improvement in relation to abbreviations in full for one of the reports.

17. Any other business

17.1 There was no other business to discuss.

18. Date and time of next meeting

18.1 The next meeting of the Education and Quality Committee will be held on 12 September 2024, 10:15am – 12:45pm as hybrid meeting.

NES
CD
August 2024

Approved – Annie Gunner Logan on 12/09/2024