

AGENDA FOR THE ONE HUNDRED AND SIXTY-EIGHTH BOARD MEETING

Date: Thursday 26 May 2022

Time: 10:15 – 13:05

Venue: NES has moved into a hybrid working approach, therefore Public Board Meetings will be held remotely using Microsoft Teams and there will be an in-person meeting opportunity at the NES Westport office, Edinburgh.

1. **10.15 Chair’s introductory remarks**
2. **10.16 Apologies for absence**
3. **10.17 Declarations of interest**
4. **10.18 Minutes of the One Hundred and Sixty-Sixth Board Meeting** NES/22/31
24 March 2022 for approval
5. **10.20 Matters arising from the Minutes and notification of Any Other Business**
6. **10.21 Actions from previous Board Meetings** NES/22/32
For review
7. **Chair and Chief Executive reports**
 - a. **10.25 Chair’s Report** NES/22/33
 - b. **10.30 Chief Executive’s Report** NES/22/34
8. **Strategic Items**
 - a. **11.00 Stakeholder Mapping** NES/22/35
For Review and Discussion (J. MacEachen)
 - b. **11.10 Emerging key messages from the stakeholder survey**
Presentation: For Discussion (J. MacEachen / N. Hay)
 - c. **11.20 Enabling Technology Roadmap** NES/22/36
For Review and Noting (C. Wroath)
 - d. **11.30 Corporate Governance Strategic Developments - Update** NES/22/37
For Review and Noting (J. Boyle / D. Thomas)

- e. **11.35** Strategic Financial Principles
For Review and Approval (J. Boyle) NES/22/38
- 9. Annual Items**
- a. **11.45** Whistleblowing Executive Lead Annual Whistleblowing
Report 2021/22 NES/22/39
For Review and Approval (D. Cameron)
- b. **11.50** Non-Executive Director Whistleblowing Champion Report
2021/22
Verbal Report for Approval (G. Mawdsley)
- c. **11.55** 2021-22 Equality Outcomes and Mainstreaming Annual
Report NES/22/40
For Review and Approval (K. Hetherington)
- 12:00 Comfort break**
- 10. Performance Items**
- a. **12:10** 2021/22 Quarter 4 Risk Register Report NES/22/41
For Review and Approval (J. Boyle)
- b. **12:20** 2021/22 Quarter 4 Performance Report NES/22/42
For Review and Approval (D. Cameron)
- 11. Governance Items**
- a. **12.30** Significant issues to report from Standing Committees:
- **12.30** Digital & Information Committee held 11 April 2022
(D. Garbutt, verbal update)
 - **12.33** Audit & Risk Committee held 28 April 2022
(J. Ford, verbal update)
 - **12.36** Staff Governance Committee held 05 May 2022
(L. Dunion, verbal update)
 - **12.39** Education and Quality Committee held 12 May 2022
(D. Hutchens, verbal update)
- b. **12:42** Model Code of Conduct (Presentation in support of paper) NES/22/43
For Discussion and Adoption (D. Thomas)
- 12. Items for Homologation or Noting**
- a. **13:00** NHS Scotland Academy Joint Strategic Programme NES/22/44
Board Minutes 22 February 2022 Meeting
For Homologation
- b. **13:00** NES Standing Committee Minutes
- i. Audit & Risk Committee, 27 January 2022 NES/22/45
 - ii. Staff Governance Committee, 04 February 2022 NES/22/46

iii. Digital & Information Committee, 28 February 2022
iv. Education & Quality Committee, 03 March 2022
For Homologation

NES/22/47
NES/22/48

13. 13:02 Any Other Business

14. 13:05 Date and Time of Next Meetings

- **Formal Private Board:** 26 May 2022 at 13:10 – 13:30
- **Board Development:** 30 June 2022 at 09:30
- **Private Board:** 30 June 2022 at 13:15
- **Public Board:** 18 August 2022 at 10.15

NHS Education for Scotland (NES)
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NHS Education for Scotland

DRAFT MINUTES OF THE ONE HUNDRED AND SIXTY-SEVENTH BOARD MEETING HELD ON 24 MARCH 2022

As a result of NES moving into a hybrid approach to work from March 2022, this meeting was held via Microsoft Teams and as an in-person meeting opportunity at the NES Westport office in Edinburgh.

Present: David Garbutt (DG) (Chair)
Jim Boyle (JB), Executive Director of Finance
Anne Currie (AC), Non-Executive Director
Linda Dunion (LD), Non-Executive Director
Jean Ford (JF), Non-Executive Director
Lynnette Grieve (LG), Non-Executive Director/Employee Director
Annie Gunner Logan (AGL), Non-Executive Director
Douglas Hutchens (DH), Non-Executive Director (Vice Chair)
Gillian Mawdsley (GM), Non-Executive Director/Whistleblowing Champion
Victoria Nairn (VN), Non-Executive Director
Prof Stewart Irvine (DSI), Executive Director of Medicine
Karen Reid (KR), Chief Executive & Accountable Officer
Sandra Walker (SW), Non-Executive Director
Karen Wilson (KW), Executive Director of Nursing

In attendance: Tracey Ashworth-Davies (TA-D), Director of Workforce
Colin Brown (CB), Head of Strategic Development, Chair's Office
Dr David Felix (DF), Postgraduate Dental Dean
Nick Hay (NH), Public Affairs Manager (to observe)
Kevin Kelman (KK), Director of NHS Scotland Academy
Gordon Paterson (GP), Director of Social Care
Charlie Sinclair, Associate Director, NMAHP (to observe)
Janice Sinclair, Deputy Director of Finance (for items 10a/b)
Judy Thomson, Director of Training for Psychology Services
Della Thomas (DT), Board Secretary & Principal Lead – Corporate Governance
Paula Tovey, Interim Deputy Director of Finance (for item 10a)
Dr Emma Watson (EW), Director of Medicine (designate / to observe)
Christopher Wroath (CW), Director of NES Technology Service (until 11.30)
Alison Shiell (AS), Manager, Planning & Corporate Governance (Minute Taker)

1. Chair's Introductory Remarks

- 1.1. The Chair welcomed everyone to the meeting. He began by noting the change to the Board being held in "hybrid" session. This now includes an in-person opportunity for any members of the public to attend if they so wish as well as the virtual TEAMS attendance. He went on to note that this Board marked Professor Stewart Irvine's final meeting as NES's Executive Director of Medicine before his retirement on 31 March 2022. The Chair reflected on Stewart's clinical career and his very significant contributions to the field of Obstetrics and Gynaecology. Stewart joined NES in 2004, became deputy Director of Medicine in 2008 and Executive Director of Medicine in 2012. He has also been deputy Chief Executive and acted as Chief Executive during the first year of the COVID-19 pandemic.

- 1.2. The Chair noted that Stewart Irvine is a recognised expert in postgraduate medical education and training and that his leadership has ensured that Scotland has a significant voice at UK-level. On behalf of the Board, the Chair thanked Stewart Irvine for his immense contribution to NES and wished him well in his retirement.
- 1.3. The Chair extended a particular welcome to Gordon Paterson, who joined as NES's first Director of Social Care on 7 March 2022. He also welcomed Kevin Kelman, Director of the NHSS Academy, who will be a regular attendee at Board meetings going forward and Charlie Sinclair, an Associate Director in NMAHP who was observing the meeting as part of his induction.

2. Apologies for absence

- 2.1. Apologies for absence were received from Donald Cameron (DC), Director of Planning & Corporate Resources.

3. Declarations of interest

- 3.1. There were no declarations of interest in relation to any of the items of business on the agenda for this Board meeting.

4. Minutes of the One Hundred and Sixty-Sixth Board Meeting (NES/22/17)

- 4.1. The minutes of the Board meeting held on 10 February 2022 were approved.

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. There were also no notifications of any other business requiring consideration by the Board.

6. Actions from previous Board Meetings (NES/22/18)

- 6.1. The Board received the rolling Board action list for review and agreement. The Board noted that four out of five actions had been marked as complete. The single 'in progress' item relates to a proposal to bring a Strategic Stakeholder Engagement paper to the 26 May 2022 Board meeting. The paper will include the results and analysis of the NES stakeholder survey that closes on 8 April 2022. The Board confirmed their agreement for this paper to be submitted to the May Board meeting.
- 6.2. The Action list was agreed.

7. Chair & Chief Executive Updates

a. Chair's Report (NES/20/19)

- 7.1. The Chair presented a paper outlining his recent meetings and activity since the February Board in his roles as Chair of the NES Board and a member of the NHSS Board Chairs Group (BCG).
- 7.2. There were no questions regarding the Board Chair's report and the Board moved onto the next item on the agenda.

b. Chief Executive's Report (NES/22/20)

- 7.3. Karen Reid introduced this report and began by thanking Stewart Irvine for his contribution and leadership in NES and wished him a fulfilling and memorable retirement.

7.4. Karen Reid then highlighted the following items within the report for the Board's information:

- a. Karen Wilson and Tracey Ashworth-Davies have been appointed Deputy Chief Executive Officers in NES for clinical and corporate matters respectively. These appointments will commence from 1 April 2022.
- b. David McColl, Deputy Director, NES Technology Service, received the Digital Leader of the Year award at Holyrood Connect's fifth annual Digital Health and Care Awards.
- c. Gordon Paterson has been invited to join the Scottish Human Rights Commission Scottish National Action Plan Leadership Panel and will represent NES on this group.
- d. NES is the first dental deanery in the UK to have achieved 'Met' status for all 20 requirements relating to the delivery of Specialty Training as defined by the General Dental Council's *Standards for Specialty Education*.
- e. NES launched an external stakeholder survey on 2 March 2022 and as of 24 March 554 responses have been received, with 68 individuals confirming they would be willing to participate in a follow-up interview.

7.5. The Chair opened up to questions. During discussion, the following points were raised:

- a. In response to a query regarding NES's involvement with the work of the National Gender Identity Healthcare Reference Group and the education elements of the NHS Gender Identity Services 2022-24 Strategic Framework, Karen Wilson remarked that it would be important to review the findings of the Cass Review (Independent review of gender identity services for children and young people) and the work that has been commissioned by NHS England in this area. The Board recognised the sensitivities associated this work and welcomed NES's involvement in the educational elements specifically. It was agreed that Karen Wilson would follow up on NES's involvement further to the findings of the Cass Review and the NHS England commissioned work. **Action: KW**
- b. The Board welcomed Karen Reid and Gordon Paterson's engagement with the Coalition of Care and Support Providers in Scotland (CCPS) to discuss future opportunities for NES within the social care sector. Karen Reid confirmed that NES will continue to meet with external stakeholders and highlighted an upcoming opportunity with Scottish Care. The Board will receive updates on the outcomes of these meetings in due course as clarity is still required from Scottish Government (SG) in relation to NES's future role in supporting the social care workforce. The NMAHP (Nursing, Midwifery & Allied Health Professions) and Psychology directorates are both already supporting the social care workforce. This information will be shared with the Board in due course. In relation to the CCPS engagement meeting, Annie Gunner Logan declared her interest as the current CCPS Chief Executive, however she also confirmed that she is standing down from this role at the end of April 2022. It was agreed that Karen Wilson and Judy Thomson would share information about the work already underway in NMAHP and Psychology with the Board. **Action: KW/JT**
- c. The Board asked how managers and staff will be supported to transition to NES's new hybrid working approach. Tracey Ashworth-Davies advised that a staff survey will be issued around June 2022 to capture staff experiences and any required actions will be implemented via the NES People Recovery Group. Lynnette Grieve highlighted that a recent all-staff hybrid working webinar was well attended and positive feedback received and advised that staff also continue to welcome regular engagement from the Executive Team and other colleagues within NES via weekly update videos.

- d. The Board commented on the importance of the Enabling Technology Roadmap (ETR) and the need to confirm timescales with Scottish Government (SG). It was confirmed that Christopher Wroath is working closely with colleagues from SG and COSLA (Convention of Scottish Local Authorities) to agree 2022-23 delivery dates. The Digital and Information Committee already receive regular ETR progress updates, however it was agreed that a paper should be brought to the May Public Board meeting to ensure that Board members have a full understanding of NES Technology Service deliverables as part of the SG Digital Health and Social Care Strategy. **Action: CW**
- e. The Board welcomed the appointment of Gordon Paterson to the Scottish Human Rights Commission Scottish National Action Plan Leadership Panel, on behalf of NES and looked forward to receiving further updates on this work.

7.6. The Chair thanked Karen Reid for her report and the Board moved onto the next agenda item.

8. Strategic Items

- a. Conclusion of “Governance Light”: December 2021 – March 2022 (NES/22/21)
- 8.1. Della Thomas presented a paper setting out a proposal to conclude the NES COVID-19 ‘Governance Light’ period that commenced on 20 December 2021 as a result of NHS Scotland winter pressures and the Omicron COVID-19 variant.
- 8.2 The paper was taken as read and the following point was raised in discussion:
 - a. The Board recognised that it will take time to re-establish NES’s previous governance timetable and individual Committee work programmes. The Board also acknowledged the pressures on the NES Executive Team and the need to continue with practices established during previous ‘Governance Light’ periods.
- 8.3 The Chair acknowledged the work of Della Thomas and her team and their continued support to the Board and its standing committees. The Board approved the conclusion of the most recent COVID-19 ‘Governance Light’ period and noted the Extended Executive Team (EET) decisions taken during this time.
- b. Strategic Update: NHS Scotland Academy (NES/22/22)
- 8.4 Kevin Kelman presented a strategic update on the development of the NHS Scotland Academy (NHSSA) during its initial implementation phase and gave a short PowerPoint outlining milestones achieved to date and new and emerging developments. Both the paper and the presentation included information on the NHSSA’s key objectives and governance structures.
- 8.5 The paper was taken as read and after the presentation, the following points were raised in discussion:
 - a. The Board discussed the NHSSA as a joint partnership between NES and NHS Golden Jubilee (GJ) that is supporting the implementation of NHS Scotland’s (NHSS) Recovery Plan. Karen Reid highlighted NES’s specific role in supporting the accelerated education and training of NHSS staff, particularly in relation to the establishment of National Treatment Centres as the NHSSA’s initial focus has been to support immediate workforce priority needs.
 - b. Kevin Kelman confirmed that learning ‘huddles’ have been established in pilot areas and these are working well. The NHSSA are now recruiting a post that will focus on widening access and establishing huddles across the whole NHSS.

- c. The Board discussed the establishment of NHSSA governance structures and recognised the complexities associated with a joint partnership arrangement. Kevin Kelman confirmed that the NHSSA Executive Programme Group and Joint Strategic Programme Board (JSPB) have been very supportive and have helped to ensure that NHSSA work is taken forward appropriately and effectively.
- d. In response to a query from the Board regarding NHSSA reporting going forward, Kevin Kelman confirmed that written updates will be submitted to the JSPB. Karen Reid also advised the Board that an internal audit of NHSSA governance will be completed during 2022-23. This report will aim to provide assurance to both NES and NHS GJ in relation to how well NHSSA governance is working.

8.6 The Chair thanked Kevin Kelman for his paper and presentation and the Board noted the NHSSA strategic update.

c. NHS Scotland Academy Joint Strategic Programme Board held 22 February 2022

8.7 David Garbutt gave a brief overview of the key issues discussed at the most recent meeting of the NHSSA JSPB. The NHSSA JSPB received a presentation from Catherine Calderwood in her role as National Clinical Director of the Centre for Sustainable Delivery (CfSD) and discussed potential opportunities for future NHSSA/CfSD/NES collaboration.

8.8 The JSPB also reviewed the draft 2022-23 NHSSA Annual Operational Plan and discussed the NHSSA approach to Equality and Diversity, Freedom of Information, Business Conduct and Whistleblowing in the context of the NES/NHS GJ partnership arrangement. The Chair acknowledged the work of the NHSSA Executive Programme Group in relation to the preparation of papers for the JSPB.

9. Annual Items

9.1 There were no agenda items submitted under this agenda heading.

10. Performance Items

a. Month 11 Finance Report (NES/22/23)

10.1 Jim Boyle presented the financial results for the first eleven months of the 2021-22 year to the Board for review and approval.

10.2 Jim Boyle advised the Board that the overall projected underspend position had moved significantly since the February Board meeting to almost £2.4m, which represents approximately 0.4% of the NES (non-Covid related) annual budget. Jim Boyle acknowledged the ongoing impact of COVID-19 on NES's ability to deliver core activities and supply chain issues that have affected opportunities to procure equipment to support the delivery of education and training. Whilst recognising the complexities of the NES budget in relation to the management of non-recurrent funding and other external factors, Jim Boyle also highlighted the need to improve financial reporting in NES to ensure that potential underspend issues are identified and actioned earlier in the financial year.

10.3 In relation to the current 2021-22 financial position, Finance colleagues are reviewing directorate budgets and other associated information to enable any further corrective action to be taken before year-end. Jim Boyle is also liaising with SG Finance colleagues to ensure that all 2021-22 non-recurrent funding has been allocated and recorded.

10.4 Before moving to a full Board discussion, Karen Reid took the opportunity to assure the Board that financial reporting improvements will be implemented within NES to ensure that potential underspend issues are identified as early as possible. Karen Reid also highlighted the importance of strengthening NES's risk management approach and

increase the organisation's risk tolerance in relation to staffing. Colin Brown is also actively engaging with NES's sponsor team in SG to agree a more robust approach to commissioning going forward.

10.5 The Chair thanked Jim Boyle for his report and update. The following points were highlighted during discussion:

- a. The Board expressed their disappointment in the current 2021-22 underspend position and welcomed Jim Boyle and Karen Reid's plans for improvements in financial reporting and risk management. The Board recommended a swift and proactive approach to the implementation of these planned changes and agreed it would be helpful to receive a paper setting out NES's strategic financial principles and future improvements at the May Board meeting. **Action: JB/DT**
- b. The Board highlighted the need for consistent approaches to financial management and reporting across NES directorates. Jim Boyle advised that the Strategic Financial Principles paper will highlight the need to move to a more corporate approach to financial management. Examples of best practice will be identified and shared across directorates alongside benchmarking with other organisations.
- c. The Board asked if any of the key deliverables had been missed as a consequence of the underspend. Karen Reid confirmed that all of the key deliverables had been achieved but there undoubtedly have been missed opportunities to make a difference for the citizens of Scotland.
- d. Tracey Ashworth-Davies and Jim Boyle both commented on recruitment challenges in relation to non-recurrent funding and the resulting high employee turnover rate in NES. Jim Boyle is working with Finance and Procurement colleagues to identify improvements to recruitment and tendering processes.

10.6 The Chair thanked Jim Boyle and his team for their work and the Board approved the Month 11 Finance Report.

b. Risk Register Report (NES/22/24)

10.7 Jim Boyle presented the NES Risk Register and associated COVID-19 Risk Annex as of 17 March 2022 to the Board for review and approval. As part of his introductory comments Jim Boyle highlighted that an external consultancy is in the process of being commissioned to undertake a review of how risk in NES is identified, managed and mitigated in order to provide greater assurance to the Board in future.

10.8 The paper was taken as read and the following points were raised in discussion:

- a. The Board welcomed the review of risk management in NES. In response to a query from the Board, Jim Boyle confirmed that the review will consider the differences between strategic and operational risks to ensure that the corporate and directorate risks are reported appropriately.
- b. Jim Boyle also confirmed that the review will consider the remit and membership of the NES Risk Management Group (RMG). RMG members are also undertaking a rolling peer review of directorate risk registers to ensure consistency of approach and share best practice.

10.9 The Chair thanked Jim Boyle and his team for their work and the Board approved the NES Risk Registers.

11. Governance Items

a. Significant issues to report from Standing Committees

Audit & Risk Committee held 28 January 2022

- 11.1 Jean Ford gave a brief overview of the key issues discussed at the most recent meeting of the Audit and Risk Committee
- a. The Committee considered three Internal Audit reports. Christopher Wroath was invited to join the meeting to discuss the findings of the Cyber Security audit as the report highlighted areas for improvement. The Committee received a high level of assurance in relation to the implementation of plans to improve NES's cyber security and agreed that further updates should be submitted to the Digital and Information Committee.
 - b. The Committee discussed the importance of internal audit actions being progressed within directorates and how this process could be enhanced.

Digital & Information Committee held 28 February 2022

- 11.2 David Garbutt gave a brief overview of the key issues discussed at the most recent meeting of the Digital and Information Committee:
- a. The Committee received a digital delivery progress report from Christopher Wroath. The NES Technology Service (NTS) are having to manage significant staffing issues as a number of specialist staff are working within temporary contracts due to SG commissions being funded on a non-recurrent basis. The Committee discussed the financial implications as a result of this funding arrangement and the associated challenges in relation to being able to extend temporary contracts and ensure continued service in specialist posts.
 - b. The Committee also received an update on NTS organisational change and the ongoing amalgamation of NES Digital and the NES Digital Service into a single NTS directorate and considered the annual Systems and Information audit.

Education and Quality Committee held 3 March 2022

- 11.3 Douglas Hutchens gave a brief overview of the key issues discussed at the most recent meeting of the Education and Quality Committee:
- a. The Committee received significant assurance in relation to the NHSSA Qualifications Assessment Framework and received a verbal update from Janice Gibson (Associate Director, Workforce) on work being delivered by the Organisational Development, Leadership and Learning (ODLL) team.
 - b. The Committee discussed Enhanced Monitoring (EM) cases and the potential for increased reputational risk for NES, particularly when cases within Boards take a longer period of time to resolve. The Chair has raised the issue of EM with the NHSS Board Chairs Group (BCG) and is due to give an Educational Governance update presentation to BCG members at their March meeting. The Chair will highlight the importance of implementing Active Governance to support a proactive approach to EM cases within Boards. Christopher Wroath will also attend to give an overview of intelligence gathering systems within NHSS.

b. **2022/23 Draft Board Schedule of Business** (NES/22/25)

- 11.4 Della Thomas presented the 2022-23 Board Schedule of Business to the Board for review and approval. She highlighted that since the paper was issued to the Board it has been

agreed that the Strategic Financial Principles paper will be brought forward and sequenced through the April Audit & Risk Committee before being submitted to the May Public Board. The June Board Development session will now include a 3-hour session on Active Governance as this is not able to be delivered at the April Board Development meeting.

11.5 The following point was raised in discussion:

- a. The Board agreed that an informal Board discussion session should be scheduled in May 2022 to review draft versions of NES's three-year delivery, workforce and financial plans in advance of final versions being submitted to the 30 June Private Board meeting. **Action: DT**

11.6 The Chair thanked Della Thomas for her work and the Board approved the 2022-23 Board Schedule of Business.

12. Items for Noting or Homologation

- a. NHS Scotland Academy Joint Strategic Programme Board Minutes (NES/22/26)
30 November 2021 Meeting

12.1 The minutes of this meeting were homologated by the Board.

- b. NES Standing Committee Minutes

- i. Education & Quality Committee 9 December 2021 (NES/22/27)

12.2. The minutes of this meeting were homologated by the Board.

- ii. Digital & Information Committee 13 December 2021 (NES/22/28)

12.3 The minutes of this meeting were homologated by the Board.

- c. NES iMatter Results

12.4 The Board received and noted NES's 2021 iMatter Health and Social Care Staff Experience Report. On behalf of the Board, the Chair congratulated the Executive Team and all NES staff for their work in achieving the report's excellent results.

12.5 The Board discussed opportunities to increase Board Member visibility amongst staff and recognised the challenges associated with meeting staff during the COVID-19 pandemic. Karen Reid highlighted the positive impact of recent Board Development sessions involving presentations from staff from across the organisation. NES's future Communications Strategy will include reference to raising Board visibility, including the possibility of visiting NES regional offices.

12.6 Tracey Ashworth-Davies highlighted NES's recent move to a hybrid working approach and how to maximise opportunities for Board engagement going forward. The NES staff conference will be held in September 2022 via a hybrid format and will include opportunities for virtual and face-to-face networking.

13. Any Other Business

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

14. Date and Time of Next Meeting

14.1 The next Public Board meeting will take place on 26 May 2022 at 10.15 a.m.

13.2 The Chair thanked everyone for their attendance and closed the meeting at 12.10pm.

NES
May 2022
AS/DT/KR/DG
v.02

Actions arising from Board meetings: Rolling list

Minute	Title	Action	Responsibility	Date required	Status and date of completion
Actions agreed at Board meeting on 24 March 2022					
7.5a	Chief Executive's Report	Follow up on NES's involvement with the work of the National Gender Identity Healthcare Reference Group further to the findings of the Cass Review and the NHS England commissioned work.	Karen Wilson	May 2022	Complete Cass Review findings shared with Jane Harris (Head of Programme, NMAHP), who is leading the work on gender identity knowledge and skills framework in NES.
7.5b		Share information relating to how Nursing, Midwifery & Allied Health Professions (NMAHP) and Psychology directorates are supporting the social care workforce	Karen Wilson / Judy Thomson / Chair & CE Office	May 2022	In Progress Information from NMAHP and Psychology to be shared via correspondence before the 26 May Board meeting.
7.5d		Bring Enabling Technology Roadmap paper to May Public Board meeting	Christopher Wroath	May 2022	Complete Included as an item for May Public Board agenda.
10.x	Finance Report	Bring paper setting out NES's strategic financial principles and future improvements to May Public Board meeting	Jim Boyle / Della Thomas	May 2022	Complete Draft paper submitted to 28 April 2022 Audit & Risk Committee and has been added to May Public Board agenda.

Minute	Title	Action	Responsibility	Date required	Status and date of completion
11.5	Draft 2022-23 Board Schedule of Business	Schedule informal Board discussion session in May 2022 to review draft versions of NES's three-year delivery, workforce and financial plans in advance of final versions being submitted to the 30 June Private Board meeting.	Della Thomas / Chair & CE Office	May 2022	Action Closed An informal Board discussion session was scheduled for 30 May 2022. This has now been cancelled as Scottish Government have advised that the aim to prepare three year Operational and Financial plans is likely to change. Donald Cameron (Director of Planning & Corporate Resources) will provide a verbal update at the 26 May Private Board meeting.
Actions agreed at Board meeting on 10 February 2022					
8.1b		Circulate output of stakeholder mapping exercise to the Board via correspondence	John MacEachen	May 2022	In Progress A paper on stakeholder mapping and an update on the emerging findings of the stakeholder survey is scheduled for discussion at the 26 May 2022 Board.

CHAIR'S REPORT

David Garbutt, Chair of NES Board

26 May 2022

Since the last Board meeting I have attended the following meetings and events in addition to internal NES meetings and Standing Committees:

March 2022

1. Held the 2020-21 Ministerial Annual review with Kevin Stewart MSP (Minister for Wellbeing and Social Care), accompanied by Karen Reid (Chief Executive, NES). We had a very positive response from the Minister.
2. Attended the NHS Scotland (NHSS) Board Chairs Group meeting. The meeting included presentations on Workforce Planning and on the new Developing Senior Systems Leadership Programme.
3. Attended a Joint meeting of NHSS Board Chairs and Chief Executives with the Cabinet Secretary for Health and Social Care.
4. Attended a meeting with Island Board Chairs re training support in their areas.

April 2022

1. Gave a presentation to NHS Grampian Board members on the role of Remuneration Committees
2. Attended a meeting of the National Board Chairs to consider how Chairs could collectively support the Recovery Plan
3. Held a Risk Review meeting with consultants from Azets.
4. Delivered a webinar presentation for NHS Scotland Executives and Non Executives on the Healthcare Built Environment model
5. Had an initial Mentorship discussion with a Non- Executive colleague from another Board
6. Attended a meeting on the delivery of the Active Governance programme
7. Chaired the Digital and Information Committee
8. Took part in the NHS Chairs Action Learning Set
9. Held a meeting with the Chair of the Scottish Social Services Council (SSSC)
10. Attended an Information Security Presentation
11. Attended sessions during the NES Annual Virtual Conference and gave the closing remarks.
12. Attended a NES/SAS (Scottish Ambulance Service) Meeting on innovation

13. Attended monthly NHSS Board Chairs meeting
14. Along with Karen Reid attended a meeting with the Chief Executive and Chair of Health Education and Improvement Wales (HEIW).
15. Held meeting with external appointment advisor
16. Took part in NHS Board Chairs Appointment Panel

May 2022

1. Took Annual Leave
2. Attended NHSS Board Chairs meeting on Leadership
3. Attended Agenda setting meeting for NHS Academy Joint Strategic Programme Board
4. Attended General Medical Council event
5. Met with Mentee
6. Held discussion about workforce information for next NHSS Board Chairs Group meeting
7. Held discussion with head of People at Scottish Government about psychometric testing
8. Attended monthly NHSS Board Chairs Group meeting
9. Attended NHS Academy Joint Strategic Programme Board meeting
10. Attended NHS Global Citizenship Advisory Group meeting to discuss future strategy
11. Attended CEO Leadership Development Group meeting
12. Held meeting re Serious and Adverse Events



CHIEF EXECUTIVE'S REPORT

Karen Reid, Chief Executive

1. INTRODUCTION

- 1.1. The agenda for our May Board meeting includes strategic items that will provide the Board with updates across a number of different areas including stakeholder mapping and engagement, digital developments and financial and corporate governance. We are now starting to develop our new corporate strategy within NES and the updates the Board receive at this meeting clearly demonstrate our intention to improve the quality of care experienced by citizens across Scotland as well as strengthening our financial and corporate governance principles and processes which will be key to the success of our new strategic ambition.
- 1.2. The Board will receive three annual items for review and approval. Both NES's Non-Executive Whistleblowing Champion and Executive Lead will provide annual updates as per NHS Scotland's national Whistleblowing standards. Katy Hetherington (Principal Lead, Equality, Diversity & Human Rights) will also present the 2021-22 Equality Outcomes and Mainstreaming Annual Report, which sets out NES's progress in delivering its statutory equality duties.
- 1.3. The Board will also receive a number of performance and governance items for review and approval, including the 2021-22 Quarter 4 Performance and Risk Reports and a paper and related presentation that will set out Scottish Government's new Model Code of Conduct.
- 1.4. This Board also marks Donald Cameron's final meeting as NES's Director of Planning and Corporate Resources before his retirement on 10 June 2022. Donald has been with NES since its inception, initially as part of the Dental Directorate. He has held a number of different roles within the organisation before being appointed to the role of Director of Planning & Corporate Resources in 2014.
- 1.5. In his current role Donald has played a very significant role in the leadership and development of NES's corporate strategy, operational planning and performance reporting processes, as well as having responsibility for our property and facilities management. Donald has been a valued member of the NES Executive Team and his approachable, caring and supportive leadership style will be greatly missed by colleagues. I would like to thank Donald for his contribution to NES and wish him a happy and fulfilling retirement.

2. ANNOUNCEMENTS

2.1 Director of Planning and Performance

In light of Donald Cameron's upcoming retirement from NES, I am pleased to announce that a new Director of Planning and Performance has been successfully recruited. This post will report to Tracey Ashworth Davies (Director of Workforce / Deputy Chief Executive (Corporate)). A formal announcement regarding this appointment will be issued shortly and will confirm a start date of early August 2022.

2.2 **NES 2021 Year in Review**

NES's [2021 Year in Review](#) was published on 17 May 2022. The review shares some of our key achievements during 2021 through a mix of infographics, text and video stories. The timeline format illustrates 16 key areas that reflect the breadth of our work including some lesser known activities. Case studies also showcase collaboration with partners and the impact of our work beyond the NHS.

2.3 The 2021 Year in Review demonstrates how over the last year we have increasingly worked across health and social care to recruit, provide and manage learning opportunities for students and existing staff. We have created and commissioned educational materials, resources and learning opportunities; and improved the physical and digital infrastructure for learners across Scotland.

3. **STRATEGIC UPDATES**

3.1. The Cabinet Secretary for Health and Social Care confirmed that NHS Scotland would no longer remain on emergency footing after 30 April 2022. Boards have been asked to focus on the recovery and renewal of our health and care services, however it is recognised that the system remains under significant pressure and that the commitments set out in the NHS Recovery Plan will have to be balanced alongside the wellbeing of the NHS and social care workforce.

3.2. **National Centre of Excellence in Remote and Rural Health and Social Care**

I am delighted to announce that NES has been asked by Scottish Government (SG) to establish and host the National Centre for Remote and Rural Health and Social Care. The Cabinet Secretary for Health and Social Care made the formal announcement at the *Rethinking Remote* conference held on 28 April 2022 and clearly set out how NES will take the lead role in developing this new centre of excellence working with a range of partners.

3.3. This is an exciting opportunity for NES as Scotland is already recognised internationally for its work on remote and rural health and social care. The development of the centre can position Scotland as a world leader for remote and rural health and social care research and education alongside the delivery of SG policy priorities. The centre will be a genuinely collaborative, Once for Scotland national endeavour that will reflect broader policy and strategic context including Programme for Government commitments, the Health and Social Care Workforce Strategy (and Remote and Rural Workforce Strategy), the Covid-19 Recovery Plan, the Digital Health and Care Strategy and the forthcoming development of the National Care Service. NES colleagues are in the process of developing a business plan to be submitted to SG in June 2022. The Board will receive progress updates as plans for the centre evolve and develop. Dr Emma Watson will be the SRO for this work, ably supported by Dr Pam Nicoll and Gordon Paterson.

3.4. **Developing Senior Systems Leadership Programme**

The Developing Senior Systems Leadership Programme for aspiring senior leaders working in Social Care, Social Work and Health in Scotland was formally launched on 3 May 2022. NES is the strategic delivery partner of SG in this work. The programme is part of an ambitious national plan, the National Leadership

Development Programme (NLDP), which aims to build high levels of systems leadership capability across Social Care, Social Work, and Health and will support the delivery of the NHS Scotland COVID-19 Recovery Strategy .Further information on the programme aims and content can be found on the dedicated [Information Hub](#).

3.5. **A National Care Service (NCS) for Scotland**

We continue to work with SG, the Convention of Scottish Local Authorities (COSLA), and partners to prepare for the forthcoming Bill on the NCS. It is anticipated this will be laid in Parliament soon.

3.6. **Sponsorship**

A Commissioning approach is in the process of being developed by NES and the Scottish Government Sponsor Team, including the Sponsorship Framework, an updated practical guide to Commissioning, Financial Principles and practical guide to commissioning methodology.

3.7 Following the NES 2020-21 Annual Review on 28 March 2022, our Scottish Government (SG) Sponsor Team is in the process of finalising NES's Annual Review Letter. The letter will be circulated to the Board once it is received.

3.8 Karen Reid, Karen Wilson and Kevin Kelman met with SG colleagues including Caroline Lamb (Director-General Health and Social Care / Chief Executive, NHS Scotland) and John Burns (Chief Operating Officer, NHS Scotland) on 12 May 2022 to discuss workforce priorities and how NES can support these. A paper for SG is being currently being developed and will set out what NES is doing and can do in the future to educate, train and support the development of the workforce.

3.9 NES continues to work with our Sponsor team to establish a series of engagements with identified SG Director-Generals/Directors and Karen Reid. Caroline Lamb and John Burns are also due to visit NES on 17 June 2022 as part of a series of visits to all NHS Scotland (NHSS) Boards. This will be an opportunity to showcase key areas of current and emerging work.

3.10 NES's External Stakeholder Survey closed at the end of March 2022, with 643 completed questionnaires received. Our consultancy partner Hall Aitken prepared a finalised report and this was received on 16 May. An interim update highlighting the report's key messages will be provided via a presentation at the 26 May Board meeting.

3.11 **NHS Scotland Academy**

NHS Scotland Youth Academy Huddles in NHS Dumfries & Galloway, Golden Jubilee (GJ), Grampian, Highland and Tayside continue to meet on a monthly basis. Skills Development Scotland (SDS) is reviewing the scope of the school-based apprenticeship for delivery in May 2023 and will provide an update within the next couple of months. NHS Forth Valley has expressed an interest in becoming part of the pilot programme and therefore exploratory meetings are taking place to look at including them as an additional huddle.

- 3.12 Alongside the Youth Academy Huddles, an overarching NHS Scotland Academy (NHSSA) Reference Group has been established. The remit and focus of this group will seek to include the expertise from partnership organisations that can support the development of the NHS Scotland Youth Academy workstreams. These include: Education Scotland; The Wood Foundation; The Prince's Trust; College Development Network; and the Digital Health and Care Innovation Centre (DHI).
- 3.13 The Accelerated Anaesthetic Assistants' Programme was approved by the NES Educational Governance Panel which took place on 3 May 2022, with programme delivery due to commence later in the summer.
- 3.14 The third upskilling course for colonoscopy within the National Endoscopy Training Programme took place in April at Stobhill Hospital. A meeting of Scottish clinicians has taken place to start exploring a similar upskilling programme for upper GI. The job description for the endoscopy faculty is complete and interviews took place in April and May. Work towards gaining JAG (Joint Advisory Group on gastrointestinal (GI) Endoscopy) accreditation continues, with the NHS GJ accreditation visit taking place in May. NHS Highland and NHS Lothian are working towards requesting their JAG accreditation visit.
- 3.15 The development of online Nursing and Midwifery Council (NMC) Objective Structured Clinical Examination (OSCE) Preparation Centre resources is progressing. Good links have been established with Territorial Boards and support for local OSCE preparation development is in place.
- 3.16 The National Clinical Skills for Pharmacists' Programme continues to progress well, further dates until the end of the year have now been confirmed and secured in the NHSSA calendar through to December 2022.
- 3.17 The Foundations in Perioperative Practice Programme has supported learners in NHS GJ, Ayrshire and Arran, Forth Valley and Highland. Cohort two is progressing well, with their final block commencing in June 2022. Cohort three will undertake their first block of training in July 2022. Feedback to date from learners has been positive, with the faculty working hard to ensure the training meets the needs of all learners.
- 3.18 Collaborative working has been developed with a number of key partners to assist in taking forward the work of the Armed Forces and Service Leavers and Veterans' workstreams. Meetings are taking place on a regular basis with the three huddles that have been established: NHS 24 and the Scottish Ambulance Service; Highland & Islands; and NHS Golden Jubilee and Erskine Care. Strong partnerships have been formed and those involved to date have been active in taking forward the tasks identified during early discussions.

4. DIRECTORATE UPDATES

4.1 Dental (including Healthcare Science and Optometry)

a. **Scottish Dental Clinical Effectiveness Programme (SDCEP)**

The SDCEP has published the second edition of its Management of Dental Patients Taking Anticoagulants or Antiplatelet Drugs [guidance](#). The guidance aims to provide clear and practical recommendations and advice to enable the dental team to manage and treat this patient group, and covers assessment of bleeding risk, treatment planning and management of dental patients taking the various types of medication.

b. The second edition of the guidance includes the newer DOAC (Direct Oral AntiCoagulant), Edoxaban, and expanded advice about the low molecular weight heparins. It is based on the most current evidence and has been updated using SDCEP's National Institute for Health and Care Excellence (NICE) accredited methodology. The updated guidance also includes some advice for this topic that aims to support more environmentally sustainable oral health.

c. The Dental Faculties of the Royal Colleges, and the College of General Dentistry have endorsed the guidance as a source of reliable, high quality professional advice that promotes the provision of safe and effective oral health care for patients.

d. **CAREER (COVID-19: Dental health professionals: a longitudinal study of uncertainties, Anxieties and pREparednEss for pRactice)**

The CAREER project, carried out by NES and the universities of Dundee and St Andrews, has sought to better understand how the COVID-19 pandemic is affecting the anxiety, feelings of uncertainty and preparedness for practice of dental trainees and primary care dental practice staff.

e. At baseline a quarter of participants (including trainees) reported depressive symptoms, and more than half of primary care team staff (excluding trainees) rated themselves as 'emotionally exhausted'.

f. Diary volunteers showed, on average, a deterioration in their wellbeing over the time period studied. Some staff actually felt less exhausted over time whereas others deteriorated at a significant rate; in other words, there was substantial variation in their response to the longer-term nature of the pandemic.

g. NES continue to look at how to incorporate this into our work at both the level of the individual and the wider team. The findings are also relevant in terms of policy and system-wide interventions and we shall continue to share and discuss these implications with our key stakeholders"

h. **GUIDE (Working with citizen scientists to improve GUIDeline Implementation in Dentistry)**

GUIDE is a citizen science platform inviting members of the public (citizens) to share their experiences of dental care and suggest ideas to improve them. The platform is also a place to learn more about oral and dental health through blog

posts and videos from our team. The project is led by the University of Aberdeen in partnership with the Universities of Dundee, West England Bristol and NES.

- i. National dental guidelines are released by the Scottish Dental Clinical Effectiveness Programme (SDCEP) to improve clinical practice. SDCEP works in close partnership with TRiADS (Translation Research in a Dental Setting), a programme that aims to increase uptake of clinical guidelines, by providing appropriate support to healthcare professionals. Patients and members of the public play a key role in this process. Using an online citizen science platform to understand their experiences and gather their suggestions is a novel approach in dentistry.
- j. The platform was launched in September 2021 and it sets up challenges to citizens, where they are asked to comment on specific aspects of their dental care experiences. After participants post their comments and ideas, others can comment on them and vote. Each activity is associated with points in the platform, which results in badges of participation and a live leader board showing who has accumulated the most points. The ideas are then discussed by an expert advisory group including dentists, guideline developers, patients and researchers to assess feasibility and relevance. To date, we had 199 citizens joining, and 138 ideas generated. We found citizens have a strong interest in evidence-based information related to oral health self-care.
- k. The results from the platform will be out by the end of the year. It is clear from the initial comments received that citizens are interested and keen on working with dental professionals, and other key stakeholders, to improve oral and dental care to all.
- l. **Healthcare Science**
Since the last Chief Executive's Report we have finalised 44 clinical scientist trainees with partner Boards for intake in 2022. Our core intake of 20 has been boosted since the last report this year by a one-off addition of cardiac physiologists funded by Scottish Government and a component funded by a NES internal bid. Whilst the total has addressed demand in 2022, the additions secured this year are unlikely to be repeated.
2. We expect to award 30 postgraduate bursaries for other Healthcare Science staff undergoing advanced-practice development. These are being assessed at the time of writing.

4.2 NES Technology Service (NTS)

- a. **National Digital Platform (NDP)**
Further to presenting the initial areas of focus at the Enabling Technology Roadmap Group on 3 March 2022, NES Technology submitted the NDP delivery plan for 2022/23 to the Scottish Government (SG) Digital Health and Care Directorate on 21 April. The NDP Delivery plan sets out the timescales for delivery of the NDP Service Catalogue along with the foundational NDP services being made available and enhanced over this period.

- b. A meeting with Scottish Government is scheduled on 24 May 2022 to discuss and agree the NDP delivery plan. In lieu of approval by the SG Enabling Technology Board and the Strategic Portfolio Board, NES Technology are currently aligning our teams (Turas Platform and NDP) in order to ensure successful delivery and are actively working to deliver against the plan, with the first deliverable being the NDP Service Catalogue by the end of June.
- c. **Winter Pressures**
Following a request from SG, the NTS has been involved in discussions and a discovery process around what service and technology interventions could be identified and put in place to help ease winter pressures the NHS in Scotland is predicted to face. For NTS, this primarily focuses on how the delivery of the NDP plan outlined in paragraphs 4.2a/b will enable a national solution for making data about individuals available to health and care professionals and to the individual themselves.
- d. **2022/23 Roadmap for Education and Training**
Further to the NTS collating all directorate requests from the 22/23 operational planning to identify areas of common needs, a roadmap was agreed by the Senior Operational Leadership Group Business Owners group. This roadmap was also presented and shared with the NES Technology Executive Group on 29 April.
- e. **NTS Organisational Change**
The proposal for phase 2a was presented and approved by the NES Change Management Programme Board on 24 April 2022. Work is underway to finalise the job descriptions for the Associate Director posts followed by the recruitment of these posts which is expected to be completed by end of July. In parallel to this, work will commence on phase 2b of the organisational change which will design, plan and deliver the structures required within each business unit in NES Technology to provide sustainable capacity and capability to deliver against NES and Scottish Government strategic outcomes.

4.3 Medicine

- a. **2022 Medical Recruitment**
Early indications for medical recruitment for August 2022 starts is once again very good with high fill rates at GP, core and run through training levels. Data indicating overall fill rates should be available by late June.
- b. **Medical Appraisal**
The NES Medical Appraisal team is currently engaged with two national projects led by Scottish Government (SG):
 1. The NES Medical Appraisal Team (comprising Prof Amjad Khan, Dr Christiane Shrimpton and William Liu) have been invited to and attended a Short-Life Working Group (SLWG), organised and chaired by SG to review the current requirements for medical appraisal and revalidation in Scotland. The aim is to produce clarification/guidance for doctors especially around the theme of taking a wellbeing approach to appraisal discussions

and the supporting information requirements. Some of the discussions from this group are feeding into the Scottish Online Appraisal Resource (SOAR), review described below.

2. Following feedback to the Revalidation Delivery Board Scotland (RDBS), SG has commissioned NES to engage with an external provider to carry out a review of SOAR. The aim of this is to assess if the functionalities and setup are still up-to-date or if changes are required and explore options for changes from minor tweaks to overhaul or rebuild of SOAR. With NES Procurement's help, *Tactuum* was appointed as the provider at the end of April. A full schedule of work is still to be finalised but it is anticipated that *Tactuum* will run a national survey with all SOAR users in the next few months, followed by focus-group meetings (the first of which took place as part of the SLWG meeting above on 3 May 2022). An end report with the findings and recommendations for options describing any changes to be made to the SOAR system is to be produced and presented to the RDBS in November.

c. Raising awareness of changes to International Classification of Diseases Version 11 (ICD-11)

Scottish Government are keen to be the first in the UK to develop information and learning materials around ICD-11. The Medical directorate is working to deliver an animation to inform users of mental health services about the changes to the ICD-11 and how this will affect them. This work is on schedule to be delivered by the end of May so it can be showcased at the Royal College of Psychiatrists Conference in June. A suite of e-learning materials for clinicians is also being developed in collaboration with our Technology Enhanced Learning (TEL) team and subject matter experts, this is due to be delivered by November 2022.

d. KPMG Internal Audit of Trainee and Postgraduate Progression

The recent audit of the Annual Review of Competence Progression (ARCP) and Appeals processes within NES reported that there was an overall assurance rating of 'significant assurance with minor improvements required' (Green-Amber rating). The audit process was a very positive experience for the Training Programme Management Team who deliver the ARCP and Appeals processes as it provided external insight and has given two recommendations to improve the delivery of ARCP's for the future which will give benefit to our medical trainees and to Specialty Training Boards.

e. General Medical Council (GMC) Announcement

Dame Carrie MacEwen has been appointed by the Privy Council as the new Chair of the GMC. Dame Carrie is a consultant ophthalmologist for NHS Tayside and Honorary Professor at the University of Dundee. She served as Chair of the Academy of Medical Royal Colleges until 2020 and is Past-President of the Royal College of Ophthalmologists. She was also an Associate Dean for NES supporting flexible working and contributed greatly to the Deanery in the East of Scotland. She will bring extensive experience as a clinician and educator to the role in the GMC.

4.4 Nursing, Midwifery & Allied Health Professions (NMAHP)

a. **Paramedic Workstream**

Within the AHP Practice Education team there is ongoing work supporting the transition of the shift from paramedic education from a largely vocational training route for Scottish Ambulance Service (SAS) employees, to a university-led degree-based programme.

b. It was originally planned for the three-year degree programme, which is delivered across five universities in Scotland, to include 60 weeks of practice-based learning, of which 27 weeks were to be in health board settings. Supporting paramedic placements within health boards is a unique ask, in that practice educators are from other professions (including nursing, midwifery, AHP, pharmacy, medical, etc) in an already stretched landscape. Following the establishment of a Short-Life Working Group, it has been agreed for the health board commitment to be reduced to 18 weeks.

c. With a focus on ensuring quality of practice-based learning for paramedic students, there is continued project work on establishing tests of change to support capacity, modernisation and sustainability.

d. In addition, there is joint work ongoing with SAS on understanding practice educator needs within the national board; recognising that this shift to a degree-based programme means that paramedics require additional support and resources to enable them to support students as this is a new way of working.

e. **AHP Careers Fellowship Scheme**

April 2022 saw the start of a new cohort of the Allied Health Professions (AHP) Careers Fellowship Scheme. This year, Cohort consists of 16 Fellows progressing 14 work-based projects across a range of settings and topics that align to AHP national or local strategy and priorities. [A summary of the projects and names of the Fellows is available here.](#) On 30 June 2022, we will also be hosting a face-to-face celebratory event for Cohorts 2 and 3 completing their Fellowships. The Fellows in these cohorts were significantly affected by disruptions caused by the pandemic and have demonstrated great resilience to complete their Fellowship. The event will include presentations from Carolyn McDonald (Chief AHP Officer) and David Wylie (Associate Director, NMAHP).

f. **Support Workers' Virtual Learning Week 2022: Social Media reach**

The social media campaign aligned to the [Support Workers Virtual Learning Week 2022](#) was the third paid campaign in collaboration with Sunstone Digital Agency and the NES Healthcare Support Workers (HCSW) team. The aim of this campaign was to promote social sharing and engagement both during and after the live event which ran from 28 February to 4 March.

g. **What worked well?**

1. Short creative content (video) was used across all platforms, with a new YouTube playlist created to host the post event content

- i. YouTube provided a frictionless option for end users with no logins and ease of access across mobile devices (95% of users viewed our content on mobile or tablet).
 - ii. The creative content was recycled through the promoted tweets and LinkedIn posts, for example Karen Reid's welcome video was viewed 979 times on YouTube, but by recycling it across all platforms it received 31,545 plays.
 - 2. Creation of the event playlist in YouTube has had both a legacy and a halo effect for NES.
 - i. The playlist has attracted 2,500 views and 90 hours of video viewing to date, and this will continue to build over time. 257 new subscribers to NES YouTube channel are attributed to the campaign
 - ii. A considerable halo effect of the campaign was seen across all NES social media platforms – with increased views, likes, shares and interactions
 - 3. Close collaboration with NES Corporate Comms team – Sunstone Digital feedback on how successful the working relationships were during this campaign.
- h. The success of the campaign for a very small investment (c£3,000) proves that when we work alongside industry experts, we can harness the untapped social media engagement for our HCSW colleagues.

4.6 Psychology

a. National Recruitment

NES are in the final stages of a National Recruitment Process for a variety of posts for the Psychology workforce. NES coordinated the process on behalf of all participating Boards from the advert stage right through to applications, shortlisting, and interviews. 69 interviews took place online over 7 days in April and 47 offers have been made. Posts advertised and interviewed for varied from Assistant Psychologists, Clinical Associates in Applied Psychology, through to Clinical Psychologists and consultant grades, with permanent and fixed term contracts, full and part time roles. We are working closely with HB colleagues to make the offers and onboard the successful candidates who will all be employed by the participating Boards. Review of feedback and lessons learned is ongoing to enable us to improve the processes for any future recruitment rounds.

b. Crisis Response - Psychological First Aid Update

NES Psychology were pleased to be able to work with Scottish Government to ensure that refugees from Ukraine, their host families and the services associated with them had access to up to date, evidence based and accessible advice and information to support the mental health and wellbeing of children, young people and adults at this hugely challenging time as they arrive in Scotland from Ukraine. This involved the updating of our existing Psychological First Aid [E-module](#), which has been an important resource as part of the pandemic response, to make it applicable to this context.

4.7 Social Care

- a. Since taking up post as the new Director of Social Care in NES, Gordon Paterson has engaged with a broad range of colleagues within NES and with key external stakeholders. Engagement within NES has served several purposes and will provide a good foundation on which to build the new Social Care Directorate over the coming months, including:
 - i. To provide induction to the 'NES way', values, structures, people and purpose
 - ii. To become familiar with the work programmes each Directorate is advancing
 - iii. To further affirm the contribution of social care and the importance of that workforce
 - iv. To acquaint colleagues with the breadth of social care provision and its 'mixed economy'
 - v. To promote the potential for collaboration across Directorates in respect of social care
 - vi. To identify existing work programmes relevant to the social care workforce
 - vii. To advise on how work in progress can better resonate with social care providers and staff

- b. Engagement with external stakeholders has affirmed NES's strong commitment to expanding our offer to Social Care providers and workforce. It has provided an opportunity to promote our intention to partner others to use data and intelligence to develop training resources that meet identified need, to support workforce planning and expand social care career opportunities and to develop digital solutions to better equip the workforce. This has included meeting with:
 - i. Various policy officials from the Scottish Government including the Office of the Chief Social Work Adviser (OCSWA)
 - ii. Coalition of Care and Support Providers in Scotland (CCPS) Members, Chief Executive and staff working on Workforce and on Commissioning.
 - iii. Scottish Care Chief Executive and staff working on Workforce and Digital.
 - iv. Colleagues from Scottish Social Services Council (SSSC), Healthcare Improvement Scotland (HIS), National Services Scotland (NSS), the Care Inspectorate and IRISS (Institute for Research and Innovation in Social Services)
 - v. the Head of Service Group of Health and Social Care Scotland.
 - vi. the Health and Social Care Alliance and National Association of Link Workers

- c. This early engagement has begun to inform consideration of possible specific areas for development. This includes some possible 'quick wins' in support of the Scottish Government's ambitions to build workforce capacity and resilience ahead of this Winter. As well as other possible initiatives that will support the workforce in preparation for the National Care Service for Scotland.

- d. Since taking up post Gordon has joined the: SNAP (Scotland's National Action Plan for Human Rights) Leadership Panel; the National Care Service Stakeholder Reference Group; the Clinical and Professional Advisory Group for

Social Care; Children and Families Collective Leadership Group; Place and Wellbeing – Communities Workstream; Discharge Without Delay National Strategic Oversight Group. He will also be chairing the selection panel that will be recruiting the first cohort of the new Developing Senior Systems Leadership Programme.

4.8 Workforce

a. Hybrid Working

NES moved formally into 'Hybrid Working' on 1 March 2022 following the decision taken by the Executive Team in 2021. Line managers are responsible for ensuring working arrangements are in the best interests of the organisation, and teams, whilst taking into account individual preferences. No material issues have been noted to date and a staff survey to obtain feedback is planned for July 2022. Staff communication continues to be a key priority. Extended Executive Team members, on rotation, continue to present a short weekly video given the strong positive feedback. Microsoft 365 Viva Insights and Yammer are replacing Trickle as staff engagement tools. The decision, taken in partnership, reflects the evolved functionality of Viva Insights and the fact that Microsoft365, used across NES, provides rich data and easy access. As new ways of working are embedded across NES, it will provide staff with the tools to self-monitor their working style and support their wellbeing.

b. Recruitment in NES

Recruitment activity is at a record high, positively reflecting the growth of opportunities for NES within the health and care sector, whilst creating some workload challenges for the Human Resources (HR) team. The non-recurrent status of funding, leading to c.20% of NES staff being on temporary employment arrangements, is directly impacting the volume of activity across all aspects of recruitment, contract extension and HR administration resulting in the need for additional HR staff. In Quarter 4, 373 business cases were submitted for changes to existing posts (mostly extensions to contract) or recruitment to new/replacement roles. This is 37% higher than in 2021. Recruitment activity across NES has, therefore, continued an upward trend with Medical and Technology Services having the highest levels of recruitment. The Executive Team has requested a review of establishment control processes as an opportunity for work reduction particularly in HR and Finance areas. Transition of NES recruitment activity into the East Region Recruitment Service is scheduled for mid-July 2022. NHS Lothian, which will host the service has been informed of the increase in NES vacancies so that this can be jointly addressed in transition planning.

c. HR is working with the Psychology Directorate on a coordinated approach to recruitment of c. 200 additional Psychology roles across the NHS in Scotland. Posts were advertised on a Once for Scotland basis in February, with over 300 applications received.

d. **Lead Employer**

Trainers in General Dental Practice have been consulted on the proposed extension of lead employer arrangements to Vocational Dental Practitioners (VDPs). Whilst some questions arose about the operational aspects of the lead employer model, consultation did not reveal major blockers, indicating majority support. Consultation feedback is being shared with Scottish Government and VDP trainers. Meanwhile, there have been positive indications in relation to the required regulatory change to enable NES to employ VDPs and work continues to ensure systems, processes and communications are in place to deliver this change from August 2022.

e. **Equality, Diversity & Inclusion**

An expanded team has been appointed over the last three months to support the activities of NES in this area, reflecting its centrality and importance to our work. Staff networks across protected characteristics are in place with membership numbers approaching 200. The networks are supported by a specialist coordinator and all networks have scheduled meetings with Terms of Reference and an intranet presence. Areas of focus continue to be NES recovery and renewal, staff wellbeing initiatives, recruitment, and learning & development programmes. The relevant Board governance committees have received the Equality & Diversity End of Year Report (2021-2022) updating on progress towards delivery of the Equality Outcomes set by NES in 2021 and noting emerging priorities for the organisation to progress and mainstream its work on equality and human rights together with policy and legislative updates.

f. Scotland National Action Plan on Human Rights (SNAP), Scotland's first national action plan on human rights, was published in 2013. It set out a roadmap towards a Scotland where everyone can live with dignity and was the first of its kind in the UK. The Scottish Human Rights Commission (SHRC) provide the secretariat to SNAP and are working with a range of representatives from civil society and the public sector to develop the next action plan. This includes establishing a leadership panel to identify the priorities for the plan. The Panel is co-chaired by a commissioner from the SHRC and the Scottish Government's Deputy Director of Human Rights. NES's Director Social Care is a member of this panel. The panel had its first meeting in March 2022 and the new action plan is due to be published in December 2022.

g. **Learning & Development**

Following the launch of the NES Learning at Work catalogue in 2021, a new programme of learning for NES was launched. New values-based recruitment, line manager and all staff induction content are in the final stages of development for launch in 2022. Arrangements are also underway for the second Learning at Work Week in May 2022, a weeklong celebration of learning across NES.

h. Completion of NES Essential Learning modules was behind target for most directorates at 31 March 2022 reflecting, in part, Covid-19 related workload pressures and priorities in 2021-22 Quarter 3/4. The Extended Executive Team has committed to improving compliance in their directorates by the end of June 2022. A further report will be presented to the August Staff Governance

Committee and will include steps being taken to review the components, processes and data relating to essential learning.

i. **NES Workforce Plan**

The Staff Governance Committee has discussed and recommended Board approval of the comprehensive 3-year Strategic Workforce Plan produced by the Workforce Directorate in collaboration with all NES directorates.

j. **Staff Governance Monitoring Report**

Following submission of the Staff Governance Monitoring Report to Scottish Government in September 2021, feedback was now been received. It was highly positive referencing, in particular, staff support and wellbeing practices within NES and noting our iMatter employee Engagement Index which, during the last 2 years, increased from 82 to 84 with staff participation also increasing from 87% to 92%.

k. **Careers / Employability**

A review of the Graduate Management Trainee Scheme is underway with the scheme paused to new recruits this year. NES has worked with NHS Scotland (NHSS) Boards and the Graduate Career Advantage Scheme (GCAS) to offer 6 month internships at Band 5 level to recent graduates adversely impacted by the pandemic. Funding is from the Young Person's Guarantee with Boards having the option to fund additional placements. NES is facilitating the scheme by directly employing the interns and implementing the necessary arrangements with placement Boards.

l. The first Virtual Learning Week for Support Workforce and Clinical Health Care Support Workers was held in February – March 2022. Delegates had the opportunity to design their own programme from a selection of 32 sessions.

m. Several careers campaigns have been delivered in collaboration with NHSS Boards and other stakeholders including Scottish Government: National Apprenticeship Week; National Healthcare Science Week; Technical Apprenticeship in Pharmacy support the intake of 100 pre-registration pharmacy technicians by August 2022; National nursing recruitment campaign; National Psychology recruitment campaign.

n. **National Leadership Development Programme**

NES is the strategic delivery partner for Scottish Government in co-designing and delivering a national leadership development programme across the health, social care and social work sectors. Working with multiple stakeholders to shape the overall programme, it's vision and evaluation framework resulting in effective leadership development offers with broad appeal has been a key activity for the past six months. Funding for an additional 15 posts has been provided to support this work. A transition plan is also in place to support the shift from the Project Lift brand to the new programme brand in June 2022. A ministerial launch of the new programme is planned for August 2022

o. Veteran Pathways

NES has secured five-year funding from Scottish Government to increase employability for military service leavers and veterans into the Health and Care system in Scotland. The aims for the programme are to: 1. Increase attraction and successful recruitment of service leavers and veterans into the Health and Care system 2. Deliver an Executive Fellowship that will successfully transition senior leaders from other sectors, to appointable Chief Executive level systems leaders 3. Deliver a portal to attract and support military leavers and veterans in their journey into and through the NHS.

p. Digital Skills & Leadership Programme

The strong performance of the Digitally Enabled Workforce (DEW) team, established in NES in mid-2021, is reflected in Scottish Governments decision to provide recurrent funding. The team is currently nine in number. The size of the total funding commitment is to be confirmed by Scottish Government based on the Digital Health & Care Delivery Plan. Progress to date includes:

- i. Digital Leadership Programme –more than doubled existing Digital Leadership Programme (to c.70 places per cohort) and extended to all health and care participants, both individuals and teams
- ii. Digital Learning Design Programme - capacity doubled from 20 to 40 learners, to support the significant translation of face-to-face learning to on-line and blended, providing increased capacity and greater flexibility for learners
- iii. launched Microsoft365 skills hub across the health sector- a SharePoint site hosted by NES to facilitate learning. Aiming to pilot care sector access via Capability Scotland
- iv. procuring a partner to conduct user research into accessibility and use of digital skills resources
- v. gained funding from Scottish Government to scope a Scotland led national Masters Level Digital Health & Care Transformational Leadership Programme for up to 60 senior level Digital Leads, across the Scottish health and care sector
- vi. testing the concept of a series of ‘Leading in a Digital Age’ masterclasses aimed at executive level staff across the health and care sector
- vii. linking with colleagues in NES responsible for leadership training (including design of the National Leadership Development Programme) to ensure plans include digital leadership
- viii. building a virtual learning academy for Knowledge, Information and Data (KIND)staff with c.100 members currently
- ix. mapping existing Digital Champion Groups across the sector including within NES to promote digital leadership and skills growth

q. Centre for Workforce Supply

The Centre for Workforce Supply (CfWS), has initially been focussed on winter system challenges, working collaboratively with NHSS Boards to support the international recruitment of nurses by providing a range of Once for Scotland resources and services. It is now seeking to extend that support to other areas of national or local shortage. NES hosts a network of NHSS Board recruitment representatives and collaborative partners from Scottish Government, NES and

NHS Scotland Academy. The scope of work to be commissioned from the CfWS, and the processes through which commissioning takes place are currently being developed with Scottish Government.

CALENDAR from 18 March – 11 May 2022

This section of the report provides an overview of the meetings I have attended since 18 March 2022. Rather than list every date individually, where possible meetings have been grouped and additional context provided.

NES [Extended] Executive Team (EET)

The EET meet twice monthly – the first meeting of each month is an EET Business Meeting where the EET discuss any priority issues and consider monthly financial, performance, workforce and risk reports. The second meeting is an opportunity to share information and discuss a particular strategic theme that has been suggested by a directorate. Since the last Board meeting the EET has held a workshop session with colleagues from the Scottish Credit and Qualifications Framework (SCQF) to learn more about potential credit-rating opportunities for NES.

NHS National Board Chief Executives

BCEs of the national Boards and Public Health Scotland meet fortnightly via Microsoft Teams.

NHS BCEs Operational Response Group (Bronze)

As of May 2022, BCE meetings to discuss operational matters that may require further escalation within Scottish Government have been stood down.

NHS BCEs + Scottish Government

NHS Board CEs meet monthly for Private, Strategy and Business meetings. All Accountable Officers also meet monthly with Caroline Lamb (Director-General of Health and Social Care and Chief Executive of NHS Scotland). From May 2022 these meetings are being held in a hybrid format.

4 Nations (NES, Health Education England, Health Education & Improvement Wales and Northern Ireland Medical & Dental Training Agency)

The Chief Executives of the 4 Nation statutory Education and Training organisations meet fortnightly to discuss and co-ordinate our ongoing response to COVID-19, with a focus on our shared responsibilities for education and training in the UK.

Meetings between 18 March – 11 May 2022

NES meetings

I continue to enjoy meeting with a range of NES staff where I can and have enjoyed a number of face to face meetings as part of visits to the NES Edinburgh office in particular. Since the last Board meeting I have met with staff to discuss Turas Care Management and have held exploratory discussions to consider the potential for NES to strengthen its research capacity. I am planning to attend NES directorate team/all-staff meetings over the coming months to update staff on the NES's future plans and the development of our strategy.

The NES Annual Virtual Conference held on Wednesday 27 & Thursday 28 April 2022 was a highly successful event with over 1900 registered attendees and 260 people presenters/session chairs. I would like to pass on my thanks and congratulations to organising committee for creating an integrated multi-professional healthcare education conference that also included sessions for specific professional groups.

NHS Scotland

I have met with a wide range of colleagues across NHS Scotland since the last Board meeting including the Chairs, Chief Executives and other senior colleagues at NHS24, Ayrshire and Arran, Golden Jubilee and the Scottish Ambulance Service. I also met with the North region Chief Executives to discuss current workforce issues and priorities and attended a meeting of the Centre for Sustainable Delivery (CfSD) Strategy Board.

External Stakeholders

I continue to meet with a wide range of key stakeholders across the health and social care sector. I have also been engaging with a number of external consultancy organisations to discuss potential performance improvement opportunities within NES. Since the last Board meeting I have met with Chief Executives and senior representatives from the Mental Welfare Commission, Digital Health & Care Innovation Centre (DHI), Convention of Scottish Local Authorities (COSLA), University of Glasgow, Care Inspectorate, Health Education and Improvement Wales (HEIW), British Medical Association, Scottish Care, General Medical Council, Azets consultancy group, Insights learning and development group and the Rubica organisational change consultancy.

On 10 May 2022, along with colleagues from Scottish Government including Caroline Lamb and Gregor Smith (Chief Medical Officer), myself and Emma Watson (Director of Medicine) attended a meeting of the GMC's UK Advisory Forum. The session focused on shared priorities around workforce retention and equality, diversity inclusion.

Scottish Government

I have met with a number of SG colleagues since the last Board meeting including Caroline Lamb (Director-General Health and Social Care / Chief Executive, NHS Scotland), Prof Alex McMahon (Chief Nursing Officer), Prof David Crossman (Chief Scientist), Donna Bell (Director of Mental Health and Social Care), Angie Wood (Professional Advisor, Social Care and National Care Service Development directorate) and Catherine McMeeken (Deputy Director, Director of Leadership, Culture and Wellbeing).

In terms of wider SG meetings, I and members of the Executive Team have met with various SG colleagues to discuss a wide range of current and emerging work areas including the establishment of the National Centre of Excellence of Remote and Rural Health and Social Care, the National Leadership Development Programme (NLDP), potential linkages between NES and the National Care Service (NCS), healthcare science, Anaesthesia Associates and the GMC Enhanced Monitoring process. I have also attended meetings of the Scottish Leaders Forum (SLF) Leadership Development Group and the Chief Executive Officers Leadership Development Group.

I have also attended meetings involving SG and other key stakeholders including a meeting of the Health, Social Care and Life Sciences in Scotland Innovation Board and a discussion with colleagues from the Scottish Mental Health Law Review in relation to a new human rights accountability framework.

David Garbutt and I met Kevin Stewart (Minister for Wellbeing and Social Care) for the NES 2020-21 Annual Review on 28 March 2022.

Board Paper

1. Title of Paper

NES Strategic Stakeholder Mapping

2. Author(s) of Paper

John MacEachen, Head of Corporate Communications

3. Situation/Purpose of paper

The attached document sets out a proposed strategic stakeholder map for the Board's review and discussion.

4. Background

4.1 The attached document (Appendix 1) is part of a wider range of work to inform and establish our future direction, including the overall five-year NES corporate Strategy and the NES stakeholder survey.

4.2 A stakeholder map is an identification and prioritisation exercise. The document lays out groups of main stakeholders, together with approximate assessments of our relationship with each of them. We have mapped their estimated level of interest in the work that we do against their power or influence over our activities.

4.3 This should help us as an organisation to prioritise how we interact with those stakeholders. It guides us on whether we should be monitoring, informing or pursuing deeper engagement with these bodies.

4.4 At this stage, this is a broad outline, which can be fleshed out as the NES future strategy develops. It will also be informed by further work with the Executive Team and using comments and findings from the stakeholder survey.

5. Assessment/Key Issues

(include identification of any strategic risks)

5.1 It is proposed to work with the Executive Team to flesh out this map. This work will be informed by both the priorities that we lay out in the NES Strategy and insights that we gain from the NES Stakeholder survey. Using that information, the subsequent step would be to map current engagement activity against the agreed priority groups.

5.2 The principal risks are around failing to identify or to engage effectively with our most important stakeholders, leading to missed opportunities etc. Conversely, there is a resource cost if we opt to significantly increase our levels of engagement: this is likely to involve the time of senior members of the NES team. We will explore both these points as part of the next steps.

6. Recommendations

The Board is invited to review and discuss the attached document.

Author to complete

a) **Have Educational implications been considered?**

- Yes
- No

b) **Is there a budget allocated for this work?**

- Yes
- No

c) **Alignment with [NES Strategy 2019-2024](#)**

- 1. A high-quality learning and employment environment
- 2. National infrastructure to improve attraction, recruitment, training and retention
- 3. Education and training for a skilled, adaptable and compassionate workforce
- 4. A national digital platform, analysis, intelligence and modelling
- 5. A high performing organisation (NES)

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

- Yes
- No

e) **Have Equality and Diversity and health inequality issues been considered?**

- Yes
- No

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

- Yes
- No

John MacEachen
NES
16 May 2022

NES Strategic Stakeholder Mapping

1. Introduction and context

This paper sets out a proposed strategic stakeholder map, for discussion. At this stage, this is a broad outline, which can be fleshed out as the NES future strategy develops. It will also be informed by further work with the Executive Team and using comments and findings from the stakeholder survey, which is expected this month.

2. Purpose

The purpose of a stakeholder map is to:

1. Identify who our key strategic stakeholders are. Here we are starting broad-brush, and will look in more detail in future exercises. Note that this assessment is an overall organisational position: if the exercise was repeated for an individual directorate, it could be expected to generate different results.
2. Make an approximate assessment of our relationship with each of them. Note here that it is an attempt to capture where we are now. It can be useful in highlighting where (and with whom) we might want things to be different.
3. Prioritise how we interact with those stakeholders. With limited resources (in terms of our collective time), which groups should we be focussing on, and how? Should we be simply keeping groups up to date with what we are doing, or should we be building a dialogue, working towards strategic partnerships with them etc.
4. Identify any gaps in our current engagement. The next step after this (see 'Future Activity' below) is to run an analysis of how we interact with the priority groups, to see what we might do differently.

3. Methodology

In this stakeholder map, we are mapping 'interest' against 'power'.

Interest is how much a group is actively engaged in learning about us. High interest means that they are seeking out information about us, or are likely to pick up our communications, sign up work our workstreams etc.

Power is a standard term for this type of map. In a public sector sense, '**influence**' is probably a better term. It is a measure of how much a given group or individual can affect our strategic direction, finances, licence to operate or our programmes. Examples here are Scottish Government (strategic direction, finances, programmes), partner bodies with whom we co-produce programmes (e.g. Golden Jubilee), regulatory authorities, or indeed NES staff (implementing our strategy)

Doing this mapping produces a matrix which is as follows:

- High power + high interest = **manage closely**. These are the groups/people we must fully engage and make the greatest efforts to satisfy.
- High power + low interest = **keep satisfied**. We need to put enough work in with these groups/people to keep them satisfied, but it they are less likely to be receptive to intensive engagement.
- Low power + high interest = **keep informed**. We need to keep these groups/people adequately informed, talk and listen to them to ensure that no major issues are arising.
- Low power + low interest = **monitor**. Monitor these groups/people, but do not overload them with excessive communication.

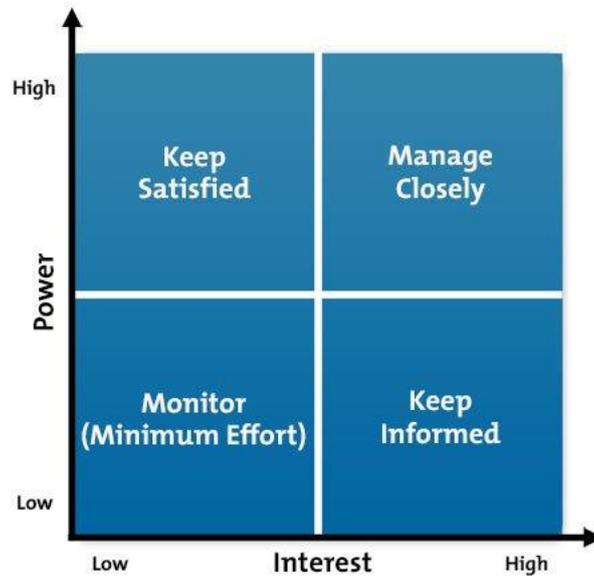
4. Identifying Stakeholders

Stakeholder group	Comments
Scottish Government	<ul style="list-style-type: none"> • Ministers • Director General Office • Director of Workforce • Office of the Chief Social Work Advisor • Sponsor teams (H&SC) • Chief Nursing, Medical , Dental, Pharmaceutical, Chief Healthcare Science & AHP Officers • Health Communications team
Partner bodies: Golden Jubilee	<ul style="list-style-type: none"> • NHS Scotland Academy governance (Board/Exec Team) • Academy project team • Staff directly involved in developing and providing Academy training courses
Partner bodies: SSSC	<ul style="list-style-type: none"> • Governance (Board/Exec Team) • Workforce team • Groups involved in co-creation of courses with NES
NHS Territorial and National Boards	<ul style="list-style-type: none"> • Chief Executives and Directors • Communication teams • Directors of Medicine, Nursing, Dentistry, Pharmacy etc in NHS Boards • Trainees (NES-employed and non-NES) • Supervisors and trainers • General staff • Clinicians • Regional Workforce planners
Staff (NHS)	<ul style="list-style-type: none"> • NHS staff, incl GPs
Staff (NES)	<ul style="list-style-type: none"> • NES staff • Partnership Forum • Staff side representatives
Health and Social Care Partnerships/ Integrated Joint Boards	<ul style="list-style-type: none"> • Chief Executives, Chief Officers and Directors • Chairs and Vice Chairs. • Health and Social Care Directors/Managers • Health and Social Care Scotland
Local Authorities, COSLA, SOLACE	<ul style="list-style-type: none"> • Chief Executives and Directors • Health and Social Care Directors/Managers

	<ul style="list-style-type: none"> • COSLA chair
Social care workforce	<ul style="list-style-type: none"> • Local authority, private, voluntary sector
Wider public sector	<ul style="list-style-type: none"> • Other bodies with whom we have or want a relationship, e.g.: CCPS, Scottish Care, Care Inspectorate, Alzheimer's Scotland, Mental Welfare Commission for Scotland, Police Scotland IRISS and Social Work Scotland, the Health and Social Care Alliance, and Coalition of Carers in Scotland
Wider public sector workforce	<ul style="list-style-type: none"> • Staff in other bodies who may benefit from our resources of programmes
UK peer bodies	<ul style="list-style-type: none"> • HEE, HSC, NIPEC (both Northern Ireland), HEIW (Wales)
Third sector	<ul style="list-style-type: none"> • Chief Executives and Directors • Managers of teams/units who might use our services
Private sector health and social care (incl housing associations)	<ul style="list-style-type: none"> • Chief Executives and Directors • Health and Social Care Directors/Managers
Private sector providers	<ul style="list-style-type: none"> • Microsoft, Amazon Web Services, Intersystems, EMIS, Vision, ATOS
Healthcare Professional bodies	<ul style="list-style-type: none"> • Royal Colleges (Medical, Dental), Royal Pharmaceutical Society, RCN, BMA, BDA, British Psych. Soc, General Optometric Council (GOC) Academy for Healthcare Science
Regulatory bodies	<ul style="list-style-type: none"> • GMC, GDC, NMC, GPhC, Care Inspectorate, MHRA, HCPC
Academia/ Educational bodies	<ul style="list-style-type: none"> • Universities • FE/HE Colleges • Scottish Funding Council • SQA • Skills Development Scotland • COPDEND (The UK Committee of Postgraduate Dental Deans and Directors) • Council of Deans for Health • College Development Network • CoPMED and GP equivalent • CoPED (UK Council of Pharmacy Education Deans) • Academy for Healthcare Science
Elected Representatives	<ul style="list-style-type: none"> • Health and Sport Committee • Opposition spokespeople • MSPs (general)
Media	<ul style="list-style-type: none"> • Specialist by profession • National
General Public	<ul style="list-style-type: none"> • Service users • Current/potential employees • NHS Careers outreach work, e.g. schools, STEM

5. Prioritisation

How do these stakeholders vary by their interest and power/influence? We give each of these a simple high/low rating for each of these, to produce a matrix as follows:



NES stakeholders by power/influence versus interest:

High Power/ influence	Health and Social Care Partnerships Healthcare Professional bodies Elected Representatives	Scottish Government Golden Jubilee SSSC National and Territorial Boards Regulatory bodies Academia/ Educational bodies Staff (NES)
Low Power/ influence	UK peer bodies Third sector Private sector health and social care Media General Public	Staff (NHS) Social care workforce Wider public sector workforce Health and Social Care Partnerships/IJBs Local Authorities, COSLA, SOLACE Wider public sector Private sector providers
	Low Interest	High Interest

Future Activity

It is proposed to work with the Executive Team to flesh out this map. This work will be informed by both the priorities that we lay out in the NES Strategy and insights that we gain from the NES Stakeholder survey.

Using that information, the subsequent step would be to map current engagement activity against the agreed priority groups, for example:

- What financial or emotional interest do they have in our strategic priorities? Is it positive or negative?
- What motivates them most of all?
- What relationship do they want with us?
- What information do they want from us?
- Within NES, how are we currently managing/informing/satisfying/monitoring these?
- How should we be doing so?

John MacEachen
Head of Communications
May 2022

Board Paper

1. Title of paper

NES Technology Service Development Roadmap – Enabling Technology Board

2. Author(s) of Paper

Christopher Wroath, Director of NES Technology Service

3. Situation/Purpose of paper

Please note that this paper is subject to governance by the Scottish Government (SG) Enabling Technology Board (ETB). It provides the proposed 2022/23 “Roadmap” for delivery by the NES Technology Service (NTS), as agreed with the SG ETB, and is presented to the NES Board for review and noting as per the action from the 24 March 2022 Board Meeting in relation to confirming 2022/23 delivery timescales. The next ETB meeting will be held on 9 June 2022.

4. Background

4.1 The NES Digital and Information Committee receive regular ETB progress updates; however, it was agreed that a paper should be brought to the May Public Board meeting to ensure that Board members have a full understanding of NES Technology Service deliverables as part of the SG Digital Health and Care Strategy.

4.2 The Board are asked to note that the 2022/23 Roadmap will be presented and discussed at the ETB meeting on 9 June 2022, with formal ratification anticipated at the following ETB meeting on 16 August.

5. Assessment/Key Issues (include identification of any strategic risks)

The risk profile for this work is embedded within the risk framework for the Digital Health and Social Care strategy. Any specific risks to NES will be captured in the Risk Register and discussed at the Digital & Information Committee. The main risk associated with the roadmap is failure to obtain appropriate and timely access to the complete Scottish GP IT data set, for which mitigating actions have commenced.

6. Recommendations

The Board is asked to review and note this paper and agree that it provides satisfactory assurance.

Author to complete

a) Have Educational implications been considered?

Yes

No

b) Is there a budget allocated for this work?

Yes

No

c) Alignment with NES Strategy 2019-2024

1. A high-quality learning and employment environment

2. National infrastructure to improve attraction, recruitment, training and retention

3. Education and training for a skilled, adaptable and compassionate workforce

4. A national digital platform, analysis, intelligence and modelling

5. A high performing organisation (NES)

d) Have key risks and mitigation measures been identified?

Yes

No

e) Have Equality and Diversity and health inequality issues been considered?

Yes

No

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

Yes

No

Christopher Wroath

NES

May 2022

NHS Scotland - The NES Technology Service Strategic Delivery Plan

Governance background:

1. The Scottish Government Digital Health & Care Strategy (DH&CS) was published in 2018 and revised in 2021. The delivery of this strategy for the Health & Social Care Management Board is devolved to the Strategic Portfolio Board (SPB). This is a joint Board chaired by SG and COSLA. In turn, the SPB has divided its responsibilities into two delivery Boards, the Enabling Technology Board (ETB) and the Digital Citizen Board (DCB). The Director of the NES Technology Service (NTS) is a member of both these Boards. They act as the co-ordinating and commissioning agents for NTS' work in delivering the technology and service change that underpins the DH&CS.
2. In October 2021 the ETB set up a short life working group chaired by the Digital Lead for NHS Lothian. It had a specific remit to consider, evaluate and then recommend to the full ETB what specific technology and services the NTS should deliver in the 2022/23 financial year in support of the DH&CS. It was asked to evaluate and prioritise the different demands from health and care on the finite resources of the NTS and agree what to recommend to ETB should be on the "roadmap".
3. In April 2022 the ETB short life working group completed its work and a set of recommendations were agreed. The ETB asked NTS to draft a proposal on what it would be delivering in the 2022/23 financial year based on the recommendations of the short life working group.

The NES Proposal to the ETB:

4. Context

The refreshed Digital Health and Care Strategy 2021 reasserts that the primary aim of the strategy is to provide to the residents of Scotland appropriate and secure access to their health and care data. This is to enable the individual to take ownership of their data to inform and support decisions about improving their health and wellbeing. The National Digital Platform (NDP) is the underpinning technology to deliver this outcome.

The strategy also commits to improving and modernising the provision of data to Scottish health and care services with the NDP identified as a significant component in achieving this aim. There are several key challenges that health and care services face; recovery of services, the need for improved resilience, ongoing demands from the pandemic, fiscal impact from rising costs and additional pressure from seasonal demands.

It is envisaged that the NDP will enable improved capability to existing and new services in direct support of health and care. The scope and impact of the capability will be determined by the capture and then repurposing to health and care services of the existing data sets that the ETB sub-group have identified as having the greatest potential to address the greatest number of use cases

quickly. These data have been identified as being those closely aligned to the “International Patient Summary” (IPS).

The provision of these data alone will not realise the needs and expectations of the services. Only by working collaboratively with territorial and national board colleagues, frontline teams and the residents of Scotland can we leverage the potential of the technology NTS deploy to underpin the transformative change needed to address at pace the most pressing challenges faced by health and social care.

5. Aim

The National Digital Platform will provide public cloud-based digital components that can be used to improve the availability and accessibility of existing health and care information and services. As we deliver the prioritised components and data sets, we will provide increasing value by making health and care data sets available in a standards-based format to appropriate collaboration partners. *This model will promote and support a significant increase in interoperability across health and care in Scotland.* We envisage this will initially be consumed by current health and care systems for use by existing providers but will be specifically aimed toward the residents of Scotland and delivered in collaboration with other national programmes, specifically the ‘Digital Front Door’ programme being developed by the Digital Citizen Board (DCB).

6. Initial Focus

The prioritised focus will be based on capturing the set of data points that support the International Patient Summary. This will be derived from existing datasets to seed the core, Clinical Data Repository (CDR) of the NDP. This will be built upon the Covid-19 (and flu) vaccination data merged with the data from Scottish GP-IT, drawing upon the Emergency Care Summary (ECS) and Key Information Summary (KIS) data.

This will create for the first time a core data repository of a resident’s health data delivered at national scale, available anywhere, in near real-time. This will be a standards-based data storage technology with retrieval and integration capability for information pertaining to:

- Immunisations (life-long record)
- Medications
- Allergies and Intolerances
- Problems & Diagnosis
- Unstructured data e.g., imagery, X-ray, Digital Imaging and Communications in Medicine (DICOM)

Capturing these data sets and linking them in this new technology environment means NTS can then provide access to the CDR to approved collaboration partners, both developers of new applications and ways to deliver the information and frontline staff consuming new data driven services.

This will significantly improve and promote availability and accessibility of health and care information between care professionals and organisations and significantly, to the individuals themselves.

Example use cases are:

- Improving Data Availability; Avoiding Data Duplication: e.g., vaccinations
 - making the existing Covid-19 vaccination data about a resident of Scotland available for consumption by other products/services such as SCI Diabetes, BadgerNet (digital maternity notes – a system giving mothers more control of their pregnancy records and care notes).
- Providing information at point of care: medications and allergies - providing information on medications and allergies at the point of care to the vaccinator/service provider improving decision making.
- Data Sharing: The International Patient Summary enables people to share their own health & care data with others they give permission to. For example, healthcare workers or others involved in care who currently do not have access. This could aid transfers between care settings e.g., in and out of care homes, having the right information available can minimise adverse events.
- Relating their story once: provides a foundation for putting health and care information into the hands of the person it relates to, giving an evidence base to their narrative removing the need to repeatedly tell their story.

7. Outcomes

The outcomes expected to be delivered in the first two quarters of 2022/23 are:

- The ability for structured health and care data to be synchronised between source systems and the National Digital Platform.
- The ability for unstructured health and care data to be uploaded to and downloaded from a secure, centralised Media Store.
- Real-time vaccinations data for people in Scotland is securely available to trusted consumers. This access model can be extended as more data sets are added to the NDP e.g., medications, allergies & intolerances, problems and diagnoses.
- A sandbox environment that can be used by potential customers to explore NDP services and by developers working on their own products that aim to leverage platform services.
- A published Service Catalogue containing information on what the National Digital Platform is and what services are available to access.
- A Workforce Identity Management service that can be used to enable secure access to products and services by people using their work login accounts.
- An Application Development Framework that can be used by trusted organisations to develop their own applications using a series of re-usable packages and libraries that drive down development time and increase consistency.

8. Considerations, Assumptions, Constraints

The following considerations, assumptions and constraints are being taken into account as they will impact the timetable of delivery of the NDP:

- Consideration must be given to the agreeing the specific data items to be collected within each data set, the scope of the data set (e.g. all population, all time).
- A framework of identifying and approving trusted consumers to be granted access to the NDP services and data via Application Programming Interfaces (API's) and other available technologies.
- It is assumed that for the immediate future the defined data sets will be consolidated from the source system(s) and *not* continually reconciled (i.e. the data will not be bi-directional). The data will be persisted within the NDP with its source and date made overtly available at the time of consumption for the consumer service to review.
- Data quality and cleansing must be governed by policy and owned and managed by the originating service.
- NES Technology Service will provide Delivery & Product management of all the agreed, technical deliverables with appropriate, formal reporting of progress, spend etc to NES and SG.
- An appropriate stakeholder group, operating with authority under the specific project governance groups, must be in place to work closely with the NES Technology Product & Delivery team to ensure all requirements for this proposal and future iterations are captured and refined.
- NES Technology Service will work with the relevant governance structures to determine and agree the specific scope of the deliverables and their delivery timelines. It should be noted that the nature of large-scale and time-sensitive, Agile programmes of work means delivery timelines can be challenging to maintain and are open to movement as the programme progresses and a more complete picture of the deliverable itself emerges.
- NES Technology Service will work with the ETB and users of the platform to identify and agree key success metrics and how they will be measured and reported.
- The service and target operating models that will underpin the NDP and its use need to be clearly defined and agreed with an enabled route to operation.
- NES Technology will actively seek opportunities with other NHS and wider public sector technology teams to collaborate on the technical delivery of components and services of the NDP.
- A stakeholder group lead(s) should be identified with responsibility for formal acceptance of each deliverable and subsequent increment of development and for final authorisation of all production releases.
- A support model for when the NDP is made more widely available in production should be agreed with stakeholders.

Delivery Timeline:

9. Delivery of this phase of the platform will take place in Quarters 1-4 of the 2022-23 Financial Year running April 2022 through to March 2023. The scope of work in quarters 3 and 4 will evolve as a rolling discovery process continues. The table below will be updated to set out the resources required, and risks associated with each deliverable.

Features to Be Delivered

Component/Service	What	Why	When
NDP Service Catalogue	<ul style="list-style-type: none"> • MVP including: <ul style="list-style-type: none"> • What is NDP • List of currently available services including: <ul style="list-style-type: none"> ○ API Catalogue ○ Workforce Identity Management Service ○ Application Development Framework ○ Multi-cloud services • Upcoming Services 	<ul style="list-style-type: none"> • Provides information on what the National Digital Platform is and the outcomes it seeks to achieve • Makes the services that will be available visible, provides an entry point to accessing them and a list of upcoming components and services. 	FY 2022-23 Q1
	<ul style="list-style-type: none"> • Service Model • Data Catalogue • Media Store 	<ul style="list-style-type: none"> • Provides an overview on the service model that should give clarity on how services are accessed, managed and supported • Introduces the media store as a service and the data catalogue can be referenced to get information about the data held in the platform 	FY 2022-23 Q2
	<ul style="list-style-type: none"> • Additional content and enhancements based on user feedback 	<ul style="list-style-type: none"> • Improves the NDP service offering and catalogue 	FY 2022-23 Q3
	<ul style="list-style-type: none"> • Additional content and enhancements based on user feedback 	<ul style="list-style-type: none"> • Improves the NDP service offering and catalogue 	FY 2022-23 Q4

Component/Service	What	Why	When
API Sandbox Environment	The following API Collections will be available on a sandbox environment for manual onboarding: <ul style="list-style-type: none"> EMPI (FHIR) Immunisation API Collection for COVID-19, Flu, Pneumococcal, Shingles, Pertussis) (FHIR) 	<ul style="list-style-type: none"> Enables developers from external organisations/technology groups to explore interaction with the API and data held in the NDP in a safe, secure and standard way to facilitate development and early integration testing. 	FY 2022-23 Q1
	<ul style="list-style-type: none"> Self-service onboarding of the API Collections Increased data sets available on the Immunisation API collection (e.g. Travel Vaccinations driven by SVIP programme) MVP Medications API Collection	<ul style="list-style-type: none"> Improves the onboarding and developer experience for consuming systems and organisations 	FY 2022-23 Q2
	<ul style="list-style-type: none"> Increased data sets available Enhancements based on user feedback 		FY 2022-23 Q3
	<ul style="list-style-type: none"> Increased data sets available Enhancements based on user feedback 		FY 2022-23 Q4
API Production Environment	The following API Collections will be available on the production environment for approved consumers via manual onboarding: <ul style="list-style-type: none"> EMPI (FHIR) Immunisation Data Set (COVID-19, Flu, Pneumococcal, Shingles, Pertussis) (FHIR) 	<ul style="list-style-type: none"> Brings tactical API solution deployed as part of COVID-19 response to a strategic footing Enables application developers, subject to governance, to build applications on top of these data sets Enables data integration between NHSS systems 	FY 2022-23 Q1
	<ul style="list-style-type: none"> Increased data sets available on the Immunisation API collection (Travel 	<ul style="list-style-type: none"> Fuller immunisation records available to consuming systems 	FY 2022-23 Q2

Component/Service	What	Why	When
	Vaccinations driven by SVIP programme)		
	<ul style="list-style-type: none"> Increased data sets available Enhancements based on user feedback 		FY 2022-23 Q3
	<ul style="list-style-type: none"> Increased data sets available Enhancements based on user feedback 		FY 2022-23 Q4
Data Integration Capability	<ul style="list-style-type: none"> GP IT <> NDP Data 	<ul style="list-style-type: none"> Enables the periodic transfer of data between GP IT and NDP 	FY 2022-23 Q1
	<ul style="list-style-type: none"> Exploration of API communication between GP IT and NDP Discovery of further data sources 	<ul style="list-style-type: none"> Enables more frequent data transfer between GP IT and NDP 	FY 2022-23 Q2
	<ul style="list-style-type: none"> Sourcing & integration of data from identified further data sources 	<ul style="list-style-type: none"> Expands the data available in NDP 	FY 2022-23 Q3
	<ul style="list-style-type: none"> Sourcing & integration of data from identified further data sources 	<ul style="list-style-type: none"> Expands the data available in NDP 	FY 2022-23 Q4
Media Store	<ul style="list-style-type: none"> Test the upload, storage and sharing of binary genomics files across labs in Scotland 	<ul style="list-style-type: none"> Low effort, high value solution that enables sharing of large DNA sequencing files between the 4 Genomics centres in NHS Scotland Enables eventual cloud processing of genomic data e.g. sequencing, interpretation and analysis Develops this NDP capability for other unstructured data workloads e.g. PACS imaging, DICOM, patient reported imagery 	FY 2022-23 Q1

Component/Service	What	Why	When
	<ul style="list-style-type: none"> Media Store API capability 	<ul style="list-style-type: none"> Unstructured data can be created, read, updated and deleted from the Media store programmatically 	FY 2022-23 Q2
	<ul style="list-style-type: none"> Media Store workloads, Authentication and Authorisation 	<ul style="list-style-type: none"> Enhance the authentication and authorisation Expands use of Media store 	FY 2022-23 Q3
	<ul style="list-style-type: none"> Media Store workloads, Authentication and Authorisation 	<ul style="list-style-type: none"> Enhance the authentication and authorisation Expands use of Media store 	FY 2022-23 Q4

10. This phase will also see the maturation and scaling of the following National Digital Platform services:

- **OpenEHR Clinical Data Repository:** Consolidating health and care information from the multiple source systems that exist across Scotland in real time into a central standards-based data store. OpenEHR is an emerging standard and less-mature technology in the healthcare systems landscape than FHIR currently is, so we are consciously decoupling the maturation of the NDP OpenEHR CDR from the delivery of the national-scale FHIR data services we are deploying in this phase, to allow the OpenEHR CDR to mature at a more appropriate pace. We have engaged with other suppliers and territories also looking to deploy this technology and are advancing it in collaboration with them.
- **Workforce Identity Management Service:** underpinned by Microsoft's Azure Active Directory, this service can be used to enable secure access to products and services by people using their work login details.
- **Audit Service** - FairWarning compatible auditing service which ensures access and modification of patient data is recorded and can be analysed for inappropriate use.
- **Application Development Framework:** libraries and code samples to "plug-in" to platform level services e.g., identity management, user interface framework, code helpers, solution architecture and cloud deployment

Risk

11. The risk profile for this work is embedded within the risk framework for the Digital Health and Care strategy, managed by the Scottish Government Digital Health and Care Directorate. Management of the risk framework is a delegated responsibility of the ETB and the DCB.
12. There is, however, a single, specific risk to NES in this proposal which is failure to obtain appropriate and timely access to the complete Scottish GP IT data set. Mitigation of this risk has commenced through engagement with the National Information Governance Group to ensure the appropriate data sharing agreements are in place, and appropriately reflect the NTS requirement to use this data set. In addition, technical discovery work has commenced between NTS and NSS Digital and Security to identify potential technical barriers to timely access to this data.

Architecture

13. Integrations

National Digital Platform currently has integrations with:

- Community Health Index (CHI) – unique patient identifier
- GP IT Systems
- DocMan via National Integration Hub
- SCISStore via National Integration Hub
- NSS Seer Data Platform
- TrakCare
- Orion Clinical Portal

A specific technology-based outcome of this phase of delivery is to enhance these existing technical integration capabilities and the developer experience of those wishing to use them, i.e., more streamlined, intuitive and easier to deploy.

14. Application Hosting

The platform is hosted in a multi-cloud configuration across Amazon Web Services and Microsoft Azure's UK data centres. Some globally redundant features are used to provide high availability and disaster recovery capability, but all health and care data is processed and stored in the United Kingdom.

15. Continuous Integration & Deployment (CICD)

All NES Technology products go through a mature continuous integration and continuous deployment process. Code is robustly version controlled and when changes pass through a quality gate it is deployed automatically to the relevant environment. In the unlikely event an error is introduced into the production environment by a release it can quickly be rolled-back to a good state.

16. Security, Resilience & Business Continuity

As part of the delivery the relevant System Security Policies will be created or updated which detail the system's security posture and the controls and processes in place to maintain it. A Disaster Recovery Plan will also be created and agreed with stakeholders in order to maintain business continuity during any adverse event.

17. Monitoring + Insights

All NES Technology products and services are monitored for performance, usage statistics, user behaviour and flow, security and to proactively identify anomalies and errors in the application, with appropriate alerting mechanism in place.

Information Governance & Security

18. The information governance and information security challenges involved in achieving the outcomes sought are complex and NTS do not underestimate these. Appropriate and focussed resources in these areas will be a core and fundamental foundation for success. Support will be sought from the full range of appropriate Scottish Government directorates, NHSS Boards and partner organisations in the care sector in ensuring that the correct agreements, processes and controls are in place to ensure the safe, legally sound and person focussed processing of an individual's data. All appropriate information governance and security documentation will be created or updated as part of the delivery including the completion of the following:

- Data Protection Impact Assessment (DPIA)
- System Security Policy (SSP)
- Any relevant Data Processing and Sharing agreements
- Internal and external security testing arrangements

Clinical Safety

19. It is imperative that the technology delivered by NTS is safe to use by health and care professionals and causes no harm to members of the public. The current Organisational Change process consolidating the NTS has a new, focussed compliance and safety group to be led by an Associate Director. They will manage the Clinical Safety team and oversee the assurance and compliance processes, specifically adherence to relevant safety and medical device regulatory standards and associated legislation.

Going into Production

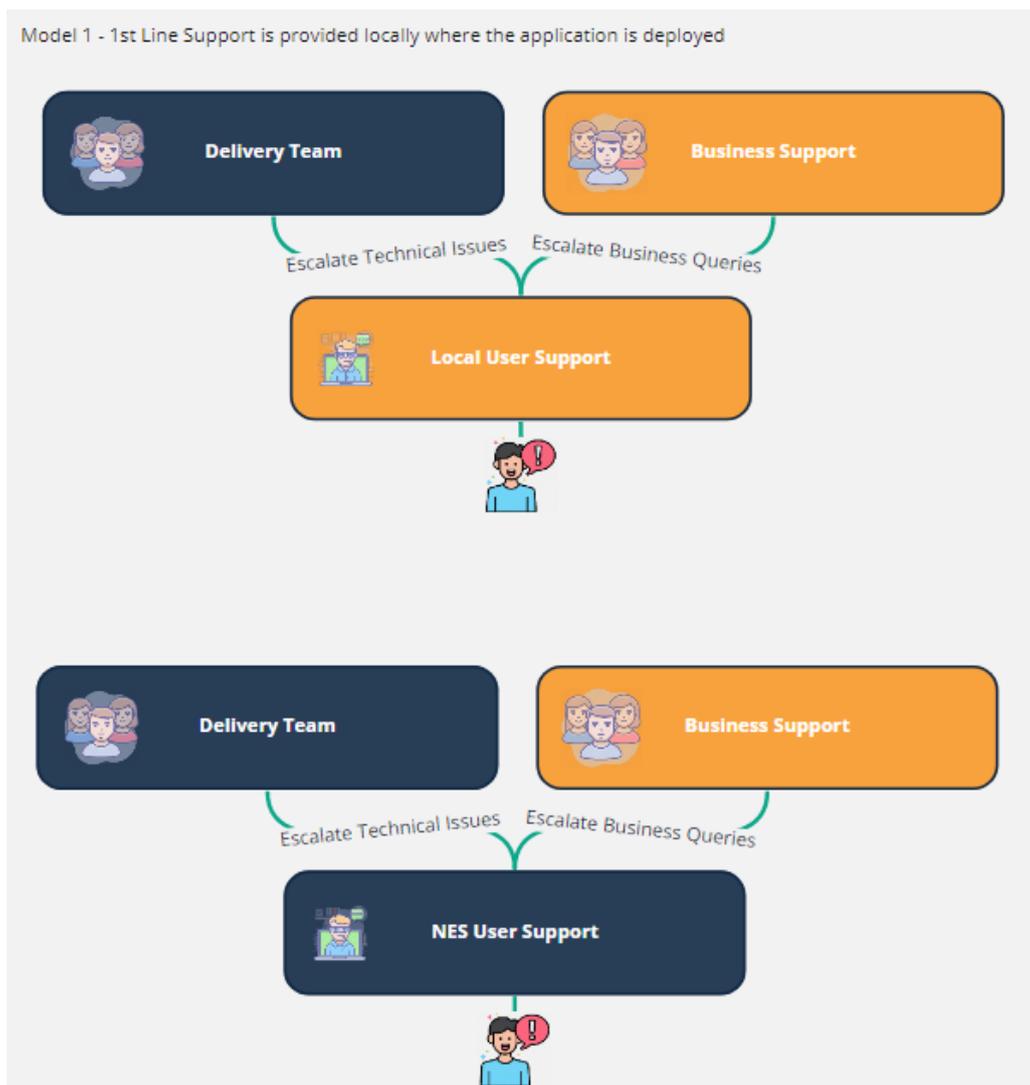
20. NES Technology will work with stakeholders to make sure robust plans are in place around:

- Communications & Marketing
- User onboarding
- Data migration considerations
- A production checklist including go/no-go authorisation

Support

21. User Support Model

This will vary depending on the requirements but usually falls into the two models identified in diagram below. In the first, the customer (service consuming organisation) provides the 1st line support and in the second, the NES Technology Service provides the agreed 1st line support. The model to be adopted will be agreed in advance of production go live with the customer bodies involved.



22. Service Management

Full and robust service management arrangements and plans will be developed and implemented as part of this delivery adhering to industry best practices and standards.

Finances

23. NES Technology Service Finances 2022-23

The current available budget for all NTS deliverables planned for this financial year is comprised of:

- Baseline funding for the Digital part of NTS (£11.5m)
- Additional NES and SG funding for the Digital part of NTS (£5.3m confirmed)
- SG funding from different Directorates for the NDS part of NTS (£5.0m confirmed)

On top of this are as yet unconfirmed bids for funding to NES and to SG, currently totalling £4.8m.

Discovery work is ongoing to finalise resourcing for the Enabling Technology Roadmap deliverables for Quarters 1 & 2, although it is anticipated that the defined components and services can be delivered with current available resources. An agile approach will follow to establish the detailed deliverables for Quarters 3 & 4, alongside the associated costs.

Board Paper

1. Title of Paper

Corporate Governance Strategic Developments - Update

2. Author(s) of Paper

Jim Boyle, Executive Director of Finance
Della Thomas, Board Secretary & Principal Lead, Corporate Governance

3. Situation/Purpose of paper

- 3.1 There are a number of corporate governance developments in train in NES currently. This paper aims to provide some background to achievements to date, and an update on the further developments required and in progress. It also brings the current NES Board Assurance Framework for review.
- 3.2 This has been considered by the Audit and Risk Committee (ARC) at the meeting held 28 April 2022 and is now scheduled to full Board for review and discussion.

4. Background

- 4.1 NES has taken forward some robust Board governance developments over the past 18 months. These have included:
- Adoption of the NHS Model Standing Orders DL (2019)24 approved by the Board on 30 July 2020, and the development of comprehensive Terms of Reference (ToRs) and linked Schedules of Business for all Standing Committees. The Board and Committee governance documents are now revised and approved as whole package on an annual basis by the ARC and then the Board. Considerable developmental work was completed in relation to the revision of the Board Standing Financial Instructions (SFIs) during 2021/22. Aspects that require some future work, are the Board Code of Conduct, for the adoption of the new once for NHS Scotland Model Code coming through 26 May 2022 Board for and adoption; the further development of Board Scheme of Delegation to align with the financial delegations linked with the SFIs and the adoption of self-assessment documentation for all Committees by the end of 2022/23 period.
 - Clarification of non-executive champion roles; Committee executive lead roles and governance terminology, with clarification of Committee Chair roles as a planned piece of work.

- Timed agendas; Chair’s briefings; pre and post Board and Committee meetings for Chairs and executive leads; adoption of the SBAR (Situation, Background, Assessment, Recommendations) approach to Board and Committee papers, with further light touch work planned to adopt the relevant aspects of the Meeting Paper Template and Guidance - DL (2021)31.
- Contribution to the developmental governance structures and frameworks for the NHS Scotland Academy.
- Comprehensive COVID-19 governance.

4.2 During this period there has been a recognition, by the Board, that further corporate governance developments are required. These include the:

- development of a new NES Strategy.
- setting of risk appetite and the identification of strategic risks involving the Board.
- ambition to set out and agree strategic financial principles.
- improved understanding of existing and new stakeholder opinion and opportunities for strategic collaboration.
- need to complete the “Active Governance” developmental session as a Board, as per the requirement of the NHS Scotland Blueprint for Good Governance DL (2019) 02.
- requirement to simplify, integrate and streamline the Board Assurance Framework linked to strategic risk. Then in turn develop the Assurance Frameworks for the Committees connecting with their delegated remits and responsibilities.
- move away from reporting against high numbers of targets and a move towards outcome focused planning, a small number of strategic key performance indicators, results and impact reporting.
- ambition to prepare integrated plans and provide strategic annual and quarterly outcome focused reports based on strategic key performance indicators for workforce, finance, operational delivery and risk.

4.3 This paper moves on to update the Board on the progress made towards the aspects listed in paragraph 4.2.

5. Assessment/Key Issues

(include identification of any strategic risks)

5.1 There is a risk that if the developments are not progressed and reviewed as a corporate governance whole, the Board cannot robustly govern. The strategic overview of the corporate governance developments enhances governance line of sight. The integrated approach aims to enable the high-level priority areas of the NES business to be reported to the Board and the Board Standing Committees in a simplified and streamlined fashion within the context of the new strategic context and the agreed risk appetite.

5.2 **New NES Strategy**

Recognising the new and changing policy environments in which NES will be operating, EET considered the emerging environment at a workshop held on 11 October 2021. The Board discussed the vision and new strategic context for the organisation at the 15 November 2021 Visioning Session. The output of this session was circulated to the Board via correspondence in January 2022 and a paper setting out the plan and timeline for the work was considered at the 10 February 2022 Board. This paper set out the stages at which the Board would be consulted in terms of the various drafts.

- 5.3 The EET progressed work on the development of the Strategy during meetings held on 8 April 2022 and 16 May 2022. The 25 August 2022 Board Development session will be an opportunity to seek Board members views and strategic direction on the draft Strategy. The final version is scheduled for the 24 November 2022 Board meeting for approval.

5.4 **Risk Appetite and Strategic Risks**

The work of the Risk Management Group, established to progress and improve the approach to risk management in NES, has been reported to the ARC and the Board. Both the ARC and the Board have been keen to see more of a strategic approach to the identification and reporting of risk, a reduction in duplication and a consistency in report formatting across the Board and the Committees. An external consultancy has been engaged to review our approach to risk and make recommendations for how strategic risks can be identified and improvements made to the way risk is reported and streamlined to give the Board greater assurance. This first stage of work has been completed by the end of April and in turn it is anticipated that this will link to future work to develop a new streamlined integrated Board Assurance Framework.

- 5.5 The Active Governance Board Development Session scheduled for 30 June 2022 will be an opportunity for the Board to review the findings of this work and discuss the next stages. The 25 August Board Development Meeting will include a discussion on risk appetite and the identification of strategic risk.

5.6 **Strategic Financial Principles**

The Standing Financial Instructions (SFIs) detail the approach to financial management in NES and the budget setting exercise at the beginning of each new financial year sets out the way in which the budget will be utilised for operational delivery. However, it has been recognised that NES does not have agreed strategic financial principles that overarch both of these documents. The strategic financial principles were discussed at the 28 April 2022 ARC meeting and amendments made and are scheduled for 26 May 2022 Board meeting for approval.

5.7 **Stakeholder Opinion and Strategic Engagement**

As the strategic context of the Board changes and develops, so does the stakeholder audience. The Board have recognised the need to better understand who our key stakeholders are and listen to their opinion in order to develop fruitful collaborative working relationships. A paper on Stakeholder Mapping and an item on emerging key messages from the stakeholder survey are scheduled for the 26 May 2022 Board meeting.

5.8 **Active Governance Developmental Session**

An Active Governance (good governance) session is being offered to all NHS Boards. The session will enable the Board to consider the way data is presented to assist governance decision making and how the triangulation of data and other forms of information and intelligence contributes to effective governance and scrutiny. Ultimately it will explore how the Board Assurance Framework can be developed to overarch active governance in the Board. The NES Board Active Governance session has been scheduled for 30 June 2022 and will include discussion on the findings from the external consultancy work on risk.

5.9 **Board Assurance Framework**

The Board Assurance Framework is included as Appendix 1 of this paper. This was last reviewed by the ARC at the 7 October 2021 meeting. Since that meeting no changes have been made.

5.10 The current NES Board Assurance Framework embraces the [Audit and Assurance Committee Handbook](#) (2018) recommendations and sets out the NES assurances using the three lines of defence approach. However, to develop this as an *integrated strategic assurance framework* it is proposed that it needs to be streamlined and simplified and connected to strategic risk. It also needs to align with new and emerging work from the NHS Corporate Governance Blueprint Group in relation to “Active Governance”. The aim would be to assist the Board triangulate strategic assurance information and improve scrutiny of strategic risk and strategic performance.

5.11 **Strategic Key Performance Indicators, Outcomes Planning, Results and Impact Reporting**

Aligned to the new strategic context and strategic themes, strategic key performance indicators are required. A move towards outcomes planning and reporting on results and impact is required. Consultancy support has been commissioned to pilot methodology based on the “Stacey Barr” results and impact approach that will enable NES to translate strategy into clear results and identify measures that evidence success. Two workshops have been delivered to EET and the methodology is being tested in the area of workforce health and wellbeing. The consultancy work completed on 31 March and has delivered training, mentoring and coaching to the pilot team and training to the EET.

5.12 The next steps are to align the development of a small number of strategic key performance indicators with the strategic themes of the new Strategy.

5.13 Integrated planning and reporting for finance, workforce, operational delivery and risk

There remains a longer-term ambition to provide quarterly performance reports to the Board will include workforce, finance, operational delivery and risk as a package. This will support NES to evolve its operating model to deliver on its Strategic objectives.

5.14 Conclusion

It is anticipated that when complete, the above-mentioned corporate governance developments will assist the NES Board to demonstrate our contribution towards improving the lives of the people in Scotland, robustly prioritising the allocation of workforce resources and budget for effective operational delivery whilst effectively identifying and mitigating strategic risks.

6. Recommendations

The Board is invited to review the corporate governance development activity and the current Board Assurance Framework (Appendix 1) noting the ambition to streamline the Board Assurance Framework and connect with the identified strategic risks in due course.

Author to complete

a) Have Educational implications been considered?

- Yes
 No

b) Is there a budget allocated for this work?

- Yes
 No

c) Alignment with [NES Strategy 2019-2024](#)

1. A high-quality learning and employment environment
 2. National infrastructure to improve attraction, recruitment, training and retention
 3. Education and training for a skilled, adaptable and compassionate workforce
 4. A national digital platform, analysis, intelligence and modelling
 5. A high performing organisation (NES)

d) Have key risks and mitigation measures been identified?

- Yes
 No

e) Have Equality and Diversity and health inequality issues been considered?

Yes

No

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

Yes

No

Jim Boyle, Executive Director of Finance
Della Thomas, Board Secretary
May 2022



NHS Education for Scotland

Assurance Framework

September 2021

Document information

Consultation		Executive Team NES Board Audit Committee
Scope of Document		The sources of assurance used by the NES Board to obtain assurance on the delivery of the organisation's strategic, operational and financial plans
Objective		To enable the NES Executive Team and Board to assess the level of assurance provided in all corporate functions.
Linked Documentation		-
Document Sponsor	Name	Janice Sinclair
	Job Title	Interim Director of Finance
	Division	Finance and Procurement
Approved by/ & Date		
Author	Name	Rob Coward
	Job Title	Principal Educator

Amendment History

Date	Issue	Details of Change
11/09/19	2	New introductory text to explain the origins and purposes of the Assurance Framework
11/09/19	2	New content under Staff Governance on Whistleblowing
11/09/19	2	New content under several functional areas to reflect the distributed nature of risk management
04/10/19	2	Change Management – New text to indicate that Change Management Board Minutes are presented at Staff Governance Committee
14/02/20	3	Quality Management - New reference to sharing examples of good practice.
14/02/20	3	New information regarding directorate reporting on Equality & Diversity performance targets in Performance Management
14/02/20	3	Links to current Committee remits in introductory section

22/04/20	3	New source of assurance on Covid-19 risks in Risk Management
03/06/20	4	New source of assurance on Covid-19 related mobilisation plans in Change management
03/06/20	4	Amendment of text in Information Management to clarify sources of assurance for Cyber Security
03/06/20	4	Text change to reflect implementation of Disaster Recovery and Incident Management Plan.
27/10/20	5	New column to indicate committee/board responsible for obtaining and improving assurance.
27/10/20	5	Deletion of links to standing committee remits pending review
23/12/20	6	Inclusion of additional sources of assurance on Information Management relating to the Network and Information Systems (NIS) directive and regulations, 2018 and associated documentation, and review of a compliance framework checklist by the Digital Executive Group
23/12/20	6	Additional sources of assurance on Whistleblowing under Staff Governance.
19/01/21	6	Cross check with Committee ToRs
21/01/21	7	Addition of assurance information relating to Information Management and references to Digital & Information Committee remit

Introduction

The Scottish Government's Blueprint for Good Governance¹ set out the requirement for Health Boards to commission information systems to assist them in obtaining assurance on the delivery of the organisation's strategic, operational and financial plans. The Blueprint - a response to reviews of governance processes and practice in NHS Tayside and NHS Highland – indicated that assurance systems should provide frequent and informative performance and financial reports to assure the Board that it is delivering safe, accessible, quality, affordable and sustainable services.

The Blueprint reinforces the Scottish Government's requirements published in the revised Audit and Assurance Committee Handbook (April 2018) for health boards to develop an Assurance Framework. The purpose of the new Framework is to enable the Audit Committee and the Board to understand the levels and sources of assurance it receives in relation to work, systems and processes. This will enable identification of areas where current levels of assurance are considered excessive or where further assurance mechanisms need to be identified and implemented.

The Audit and Assurance Handbook specifies the following corporate functions where the Board will require assurance regarding management, quality and performance:

- **Performance in delivering Strategic Plans** – setting the organisation's strategic direction and monitoring and managing performance against related objectives.
- **Quality Management** – monitoring quality, making improvements and rectifying quality deficits
- **Financial Management** –the organisation's financial resources are managed effectively
- **Human Resources Management** – NES employees are recruited, developed and managed fairly and effectively
- **Change Management** – organisational and service change is efficient and effective
- **Risk Management** – NES's processes and practices for identifying and managing operational, strategic and other risks are effective.
- **Information Management** – the policies, processes and for collecting, holding, using and sharing information safely and effectively.

¹ Scottish Government, [Blueprint for Good Governance](#), January 2019

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance)	Responsible Committee/ Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
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<p>Performance in delivering Strategic Plans</p> <p>(Making sure that our plans deliver against our strategy and that we deliver against our plans)</p>	<p>Development of the NES Strategy in consultation with internal and external stakeholders</p> <p>Operational Planning processes – ensuring strategic alignment</p>	<p>Board workshop and sign-off of consultation draft and final NES Strategy</p> <p>Annual Operational Plan, includes plans to progress delivery of key strategic outcomes.</p>	<p>Consultation feedback on NES Strategy and Scottish Government feedback</p> <p>Internal Audit Reports on Performance Management, and Staff Governance</p>	<p>NES Board (Director of Planning) Quinquennial process</p> <p>NES Board (Director of Planning)</p> <p>Audit & Risk ToR 9.1.5 (Director of Finance) Annual</p>	<p>Managing the process to develop the Strategic Plan and Financial Plan for approval by the Board.</p> <p>Ensuring systems and processes at a local directorate level support high performance.</p> <p>Executive Team oversight of performance indicators, financial indicators and staffing indicators.</p>	<p>Setting the Direction (Approval of Strategic Plan and Financial Plan)</p> <p>Holding to Account (Receiving quarterly performance reports and challenging areas of poor performance)</p> <p>Assessing Risk (Achieving balance between ambition and realistic assessment of what is</p>
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What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance)	Responsible Committee/ Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
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Performance in delivering Strategic Plans (continued)	Corporate Performance Management Dashboard and quality control process	Performance Reports with detail of actual performance against targets.	External Audit review of Performance in Annual Report and Accounts	NES Board (Director of Planning) Quarterly		achievable given resources, environment etc (Board, standing committees))
	Financial Plan aligns with Operational plan	Strategic Outcomes progress report to Board	-	NES Board (Director of Planning) Annual		Engaging Stakeholders (obtaining assurance that stakeholders have been involved in the setting of Strategy and in understanding annual operational plans).
	All staff have objectives that relate to delivery of key targets	Reports to Staff Governance Committee on personal objectives and Staff Governance Standard	Scottish Governance monitoring of Staff Governance Standard	Staff Governance ToR 9.1 & 9.1.1 & 9.1.4 (Director of Workforce) Annual		

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance)	Responsible Committee/ Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
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Performance in delivering Strategic Plans (continued)	Performance against targets considered at Directorate meetings – measures taken to remedy areas of poor performance	-	-	(All NES Directors) Quarterly	Executive Team has oversight of progress against equality and diversity targets.	Influencing Culture (oversight of Staff Governance indicators)
	Staff management – ensuring staff are managed in accordance with the Staff Governance Standard and NES policies to be high performing.	Performance reports	-	Staff Governance ToR 9.1.3 & 9.1.4 (Director of Workforce) Biannual		
	Equality and diversity targets developed annually in operational planning	Directorate updates on prioritised E&D targets	-	Education & Quality ToR 9.6 Staff Gov. ToR 9.2.4 (Equality Advisor) Biannual		

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance)	Responsible Committee/ Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
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	<p>Feedback, complaints handling and participation processes implemented by directorates and corporate Complaints Handling team</p> <p>Engagement with stakeholders</p>	<p>Feedback, Comments, Concerns and Complaints (FCCC) report</p> <p>Stakeholder Map and Communication Strategy</p>	<p>Scottish Government and Scottish Public Services Ombudsman reviews FCCC report and provides feedback</p> <p>-</p>	<p>NES Board</p> <p>Education & Quality ToR 9.9 & 9.10 (Director of Planning) Annual</p> <p>NES Board (Head of Comms) As required</p>		
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What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance)	Responsible Committee/ Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
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Quality Management (Making sure that what we deliver – in all areas, is of a high quality, and fit for purpose)	Local processes in place to ensure quality and ‘fitness for purpose’ of educational programmes, resources.	Education & Quality processes including Directorate Review and Thematic Review	Internal Audit reviews. Formal Review by the GMC (every 5 years) of Medical Education in Scotland.	Education & Quality ToR 9.10 (Directors of education directorates) Thematic and Directorate Reviews biannual	Managing local operational processes to assure, control and improve quality. Ensuring appropriate stakeholder engagement in development of new products/review of existing programmes. Executive Team oversight of draft Educational Governance processes	Setting the Direction (approval of the Educational Governance Framework) Holding to account (reviewing educational governance reports, Annual FCCC report, Equalities Outcomes progress reports)
	Sharing of practice through the Educational Leadership Group and Thematic Review	EQC review of Thematic Review reports	-	Education & Quality ToR 9.4 (Education & Quality Exec Lead)		
	Feedback collected from service users and stakeholder organisations and reviewed to identify quality issues	Feedback, Comments, Concerns and Complaints (FCCC) Report	-	Education & Quality ToR 9.4 (Director of Planning) Annual		

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance)	Responsible Committee/ Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
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Quality management (continued)	Complaints management process (including follow-up on complaints related recommendations) and annual review	Review of local quality management outcomes, including those from trainee surveys.	Scottish Government review of Feedback, Comments, Concerns and Complaints report	Education & Quality ToR 9.12 (Director of Planning) Annual	Executive Team approval of complaints handling processes	Assessing Risk (Identifying risks to receiving assurance related to performance and quality including compliance with statutory and policy duties (Board, standing committees)) Engaging Stakeholders (oversight of appropriate stakeholder/lay involvement in educational and digital developments)
	Annual review of standing committee business to check performance against approved remits	Annual review of Board committee reports confirming adherence to approved remits	-	Audit & Risk ToR 9.1.6 & 9.1.7 (Executive Leads) Annual		
	Development of standing committee annual workplans	Standing committee annual workplans approved	-	Audit & Risk ToR 9.1.6 & 9.1.7 9.1.8 (Executive Leads) Annual		

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance)	Responsible Committee/ Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
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Quality management (continued)	<p>Compliance with equality related statutory duties</p> <p>Application of local quality management processes to digital developments</p>	<p>Approval and monitoring of: Equality Outcomes and Mainstreaming Priorities Equality Impact Assessments Fairer Scotland Duties</p> <p>-</p>	<p>Review of Equality Outcomes and associated reports by Equality & Human Rights Commission</p> <p>-</p>	<p>Education & Quality ToR 9.5</p> <p>Staff Governance ToR 9.2.4 (Equality Adviser) Biannual</p> <p>Education & Quality ToR 19.6 (Directors of education directorates) As required</p>	<p>Executive Team oversight of draft Equality Outcomes, Mainstreaming Priorities and FCCC reports</p>	<p>Influencing Culture (advocating for proper oversight of learning environment at all NHS Boards)</p>
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	Application of local research governance process aligned with NES Research Framework	Approval of NES Research Governance Framework (aligned with UK Research Standards) and Research Governance annual report	Internal audit of research governance	Education & Quality ToR 9.7 (Research Governance Lead) As required Annual		
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<p>Financial Management</p> <p>(Making sure that our resources are properly applied to deliver our Strategic Plans and that we do not breach our financial limits)</p>	<p>Budget setting process aligned to Operational Planning which aligns to Strategic Plan</p> <p>Operational level challenge to budget setting process</p> <p>Regular and accurate reporting of actual against budget and forecast</p>	<p>Full details of process of developing an annual budget</p> <p>Regular Financial reporting</p>	<p>Internal Audit (e.g. Budget Management, Fraud prevention, Procurement)</p> <p>External Audit of Annual Accounts</p> <p>Scottish Government scrutiny of Financial Reporting submissions</p>	<p>Audit and Risk ToR 9.2, 9.3, 9.4 NES Board (Director of Finance) Annual</p> <p>(Director of Finance) Annual</p> <p>Audit and Risk /NES Board (Director of Finance) Quarterly</p>	<p>Detailed controls on expenditure at a Directorate level.</p> <p>Adherence to delegated authorities</p> <p>Regular review of Finance monitoring reports</p>	<p>Ensures effective financial stewardship through considering value for money, financial control and financial planning and strategy through the following:</p> <p>Setting the Direction (Approval of Strategic Plan and Financial Plan)</p>
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What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance)	Responsible Committee/ Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
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Financial Management (continued)	Production of Annual Accounts and sign-off by Accountable officer	Review of annual accounts	Auditor General for Scotland and the Scottish Government Health and Social Care Directorate review and provide feedback on Annual Accounts	Audit & Risk ToR 9.3.4 – 9.3.9 (Director of Finance) Annual		Holding to Account (Receiving monthly Finance Report)
	Annual Best Value review	Directors' assurance provided to the CEO to support signing of the Governance Statement.	Internal Audit Review as part of Controls Framework review.	A&R ToR 9.4 (Director of Finance) Ongoing		Assessing Risk (Understanding key areas of budget risk)
	Regular review of in-year financial performance at Directorate level					Engaging Stakeholders (Ensuring that stakeholders understand the budget)
	Development and adherence to Standing Financial Instructions setting out limits of financial delegation					Influencing Culture (Setting a strong tone in relation to the proper use of public money)

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance)	Responsible Committee/ Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
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Financial Management (continued)	Development and implementation of procurement controls	Monitoring of Procurement including performance of the compliance with Procurement Duty (through Procurement Annual Report)	Internal Audit Review as part of Controls Framework review.	A&R ToR 9.6 (Director of Finance) Annual		
	Development and implementation of financial controls and reconciliations		Internal Audit Review as part of Controls Framework review.	Audit & Risk ToR Controls 9.2 9.2.2 & 9.2.4 (Director of Finance) Ongoing		
	Savings plans and measurement of delivery					
	Management and reporting of finance risks	Review of Corporate and local risk registers	Internal Audit	Board/ Audit & Risk ToR does not detail A&R role with financial risks (DoF) All meetings		

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance)	Responsible Committee/ Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
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<p>Human Resource Management</p> <p>(Making sure that NES recruits, develops, manages and retains its staff fairly, efficiently and effectively)</p>	<p>People and OD Strategy including Key Performance Indicators (including relevant workforce metrics)</p> <p>Reports on Staff Governance Standard</p>	<p>Approval of People and OD Strategy (including KPIs)</p> <p>Review of progress against agreed KPIs (through quarterly review of metrics and dashboard with KPIs) and reports on Staff Governance Standard</p>	<p>Internal audit</p> <p>External audit</p> <p>Scottish Government reviews Staff Governance Monitoring data and provides feedback</p>	<p>Staff Governance ToR – role re. risk 9.2.3 (Director of Workforce) Triennial</p> <p>Staff Governance ToR does not appear to include specifics on progress reports re KPIs (Director of Workforce) Quarterly</p>	<p>ET ensures alignment of human resources with strategic priorities and operational needs</p> <p>ET reviews performance against People and OD Strategy KPIs</p> <p>ET reviews reports on Staff Governance Standard</p> <p>ET reviews iMatter reports and initiates change where required</p>	<p>Setting the Direction (Approving the People and OD Strategy and Workforce Plan)</p> <p>Holding to account (Reviewing reports on Staff Governance, the Workforce Plan, iMatter, performance against KPIs)</p> <p>Assessing Risk (Identifying key risks relating to Human Resource Management and ensuring</p>
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Human Resource Management (continued)	Use of feedback on staff satisfaction and team working through iMatter to identify issues and affect improvements	Review of NES and national iMatter reports	Publication of iMatter comparative data by Scottish Government and thematic review	Staff Governance ToR does not explicitly cover staff related feedback and conclusions e.g. iMatter Staff Governance Committee (Director of Workforce) Annual	ET considers Establishment Control recommendations at each meeting	these are managed effectively
	Monitoring quality of staff performance objectives and personal development plans to ensure alignment with directorate and NES objectives	Report on outcomes from quality assurance of performance objectives and PDPs	Internal audit	Staff Governance ToR 9.2.4 (Director of Workforce) Annual	Equalities performance data reviewed by SMLT	Engaging stakeholders (Ensuring that People, OD and policy application is developed in partnership) Influencing Culture and standards of people management across the organisation (SGC)

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance)	Responsible Committee/ Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
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Human Resource Management (continued)	Compliance with the specific statutory duties under Equality and Fairer Scotland legislation	Approval of Equality Outcomes and Mainstreaming Priorities and monitors progress reports Monitor compliance and improvement in relation to specific equality duties through review of Equal Pay statement and workforce equality data (presented in Workforce Plan) and Fairer Scotland related reports.	Equality and Human Rights Commission scrutiny Scottish Government reviews Workforce Plan	Board Staff Governance ToR 9.1.7 (Director of Workforce) Quadrennial Staff Governance Committee (Director of Workforce) Quadrennial		
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What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance)	Responsible Committee/ Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
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Human Resource Management (continued)	Ensure fair remuneration of senior staff	Remuneration Committee considers pay levels and performance of senior staff.	National Performance Evaluation Committee reviews performance ratings and provides feedback.	Remuneration ToR 9.1 (Director of Workforce) Annual	[Assurance arrangements in development]	Holding to account for whistleblowing policies and practice.
	Ensure fair access to development opportunities and training progression for staff and employed trainees through 'Differential Attainment' actions	Considers reports on Differential Attainment initiatives and information.	-	Education & Quality ToR 9.12 (Directors of education directorates) As required		
						Influencing the culture to encourage staff and others to report public interest concerns

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	<p>Whistleblowing Policy and processes to encourage staff and others to raise public interest concerns and ensure these are investigated and reported effectively</p> <p>Maintenance of risk registers relating to human resources</p>	<p>Quarterly updates on the whistleblowing portfolio provided to Staff Governance Committee</p> <p>Annual report on handling of whistleblowing concerns</p> <p>Non-Executive Whistleblowing Champion appointed</p> <p>Review of corporate and directorate risk registers relating to NES workforce</p>	<p>Independent external review of Whistleblowing concerns referred to the Independent National Whistleblowing Officer.</p> <p>Internal audit</p>	<p>Staff Governance Whistleblowing ToR 9.2.1 (Director of Planning) Quarterly</p> <p>Staff Governance Risk ToR 9.2.3 Board (Director of Workforce) Quarterly</p>		
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Change Management (Making sure that NES manages significant service change and any consequential organisational change)	Business cases and plans for service re-design and change (including explicit information on impact and efficiency and Stakeholder Engagement Plan)	Plans for service re-design and progress reports Organisational Change Policy and Procedures approved	Internal audit External audit -	Staff Governance ToR does not include a specific role for SGC in relation to organisational change (Director of Workforce) Locus and frequency of reporting to be established	ET reviews and authorises business cases and plans for service re-design and change Change Management Programme Board authorises and monitors organisational change processes	Setting the direction (Approving the Organisational Change Policy) Holding to account Assessing risk Engaging stakeholders (Ensuring NES follows consultation and engagement processes (Board)) Influencing culture (Ensuring NES is focused on improvement in
	Organisational Change Policy and Procedures Change Management Programme Board authorises and monitors organisational change processes	Change Programme risk register reviewed Minutes of Change Management Programme Board meetings	-			
Change Management (continued)						

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	<p>Organisational Perf. Imp. Programme processes</p> <p>Covid-19 Recovery Plan articulates strategic and operational responses to Covid-19 pandemic</p> <p>Decision Log from Executive team daily meetings</p>	<p>Quarterly report from the OPIP team.</p> <p>Covid-19 Response subject to scrutiny by NES Board</p>	<p>Covid-19 Mobilisation Plan submitted to Scottish Government</p>	<p>Staff Governance ToR does not include a specific role for SGC in relation to organisational change (Director of Workforce)</p> <p>Board (Director of Planning) Approx. Biannual</p> <p>Board Board Secretary Board meetings</p>		<p>all aspects of its work</p>
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What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance)	Responsible Committee/ Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
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Risk Management (Making sure that NES identifies and manages key risks to its services, stakeholders and the organisation)	ET review of NES Risk Strategy and Risk Management Framework.	Review and approval of Risk Strategy and Management Framework	Internal audit reviews External audit	Audit & Risk (ToR 9.2) (Director of Finance) As required	ET reviews reports on risk registers ET advises on Risk Strategy and Risk Management Framework	Setting the Direction (Approving the Risk Strategy and Management Framework, determining NES's risk appetite)
	Development and local review of corporate and directorate risk registers.	Annual review of risk appetite	Internal audit	Board (Director of Finance) Annual		Holding to account (Reviewing corporate and directorate risk registers to check key risks are identified and managed effectively)
	Recording and monitoring of directorate and project risks using Risk Management System (MiTracker).	Regular review of the Corporate Risk Register	Internal audit	Board (Director of Finance) All Board meetings		
		Review of the most significant (Primary rated) Directorate risks	Internal audit	All standing committees (A&R Committee ToR does not mention specific role in		Assessing risk (Identifying key risks to NES business)

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Risk Management (continued)	Quarterly Risk Register Review Process in directorates.	Reports on Standing Committees' review, handling and identification of risks		monitoring financial risks) (Executive Lead Officers) Quarterly		
	Reports to Exec Team on directorate risk registers	Review of Audit Scotland reports		(Director of Finance) Quarterly		
	Cross-directorate Covid-19 risk register	Review of Covid-19 risk register		Audit & Risk (ToR does not mention this responsibility) NES Board (Director of Finance) All Board meetings		

What are we seeking assurance on?	First line (from front line operational areas)	Second line (oversight, effective management information)	Third line (independent and more objective assurance)	Responsible Committee/ Officer/ Frequency of reporting	Executive Assurance Role	Board Governance Assurance Role
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<p>Information Management</p> <p>(Making sure that NES only collects the data it needs, the data is kept securely and is only accessed by the correct people)</p>	<p>Development and implementation of Information Management Strategy</p> <p>Policies, plans and processes for information governance, cyber security, records management, Freedom of Information and intellectual property.</p>	<p>Review of Caldicott Guardian annual report</p> <p>Annual Information Governance & Security report reviewed</p>	<p>Internal audit</p> <p>External audit</p> <p>The Digital Health & Care Strategic Portfolio Board reviews and provides feedback on regular reports from the NES Digital Service</p>	<p>Board (Director of Digital) Annual</p> <p>Digital and Information Committee (ToR 9.4) (Director of Digital) Annual</p>	<p>Executive Team approves organisational policies, plans and processes for information management.</p> <p>Executive Team monitors Information Management through reports in areas such as Freedom of Information and data protection.</p>	<p>Setting the direction (Approve strategy)</p> <p>Holding to account (Review and challenge progress reports from Digital. Review Data incident reports)</p> <p>Assessing risk (Understand the kind of information risks NES could be exposed to and seek assurance on how these are addressed)</p>
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Information Management (continued)	Information management policies, plans and processes (including cyber security arrangements) aligned with relevant legislation, international quality standards and Scottish Government policy/strategies		Internal Audit. A specific IT Risk Universe conducted to target internal audit resource towards the areas assessed as most high risk.	Digital and Information Committee (ToR 9.1) (Director of Digital) As required		(Digital Sub-Committee) Engaging stakeholders (how do we communicate how we use the data we hold)
	Role-based access to information systems and dashboards		Internal Audit	Digital and Information Committee (ToR 9.1) (Director of Digital) As required		Influencing culture

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Information Management (continued)	Development, implementation and audit of Information Security Management System		Internal audit	Digital and Information Committee (ToR 9.1) (Director of Digital) As required		
	Information Asset Register and Data Protection Impact Assessment Register			Digital and Information Committee (ToR 9.4) (Director of Digital) As required		
	Business continuity/disaster recovery systems and processes	The Executive Team has reviewed and commented on the iterative development of NES Business Continuity plans. Plans implemented due to COVID.		Digital and Information Committee (ToR 9.1) (Director of Digital) As required		

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Information Management (continued)	Provision of cloud-based information management systems for safe data storage, retrieval and sharing			Digital and Information Committee (ToR 9.4) (Director of Digital) As required		
	Cyber security based on agreed processes for authentication and registration of system users and investment in firewall technologies			Digital and Information Committee (ToR 9.4) (Director of Digital) As required		
	Mandatory training of all NES staff on Information Governance.	Scrutiny of training data		Staff Governance (ToR 9.2.4) (Director of Workforce) As required		

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Information Management (continued)	Assessment and management of risks relating to data management	Review of NDS Risk Register	Annual Scottish Government audit of Information Governance and Information (Cyber) Security policies and procedures	Digital and Information Committee (ToR 9.1) (Director of Digital) Quarterly		
	Development of Information Governance and Information Security documentation to evidence compliance with Scottish Government Network and Information Systems (NIS) directive and regulations, 2018	Review of Digital Progress report		NES Board (Director of Digital) As required		

Board Paper

1. Title of Paper

Strategic Financial Principles

2. Author(s) of Paper

Jim Boyle, Executive Director of Finance

3. Situation/Purpose of paper

3.1 This report brings to the Board a set of Strategic Financial Principles for the management of the financial affairs of NES. The draft Principles were considered at the Audit and Risk Committee at its meeting of 28 April 2022, and received support from the Committee for them to be presented for consideration at this meeting of the Board.

3.2 These Principles are not a replacement for the Standing Financial Instructions (SFIs) of NES, and those SFIs will continue to be fully applied in line with the approval given by the Board on 10 February 2022. The Strategic Financial Principles should be seen as complementary and supportive to the operation of those SFIs, and the Principles set out the high-level expectations of those managing the financial affairs of the organisation.

4. Background

4.1 NES operates a set of high-level leadership behaviours that all employees are expected to display when carrying out their duties. Those behaviours are: Inspiring; Empowering; Adaptive; Collaborative; Engaged & Engaging. These behaviours can be applied to all aspects of how we interact with each other and with other partners and stakeholders, and to any aspect of our business. This equally applies to how we manage and deploy the resources at our disposal and that includes our financial resources.

4.2 Delivery of the NES Strategic Plan relies on spending a baseline budget for 2022/23 of £0.5 billion, and this will rise further as additional Scottish Government commissions are confirmed.

4.3 The financial affairs of NES are complex and there are many considerations that come into play when managing such a complex financial plan. In order to ensure that resources are managed to best effect and that funds are protected, it is crucial that roles and expectations are agreed and communicated clearly to all stakeholders and that the agreed principles are adhered to.

4.4 To complement the general leadership behaviours, this report contains a set of Strategic Financial Principles that the Audit and Risk Committee is invited to comment on prior to them being presented for approval to the NES Board.

5. **Assessment/Key Issues**

(include identification of any strategic risks)

5.1 In recent years there has been a degree of volatility in the financial projections that have been reported to the NES Board. Due to the large number of internal and external drivers and influences that affect financial performance, there is no single or consistent reason for the movement in projections reported. It should also be noted that the effects of the Covid pandemic have caused a great deal of uncertainty and volatility of the financial performance of all Boards, and NES has been equally subjected to those impacts.

5.2 While it is true that many of the drivers are external to NES and not fully within our control, others will be more easily influenced internally. There is clearly a need for a range of improvement actions to be implemented to ensure that the reporting of significant unanticipated variations in financial projections is reduced in future.

5.3 The Board has recently approved the latest iteration of the NES Standing Financial Instructions which contains very detailed requirements placed on all Board members, officials, staff, and agents of NES in discharging their duties. That document, which is a legal requirement of all Boards, has been in operation since the establishment of NES, as a key pillar of good governance and financial control. Although future refinements will be made, it is not proposed at this stage to make further changes.

5.4 This report sets out the proposed Strategic Financial Principles to be applied to future management of financial resources within NES, and those Principles will sit alongside the Standing Financial Instructions but will not replace them or replace parts of them, although the Strategic Financial Principles will cover some aspects that are already contained within the Standing Financial Instructions.

5.5 The proposed Strategic Financial Principles should apply equally to those who have financial management responsibility delegated to them as well as to employees who play a supporting role, e.g., Finance & Procurement, Workforce, FM.

5.6 The key purposes of the Strategic Financial Principles are:

- to underpin and support strategic decision making;
- to support the responsibilities of the Accountable Officer; and
- to support NES to strengthen its financial governance and its transition to new ways of working.

5.7 The Strategic Financial Principles will sit alongside the NES Strategy and support the five key areas of the current Strategy, in delivering high quality education and training to Scotland's health and care workforce.

- 5.8 The Strategic Financial Principles are set out below (paragraphs 5.11 to 5.15) and are summarised in Appendix 1. Should the Board approve, then those Principles would then be communicated across NES as the expected behaviours and practices for conducting financial management in future.
- 5.9 The Audit and Risk Committee considered the Principles in draft on 28 April and supported them going forward for Board approval. The Committee suggested that the wording of the Principles be strengthened to emphasise compliance, and that the presentation of the appendix be modified, and those suggestions have been taken account of in producing this report for the Board.
- 5.10 Relevant financial training conducted across the organisation will also incorporate the requirements of the Strategic Financial Principles.

Proposed Strategic Financial Principles

5.11 Principle 1 – Accountability

Those who have the responsibility for the management of financial resources delegated to them will be actively involved in that process. They will assume full accountability for decision making and be aware of the implications of those decisions. Appropriate advice and support will be sought in decision-making and in reporting financial performance.

- 5.11.1 All those across the whole of NES who are involved in financial management will ensure that there is regular engagement with NES colleagues, Scottish Government colleagues and all other stakeholders involved in financial decision making and reporting. Although tasks can be sub delegated to others, overall financial accountability cannot. Where delegation has been made, budget managers will ensure that appropriate reporting and briefing is carried out to ensure that they remain aware of overall financial performance and that any significant issues arising from that are reported and addressed.
- 5.11.2 Although financial reporting will principally be the responsibility of the Director of Finance, the contents of any financial reports will be determined following regular and detailed discussions between budget holders and Finance colleagues. There is a joint responsibility to ensure that such discussions take place to make sure that reports contain an accurate and timely reflection of any variances from agreed budget and any corrective actions that can be taken to address such variances.
- 5.11.3 Staff with financial delegations have the responsibility to ensure that they have the appropriate knowledge and technical skills to discharge that responsibility, including awareness and compliance with relevant regulations and policies. Appropriate advice should be sought from Finance and other colleagues where appropriate.

5.12 Principle 2 – Value for Money

Financial and physical resources as well as our human resources, will be used to best effect, to deliver the aims and objectives of the NES Strategic Plan. Decisions will be taken regarding cost, quality of service, financial sustainability, and other wider factors to deliver the aims of the Strategic Plan. Decisions will be transparent and appropriately recorded. Where possible, value for money should be agreed in advance with stakeholders.

- 5.12.1 Deployment of financial resources will be carried out with a clear focus on making best use of the finite financial resources at the disposal of NES. While cost considerations should always feature as part of any decision to deploy financial resources, there should also be wider consideration of quality of goods and services, the ability to sustain procurement over a period of time.
- 5.12.2 For complex commissions, the level of service, cost of service and quality of service should be explicitly agreed with stakeholders, and thus value for money criteria established in order that they can subsequently be measured against a baseline.
- 5.12.3 Where external procurement is being carried out, the detailed specification and evaluation criteria will be agreed in advance and the evaluation process will be the sole determinant of contract award, unless there are exceptional reasons to take an alternative course of action. Specialist procurement advice should always be sought at the earliest opportunity where the value of tenders is above the specified limits set out in the Standing Financial Instructions.

5.13 Principle 3 – Collaboration

Those with delegated financial responsibility will seek appropriate advice and support from colleagues, and all involved should treat each other as trusted partners and will be approachable and open to constructive challenge on matters relating to the finances across the whole of NES. Colleagues in a support role equally have a responsibility to provide good quality advice and guidance. All information will be shared in a fully open manner, and in as timely a manner as possible.

- 5.13.1 The management of financial resources is a complex process, and a range of stakeholders need to play an active role. High quality and timely information flows are absolutely key to successful financial management. Information should pass freely between all those involved in financial management, in order that the Board of NES and the Scottish Government can take optimum decisions on the allocation and potentially redistribution of financial resources to support the delivery of the NES delivery plan and the interests of the wider health and care system. Significant deviations from financial plans should be made known at the earliest opportunity to increase the ability to take corrective actions and if necessary, allocate resources to areas that can provide alternative delivery plans.

5.13.2 All stakeholders should respect the principle of constructive challenge to assumptions that underlie financial plans and in particular the assumptions that support financial projections. All assumptions should be regularly scrutinised and challenged and adjusted where appropriate. Over-optimism in spending plans should be avoided and appropriate levels of challenge should help to avoid such instances.

5.14 Principle 4 – Planning & Risk Awareness

All expenditure will be well planned, costed and deliverable. Where it becomes clear that spending plans require to be amended, alternative options under virement will be considered, or underspends declared at the earliest opportunity, in order that alternative corporate resource deployment decisions can be made. A risk approach will be taken to any spending made prior to final confirmation of funding.

5.14.1 The Annual Operating Plan Process should ensure that commitments in support of the NES strategic plan are fully costed into the financial plan approved by the Board. However additional commissions will come to NES through discussion with the Scottish Government and other stakeholder funding partners.

5.14.2 Full and meaningful engagement should have taken place with Scottish Government sponsorship and policy teams and if necessary Scottish Government Finance colleagues prior to the acceptance of commissions.

5.14.3 Any agreement to deliver commissions should be accompanied by fully costed plans that should also incorporate all relevant milestones against which ongoing delivery can be measured.

5.14.4 Milestones should be realistic and be fully explicit and should take account of realistic recruitment timescales as well as procurement timescales. This should ensure that delivery can begin quickly, and that funding can be accurately phased to match planned expenditure, thus reducing the likelihood of adjusting the drawdown of government funding or return of funding.

5.14.5 For more complex commissions, the support of the Programme Management Office should be utilised, to bring a consistent and comprehensive set of project management disciplines to the planning process. Finance and Procurement, Workforce, and other support colleagues should be involved in the planning of commissions to ensure that necessary professional advice is taken, and that spending plans are fully reflected in the NES corporate financial plans.

5.14.6 To further mitigate against commission slippage, consideration should be given to committing preliminary expenditure and commencing recruitment and procurement processes, prior to final funding confirmation. In order to minimise financial risk to NES, this should be done in a measured way, taking account of ongoing funding discussions with Scottish Government colleagues and by keeping the Director of Finance aware of the progress of

these discussions prior to commencing spending commitments, and seeking approval from the Director of Finance to progress such spending.

5.15 Principle 5 – Stewardship

As custodians of public funds, we will ensure that these funds are properly and effectively managed and accounted for at all times. We will always adhere to all internal financial and other controls. Information will be readily shared with all others involved in the stewardship of financial resources.

5.15.1 The management of NES finances should always be carried out according to the principles of good governance, proper accounting practice and in full compliance with the Scottish Government’s requirements for managing and monitoring the deployment of funding through NHS Boards.

5.15.2 Finance & Procurement will provide professional advice and guidance on stewardship matters but it will be the responsibility of all those charged with the financial management of NES resources to ensure full compliance and provision of all information requirements. In particular, the detailed requirements of the Standing Financial Instructions should be complied with in all financial matters.

6. Recommendations

The Board is asked to consider and approve the proposed Strategic Financial Principles set out in this report.

Author to complete

a) Have Educational implications been considered?

- Yes
 No

b) Is there a budget allocated for this work?

- Yes
 No

c) Alignment with [NES Strategy 2019-2024](#)

1. A high-quality learning and employment environment
 2. National infrastructure to improve attraction, recruitment, training and retention
 3. Education and training for a skilled, adaptable and compassionate workforce
 4. A national digital platform, analysis, intelligence and modelling
 5. A high performing organisation (NES)

d) Have key risks and mitigation measures been identified?

- Yes
 No

e) Have Equality and Diversity and health inequality issues been considered?

Yes

No

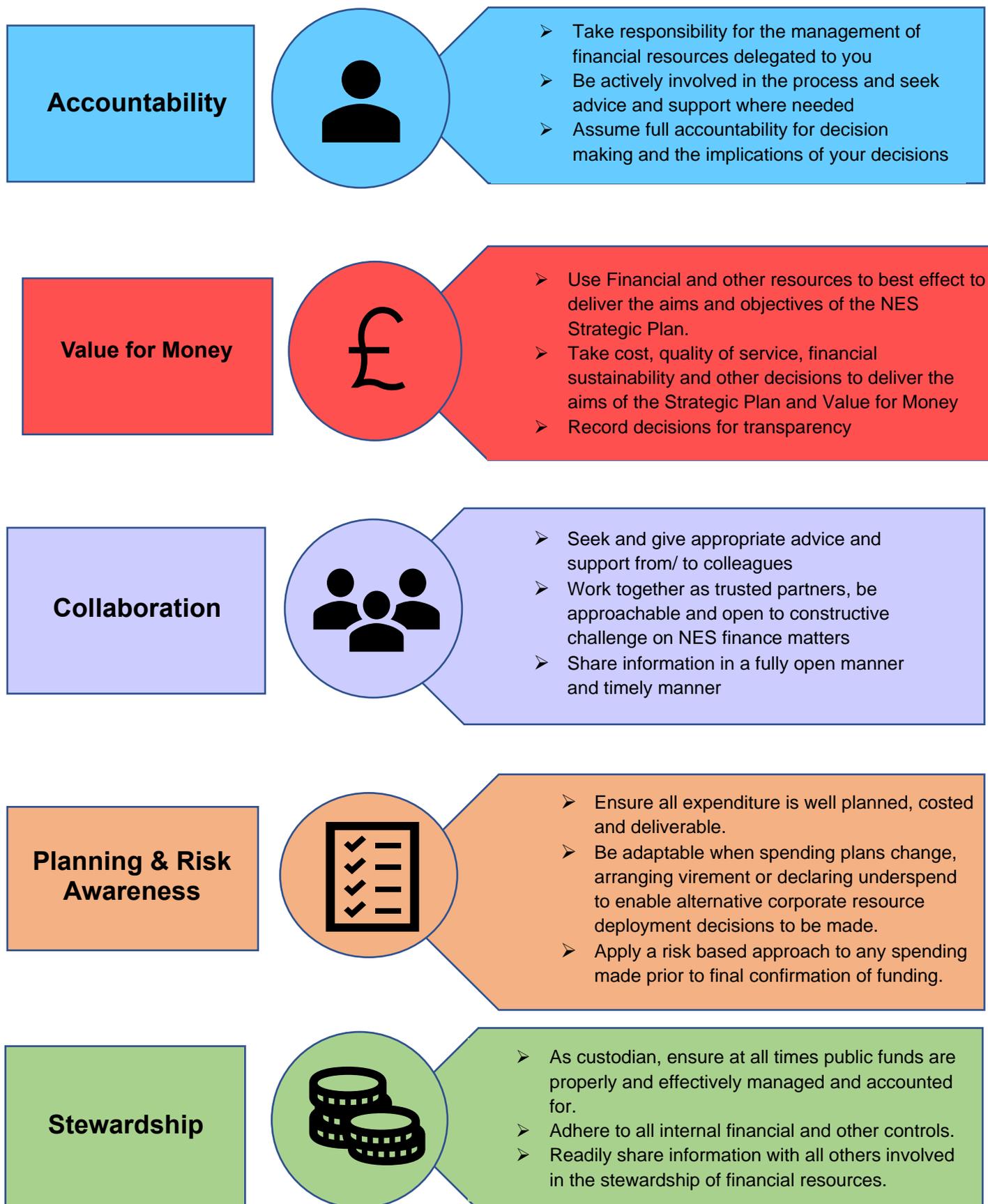
f) Have you considered a staff and external stakeholder engagement plan?

Yes

No

Jim Boyle, Director of Finance
May 2022

Strategic Financial Principles



Board Paper

1. Title of paper

Whistleblowing Executive Lead Annual Whistleblowing Report 2021/22

2. Author(s) of paper

Nancy El-Farargy, Manager – Planning and Corporate Governance
Donald Cameron, Director of Planning and Corporate Resources

3. Situation/purpose of paper

The purpose of the accompanying paper is to present the 2021-22 Annual Whistleblowing Report to the Board for approval.

4. Background

The National Whistleblowing Standards¹ (the Standards) came into force on 01 April 2021. All NHS Scotland boards have been asked to report on any whistleblowing concerns on a quarterly basis and to provide an annual report. The annual whistleblowing report, covering the period 01 April 2021 to 31 March 2022, is now presented (as attached). This is our first annual report under the new arrangements.

5. Assessment/key issues

- 5.1 The attached report outlines the chronological actions we have taken in implementing the new Standards, and the overall whistleblowing return.
- 5.2 We provided four quarterly reports to the Staff Governance Committee throughout 2021-2022.
- 5.3 Nil returns were reported for quarters one to three; 2021-2022. During 01 January 2022 to 31 March 2022 inclusive (quarter four), NES received one “unnamed concern” (in March 2022). This concern is currently open, as a conclusion has not yet been reached. There is no obligation to follow the Standards to conclude unnamed concerns; however, it is good practice to do so². Under the formal definitions (and given the extant status of the unnamed concern), a nil return is reported for 2021-2022.
- 5.4 In collaboration with the Board Chair and the Non-Executive whistleblowing champion, the scrutiny and governance of the whistleblowing agenda was reviewed. This also included the role descriptor of the Non-Executive whistleblowing champion.
- 5.5 As of 31 March 2022, 332 staff members completed the online training, with 91 in progress. With respect to managers, 140 (52%) completed the training.
- 5.6 We continue to work with our staff in support of the National Whistleblowing Standards.

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

² The National Whistleblowing Standards (April 2021), part two, paragraphs 66-73.

6. Recommendations

The Board is invited to review and approve the accompanying 2021-2022 annual whistleblowing report.

7. Author to complete

a) Have educational implications been considered?

- Yes
 No

b) Is there a budget allocated for this work?

- Yes
 No

c) Alignment with the NES Strategy 2019-2024.

1. A high-quality learning and employment environment.
 2. National infrastructure to improve attraction, recruitment, training and retention.
 3. Education and training for a skilled, adaptable and compassionate workforce.
 4. A national digital platform, analysis, intelligence and modelling.
 5. A performing organisation (NES).

d) Have key risks and mitigation measures been identified?

- Yes
 No

e) Have equality, diversity and health inequality issues been considered?

- Yes
 No

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

- Yes
 No

Nancy El-Farargy
NHS Education for Scotland
19 May 2022

Annual Whistleblowing Report 2021-2022

NHS Education for Scotland

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1. Introduction

- 1.1. The National Whistleblowing Standards¹ (the Standards) came into force on 01 April 2021. In short, these Standards include a new procedure for handling any whistleblowing concerns across NHS Scotland and an overview of NHS board requirements. The importance of reporting, onward improvement and sharing lessons learned is also noted.
- 1.2. Other main developments included an Independent National Whistleblowing Officer (INWO) for NHS Scotland and the appointment of a Non-Executive “whistleblowing champion” for every NHS Scotland board.
- 1.3. We engaged with senior teams, and all staff in general, to implement the new procedure. Looking ahead, we continue to raise awareness of the Standards and the training available to all our staff.
- 1.4. This is our first NHS Education for Scotland (NES) Annual Whistleblowing Report under the new arrangements (covering 01 April 2021 to 31 March 2022). An overview of the new procedure is presented, as well as an outline of the actions we have taken to implement it.
- 1.5. This report is presented as follows:
 - The background and legislation to the Standards (p. 4).
 - A review of actions we have taken in implementing the Standards (p. 9).
 - The whistleblowing annual return (p. 12).

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

2. Background and legislation

- 2.1. The 2015 'Freedom to Speak up' report by Sir Robert Francis QC² highlighted that additional measures were required to ensure that all NHS staff could safely and freely raise any patient safety concerns. The report was related to NHS England; however, the Scottish Government welcomed the review and used it to support, encourage and promote whistleblowing in NHS Scotland³.
- 2.2. The report by John Sturrock QC in 2019 investigated cultural issues related to allegations of bullying and harassment in NHS Highland⁴. His review recommended a more enabling culture for people-centred leadership that was more compassionate, empowering and open to respectful challenge. Restorative and preventative measures to "reset the whole organisation" were also recommended. With respect to the whistleblowing agenda, the following were proposed:
- A clear and independent mechanism for speaking up (acknowledging the fact that whistleblowing would be the last resort).
 - All staff to understand the circumstances for raising any whistleblowing concerns and to be confident in doing so.
 - Provision of an independent and confidential "guardian" for those wishing to report inappropriate behaviour.
- 2.3. In response to the Sturrock review, the then Cabinet Secretary for Health and Sport, Jeane Freeman, acknowledged the learning for other NHS Scotland boards and set out a commitment to ensure that everyone in NHS Scotland feels welcome, safe and supported in their role. Specifically, the Scottish Government proposed new legislation to introduce an Independent National Whistleblowing Officer for NHS Scotland⁵. Proposals to embed independent Non-Executive whistleblowing champions in every NHS Scotland board and a revised suite of HR policies for NHS Scotland were also noted.
- 2.4. In the main, the Scottish Government advocated the need to improve whistleblowing arrangements across NHS Scotland and to support a more open, honest and inclusive culture.

² Francis, R. (2015) 'Freedom to speak up. An independent review into creating an open and honest reporting culture in the NHS.' Available at:

https://webarchive.nationalarchives.gov.uk/20150218150953/https://freedomtospeakup.org.uk/wp-content/uploads/2014/07/F2SU_web.pdf (Accessed: 11 November 2019).

³ Scottish Government (2017) 'Freedom to speak up for NHS Scotland staff'. Available at: <https://www.gov.scot/news/freedom-to-speak-up-for-nhs-scotland-staff/> (Accessed: 16 May 2022).

⁴ Sturrock, J. (2019) 'Report to the Cabinet Secretary for Health and Sport into: Cultural issues related to allegations of bullying and harassment in NHS Highland'. Edinburgh: Scottish Government. Available at: <https://www.gov.scot/publications/report-cultural-issues-related-allegations-bullying-harassment-nhs-highland/> (Accessed: 30 June 2019).

⁵ Scottish Government (2019) 'The Scottish Government Response to the Sturrock Review: into cultural issues related to allegations of bullying and harassment in NHS Highland'. Edinburgh: Scottish Government. Available at: <https://www.gov.scot/publications/scottish-government-response-report-bullying-harassment-nhs-highland/> (Accessed: 30 June 2019).

- 2.5. Legislation to allow the Scottish Public Services Ombudsman (SPSO)⁶ to take on the INWO role then followed. This route offers whistle-blowers the independent external review of the handling of any whistleblowing concerns about health services in Scotland.
- 2.6. The Public Services Reform (The Scottish Public Services Ombudsman) (Healthcare Whistleblowing) Order 2020⁷ defines “whistleblowing” as:
- “... when a person who delivers services or used to deliver services on behalf of a health service body, family health service provider or independent provider (as defined in section 23 of the Scottish Public Services Ombudsman Act 2002) raises a concern that relates to speaking up, in the public interest, about an NHS service, where an act or omission has created, or may create, a risk of harm or wrong doing.”*
- 2.7. This definition essentially covers any concerns raised in the public interest, by existing and former employees, bank and agency workers, contractors, volunteers, students, and anyone working with us to deliver services.

⁶ The SPSO currently covers three main functions: (1) the SPSO, which is the final stage for complaints about public service organisations in Scotland; (2) the Scottish Welfare Fund Independent Review, which reviews decisions made by councils on community care and crisis grant applications; and (3) the INWO, which is the final stage of the process for NHS workers raising concerns about health service delivery in Scotland.

⁷ Crown Copyright (2020) ‘Scottish Statutory Instruments: 2020 No. 5. Public Services Reform: Scottish Public Services Ombudsman. Public Health. National Health Service. The Public Services Reform (The Scottish Public Services Ombudsman) (Healthcare Whistleblowing) Order 2020’. The Stationery Office. Available at: https://www.legislation.gov.uk/ssi/2020/5/pdfs/ssi_20200005_en.pdf (Accessed: 21 April 2022).

3. The National Whistleblowing Standards

- 3.1. The Standards came into force on a “Once for Scotland” basis on 01 April 2021 and replaced any local Whistleblowing Policies in NHS Scotland boards.
- 3.2. The Standards present:
- The principles of whistleblowing, and the definitions of “whistleblowing” and “whistle-blower”.
 - An overview of the stages involved in handling any whistleblowing concerns.
 - The role of NHS boards and staff responsibilities.
 - The importance of recording, reporting and learning lessons.
 - An overview of board requirements.
 - Specific information for primary care providers and Integration Joint Boards.
 - Arrangements for students and volunteers.
- 3.3. In many cases, any concerns can be resolved through informal conversations and business as usual processes. These are not part of the formal whistleblowing procedure but can be an important precursor. We aim to support all staff, and those working with us, to report any concerns as early as possible so that they can be dealt with promptly and professionally (before they get to the formal stage).
- 3.4. When raising a concern informally is not an option, those metaphorically blowing the whistle under the Standards are afforded support and legal protections. This is in addition to the confidential nature of any investigation.
- 3.5. The following eligibility checks are made to follow the Standards:
- The concern is in the public interest. This could include areas like patient safety issues, unsafe working conditions, or fraud.
 - The business-as-usual process has already run its course (where appropriate).
 - The concern (and outcome required) is not related to a Human Resources process.
 - The concern is raised within the appropriate time-limit, i.e., normally within six months of becoming aware of the issue.
 - Given the aforementioned points, the whistle-blower can choose to use the process under the Standards if they so wish⁸. If this is not the case, then we (the organisation) will decide how to investigate.
- 3.6. Anonymous and unnamed whistleblowing concerns cannot be formally investigated under the Standards. An anonymous concern is one where nobody knows who provided the information. An unnamed concern is one that is raised with an organisation, but the person raising the concern is not willing to have their name or personal details recorded. These types of concerns limit the protections and support available to the whistle-blower and cannot be referred to the INWO. Under these circumstances, an organisation is not required to follow the Standards to conclude the case⁹.

⁸ It is up to the individual whether they want to formally raise a concern under the Standards. The concern is not recorded as whistleblowing if the person does not wish it to be.

⁹ Independent National Whistleblowing Officer (2021) ‘The National Whistleblowing Standards - April 2021’. Edinburgh: Scottish Public Services Ombudsman. Pages 24-25; paragraphs 66-73. Available at: <https://inwo.spsos.org.uk/sites/inwo/files/Standards/NationalWhistleblowingStandards-AllParts.pdf> (Accessed: 24 January 2022).

3.7. There are two main stages for NES under the Standards (Figure 1). At the end of stage two, whistle-blowers are signposted to the INWO.

3.8.

Stage 1 (NES)	Stage 2 (NES)	Stage 3 (INWO)
<ul style="list-style-type: none"> • Little or no investigation. • Response with an explanation of outcome issued within five working days. • Any actions taken in response to the concern raised are outlined. • Information on Stage two provided. 	<ul style="list-style-type: none"> • Would involve serious risks or complex issues that need investigation. • Stage two also used when stage one process is not appropriate. • Acknowledged within three working days. • Detailed response normally issued within 20 working days. 	<ul style="list-style-type: none"> • Offer of independent external review.

Figure 1: Summary of stages.

3.9. To support the national Standards, new dedicated Non-Executive whistleblowing champions were recruited to all NHS Scotland boards. The role was developed by the Scottish Government and complements the work of the INWO. Each appointment is independent and impartial, with no operational role in any board. The aim is to provide oversight and independent assurance, for example, by seeking assurance from executives and providing assurance to the Board that there is compliance with the Standards¹⁰. This is in accordance with the principles of corporate governance, whereby the work of board members is distinguished from the day-to-day operational management of the organisation by the Executive Leadership Team¹¹. The new dedicated Non-Executive whistleblowing champion role replaced the then nominated Non-Executive director who had additional whistleblowing responsibilities¹².

3.10. In terms of governance and monitoring, the Standards outline the role of board members in valuing a tone and culture of speaking up. Board members are also required to monitor (on a quarterly basis) the number of concerns raised at their public Board meetings. Each NHS Scotland board is also required to publish an annual report setting out their performance in handling whistleblowing concerns.

3.11. With respect to recording and reporting, all concerns need to be recorded in a systematic way so that the data can be further analysed to identify any themes and trends. This is to ensure learning and to identify opportunities to improve services.

¹⁰ As per the Scottish Government's role descriptor.

¹¹ Scottish Government (2019) 'A Blueprint for Good Governance'. Edinburgh: Scottish Government. Available at: [https://www.sehd.scot.nhs.uk/dl/DL\(2019\)02.pdf](https://www.sehd.scot.nhs.uk/dl/DL(2019)02.pdf) (Accessed: 5 August 2019).

¹² Gray, P. (2015) 'Non-Executive Whistleblowing Champion'. Letter to NHS Scotland Health Board Chairs (29 September 2015). Edinburgh: Scottish Government.

3.12. NHS Scotland's national workforce policies currently include¹³:

- Attendance
- Bullying and Harassment
- Capability
- Conduct
- Grievance
- Whistleblowing
- Workforce Policies Investigation Process

3.13. We continue to promote a culture of openness and transparency where staff, and partners working with us, feel confident to raise any concerns.

¹³ Crown Copyright (2022) 'Workforce Policies: NHS Scotland'. Available at: <https://workforce.nhs.scot/policies/> (Accessed: 26 April 2022).

4. Actions taken in support of the new arrangements

- 4.1. This section of the report presents a summary of the actions taken in support of the new whistleblowing arrangements.
- 4.2. Led by the then Director of Workforce (Dorothy Wright), a Short Life Working Group (SLWG) was set up in August 2019 to prepare for the implementation of the Standards. Members included representatives from Planning and Corporate Governance, Medicine and Finance.
- 4.3. As part of the SLWG, our review included:
 - The then whistleblowing arrangements in place.
 - The Scotland Deanery (medicine) quality management processes, which included sources of data, and information and intelligence available from trainers and doctors in training.
 - The Lead Employer Model and arrangements for doctors in training.
 - The Assurance Framework and governance arrangements for feedback, comments, concerns, complaints, whistleblowing and staff grievances.
 - The definitions of feedback, comments, concerns, complaints and whistleblowing.
 - Potential recording systems, our online presence and corporate induction.
 - Ongoing arrangements for the whistleblowing agenda via the Director of Planning and Corporate Resources and the Corporate Complaints Team.
- 4.4. Our aim was to comply with the then impending Standards and to ensure that our organisation was ready to deal with any whistleblowing concerns. We were aware that formal internal whistleblowing cases within our organisation were historically non-existent or very low.
- 4.5. As announced (in February 2020) by Jeane Freeman, the then Cabinet Secretary for Health and Sport, Gillian Mawdsley was appointed as the Non-Executive whistleblowing champion of the NES Board.
- 4.6. The NES Executive Team and NES Board were appraised of developments in an ongoing manner.
- 4.7. The NES Board delegated the governance and scrutiny of whistleblowing to the Staff Governance Committee, where it was agreed to include whistleblowing as a standing agenda item.
- 4.8. A workshop with a few members of the Corporate Complaints Team and Gillian Mawdsley, Non-Executive whistleblowing champion, was held in August 2020.
- 4.9. In September 2020, a recorded video by Gillian Mawdsley, Non-Executive whistleblowing champion, was disseminated to all staff via the intranet newsfeed.
- 4.10. The Terms of References for the Staff Governance Committee were updated (in tandem with a review of NES's corporate management structures) in November 2020.
- 4.11. Developed by the SPSO, whistleblowing training was made available on 'Turas Learn' in January 2021. Two levels were available: for all staff and managers.

- 4.12. Directorate Complaints' Leads and the Corporate Complaints Team were specifically signposted to the online training. The available training was also promoted through the Senior Operational Leadership Group (SOLG) and through a "management matters" newsletter (March 2021).
- 4.13. At the launch of the new whistleblowing arrangements (April 2021), we disseminated an all-staff video on the new arrangements. This comprised of a recorded message by Karen Reid, Chief Executive, and Gillian Mawdsley, Non-Executive whistleblowing champion. In addition to core NES staff, a communication was sent to doctors in training.
- 4.14. We engaged with directorates to ensure that the new whistleblowing arrangements were appropriately referenced in our documentation and webpages. Example updates included the NES Risk Register, the Board member induction pack, the Board Development Turas Learn site, the Scotland Deanery website, and our corporate website. Our Corporate Communications Team issued updates via social media. Individual teams also updated their partners and stakeholders on the new arrangements (including contractors, volunteers, higher education students and trainees). The Implementation Plan was kept updated in an ongoing manner.
- 4.15. We delivered a live "What you need to know" whistleblowing question and answer webinar for all staff in August 2021. This was presented by Donald Cameron, Director of Planning and Corporate Resources, Tracey Ashworth-Davies, Director of Workforce, Gillian Mawdsley, Non-Executive whistleblowing champion, and Morag McElhinney, Head of Service – Human Resources.
- 4.16. A discussion between the NHS Scotland Academy and NES, regarding joint whistleblowing governance arrangements, took place in August 2021.
- 4.17. The outcome of the internal audit of the newly implemented whistleblowing arrangements, was "significant assurance with minor improvement opportunities" (September 2021). It was agreed to mandate all NES line managers to complete the online training. Line managers could potentially receive whistleblowing concerns at stage one and should know when to escalate any matters to stage two. Led by the Workforce Directorate, the proposed target was 80% of line managers completing the manager-level training by 31 March 2022, and 95% by 30 June 2022. The Extended Executive Team was appraised of these developments (in September 2021).
- 4.18. A corporate training presentation was developed and made available for all teams and staff to use within any required meetings (September-October 2021). The intranet whistleblowing page is updated on an ongoing basis, where warranted.
- 4.19. Workforce Directorate colleagues led on the award of a new Employee Assistance Programme (launched in December 2021). This is an independent counselling and advisory service and is available to all NES employees.
- 4.20. In December 2021, Nancy El-Faragy, Planning and Corporate Governance, gave an overview of recent whistleblowing developments at the SOLG meeting. In addition, Gillian Mawdsley, Non-Executive whistleblowing champion, provided an overview of her role. The session was well received by SOLG members and the call to action to complete the online training was noted.

- 4.21. At their meeting on 03 February 2022, the Staff Governance Committee approved a 2022-2023 schedule of business that outlined the continued approach to quarterly and annual reporting. Separate annual reports from the designated executive whistleblowing lead and the Non-Executive whistleblowing champion were added to the schedule.
- 4.22. The governance and scrutiny of the whistleblowing agenda was reviewed in February to March 2022. This confirmed reporting responsibilities to both the Staff Governance Committee and the NES Board. This review also included the role of the Non-Executive whistleblowing champion, in which reference was made to the original role descriptor, as developed by the Scottish Government (in 2019). It clarified how an additional level of scrutiny and accountability for all whistleblowing activities would be followed through by the Non-Executive whistleblowing champion. Any issues (for example, in connection with the progress or handling of cases, etc.,) would be reported to the Board. Assurance that there is compliance with the Standards is also sought. This descriptor highlighted that the Non-Executive whistleblowing champion's remit would not be an operational role. The aim is to ensure their independence, as well as ensuring transparency between the roles of executives and non-executives¹⁴.
- 4.23. Led by Workforce Directorate colleagues, a refreshed "Our Way" suite of resources was published and communicated to all our staff on 23 March 2022. This suite aims to promote and understand the types of behaviour acceptable across our organisation. It also aims to encourage reflection on how we interact, engage, respectfully challenge, and encourage positive ways of working together.

¹⁴ Scottish Government (2019) 'A Blueprint for Good Governance'. Edinburgh: Scottish Government. Available at: [https://www.sehd.scot.nhs.uk/dl/DL\(2019\)02.pdf](https://www.sehd.scot.nhs.uk/dl/DL(2019)02.pdf) (Accessed: 5 August 2019).

5. Whistleblowing annual return and performance indicators

- 5.1. The NES Board delegated the governance and scrutiny of whistleblowing to the Staff Governance Committee. Throughout 2021-2022, the committee received four reports (i.e., on a quarterly basis).
- 5.2. Between 01 April 2021 and 31 December 2021 inclusive (i.e., quarters one to three), there were no whistleblowing concerns received¹⁵. Between 01 January 2022 and 31 March 2022 (i.e., quarter four), one unnamed whistleblowing concern was received¹⁶.
- 5.3. Given various circumstances, the unnamed concern is currently open. Work with another NHS Scotland board is in place to jointly conclude the case and share onward learning and improvement.
- 5.4. There is no obligation to follow the Standards to conclude unnamed concerns; however, it is good practice to do so¹⁷. At the time of writing (given the extant status of the unnamed concern), a nil return for 2021-2022 is reported under the Standards.
- 5.5. The unnamed concern has afforded us the opportunity to triangulate evidence from another separate route, and to learn from the two sources in investigating the case.
- 5.6. Early feedback (received to date) on the experiences of those engaged with the whistleblowing process has been positive. Following the conclusion of a whistleblowing investigation, we aim to solicit formal feedback from the whistle-blower and any other relevant parties. The aim of this is to support onward learning and to make any other appropriate improvements to the whistleblowing procedure. We also aim to continue to engage with our staff to solicit their feedback on the national whistleblowing arrangements.
- 5.7. Online training from the SPSO was made available on Turas Learn from January 2021. Two training options were available; namely, training for all staff and training for managers¹⁸.
- 5.8. We promoted the (then available) online training to all staff and made the manager-focused training mandatory for all line managers. As of 31 March 2022, 332 core staff members completed the SPSO training. With respect to line managers, 140 (52%) completed the manager-focused training. We have welcomed unsolicited feedback on the training to date.

¹⁵ Upon their request, we have previously shared quarterly reports with the INWO team.

¹⁶ Due to the absence of reporting tables (templates), this section of the report aligns with the key performance indicators, where applicable (as presented in the Standards).

¹⁷ Independent National Whistleblowing Officer (2021) 'The National Whistleblowing Standards - April 2021'. Edinburgh: Scottish Public Services Ombudsman. Part 2: paragraphs 66-73. Available at: <https://inwo.spsso.org.uk/sites/inwo/files/Standards/NationalWhistleblowingStandards-AllParts.pdf> (Accessed: 24 January 2022).

¹⁸ The SPSO learning programmes were refreshed in April 2022. Three new whistleblowing learning levels are available: (1) an overview; (2) for line managers; and (3) for senior managers.

- 5.9. We continue to raise awareness of the national whistleblowing arrangements and the training available via our intranet page and relevant communications. The SOLG has been instrumental in cascading this information to directorates. As of 31 March 2022, completion rates of “essential learning” were behind target for most directorates, reflecting in part, COVID-19-related work pressures and priorities in quarters three and four. We continue to encourage all line managers to complete the manager-focussed whistleblowing training and note their personal accountability in doing so. The Extended Executive Team has committed to improving compliance for all essential learning in their directorates by 30 June 2022.
- 5.10. Throughout the reporting period, we have proactively communicated the new national whistleblowing arrangements to all our staff. Examples included a recorded video at the launch of the Standards, an all-staff question and answer webinar, a training presentation for all directorates to use, and signposting to our intranet page.
- 5.11. We continue to welcome the opportunity to listen to our staff and those working with us to address any concerns raised and make any required improvements to services.

6. Conclusion

- 6.1. We are committed to dealing responsibly, openly, and professionally regarding any genuine concern about wrongdoing or malpractice in the workplace. We have highlighted the important role that whistle-blowers have in raising any unjust or unethical behaviour; potentially resulting in positive change.
- 6.2. All staff have been made aware of the new national arrangements and have been signposted to relevant training and awareness raising opportunities.
- 6.3. Quarterly reports have been submitted to the Staff Governance Committee over 2021-2022.
- 6.4. We have welcomed the opportunity to reflect on our whistleblowing arrangements, and the work delivered to date in fostering a more open, honest and inclusive working culture.
- 6.5. Looking ahead, Donald Cameron, Director of Planning and Corporate Resources, will be retiring in June 2022. Arrangements are in place for a successor to take up post in early August 2022.

Nancy El-Farargy
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19 May 2022

Board Paper

1. Title of Paper

2021-22 Equality Outcomes and Mainstreaming Annual Report

2. Author(s) of Paper

Katy Hetherington, Principal Lead, Equality, Diversity and Human Rights

3. Situation/Purpose of paper

To provide the Board with an end of year report for approval on NES's progress with delivering its statutory equality duties. This includes progress towards NES's Equality Outcomes published in April 2021. Appropriate scrutiny has been provided by the Staff Governance, Digital and Information and Education and Quality Committees. The paper also highlights emerging priorities for NES in the year ahead now that there is increased capacity for the organisation with the establishment of a new Equality, Diversity and Human Rights team. A brief overview of recent key policy and legislative developments is also provided for information for Committee members.

4. Background

4.1 The statutory requirements

The purpose of the Public Sector Equality Duty and the Fairer Scotland Duty is to ensure that public authorities consider how they can positively contribute to a more equal society through advancing equality and good relations in their day-to-day business, to:

- take effective action on equality
- make the right decisions, first time around
- develop better policies and practices, based on evidence
- be more transparent, accessible and accountable
- deliver improved outcomes for all

4.2 NES's Equality Outcomes

NES published its Equality Outcomes in April 2021 to set out how it would meet the Public Sector Equality Duty and the Fairer Scotland Duty (Annex A).

4.3 Equality and Diversity governance is distributed within the Board committee structure in NES with Staff Governance, Digital and Information and the Education and Quality Committees providing appropriate scrutiny on the Equality Outcomes relevant to their functions. Each of these Committees have

received end of year updates which have been discussed and approved. This report provides an overall progress update for the Board to approve.

- 4.4 Our Equality Outcomes should align with organisational strategy. As we develop NES's new strategy this year there is the opportunity to review our outcomes to ensure they are focused on the areas where NES can make the most difference to addressing discrimination and promoting equality. This is an important way that NES can contribute to reducing health inequalities in Scotland and creating an inclusive and diverse workplace culture.

5. Assessment/Key Issues

- 5.1 NES aims to embed equality and diversity into its functions as an employer and in the delivery of its services as a national NHS Board. This is core for developing high quality educational and training programmes, digital products, national workforce services and in creating an inclusive and diverse workforce at NES. It is also a legislative requirement for NES as a public body.

- 5.2 Key issues for the Board to note:

- A new Equality, Diversity and Human Rights team has been established in NES in 2022 which provides us with additional capacity to develop our equalities work in NES and contribute to education and learning resources for the wider health and social care system.
- Progress has been made in work towards our Equality Outcomes since April 2021, with end of year reports being presented for scrutiny through our Committee structure. See Annex A.
- Improvements have been made to refresh operational governance for our equality work with a new Equality and Human Rights Governance Group established.
- Staff equality networks have been established during 2021/22 to provide a way for staff to influence organisational policy and practice in creating an inclusive workplace.
- Addressing inequalities and promoting equality is central to our work in NES and our equality outcomes will be reviewed as we develop our new strategy for 2023-2026.

6. Recommendations

The Board is invited to:

- a. Approve progress in working towards NES's Equality Outcomes.
- b. Note the emerging priorities for the organisation to progress and mainstream its work on equality and human rights, including in the development of the new strategy for 2023-2026.
- c. Note the current policy and legislative updates, including the consultation that the Scottish Government is undertaking on the specific duties for the Public Sector Equality Duty.

Author to complete

a. **Have Educational implications been considered?**

Yes

No

b. **Is there a budget allocated for this work?**

Yes

No

c. **Alignment with [NES Strategy 2019-2024](#)**

1. A high-quality learning and employment environment

2. National infrastructure to improve attraction, recruitment, training and retention

3. Education and training for a skilled, adaptable and compassionate workforce

4. A national digital platform, analysis, intelligence and modelling

5. A high performing organisation (NES)

d. **Have key risks and mitigation measures been identified?**

Yes

No

e. **Have Equality and Diversity and health inequality issues been considered?**

Yes

No

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

Yes

No

Katy Hetherington

26 May 2022

2021-22 End of Year Report – Equality and Diversity

1. Progress towards Equality Outcomes

The Board approved for publication a revised set of Equality Outcomes in April 2021. Governance for equality and diversity is distributed within the Board Committee structure to provide appropriate scrutiny on elements relevant to Committee functions. This end of year report provides an overview of progress over the last 12 months towards each outcome. This is set out in Annex A.

The Digital and Information, Staff Governance and Education and Education and Quality Committee have each approved end of year reports on progress with equality outcomes relevant to their functions. It was noted that future reports will provide an update on the impact of our activities to ensure there is a focus on outcomes and that we will review our Equality Outcomes considering the development of a new strategy.

As well as the equality outcomes on specific areas of NES's programmes, we also set outcomes to mainstream equality into our work by:

- Improving our Equality Impact Assessment (EQIA) performance, ensuring a systematic approach to using EQIA to inform the development of new workstreams;
- Building capacity – both technical and educational -- to deliver accessible digital learning

Our EQIAs are published on our website and building capacity across the organisation on impact assessment is a priority for the Equality, Diversity and Human Rights team this year. Guidance on EQIA is available to staff on the intranet but more is required to share practice and build and maintain staff knowledge to apply this proportionately to inform decisions on products, policy, strategy, and practices.

Building capacity to deliver accessible digital learning continues. The Technology Enhanced Learning Team was established in November 2021 to support NES develop the skills and capabilities to use technology in the delivery of our educational programmes. We are reviewing our Inclusive Education and Learning Policy, involving a range of stakeholders including our staff equality networks, to ensure it is up to date considering our increasing focus on digital learning. We are also playing an important role in supporting the digital capability of the wider health and social care workforce through the establishment of the Digital Enabled Workforce Team.

2. Learning and development on equality, diversity, and human rights

Staff learning and development is an important building block for progressing with our equality outcomes, embedding equality into our work and for contributing to an inclusive organisational culture. Staff events have taken place over 2021 and in early 2022 to share experiences and increase knowledge on equality issues. These events have been hosted by staff networks and supported by the Equality Network Co-ordinator.

A community of interest on equality, diversity and human rights is being established to support continuous learning on equality and human rights issues for staff. This will provide a mechanism to share examples of practice from across the organisation and from other sectors, hold webinars on various topics and to identify training and development needs. It is intended to support a learning culture on equality, diversity and human rights in the organisation.

We have been working with the Equality and Human Rights Commission on an e-learning module for NHS non-executive board members on the Public Sector Equality Duty. This includes film clips from local NHS Board non-executives speaking about the Duty in relation to their role on the Board. The module will be launched at the end of May and promoted to all Boards. NHS Scotland's Chief Executive will include the resource in the next networking session with Non-Executive Board members.

We are working with Scottish Government to position NES as a key partner in developing high quality education and training resources on equality and diversity for the sector. Collaboration with our stakeholders, including staff networks and the third sector will be essential in developing resources. Education and training are important in supporting a whole systems approach in making progress on equality and diversity. It can also support the delivery of policies such as the Health and Social Care National Workforce Strategy and in responding to recommendations from the Expert Reference Group on Ethnicity and Covid.

3. Equality, Diversity and Human Rights Team

A new Equality, Diversity and Human rights team in NES was established in January 2022 with the appointment of a Principal Lead and a Learning and Digital Content Officer. A Specialist Lead for Education is starting in June 2022 and the Network Co-ordinator is on a fixed term post until end of March 2023. The establishment of this team provides a resource for NES to being to develop as a centre for expertise on educational resources on equality, diversity, and human rights for the health and care sector. This includes reviewing and developing our education and learning resources on the equality and diversity zone on TURAS and working with our policy colleagues in government to contribute to addressing the learning needs for the sector. It provides capacity to support NES with progress in its equality outcomes, mainstreaming equality and human rights into NES's strategy and day to day business and for internal learning and development for NES staff.

4. Operational Governance Arrangements

It was timely to refresh the arrangements for an effective operational governance group in NES after a 6-month gap in our E&D capacity and with the establishment of a new team. We have reviewed membership and the terms of reference for the group which will support the performance management of our Equality Outcomes and statutory equality requirements. This group will support a review of the Equality Outcomes as part of the development of the new Strategic Plan. It will continue to be co-chaired by the Director of Workforce and the Director of Nursing.

5. Equality Champion Role in the Board

Anne Currie has been appointed as our non-executive Board Champion for equality and human rights. This will provide visible non-executive leadership at Board level to demonstrate to the organisation and to our partners, our commitment to make progress on equality, diversity, and human rights. This is the first time the NES Board has appointed a non-executive director in this area, and we have developed a role descriptor to set out the parameters for the role.

6. Future direction and emerging priorities

The Equality, Diversity and Human Rights Team is establishing its strategic plan for the year ahead to support the organisation in its equality and human rights work, including legislative requirements. Emerging priorities include

- continuing to support and build the capacity in our staff equality networks and evaluating the impact of the networks
- developing appropriate training and development for staff through a community of practice and staff events
- reviewing and re-energising our approach to equality impact assessments to make sure we are meeting our public sector equality duties, including the Fairer Scotland Duty
- establishing a refreshed operational governance group with membership representing all directorates
- ensuring appropriate governance of the NHS Scotland Academy's work on E&D through a collaborative approach between NES and NHS Golden Jubilee
- contributing to the development of NES's new strategy, building in an equality and Fairer Scotland impact assessment.
- Board and Executive Team development sessions on equality and human rights
- Understanding the learning needs of NHS boards and collaborating with those with experience of discrimination in reviewing and developing content for the Equality and Diversity zone on TURAS.

It is important that our Equality Outcomes reflect the strategic plan for the organisation and are integrated into strategic planning. It is proposed that we review the Equality Outcomes published in April 2021 to ensure these are the most significant and persistent areas of inequality that NES can take action to address.

We are engaging with a range of our stakeholders to position NES to support the education and skills of the workforce in equality, diversity, and human rights. This includes working with Public Health Scotland, other NHS Boards, Scottish Government Health Workforce Equality Unit and Health Inequalities Unit, EHRC and Scottish Human Rights Commission.

7. Policy and Legislative Developments

7.1 Scottish Government Programme for Government 2021-22 Commitments

The following provides a brief update on key commitments in relation to equality and human rights in the current Programme for Government:

- The Scottish Government is consulting on proposals to revise the Scottish specific duties as part of the Public Sector Equality Duty (PSED). The specific duties are intended as a supporting framework for public authorities to demonstrate 'due regard' to the need to:
 - Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Act
 - Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it and
 - Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

The Government has undertaken a review of the effectiveness of the specific duties and has set out proposals to improve the overall regime. This includes improving the cohesiveness of the regime and reducing bureaucracy, embedding inclusive communication proportionately across work with the public, extending pay gap reporting to include disability and ethnicity, and emphasising that equality impact assessment should be undertaken at the earliest opportunity to inform policy development and decision-making.

There are also proposals for Scottish Government to set national equality outcomes, aligned to the national performance framework which public authorities could adapt or if preferred to develop their own outcomes. Involving people with lived experience would be central to outcome setting. NES has submitted a response to the consultation which largely agrees with the proposals set out by the Government. There will be further engagement with stakeholders once SG has considered the consultation responses.

- An [Immediate Priorities Plan](#) up to 2023 was published in May 2021 to tackle all forms of racism and advance race equality. The plan aims to address the recommendations of the Expert Reference Group on COVID-19 and ethnicity.
- There will be a consultation on a draft Human Rights Bill which will incorporate the International Covenant on Economic, Social and Cultural rights, alongside three international treaties for the empowerment of women, disabled people and minority ethnic people.
- [Legislation](#) has been published to improve the system through which transgender people can gain legal recognition in Scotland. The Gender Recognition Reform Bill does not introduce any new rights for trans people but seeks to simplify the process for a trans person to gain legal recognition. The Bill is at Stage 1 in the Scottish parliamentary process.
- SG will consult on a strategy this year to embed equality, inclusion, and human rights across the public sector, including in all government policies, decisions and spending. Implementation will begin by the end of 2024.

7.2 Updated Guidance on the Fairer Scotland Duty

The Fairer Scotland Duty came into force on 1 April 2018. It places a legal responsibility on named public bodies in Scotland to actively consider ('pay due regard' to) how they can reduce inequalities of outcome caused by socio-economic disadvantage, when making strategic decisions. Updated [Statutory guidance](#) was published in October 2021 to help public bodies meet the duty. It includes key questions to consider when making strategic decisions and resources to support organisations to reduce inequalities caused by socio-economic disadvantage. The Improvement Service support a Fairer Scotland network to share practice across the public sector and NES participates in the network.

7.3 Scotland National Action Plan on Human Rights (SNAP)

Scotland's first national action plan on human rights was published in 2013. It set out a roadmap towards a Scotland where everyone can live with dignity and was the first of its kind in the UK. The Scottish Human Rights Commission (SHRC) provide the secretariat to SNAP and are working with a range of representatives from civil society and the public sector to develop the next action plan. This includes establishing a leadership panel to identify the priorities for the plan. The Panel is co-chaired by a commissioner from the SHRC and the Scottish Government's Deputy Director of Human Rights. NES's Director Social Care is a member of this panel. The panel had its first meeting in March 2022 and the new action plan is due to be published in December 2022.

Katy Hetherington

Principal Lead – Equality, Diversity and Human Rights

26 May 2022

Annex A: Equality Outcomes 2021-20025: Progress Update 2021-25

Outcome 1: Our support for youth employment with a particular focus on engagement and supporting transitions from school, college and university for those further from the labour market or more likely to experience barriers to full employment: young people who are care-experienced, disabled, or from Black and minority ethnic or socio-economically disadvantaged communities

Progress

We continue to work in partnership with the Employability and Apprenticeship Network, Scottish Government and external partners to progress planning and activity focused on the Young Person's Guarantee (YPG). We have created a draft NHS Scotland Opportunities Plan and are facilitating a series of working groups looking at marketing, voice and data to inform the final Plan. These are specifically targeting groups that are not well represented in our current workforce.

We are also exploring the potential for a Once for Scotland Virtual Work Experience platform which would support targeted activity across the country, again with support from YPG. This will allow us to develop resources that align with intersectional needs across the country, linked with careers marketing activity in schools and with partner organisations, e.g. The Princes Trust.

In terms of recruitment, we have secured Scottish Government funding to support a covid recovery internship programme, which will see up to 30 graduates take up placements across 18 health boards. Working with Graduate Careers Advantage Scotland, we have developed job packs and recruitment arrangements that support individuals that may have specific employability issues, e.g. socio-economic disadvantage. Early indications are that the recruitment pool is more diverse than we would have seen for a standard graduate recruitment exercise.

The NES Workforce Plan includes actions related to building capacity and capability across the organisation to support employability programmes. We are incorporating an EQIA into the plan.

As part of NHS Scotland Academy, the NHS Scotland Youth Academy has been developed to support widening access routes and sustainable workforce solutions in health and care through the lens of young people. Collaborative huddles to develop innovative approaches to support workforce challenges faced by health and social care employers have been developed across Scotland. The huddles include partners from local schools, colleges, Skills Development Scotland and third sector organisations.

Outcome 2: The number of refugee health professionals re-entering their profession is increased through better access to training, language support, professional mentoring and work experience

Progress

NES runs a refugee doctors programme which offers those wishing to become employed in NHS Scotland in future access to professional advice. They are guided on language qualifications, registration with the General Medical Council and, occasionally, supported in obtaining clinical placements. Refugee doctors also receive funding from NES for travel to college to support them in obtaining their language qualification and funding for travel and accommodation for PLAB (Professional & Linguistics Assessment Board) preparation courses and exams. NES works with The Bridges Programmes, Scotland's specialist agency, supporting the social, educational and economic integration of refugees.

We recognise the need to undertake further work in this area to measure progress towards this outcome. We are also exploring whether a resource on diversity and inclusion is required to support staff in their behaviours, attitudes and cultural competence to work towards an NHS culture of diversity and inclusion. For example, to support international nurses coming to work in Scotland.

Outcome 3: Attainment gaps for medical trainees from Black and Minority Ethnic backgrounds and International Medical Graduates are reduced

Progress

The Steering Group to advise the Scotland Deanery in supporting all trainees, particularly those with protected characteristics, to achieve their full potential by reducing differential attainment in medical education has continued to meet quarterly. An action plan is in place to act on the factors which the literature has identified as contributing to the attainment gap. This includes:

- Multi-stakeholder workshop planned for September
- GP STEP (Scottish Trainee Enhanced Programme) is being extended to Medicine. It is being explored for Surgery, Diagnostics, Obstetrics and Gynaecology and Paediatrics speciality groupings and continuing for Psychiatry.
- Reverse Mentoring being piloted in GP – 12 mentors have been trained and is being explored for senior deanery leaders
- Softer Landing- Safer Care being rolled out across Scotland for International Medical Graduates
- Additional support discussed for those trainees who advise that this is required at recruitment
- Associate Post Graduate Dean for International Medical Graduates recruited
- Equality, Diversity and Inclusion course for Trainers being piloted 5th May
- Foundation - unconscious bias awareness training at Foundation Programme Director awayday
- Looking to update the TURAS EDI data fields and to include EDI data within Training Programme Management reporting dashboard.

Outcome 4: We will continue to enhance the inclusivity of education and training programmes for disabled learners in NHS Scotland through:

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

The Technology Enhanced Learning (TEL) team was set up in NHS Education for Scotland in November 2021 to help support NES staff to build their skills and confidence when using technology to enhance the design, development and delivery of learning courses and activities, and accessibility is an integral part of this. Virtual learning options can offer increased flexibility of learning opportunities, and the TEL team is in place to support educators transform their course materials into effective virtual formats.

One aspect the team have focused on is improving the experience of learners with sensory losses by incorporating pre and post event questionnaires. For example, our approach to identifying learning needs and ensure learning content was accessible for all was checked as part of the Healthcare Support Workers Virtual Learning Week in March 2022. We have identified where existing guidance for educators could be strengthened to help plan and adapt presentation styles. Signposting to guidance is an important part of the TEL teams' role in general as we aim to increase educator's confidence in their content and decisions.

A survey was undertaken in late 2021/ early 2022 to capture feedback on the experiences of delegates attending webinars and ascertain the efficacy of the transcription process. The analysis of this response data is almost complete and will be used to inform next actions in this area.

We have established a short-life working group to undertake a review of NES's Inclusive Education and Learning Policy. This will include an equality impact assessment and an increase in focus on digital learning. We intend to conclude this work by September 2022. It will involve a wide range of stakeholders and partners, including our staff equality networks.

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

A new Disability Advisor started in NES on 1 April 2022 and will be progressing work on reasonable adjustment passports for trainees under our lead employer programme. A Reasonable Adjustment policy has been piloted in NHS 24 and the Scottish Government are taking it to the 'Once for Scotland' policy team as this work restarts now. Our Disability Advisor will be linked into this work.

c. Providing holistic careers advice and person-centred support for disabled trainees through the Performance Support Unit.

We are in the advanced stages of completing a reorganisation and expansion of a suite of trainee support services. The name of the Performance Support Unit will change in the Autumn to the Trainee Wellbeing and Development Service and will provide a seamless and better connected portfolio of services such that trainees can be fully supported to achieve their potential. Part of this work involves aligning

previously separate parts of trainee support (e.g. careers, less than full time training) under a single governance umbrella. Trainees will, when they require or access support, receive this from staff who will receive regular training and will be generally able to offer a one stop approach to triage and provision of support.

Outcome 5: The diverse development needs of our workforce and changes in the way work is being done will be our focus as we support development of digital capability and accessible and inclusive technology enhanced learning. Digital learning capability is a complex concept incorporating elements of information literacy, digital skills and capacities for learning. Learners may also be differentially impacted by barriers to accessing appropriate digital infrastructure for learning. We will invest in core skills development for our educators and designers which will include

- Accessibility [design, facilitation, assessment, reasonable adjustments]
- Cultural competence and anti-racist education
- Unconscious bias in education
- Social learning and facilitating for inclusive learning

Developing digital capability in NES

The Technology Enhanced Learning (TEL) team is supporting NES educators to develop their skills and confidence in technology enhanced learning. They will do this through the creation of learning resources and activities which will be available to all NES staff, and by providing direct support in response to requests from educators. An online tool has been purchased for NES staff which will enable effective self-assessment of skills and competencies relating to digital capabilities. This includes questions on accessibility and inclusion. Initially introduced to the TEL Educator community, there are plans for wider roll-out across the organisation. Evaluation on learners' experience of the technologies used is also now incorporated to identify any changes for improving learning.

A review is underway of the existing Quality Standards for Digital Learning, and a new standard specifically for 'Accessibility' will be included as part of this process. Educators will be signposted to these standards to ensure that these underpin the design and development of learning materials in the organisation. The review and amendments to the standards is due for completion by May 2022.

The Knowledge Services Team delivered information literacy skills training via a range of videos, guidance, eLearning and webinars tailored to the audience. Webinars attracted 850 people in 2021-22. The team worked with educators in NES to tailor resources for different audiences. NES funds the national digital library (www.knowledge.scot.nhs.uk) to ensure equity of access to research and evidence for health and social care staff in Scotland.

The Knowledge Services Team (with the wider NHSS Library Network) also provides support for building and engaging with communities of practice and promotes the benefits of social learning in all their training, policies, and strategies.

Developing digital capability across the health and social care sector

SG funded NES to deliver a programme of work to support Building Digital Skills and Leadership capabilities across the health and social care sector. The Digital Enabled Workforce Team has been established in NES and is working in collaboration with a wide range of partners and stakeholders across the sector to support delivery of the priorities within the programme. The programme will provide foundational resources to help in building digital skills and leadership. The Principal Lead – Equality, Diversity and Human Rights is joining the Programme Board to support equality considerations as the programme is delivered. Examples of progress include:

- Creation of Near Me and Remote Health Pathways dedicated learning resource website. Capturing user feedback to develop the content and required learning resources further.
- Launch of the M365 skills hub across the health sector to support adoption and considering options to support accessibility to the care sector.
- The KIND (Knowledge, Information and Data Specialist) workforce learning network was launched in January 2022. The KIND learning network is an inclusive and supportive community of practice for staff across the knowledge, information and data workforce. A monthly learning webinar series was launched in January 2022 as part of a portfolio of learning activities. Recent topics have included digital accessibility, and ethical digital design practices.

Cultural competence and anti-racist education

Several Active Bystander training sessions delivered by The Active Bystander Training Company took place for staff in our Medical Directorate in summer 2021 and an all staff open webinar was offered to and attended by 40 members of NES staff in December 2021.

Outcome 6: Our approach to digital design considers the role of digital in:

- a. How we design with the diverse needs of our audiences in mind when developing our products;
- b. How we consider the role of digital in supporting the care pathways we are supporting or for which we are delivering learning;
- c. How the delivery of highly accessible digital solutions is best supported by and influences the “non-digital” ways of interacting with a product or service; and
- d. How we measure whether our digital products and technology enabled learning are connecting with audiences in ways that address rather than widen inequalities

Key measures have been developed to set out how progress will be made towards outcome 6.

NES considers equality, equity, inclusivity, accessibility, and access at the start and throughout all phases of digital design as core to good design and as part of our statutory duty. When designing any digital product or service, a framework on ‘key dimensions to enhance’ and ‘barriers to access’ is undertaken. Digital design standards underpinning our work are outlined in the [Scottish Approach to Service Design](#) and the [Digital Scotland Service Standard](#).

Design and product research is conducted across a wide variety of users, disciplines, contexts, and programmes, reflecting all the many ways in which digital is core to supporting people, the workforce, operations, policy, and strategy to improve health, care, well-being, education, and training.

A foundational EQIA is underway for NES Technology Service to ensure the 30+ products in Health and Care we develop are compliant with our Public Sector Equality Duty and our aim to reduce inequalities. The further iteration on the ICARE and Barriers to Access frameworks considers critical elements which apply across a range of digital products for people.

Digital inclusion has been recognised as a 'super social determinant of health' through the intersecting layers of literacy, access, and connectivity by the WHO. Good design in digital infrastructure and access at scale as an important system-level capability as part of a national strategy. Lessons learned from at pace and scale include the development of the Vaccinations Programme and the Highest Risk SMS Service. This underscores digital infrastructure and digital access as an important social determinant of health.

The system-level virtual infrastructure of the National Digital Platform for health and care and myTuras, our education, training, and workforce platform, contribute to person and community level interactions with digital design to promote key goals of equality, inclusivity, accessibility, and access.

Outcome 7: The attraction and selection processes for our leadership and management programmes support a leadership and Management cohort that is inclusive and representative. The provision of our leadership and management programmes supports the building of an inclusive workplace culture.

We are developing an approach to ensure greater diversity and inclusion in national leadership programme participant cohorts by following the principles of the NES Inclusive Education and Learning policy. We are ensuring that:

- A robust and effective communication plan is in place to ensure that all stakeholders and interested parties are informed about existing programmes and those in development
- Publicity material reflects the diversity of health and social care workforce in Scotland.
- All applicants and participants are treated fairly, irrespective of their protected characteristics.
- We monitor the equality and diversity profile of applicants to the programme and use the data to ensure the process is fair and identify any areas for improvement
- We are contributing to the National Leadership Development Programme sub-group on equalities, chaired by SG and which is at an early stage in identifying its actions.

Outcome 8: NES is an inclusive employer, with:

a. Staff Networks

An Equality Network Co-ordinator was appointed on a fixed term basis in February 2021 to establish staff networks. NES now has the following staff networks which meet regularly in a supportive environment:

- Parents and Carers Staff Network (67 members) - This network meets quarterly
- Underrepresented Ethnic Minority Staff Network (36 members) - This network meets monthly
- LGBTQ+ Staff Network (29 members) - This network meets every 2 months
- Disability, Long-term conditions, Neurodiversity & Mental Health Staff Network (48 members) - this network meets monthly

Each network has developed terms of reference, appointed a chair and vice chair and is developing action plans. Staff are given protected time to participate in the networks. Network meetings provide the opportunity for peer support as well as progressing network action plans.

Examples of activity that the networks have been involved in include:

- Working with HR on Carer Positive benchmarking to create a supporting working environment for carers in the workplace
- Membership of the Scottish Government Ethnic Minority Forum for all NHS ethnic minority network Chairs
- Supporting NHS Scotland's Pride Pledge and badge campaign
- Contributing to new style guidance for TURAS to ensure accessibility
- Contributing to NES's People Recovery Group through a survey to the staff networks on experiences of the pandemic and hybrid working
- Contributing material to promote NHS Scotland as a diverse employer including five podcasts to reflect LGBTQ+ people working in the NHS and now are now developing an educational website to celebrate diversity in the NHS with stories from minority ethnic staff
- Contributing to the Healthy Working Lives Strategy Group work.

The network co-ordinator is working with the staff networks to build a sustainable infrastructure that will contribute to effective staff participation and influence in the organisation. The Chairs and Vice Chairs of all the networks meet every quarter to discuss and decide ways forward on network common areas. Evaluation of the networks will be planned for 2023 for continuous improvement.

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

Over Q2 and Q3, a hypothesis was developed that external advertising of posts leads to increased diversity in relation to ethnicity of all applicants and also increases the pool of candidates aged 16-24 for entry level posts (Agenda for Change Bands 2-5). Internal advertising decreased from 25% in Q3 to 18% in Q4, therefore if the

hypothesis is accurate it would be reasonable to anticipate that the subsequent increased external advertising of roles might lead to increased ethnic diversity of applicants and that entry level posts would have an increased pool of applicants aged 16-24.

In Q4, the number of vacancies advertised for posts at Bands 2-5 increased to 42 (in Q3 there were 25) and average applicants to entry level posts increased to 68 (Q3 was 52). The applicants in age range 16-24 also increased from 5% in Q3 to 7% in Q4. The data, therefore, in relation to attracting younger applicants, appears to confirm the emerging hypothesis. However, it is early days, and this should continue to be monitored to determine the correlation.

The Q4 data in relation to Black and Asian minority ethnic applicants is less indicative, however, with a small increase from 15.89%, in Q3, to 17% in Q4. Continuing to track the impact of internal and external recruitment practices will continue to further test the hypothesis.

A review of the NES job pack was undertaken to understand what barriers the current job pack and person specification created for different communities when applying for a role at NES. This included colleagues currently working within NES who were seeking career progression. We reviewed academic and professionally led research. We reached out to several external organisations, internal networks, line managers and colleagues to ensure a diverse input. Findings from these discussions led to changes being made to the job pack. These changes include a shortening of the job pack; improved visibility of commitments to E&D; person specifications made more specific; refocusing of experiencing and role of qualifications. The refreshed job pack will shortly be rolled out for all NES Agenda for Change vacancies.

Work is underway developing an e-learning module on recruitment for line managers. The first module is live on Turas and is a guide to values-based recruitment. The second module, which will shortly go live, is on advertising and planning for recruitment. The third module, which is in development, is about the shortlisting and interviewing process, and includes guidance on reasonable adjustments in interviews and the Guaranteed Interview Scheme, which is part of our commitment as a Disability Confident Employer.

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

The Equality Network Co-ordinator has contributed to our People Recovery Group, providing a link to our staff networks as plans to move to hybrid working have progressed. This includes surveys through the networks. We are also considering our overall approach to staff wellbeing which covers learning and development, our Healthy Working Lives Group, health and safety, HR and equality and diversity. Further work will be undertaken in the first quarter of the financial year.

Mainstreaming Equality and building capacity

As well as specific outcomes, NES also set outcomes to mainstream equality into its work:

- Improve our Equality Impact Assessment (EQIA) performance, ensuring a systematic approach to using EQIA to inform the development of new workstreams
- Build capacity – both technical and educational -- to deliver accessible digital learning.

Our EQIAs are published on our website and building capacity across the organisation on impact assessment is a priority for the Equality, Diversity and Human Rights team this year.

The establishment of the TEL team in November 2021 is supporting our educators to assess skills and competencies in relation to digital capabilities and to increase skills and confidence in accessible digital learning. We will also be reviewing our Inclusive Education and Learning policy over the next few months and this will reflect the increasing focus on digital learning (as highlighted under Outcome 4a).

Board Paper

1. Title of Paper

2021-22 Quarter 4 Risk Register Report, including Corporate & COVID-19 Risk Registers

2. Author(s) of Paper

Jim Boyle – Executive Director of Finance
Janice Sinclair – Deputy Director of Finance
Lorraine Turner – Manager, Planning and Corporate Resources

3. Situation/Purpose of paper

The purpose of this paper is to present the NES Risk Register and COVID-19 Risk Annex as at 19 May 2022.

4. Background

4.1 The paper presents the NES Corporate Risk Register as at 19 May 2022 which incorporates re-scoring, where appropriate, to reflect the impact of the COVID-19 pandemic on *existing* risks.

4.2 An annex detailing the *additional* key risks identified for the organisation as a result of the impact of, and the NES response to, the COVID-19 pandemic is included.

5. Assessment/Key Issues

(include identification of any strategic risks)

5.1 Corporate Risk Register and COVID-19 Risk Register

The Corporate risk register has been updated since the Board meeting on 24 March 2022, with changes denoted in blue. The most significant of these changes is the addition of a new operational risk (**Risk R20**) discussed and agreed at the Extended Executive Team meeting on 6 April 2022, in relation to the capacity of the corporate support infrastructure to assist in the delivery of the NES Strategy, particularly as a result of the difficulties in recruiting in sufficient numbers. A number of mitigating actions have been identified with further measures expected to be added. The impact of the mitigation measures will be quantifiable once a full assessment can be made.

The Finance risk **R10**: *The complexity of the NES budget results in year-end underspend giving the impression that NES is overfunded or not delivering its planned objectives* has been updated with additional mitigation detail and re-scored following feedback from the Audit & Risk Committee meeting on 28 April 2022. The net scoring has been adjusted (from Impact 3, Likelihood 3 to Impact 3, Likelihood 5) reflecting the need to strengthen mitigations; and that additional actions are not yet implemented.

5.2 Risk Management Group (RMG) update

The schedule of monthly RMG meetings has been extended through to March 2023. The Group continues to consider key aspects of risk management to support continuous improvement in practice.

There remains an ongoing focus on consistency and clarity in development and content of risk registers, including risk identification and scoring, through the rolling peer review of Directorate risk registers. The Risk Management Group will also seek to identify existing or emerging risks which require escalation to the strategic corporate register.

The group have adopted enhancements to risk terminology, informed by KPMG pro forma, which are currently being progressed through updates to the risk management system. Development of a standardised risk template is currently under consideration to support a common format for local review of risks in the absence of system capability to produce reports that meet requirements. A proposed template has been developed and shared with RMG members for initial pilot and feedback.

Once the risk review report produced by Azets has been finalised, the role and membership of the Risk Management Group will be revisited in the light of the report's recommendations.

6. Recommendations

The NES Board is asked to approve the NES Corporate Risk Register and COVID-19 risks and provide any further feedback as appropriate.

Author to complete

a) Have Educational implications been considered?

- Yes
- No

b) Is there a budget allocated for this work?

- Yes
- No

c) Alignment with [NES Strategy 2019-2024](#)

- 1. A high-quality learning and employment environment
- 2. National infrastructure to improve attraction, recruitment, training and retention
- 3. Education and training for a skilled, adaptable and compassionate workforce
- 4. A national digital platform, analysis, intelligence and modelling
- 5. A high performing organisation (NES)

d) Have key risks and mitigation measures been identified?

- Yes
- No

e) Have Equality and Diversity and health inequality issues been considered?

Yes

No

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

Yes

No

JS/LT
NES
May 2022

NES Corporate Risk Register - May 2022

Risk No.	Description	Risk Owner (Lead Director)	I x L	Current Scores			Mitigating measures	NES Risk Appetite	Previous Residual Score	
				Gross Risk	I x L	Net Risk			I x L	Residual Risk
STRATEGIC/ POLICY RISKS										
R1	Pressures on the system result in education and training being considered as less important than service delivery priorities, including as a result of COVID-19 impact.	NES Chief Executive Karen Reid	4 x 4	Primary 1	4 x 4	Primary 1	<ol style="list-style-type: none"> NES Board to advocate and promote the importance of education and training. Revised NES Strategic Plan clearly articulates the importance of education and training to a sustainable workforce. This has been well received. The residual scoring of this risk remains as Primary 1 and now reflects the risk associated, across the professional groups, with the disruption to educational professional programmes. Detailed measures are reflected in Risk 1 and 2 of the attached COVID register. NES Remobilisation Plan focuses on recovery of priority areas of core business, acknowledging the continuing uncertainty and service pressures which may affect capacity within the workplace- based learning environment. 	OPEN (Score Range 10-12)	4 x 4	Primary 1
R2	Scottish Government budgetary decision results in an uplift for NES that is less than cost pressures which in turn could mean NES Board are unable to balance expenditure against expected funding and is unable to deliver its strategic outcomes.	NES Executive Team (Jim Boyle)	5 x 5	Primary 1	4 x 3	Primary 2	<ol style="list-style-type: none"> The Annual Operational Planning process within NES gives Directorates indicative budgets to plan their own activities and expenditure and identifies cost pressures and potential savings across NES. The Senior Operational Leadership Group, chaired by the Director of Planning reviews budget submissions from across NES to ensure congruence, no duplication and identify opportunities for collaboration and efficiency savings. This process enables decisions to be taken by the EET on prioritisation measures needed to deliver a balanced budget to the Board to be based on the impact of the planned activities. NES Board approves the annual budget, including the measures suggested by the EET to reach a balanced position. Close working with SG to address the underlying deficit resulting from the expansion of TGs and uplifts that have been less than cost pressures in this area. SG have agreed to underwrite the in-year deficit position on MTG's. Discussions with SG are ongoing to identify the longer term (recurrent) impact of COVID. The NES budget is now managed and reported in two separate elements which highlights the underlying recurrent deficit on Medical training grade salaries which is underwritten by SG. 	OPEN (Score Range 10-12)	4 x 4	Primary 1
R3	Policy development UK-wide and within Scotland (including as a result of COVID-19 pandemic), may have negative impact on NES's capacity to support attraction, recruitment and retention of the workforce; potential future workforce supply; and training progression.	NES Chief Executive Karen Reid	4 x 4	Primary 1	4 x 3	Primary 2	<ol style="list-style-type: none"> NES Directors maintain strong engagement with relevant leads at Scottish Government. NES to maintain an evidence bank to support ability to influence policy decisions. Chief Executive and NES Directors to maintain links with other UK organisations. The ability to agree decisions on a 4 nation basis has been key during the COVID response. The detail of these decisions is included in the COVID appendix. 	OPEN (Score Range 10-12)	3 x 3	Contingency

R4	Challenges that Boards and other organisations have in meeting demand for staffing result in a negative perception of NES's involvement in the attraction, recruitment and retention of the workforce	NES Chief Executive Karen Reid	4 x 4	Primary 1	3 x 4	Primary 2	<ol style="list-style-type: none"> 1. Maintain clarity in relation to NES's role and influence - through regular engagement with SG sponsor team, and relevant executive director groups, including SAMD, SEND and HRDs. 2. Work with Boards to ensure optimal deployment of staff. 	OPEN (Score Range 10-12)	3 x 4	Primary 2
R5	Changes in the landscape of health and social care and pressures in the system result in a risk that NES is unable to manage constructive relationships with key partners	NES Chief Executive Karen Reid	4 x 4	Primary 1	3 x 4	Primary 2	<ol style="list-style-type: none"> 1. Chief Executive and/or NES Directors maintain open and collaborative relationships/arrangements with counterparts in partner organisations 2. Ensure Chair is well briefed to manage relationships with other Board/organisational Chairs - Chair's regular Newsletter now being issued to other Chairs. 3. Parliamentary monitoring service provides daily briefing to NES Executives and senior managers. Board papers and minutes made available on NES corporate website. Discussions about pressures and national developments at EET are communicated to staff through regular staff video and Intranet updates. 	OPEN (Score Range 10-12)	3 x 4	Primary 2
R16	The UK is no longer a member of the EU: potential negative impact on recruitment, and reciprocal recognition of qualifications.	NES Chief Executive Karen Reid	4 X 5	Primary 1	3 x 4	Primary 2	<ol style="list-style-type: none"> 1. Systems and processes have been updated to reflect the points-based system for NES recruitment and for NES employees, and more widely for the national immigration (formerly Tier 2) services provided to Health Boards by NES for trainees (doctors and dentists in training). 2. Regular communications have been provided to colleagues across Boards and affected employees and trainees. Changes to immigration regulations led to a 25% increase in unique applications in 2020/21 and a further increase in 2021/22. The 2020/21 increase in applications resulted in improved fill rates to training programmes across the medical specialties and this is expected to continue in the 2021/22 recruitment round. 	OPEN (Score Range 10-12)	3 x 5	Primary 1
R17	The National Digital Platform is not delivered in line with the updated Digital Health and Care Strategy.	NES Executive Team (Christopher Wroath)	4 X 4	Primary 1	4 X 3	Primary 2	<ol style="list-style-type: none"> 1. New Director to review structures and deliverables and identify necessary changes to ensure resources are focused on delivery of the agreed outcomes from the Digital Health & Care Strategy (and take account of any changes when SG refresh the Strategy later in 2021). 2. Continued engagement with key stakeholders. 3. Performance Monitoring will be included in the remit of the reconstituted Digital and Information Board Committee. 4. New Director to ensure all NES Technology Service work has clinical safety and medical device regulations embedded into all developments. 	OPEN Score Range 10-12)	4 x 3	Primary 2
R20 (NEW)	Inability to fully support the delivery of the NES Strategy due to lack of capacity in corporate support infrastructure	NES Executive Team	4 x 4	Primary 1	TBC	To be confirmed following the further assessment of mitigation impacts	<ol style="list-style-type: none"> 1. Assessment of resource required to support pipeline commissions is being made, informed by information provided by SG sponsorship team. 2. Some additional HR resource has already been provided in the 2022/23 budget. 3. Further assessment of any additional resource in all support areas will be made based on emerging commissions, as well as NES baseline activity. 4. Recruitment authorisation and other recruitment processes are being reviewed with the aim of achieving a more efficient, risk-based approach reducing time across NES and, all things being equal, reducing the time to recruit new staff. This could include how to bundle recruitment into groups of authorised roles, rather than recruiting to each post individually, etc. 5. Discussions on the implications of continued non-recurrent funding have been and will continue to be held with the Scottish Government. 	OPEN (Score Range 10-12)	N/A	N/A

OPERATIONAL/SERVICE DELIVERY RISKS										
R6	In the face of new and existing demands, NES is unable to allocate resources to support priority activities in an agile and responsive manner	NES Chief Executive Karen Reid	5 x 5	Primary 1	3 x 4	Primary 2	<ol style="list-style-type: none"> As part of operational planning all activities are linked to a NES strategic objective. Continued focus on improving processes to release capacity - with plans to support this with QI coaching. At a Strategic Level argument to be made about requirement to invest in workforce organisation. Regular EET meeting are a positive contribution to the management of resource demands – priority areas identified quickly and addressed. Executive-led digital structure enables prioritisation of NES digital activity, Strong focus on continuing to build on innovations in delivery in response to COVID. Workforce planning approach approved by Executive Team to develop and implement NES whole system workforce planning covering 2022 -2025. Action Plan to be published by July 2022, linking workforce planning to operational planning, and incorporating prioritised actions informed by Directorate-level discussions. The Action Plan to include specific actions covering: recruitment, attraction and branding, succession planning, identification of skills gaps, and diversity. Discussions are ongoing with the Scottish Government sponsorship team to ensure that commissions land at NES with clear policy aims and objectives, to minimise the time spent forming delivery proposals, and with full resource implications outlined. The NES Executive Team will also continue to monitor the resources required to deliver the Strategic Plan, and measures will be put in place to improve recruitment timescales, which are currently causing resource pressures. 	OPEN (Score Range 10-12)	3 x 4	Primary 2
R7	Turnover in key roles leads to loss of expertise/corporate knowledge resulting in negative impact on performance.	NES Chief Executive Karen Reid	4 x 4	Primary 1	3 x 3	Contingency	<ol style="list-style-type: none"> Executive Team has approved an approach to career development and succession planning. This includes mapping of key roles; a process to identify potential successors; work with potential successors on individual development plans. Key focus has been applied to planning the onboarding of new executive recruits: Medical Director, Director of Social Care, Director of Finance. Deputising arrangements for the NES CEO were formalised on 29 March 2022 to align with the retirement of the current Deputy CEO in March 2022. 	OPEN (Score Range 10-12)	3 x 3	Contingency
R8	Organisational or other changes lead to dissatisfaction and disengagement of staff	NES Chief Executive Karen Reid	4 x 4	Primary 1	3 x 3	Contingency	<ol style="list-style-type: none"> Strong partnership working arrangements in place and maintained through regular contact with the Employee Director and via the Change Management Programme Board. Communication plan to be a key focus on all organisational change projects. Strong focus on communication and visibility, both at a corporate and directorate level through, for example, weekly executive led corporate videos. Use of employee voice tools to monitor the pulse on organisational sentiment. Following an evaluation of Trickle in October 2021, it has been agreed to transition to an alternative tool (Microsoft Viva insights) during 2022. 	OPEN (Score Range 10-12)	3 x 3	Contingency
R9	Major adverse incident impacting on business continuity	NES Executive Team (Christopher Wroath)	4 x 4	Primary 1	2 x 4	Housekeeping	<ol style="list-style-type: none"> Disaster Recovery Plan and Business Continuity Plans have been approved by the Executive Team. <ul style="list-style-type: none"> The plans were tested in a desk top exercise and recommendations were considered by the ET and incorporated into the current version of the plans. How these plans have been implemented is reflected in the COVID Annex. Update of BCP will be considered post-Covid recovery since currently still in full deployment of the Plan. 	OPEN (Score Range 10-12)	2 x 4	Housekeeping

FINANCE RISKS										
R10	The complexity of the NES budget results in year-end underspend giving the impression that NES is overfunded or not delivering its planned objectives.	NES Executive Team (Jim Boyle)	4 x 5	Primary 1	3 x 5	Primary 1	<ol style="list-style-type: none"> A Variance Analysis Reporting (VAR) process is in place: <ul style="list-style-type: none"> The annual budget is based on the operational and financial plans. The targets and outcomes within the operational planning model provide visibility of planned spend at an activity level which contributes towards more effective variance analysis. The outcome from regular discussions between Finance Managers and budget holders to identify any movements in actual expenditure compared to budget/forecast are held monthly and reported to Directors and the Director of Finance. This process allows for mitigating action to be taken to manage any overspend/ underspend, as early as possible during the year. Regular budget update reports to the Extended Executive Team, and the Board support effective governance. In addition, the Executive Team sub-group on recruitment (ETSR) ensures that headcount cannot be added without prior approval. Requests from SG for NES to undertake additional work are only agreed if appropriate funding is provided at the outset and recognises what can be delivered in-year. In addition, a process is currently being developed to identify all future commissions from Scottish Government (SG). This involves working with the SG to ensure that all commissions come into a central point of contact within the SG sponsor team and will then be communicated to the Director of Finance (DoF) to ensure wide visibility across NES. NES colleagues will also be required to inform the DoF of any discussions with SG to ensure no omissions. Discussions with SG are underway to reclassify more non-recurring funding to recurring which should encourage the early commitment to programmes, reducing underspends caused by recruitment delays. An initial paper on high level financial principles to be adopted across NES was discussed at the ARC meeting in April 2022 and recommended to the Board for adoption in May 2022. The principles will set out the definitions of roles & responsibilities across the whole of NES affecting a range of financial aspects of NES business. 	AVERSE (Score Range 1 - 3)	3 x 3	Contingency
R11	NES is unable to deliver in year savings required to balance budget and therefore has year-end overspend which is in breach of its statutory financial targets	NES Executive Team (Jim Boyle)	4 x 5	Primary 1	3 x 3	Contingency	<ol style="list-style-type: none"> Monthly Financial reporting includes performance against savings targets to provide an early indication of any potential under-achievement of the targets. Additional measures identified during Operational Planning could be implemented part-way through the year if required. Improvement plans to support an ongoing programme of identifying efficiency savings will be developed Savings captured from innovations in delivery in response to COVID. SG have agreed to review the status of non-recurring allocations with a view to changing them to recurring where possible which will generate efficiencies from the stability created from longer-term planning. 	AVERSE (Score Range 1 - 3)	3 x 3	Contingency

REPUTATIONAL/CREDIBILITY RISKS										
R12	NES is not able to demonstrate the impact from the interventions that it has developed and delivered: Scottish Government guidance has required necessary reprioritisation of organisational activities in response to COVID-19.	NES Chief Executive Karen Reid	4 x 5	Primary 1	3 x 4	Primary 2	<ol style="list-style-type: none"> 1. Directorates have focused on contingency planning and arrangements for paused work. 2. UK based guidance from Statutory Education Bodies has informed education and training remediation responses. 3. Some core areas of education and training have been maintained/adapted to mitigate long-term impact to workforce supply. 4. Scottish Government guidance to NHS Boards will shape recovery phase requirements. 5. NES Recovery Plan will focus on three-phased approach: to prioritise delivery of critical activities in short-term; resume delivery in medium term; and consider improvements to business model in longer-term. 6. Annual Operational Plan, incorporating desired outcomes, will form baseline for organisational activities post-COVID-19. 7. Planning systems require all activities to include anticipated desired outcome 8. Desired outcome measured 9. Readiness to 'fail fast' rather than pursue initiatives that aren't working. 10. Development of focused communication plans as a pro-active measure to ensure awareness of NES activity. 	CAUTIOUS (Score Range 4 - 9)	3 x 4	Primary 2
R13	<p>NES does not deliver leading to a loss of reputation and confidence from stakeholders.</p> <p>Uncertainty in health and social care as a result of COVID-19 may lead to difficulties responding to service demands and needs.</p> <p>Future implications of the Independent Review of Adult Social Care in Scotland.</p>	NES Chief Executive Karen Reid	4 x 5	Primary 1	3 x 3	Contingency	<ol style="list-style-type: none"> 1. NES organisational activity has been refocused to support frontline services and implementation of NES Re-mobilisation Plans 2. Work has been undertaken with NHS Boards, statutory education bodies in the four nations, and professional regulators, to mitigate disruption and allow trainees/learners to progress where possible. 3. In consultation with statutory bodies across the four nations, recruitment procedures have been put into place to enable recruitment to operate effectively under current restrictions and support workforce supply chain. 4. Management of stakeholder expectations in relation to NES capability to deliver and support new systems developments. 5. Review of Operational Plan targets to identify and plan priorities in the recovery phase. 6. Ensure targets set are SMART and also have resources allocated to them to support delivery 7. Ensure Chief Executive, NES Directors, Board and standing committees have access to regular management reporting. 8. Development of focused communications to support management of stakeholder expectation in relation to NES capacity to deliver and support new systems development. 9. NES Director of Social Care appointed to lead the social care work programme in NES. 10. The implications for NES from the Adult Social Care Review and the establishment of the National Care Service are discussed with our Sponsor Directorate and Mental Health & Social Care Directorate to allow for forward Planning. 	CAUTIOUS (Score Range 4 - 9)	3 x 3	Contingency

ACCOUNTABILITY/GOVERNANCE RISKS											
R14	Failures in Board processes lead to corporate governance non-compliance and loss of credibility with Scottish Government e.g. failure to comply with statutory and/or other requirements, failures in financial/audit/staff governance/educational quality procedures	NES Executive Team (Donald Cameron)	5 x 5	Primary 1	2 x 2	Housekeeping	<ul style="list-style-type: none"> 1. Standing committees responsible for each governance domain supported by Executive Groups. 2. Each committee provides an annual report to Audit Committee detailing how it has discharged its remit. 3. Comprehensive programme of internal audit 4. An Assurance framework has been developed in line with the 'Blue Print for Governance' and the Assurance and Audit Committee Handbook 5. Whistleblowing arrangements are in place with information, training and resources available to staff via the Intranet including Whistleblowing standards, policy and process. 6. During the pandemic we have maintained a 'Governance Light' approach for implementation if required to support secure governance at times of particular service pressure. 7. Ensure corporate awareness of relevant statutory regulatory oversight, and maintain close working with relevant professional and other regulatory bodies. 	AVERSE (Score Range 1 - 3)		2 x 2	Housekeeping
R15	NES has a breach of Information Governance requirements resulting in loss of data and/or negative publicity	NES Executive Team (Christopher Wroath)	4 x 5	Primary 1	4 x 2	Contingency	<ul style="list-style-type: none"> 1. Statutory and relevant data security processes in place, with specific reference to the new General Data Protection Regulations. 2. Specific additional policies, procedures and practices (based on ISO27001) have been put in place to ensure robust security applies to the TURAS platform and the being developed National Digital Platform. 3. Whistleblowing arrangements are in place with information and resources available to staff via the Intranet including Whistleblowing standards, policy and process. 	AVERSE (Score Range 1 - 3)		4 x 2	Contingency
R18	Impact to NES operations, staff and stakeholders as result of Coronavirus pandemic.	NES Chief Executive Karen Reid	5 x 5	Primary 1	4 x 5	Primary 1	<ul style="list-style-type: none"> 1. Immediate implementation of emergency planning arrangements including NES Business Continuity Plan, COVID-19 Contingency Plan, Re-mobilisation Plan and Communications Plan. On-going review, monitoring and update in response to UK and Scottish Government guidance and latest developments. 2. NES Resilience Co-ordinating Team in place. 3. Strategic deployment and enablement of remote access technology to support meetings and decision-making; operational activities; and staff working from home 4. Reporting protocols agreed and implemented. 5. Dissemination and cascade of organisation-wide communications across key platforms. 6. Fortnightly meetings of the Recovery and Renewal Steering Group actively reviewing Covid recovery status and current staff arrangements, making necessary decisions to adapt or escalate as appropriate. 7. Future working arrangements for NES agreed by the Executive as 'hybrid'. Directorates have responsibility for their own implementations plan which will be triggered at the appropriate point of Covid recovery on a corporate basis. 8. NES CEO, Chair and Director of Workforce taking forward strategic discussions regarding the resilience and wellbeing of health and social care senior leaders as part of the National Leadership Development Programme, 	AVERSE (Score Range 1 - 3)		4 x 5	Primary 1

R19	Breach of cyber security resulting in unauthorised access to NES digital systems and data	NES Executive Team (Christopher Wroath)	5 x 4	Primary 1	5 x 3	Primary 1	<ol style="list-style-type: none"> 1. Digital team ensures firewall logs, including changes to the firewall rule base, are added to the (Security Information and Event Management) SIEM tool in use and continue to be monitored frequently. 2. The standard build for end user Windows devices and servers has been documented in the Windows 10 Endpoint Security Standards and in the VMWare tool for servers. 3. A penetration test of the NES internal network by an external CHECK-accredited organisation will be scoped and scheduled before the end of August 2022. 4. Senior Management and Executive level involvement and oversight of Cyber security related risk through updates in the Digital and Information Committee and Audit Committee meetings. 5. Staff awareness of Cyber security matters is raised through information security webinars provided by the Information Security Manager, which includes phishing emails and security regarding the use of public Wi-fi, reporting security breaches and determining key NES contacts, password guidance, information / data management under GDPR as well as analysing key current trends in Cyber crime. 6. The suite of Information Security Policies and Procedures will be reviewed annually. 7. NES Senior Management will ensure a skills and capability matrix for cyber security is completed and updated annually. 	<p style="text-align: center;">AVERSE (Score Range 1 - 3)</p>	5 x 3	Primary 1
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Operational/Service Delivery Risks								
Risk No.	Directorate	Risk Title	Cause	Effect	Inherent Priority I x L	Residual Priority I x L	Mitigation Measures (Controls/Actions)	NES Risk Appetite
1.	NES Clinical Directorates: <ul style="list-style-type: none"> Medical NMAHP Dental Pharmacy Optometry Healthcare Science Psychology 	Interruption/delay /adverse impact to training programme delivery including Scottish Government mandated training.	<ul style="list-style-type: none"> Cancellation of required courses or programmes Cancellation of required professional examinations Reduced clinical experience and training capacity due to: cancellation of routine clinical activities; redeployment of trainees to different clinical duties; absence from work due to self-isolation or illness Cancellation of study leave due to COVID pressures 	<ul style="list-style-type: none"> Disruption to training leading to delays in training progression Slippage to recruitment and training plans Financial implications as a result of extensions to training and support Training capacity issues Negative impact on service delivery Potential future workforce supply issues/gaps Uncertainty around non-recurrent funding Several essential Medical Royal College examination diets continue to be postponed. Hopefully, many will be rescheduled within this training year, but this will introduce further lag into the system. Ongoing concern about the significant impact of reduction in elective clinical activity in many craft specialties (Surgical, some Medical, Pathology). Likely that significant numbers of trainees, especially in some specialties (Surgery) will not achieve expected curricular requirements in order to achieve satisfactory ARCP (Annual Review of Competence Progression) outcomes and therefore will need extensions to training in August. The impact may affect CCT (Certificate of Completion of Training) output and completion of core training programmes. 	Primary 1 4 x 4	Contingency 3 x 3	<p>Medical: Possibility of redeployment of trainees:</p> <p>Control (1) In discussion with Directors of Medical Education (DMEs), trainees have previously received communication to confirm that redeployment was likely to be limited and related to local and regional service pressures. Increasing service pressures are now being highlighted and redeployment will need to be closely considered to ensure that trainees do not lose further time in training wherever possible. Any requests for redeployment will be carefully considered and managed under former guidance. All redeployment will be recorded and reported to the Deanery as per our consensus document.</p> <p>Update 11/5/22: Unless there is another significant wave of Covid it is highly unlikely that we will need to redeploy trainees.</p> <p>Delays to progression</p> <p>Control (1) The vast majority of trainees achieved training competencies and progress as expected in 2021 so despite the challenges of the pandemic progression has been maintained in the majority of specialties. Some specialties have seen a greater impact on progression (e.g. obstetrics & gynaecology, some surgical and diagnostic programmes) due to reduction in training opportunities following on from the cancellation of elective work and the challenges in reducing the backlog in this due to ongoing significant staff absence. The speed of clinical service recovery will impact on the availability of training opportunities. There remains concern that the current service pressures identified by our senior medical educators throughout Scotland, are continuing to have an adverse effect on trainees gaining certain competences. Although curricula requirements have been derogated to support progression and will continue to be so for 2022, the criteria for the award of the Certificate of Completion of Training (CCT) have not. This could result in a significant accrual of unmet competencies and delays to CCT in the coming years. There are differences between specialties and variation across regions. Specialty Training Boards will review this data and consider if there is a need for enhanced training approaches to mitigate training gaps (e.g. simulation-based education).</p> <p>Control (2) Simulation will be a significant vehicle to provide educational resilience. Support is in place to deliver simulation for trainees in Core Psychiatry, IMT, IST and Higher surgical training with further support being put in place for Diagnostics, O&G and Paediatrics with the appointment of additional APGD's for simulation and appointment of administrative staff within the CSMEN team to deliver and commission training. All STB Chairs have been asked to consider their requirements over the next 2 years. Additional funding to support Simulation training will be required to roll out new training</p> <p>Control (3) Work with DME colleagues to ensure trainees can attend essential/ mandatory training and professional examinations.</p> <p>Control (4) Continue to monitor progression to identify any specialty groups that continue to be affected and to report back to SG on a regular basis.</p> <p>NMAHP: Delay to pre and post registration commissioned programmes (by NES or Scottish Government).</p> <p>Control (1): NMAHP working closely with HEIs, Colleges and Boards to pre-empt problems and assist in ensuring that educational programmes can continue as smoothly as possible. Rapid Action Group (RAPOG) set up with all stakeholders to ensure practice learning continues as much as possible. Data on magnitude of delays collected from HEIs. Some limited face to face NES education continuing following a rigorous risk assessment. RAPOG now stood down but any continued problems with students' placements will be dealt with by the relevant nursing & midwifery or AHP group. Student placements progressing despite continued pressure on NHS as at December 2021.</p>	OPEN (Score Range 10 – 12)

<p>1. / Cont'd</p>	<p>NES Clinical Directorates:</p> <ul style="list-style-type: none"> Medical NMAHP Dental Pharmacy Optometry Healthcare Science Psychology 	<p>Interruption/delay /adverse impact to training programme delivery including Scottish Government mandated training.</p> <p>Risk Owner: Karen Reid</p>	<ul style="list-style-type: none"> Cancellation of required courses or programmes Cancellation of required professional examinations Reduced clinical experience and training capacity due to: cancellation of routine clinical activities; redeployment of trainees to different clinical duties; absence from work due to self-isolation or illness 	<ul style="list-style-type: none"> Disruption to training leading to delays in training progression. Slippage to recruitment and training plans. Financial implications as a result of extensions to training and support. Training capacity issues Negative impact on service delivery Potential future workforce supply issues/gaps Uncertainty around non-recurrent funding Several essential Medical Royal College examination diets continue to be postponed. Hopefully, many will be rescheduled within this training year, but this will introduce further lag into the system. Ongoing concern about the significant impact of reduction in elective clinical activity in many craft specialties (Surgical, some Medical, Pathology). Likely that significant numbers of trainees, especially in some specialties (Surgery) will not achieve expected curricular requirements in order to achieve satisfactory ARCP (Annual Review of Competence Progression) outcomes and therefore will need extensions to training in August. The impact may affect CCT (Certificate of Completion of Training) output and completion of core training programmes. Negative impact on Dental Training across the undergraduate postgraduate continuum. Potential impact on Dental workforce pipeline. <p>Cont'd over/</p>	<p>Primary 1 4 x 4</p>	<p>Contingency 3 x 3</p>	<p>Dental: Interruption to supply of workforce (major negative impact on undergraduate dental student progression and Dental Vocational Training and to a lesser extent Dental Core and Specialty Trainees as well as pre-registration Dental Nurse Training).</p> <p>Control (1) In response to the concerns over undergraduate dental student progression, it was agreed that there would be no output from the Universities of Dundee and Glasgow in 2021 and the course for all cohorts of students would be extended by one year. Current restrictions continue to impact on delivery of dental care although are gradually easing. Student progression is currently being monitored and there is confidence in the Dental Schools that this cohort will graduate as expected in 2022. A total of 19 students in the BDS programme at the University of Aberdeen graduated in December 2021. This cohort of students will graduate out of sequence with the normal recruitment cycle for dental vocational training. We identified career opportunities for this group of graduates and 12 have taken up assistant posts in general dental practice until they are able to commence VT in August 2022.</p> <p>Control (2) Vocational Training: Online resources have been identified/developed to provide alternatives to study day activities and requirements, as well as some aspects of evidence required for Satisfactory Completion.</p> <p>Control (3) Financial impacts are under regular review with Directorates and SG Finance have been made aware of the potential costs.</p> <p>Action (1) Adjust existing students' training plans. (On-going) Action (2) Review the teaching and assessment schedules. (On-going) Action (3) Delay commencement of new Dental Care Professionals (DCP) programmes (On-going) Action (3) Revise financial planning predictions in relation to the Modern Apprenticeship in Dental Nursing funding. (On-going) Action: (4) Adapt teaching and assessment approaches utilising online technologies in line with awarding bodies requirements. (On-going)</p> <p>Control (1) Current Dental Vocational Trainees have been offered a contract extension to 31 July 2022. Control (2) Regular discussions at a UK level with all stakeholders including the other Statutory Education Bodies to develop recruitment plans for Core and Specialty Training. There will also be increased flexibility for Specialty training start dates. Control: (3) Trainee progression is monitored through existing processes Control (4) Mandatory training for new entrants to NHS Scotland dental workforce has been moved to online delivery.</p> <p>Pharmacy: Potential workforce gaps and extended training support required for the 2019/20 200 PRPS (Pre-registration Pharmacist Scheme) trainees</p> <p>Control (1) Continuing to support the 2019/20 Prov-Registrant Trainee group until the registration assessment re-arranged GPhC examination with one resit option (currently the June 2022 assessment, with results known in July 2022). This group (known as Prov-registrant or provisionally registered pharmacist) were offered a range of supports to be ready for assessment. As at May 2022, a remaining 3 provisionally registered pharmacists are being educationally supported to the June 2022 sitting. Control (2) There was a financial impact 2020/21 with additional SG funding. NES Covid Funding secured for this group for budget year 2021/2022. As at May 2022, a remaining 2 provisionally registered pharmacists are being educationally supported to the June 2022 sitting.</p> <p>Optometry: Service delivery impact due to reduction in training and support</p> <p>Control (1) Sourcing/using as many online and/or simulation skills training resources as possible. Control (2) Regular touching base with the team, with a focus on staff well-being and team support.</p> <p>Healthcare Science: Slippage to recruitment</p>	<p>OPEN</p> <p>(Score Range 10 – 12)</p>
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				<ul style="list-style-type: none"> Pharmacy PRPS 2019/20 cohort re-arranged GPhC Assessment (currently the June 2022 option, with results due in July 2022). This overall delay has an ongoing impact on workforce pipeline. 			<p>Action (1): Measures being put in place to facilitate virtual recruitment selection for September 2021 Clinical Science trainee intake Completed.</p> <p>Healthcare Science: Slippage to Training Plans Action (1): Discussions with training leads to be progressed. Completed Action (1): Financial implication for employment/SLA (Service Level Agreement) extensions - worst case scenario modelled and submitted to Finance. Completed Control (2) Ongoing monitoring of training plans as routine (business as usual).</p> <p>Psychology: Interruption to Workforce Supply of Clinical and Applied Psychologists Control (1) NES Psychology, Higher Education Institutes (HEIs) and Health Boards to continue to meet regularly as part of wider Psychology Services meetings. Regular discussions to discuss COVID-19 impact on training placements. Control (2) Adjustment made to training plans to take account of COVID-19. Control (3) Systemic review and summary of evidence base for technology enabled delivery of psychological services to support Boards being able to continue delivery and ensure continuity of training places.</p>	
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Operational/ Service Delivery Risks (cont'd)

Risk No.	Directorate	Risk Title	Cause	Effect	Inherent Priority I x L	Residual Priority I x L	Mitigation Measures (Controls/Actions)	NES Risk Appetite
2.	NES Clinical Directorates: <ul style="list-style-type: none"> Medical Dental Optometry Psychology NMAHP 	Reduced capacity (human and financial) to deliver appropriate education and training once clinical services are re-established Risk Owner: Karen Reid	<ul style="list-style-type: none"> Significant backlog of clinical work Service delivery may not resume in line with previous mode of delivery Pressure to regain lost ground Surge in clinical demand 	<ul style="list-style-type: none"> Reduced capacity to deliver upskilling for roles in certain areas to maintain and improve the quality of patient care Methods of workplace education and training may need to be revised Potential implications from adapting to online delivery Training environment is compromised Significant requirement to release clinical trainers to deliver mandatory training/courses and professional examinations to remediate critical missed elements required for training progression, including Certificate of 	Primary 1 4 x 4	Contingency 3 x 3	<p>Medical: Ability to deliver education and training due to backlog of clinical work Control (1) Medical Directorate Senior Team (MDST) continues to review the position regularly with Health Board Directors of Medical Education (DMEs). Control (2) Regular discussions at UK level with all stakeholders including other Statutory Education Bodies, the GMC (General Medical Council), Royal Colleges and others, to address this risk. Control (3) Additional Simulation training is being implemented for a number of specialties to ensure trainees can get relevant experience to meet clinical competencies. Associate Postgraduate Deans have been appointed to lead on this activity Control (4) Medical Directorate has commenced a wide-ranging Business Recovery Programme that will also tackle this risk in all its aspects, including the availability of clinical placements for undergraduate teaching.</p> <p>Dental: Reduced Capacity to Deliver Upskilling of Existing Dental Workforce Action (1) Prioritise the delivery of specific programmes depending on workforce demands and access to relevant practical cases required for assessment. (On-going). Action (2) Adapt teaching and assessment approaches utilising online technologies in line with awarding bodies requirements. (On-going). Control (1) Delivery of most CPD is currently online, which has enabled greater access to key CPD topics by a larger proportion of the dental team. Control (2) Recent discussion with SG to re-establish training for Enhanced Practitioners for Domiciliary Care. Currently assessing demand in Health Boards. This will also be dependent on the capacity of the Public Dental Service (PDS) to provide the PDS mentors.</p>	OPEN (Score Range 10 – 12)

				<p>Completion of Training (CCT)</p> <ul style="list-style-type: none"> Impact on availability of clinical placements for undergraduate teaching across disciplines. 			<p>Optometry: Reduced Capacity to Deliver Upskilling of Existing Optometric Workforce Control (1): The risk around failure to deliver NES Glaucoma Award Training (NESGAT) in 2021/22 is mitigated by increased use of remote supervision and recovery related community work. Control (2): Tackling IP placement bottleneck to ensure we can support additional optometrists into therapeutics modules at GCU – as per operational plan.</p> <p>Psychology: Training and education delivery compromised Control (1) Continue to adjust method of delivery to Digital webinars and virtual training environments where practical. Control (2) Work closely with Board colleagues and offer flexible support to mitigate effect. Control (3) Through regular contact with stakeholders, ensure that our work is aligned with their priorities.</p> <p>NMAHP: Training and education delivery compromised Control (1) Adapt delivery methods as far as possible towards technology enabled learning. Control (2) Ongoing contact with key stakeholders to ensure training & education meeting needs. Control (3) continue face to face teaching methods where absolutely necessary (e.g. SMMDP) to meet service demands. Action (1) Establish the Rapid Action Placement Oversight Group to ensure progression of recommendations from the NES report "Provision of Nursing, Midwifery and Allied Health Professions (NMAHP) placements in the 2020-21 Academic Session". Now stood down September 2021. Control (4) Recognising that COVID has, by necessity, impacted the way training will be delivered in the future. NES has a Technology Enhanced Learning Programme underway which aims to create a strategy for the future technology education and learning delivery for all Directorates.</p>	
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Operational/ Service Delivery Risks (cont'd)

Risk No.	Directorate	Risk Title	Cause	Effect	Inherent Priority I x L	Residual Priority I x L	Mitigation Measures (Controls/Actions)	NES Risk Appetite
3.	NES Technology Service	Impact on BAU (Business As Usual) delivery which has had to be de-prioritised and the workforce realigned to the immediate requirements to support COVID-19. Risk Owner (Lead Director): Christopher Wroath	<ul style="list-style-type: none"> Scottish Government in combination with NHS Scotland determine new, amended or existing services which need to be developed and deployed in support of the wider COVID-19 response. These services require a significant proportion of the available resources within NES Technology Service effectively suspending or cancelling BAU services or delivery against agreed deadlines 	<ul style="list-style-type: none"> NHSS services are not deployed in a timely fashion causing detrimental effects to services and service users Training programmes and outcomes are not delivered on time to the detriment of the individual learner or the service expecting their completed outcome Financial loss due to disrupted services and the need for remedial action Reputational risk 	Primary 1 4 x 4	Contingency 4 x 2	<p>Action (1) Stakeholders of the agreed BAU outcomes communicated with to indicate the NES Digital resource reallocation and expected timeframes for the resumption of BAU developments and delivery. Action Owners: Product Owners – All Stakeholders engaged and sighted.</p> <p>Action (2) Assessment and interweaving of BAU functionality/service requirements into COVID-19 responses to reduce the time to delivery of BAU outcomes on resumption of services (Ongoing) Action Owners: Product Managers/ NES Technology Service Senior Team</p> <p>Action (3) Accelerate (within quality limits) the development and deployment timetables of COVID-19 responses to more quickly end the redeployment of BAU resources. Action Owners: Principal Leads Development/ Delivery</p>	OPEN (Score Range 10 – 12)

4	NES Technology Service	Impact of new change programmes Risk Owner (Lead Director): Christopher Wroath	<ul style="list-style-type: none"> SG appetite for further delivery of change underpinned by NES technology has been increased by the NES COVID-19 response. This is particularly important as the Care Home support work has drawn Social Care sector demands, in addition to NHSS and the ongoing support to the new services already delivered. 	<ul style="list-style-type: none"> NES strategic objectives are compromised by too much demand on NES Technology Service. The new services are not adequately resourced on a recurrent basis. 	Primary 2 3 x 4	Contingency 2 x 3	<p>Control (1): Management of the expectations of possible outcomes and the associated resourcing (funding) requirement from SG.</p> <p>Control (2): Regular communications with SG and ET/Board sighted</p>	OPEN (Score Range 10 – 12)
Operational/ Service Delivery Risks (cont'd)								
Risk No.	Directorate	Risk Title	Cause	Effect	Inherent Priority I x L	Residual Priority I x L	Mitigation Measures (Controls/Actions)	NES Risk Appetite
5.	NES Technology Service	Delivery and development of COVID-19 related work primarily now related to the COVID-19 vaccination programme. Risk Owner (Lead Director): Christopher Wroath	<ul style="list-style-type: none"> Rapid and fast changing requirements from the Scottish Government Workforce initiative to develop/redevelop Turas based applications and related data support services in support of the COVID-19 mass vaccination programme. Associated outcomes (Management reporting data to SG). 	<ul style="list-style-type: none"> COVID-19 vaccination programme not able to deliver to 'expectation' through misunderstanding of what the current systems landscape can deliver, poor communication of timetables and changing Scottish Government priorities Data breaches Reputational risk 	Primary 2 4 x 3	Contingency 4 x 2	<p>Control (1) Daily communications with Scottish Government to manage expectations and check and cross check requirements, expected deliverables and timeframes. Owner: Director NES Technology Service</p> <p>Control (2) Daily meetings with key NES and external stakeholders to identify, discuss and co-author responses to Scottish Government, Board and COVID-19 Vaccination Programme members' expectation. Owner: Director NES Technology Service</p> <p>Action (1) Co-ordinate NES staff across all Directorates to bring to bear increased, appropriate and targeted resources to increase available resource to assist timely delivery at expected quality, mainly but not exclusively supporting Vaccinations. Action Owner: Director NES Technology Service</p> <p>Action (2) Introduce as much technology support as practicable in an iterative manner, to reduce/remove manual processes as understanding of them matures and time is allowed to develop and implement. Action Owner: Associate Director, NES Technology Service – this work is ongoing</p>	OPEN (Score Range 10 – 12)
6.	NES Technology Service	National clinical data landscape is further fragmented by short-term COVID-19 digital solutions Risk Owner (Lead Director): Christopher Wroath	<ul style="list-style-type: none"> Responsiveness to a complex and ever-changing health and social care landscape; serial development of short-term Minimum Viable Product digital solutions that are adopted to address the pandemic. 	<ul style="list-style-type: none"> Short term digital solutions further exacerbate the fragmentation of clinical data and make the objective of delivering national infrastructure more challenging, compromising ability of NES Technology Service to deliver agreed outputs. Overall reduction in project impact. 	Primary 2 3 x 4	House-keeping 2 x 3	<p>Control (1) Through meetings with the Scottish Government and eHealth leads and by feeding into national policy work, continue to make the case for data integration and availability, with a view to the longer term, while understanding that there are some short-term requirements.</p> <p>Control (2) Continual delivery monitoring to ensure emergency digital solutions are robust, with product lifespan agreed at initiation of project. e.g. will this be used post COVID-19?</p>	OPEN (Score Range 10 – 12)

7.	NES Technology Service	Digital product demand exceeds what the available resources can support Risk Owner (Lead Director): Christopher Wroath	<ul style="list-style-type: none"> Expectations and demands from external bodies in respect of new digital products exceed what the available NES Technology Service resources can support. 	<ul style="list-style-type: none"> NES Technology Service medium- and long-term business as usual work is impacted, resulting in delayed or absent platform roll-out. Weakened external credibility 	Contingency 3 x 3	House-keeping 2 x 2	<p>Action (1) Revisit short-term objectives for 2020/21 with clarity on required commitments to temporary COVID-19 projects and how this impacts longer-term work. Action Due Date: 31 March 2021 Complete Action Owners: Christopher Wroath</p> <p>Action (2) Increase available resource, subject to agreement with Scottish Government. Recruitment of software engineers and product team continues, using a remote recruitment model developed by NES HR and NDS Principal Lead for Recruitment. This will increase capacity within the directorate on a long-term basis. Action Due Date: 31 March 2021 Complete Action Owners: Christopher Wroath</p> <p>Control (1) NES Technology Service attend regular scheduled meetings with internal and external stakeholders (SG Vaccination Programme meetings, NES Technology Service Senior Management Team, existing programme steering groups, Standing Committee) to ensure continuous evaluation and reflection on short-term COVID-19 objectives.</p>	OPEN (Score Range 10 – 12)
Operational/ Service Delivery Risks (cont'd)								
8.	Workforce	Failure to recruit NES staff and trainees. Risk Owner (Lead Director): Tracey-Ashworth-Davies	Due to a lack of resource and/or systems support leading to a failure to recruit: <ul style="list-style-type: none"> Trainees across NHSS through usual vocational training recruitment activity, and NES staff through usual recruitment processes. 	<ul style="list-style-type: none"> For the trainees any failure to recruit will affect frontline service provision, impacting of patient care. A failure to recruit vocational trainees will result in workforce supply issues. The impact of the inability to recruit staff to NES would impact on delivery of the NES operational plan. 	Primary 1 5 x 4	Primary 2 3 x 4	<p>Control (1) Directorate leads are linked to national discussions on trainee recruitment across all relevant professional groups, including the suite of national systems such as Oriel, and work with HR in progressing vocational training recruitment for trainee groups in Scotland.</p> <p>Control (2) Establishment control processes refined to enable more fluid response to Directorate demand for recruitment activity for NES staff.</p> <p>Control (3) Guidance on remote interviews developed and available to hiring managers, including support from HR. Jobtrain recruitment management system now embedded into NES recruitment processes.</p> <p>Action (1) HR and Finance work together to anticipate and mitigate issues relating to financial year end, working with directorates to identify posts needed beyond year end and to extend contracts where appropriate.</p> <p>Action (2) Further review of establishment control processes to consider capacity for business processes, pace of organisational growth, agility in processes and proportionate management of risk.</p>	OPEN (Score Range 10 – 12)
17.	NMAHP	Lack of NMAHP capacity and resource to meet all the fast-moving requests of the NHS Scotland Academy and associated winter pressure work within the context of the on-going pandemic. Risk Owner (Lead Director): Karen Wilson Cont'd over/	<ul style="list-style-type: none"> National Treatment Centre (NTC) planning was paused in Spring 2020, which has subsequently delayed activity for staff development and education. There are now confirmed training needs in level 4 and 5 perioperative roles, recently agreed at March Elective Care Board. NHS Scotland Academy, 	<ul style="list-style-type: none"> Incomplete/low volume delivery of required priority educational programmes as the Academy gets underway. Inability to suitably engage with core stakeholders (NHS Boards) due to COVID-19 related staff absence and surge capacity. Altered priorities and requirements to change track, at short 	Primary 1 4 x 4	Primary 1 4 x 4	<p>Control (1) Mutually agreed prioritisation of required education.</p> <p>Control (2) Strategic engagement with key partners regarding potential educational options to maximise flexibility for these urgent workforce needs</p> <p>Action (1) Confirmation from Workforce Directorate regarding priority allocation and funding. Action Owner: Karen Wilson Action Due Date: August 2021. Complete</p> <p>Action (2) Recruitment of Senior Educator to support NES NMAHP post registration acute workstream objectives. Action Owner: Fiona Fraser Action Due Date: July 2021. Complete</p> <p>Action (3) Funding from NHS Scotland Academy in lieu of ongoing work carried out by NES Head of Programme who will be in post until at least 31 December 2021 – this will aid flexibility of approach and support additional capacity for the programme.</p>	OPEN (Score Range 10 – 12)

			<p>governance routes and accompanying budget for priority role development is still to be finalised and effective collaboration developed with NTCs and Scottish Access Collaborative</p> <ul style="list-style-type: none"> The Academy is being suggested by Scottish Government, Centre for Sustainable Delivery, territorial Boards to support new workforce developments – at pace and from different partners - to support winter planning 	<p>notice as a result of COVID and winter pressures, could impact volume of output.</p> <ul style="list-style-type: none"> The extended loan period of the NMAHP Head of Programme role supporting educational leadership within the NHS Academy will have impact on progression of core NMAHP objectives without access to supplementary resource. 			<p>Action Owner: Karen Wilson Action Due Date: October 2021. Complete</p> <p>Action (4) On-going involvement with National Treatment Centres Programme, Unscheduled Care Programme, Centre for Sustainable Delivery and Winter Pressures System Response Group to increase awareness of priorities that will or may come to the Academy as requests/commissions. Action Owner: Karen Wilson Action Due Date: on going until March 2022.</p>
19.	NES Clinical Directorates	<p>Reduced capacity to deliver NES core work due to Scottish Government vaccination programme support requirements</p> <p>Risk Owner: Karen Reid</p>	<p>Scottish Government urgent requirement for volunteer registered healthcare staff to support vaccination programme from 29/11/21 for three weeks</p>	<ul style="list-style-type: none"> Disruption/delay to core work programmes Impaired ability to meet statutory obligations Adverse impact on service delivery Negative stakeholder perceptions 	Primary 2 4 x 3	Contingency 3 x 2	<p>Control (1): Liaison with Scottish Government sponsor team to manage expectations in relation to the potential impact across a broad programme of work, and to agree work programmes that can be suspended and who can be trained and released if required.</p> <p>Control (2): Non-essential work programmes from which staff can be released identified by Clinical Directorates.</p>
20.	ALL	<p>NES capacity to meet timescales for planned deliverables and programmes of work is compromised by the impact of the COVID pandemic</p> <p>Risk Owner: Karen Reid</p>	<ul style="list-style-type: none"> Revised priorities and requirements as a result of a surge in pandemic cases and winter pressures Resource capacity constrained due to staff illness or requirement to support vaccination programme Inability to maintain timely engagement with NHS Board stakeholders due to COVID related staff absence and surge capacity 	<ul style="list-style-type: none"> Reduced capacity to deliver Delayed deliverables Backlog of work Operational plan targets missed/delayed Potential negative effect on forward planning Pressure to regain lost ground Negative reputational impact 	Primary 1 4 x 4	Contingency 3 x 3	<ul style="list-style-type: none"> CEO representation on NHSS Chief Executives' Healthcare Planning Group enables day-to-day awareness of changing requirements Strong links maintained with SG to minimise uncertainty and maintain awareness of current and emerging priorities Management of stakeholder expectations in relation to capacity to deliver Fortnightly EET meeting enables joint review of resource demands and decision-making on prioritisation of activities Directorates contingency planning and arrangements for paused work

Finance Risks								
Risk No.	Directorate	Risk Title	Cause	Effect	Inherent Priority I x L	Residual Priority I x L	Mitigation Measures (Controls/Actions)	NES Risk Appetite
9.	Finance	Payment of NES staff and suppliers is delayed or incorrect Risk Owner (Lead Director): Jim Boyle	<ul style="list-style-type: none"> Staff absence. Requirement to work from home. Increased fraud risk as business processes have been amended in response to the COVID-19 pandemic 	<ul style="list-style-type: none"> Data not available in time to meet payroll deadlines Staff not available to approve business as usual processes for suppliers (Purchase orders/Goods received notes/ Invoice matching) resulting in payments issued incorrectly or not issued on a timely basis. Expenses not paid as the system needs to be accessed via the SWAN network Loss of funds due to fraudulent payments not being recovered 	Primary 2 4 x 3	House keeping 2 x 2	<p>Control (1.1) Where a payroll deadline cannot be achieved a process is in place to enable an advance of salary to be made into the individuals bank account.</p> <p>Control (2.1) All directorate staff have been provided with SWAN VPN access to support working from home and social distancing.</p> <p>Control (2.2) Suppliers have been requested to email invoices.</p> <p>Control (2.4) A member of staff is going into the office every two weeks to collect post and scan invoices.</p> <p>Control (2.5) Currently there are three members of staff able to complete each part of the payment process, so can provide reduced capacity with one staff member for a short period of time in each of these areas.</p> <p>Control (2.6) Procedure notes have been adapted to suit remote working to ensure teams have the necessary resources available to them. This will enable staff from other areas to be deployed into the payment function.</p> <p>Control (2.7) System authority levels have been amended to enable more flexibility in the number of authorisers and their authority levels. The required amendments to the SFI's have been approved.</p> <p>Control (3): A supplementary process has been agreed for the submission and approval of expenses where access to the SWAN network is not possible.</p> <p>Control (4.1) Fraud alerts are being circulated to relevant staff.</p> <p>Control (4.2) The same level of rigour to the controls is being applied before any supplier bank details are accepted and amended.</p> <p>Control (4.3) NES Finance are now also verifying supplier details with Directorates and the Procurement Team to ensure Bank details are legitimate and from a trustworthy source</p> <p>Control (5) Payroll services across Scotland have developed system reports to identify leavers/additional hours worked to be used as a tool by individual payroll teams. We are working closely with NSS to ensure payments are correctly processed.</p>	AVERSE (Score Range 1 -3)
10.	Finance	Unable to maintain financial governance / internal control mechanisms. Risk Owner (Lead Director): Jim Boyle	<ul style="list-style-type: none"> Any interim governance arrangements in place do not enable appropriate oversight of the Financial position Business as usual control mechanisms are ineffective. Staff absence due to illness or redeployment 	<ul style="list-style-type: none"> Effective scrutiny and assurance will be compromised <p style="text-align: right;">Cont'd over/</p>	Primary 2 4 x 3	Contingency 3 x 2	<p>Control (1.1) Any COVID specific contingency arrangements required to be put in place will ensure that financial reports are routed through the Audit & Risk Committee, or presented directly to the Board depending on the dates of the meetings.</p> <p>Control (1.2) Where required, Board committees have agreed to review the Annual Reports of committees remotely to enable the necessary assurance processes to be carried out in the development of the Governance Statement.</p> <p>Control (1.3) The regular Extended Executive Team meetings enable a focus on key operational issues including financial decision-making and review of the current financial position.</p> <p>Control (1.4) Standing Financial Instructions (SFIs) and desktop procedures have been reviewed and amended, where appropriate, to enable robust control measures in the current home working environment. Changes to the SFI's have been endorsed by the Audit & Risk Committee and approved by the Board.</p>	AVERSE (Score Range 1 -3)

			<ul style="list-style-type: none"> Regular reporting and monitoring is impacted reducing the effectiveness of the internal control environment and Scottish Government reporting requirements. It is not possible to produce a set of annual accounts within agreed timescales which is a statutory requirement. 			<p>Control (2.1) We have robust reporting processes in place to capture the additional costs and savings resulting from the impact of COVID-19 on our operations. These arrangements have been reviewed by Internal Audit who reported that these controls reflect a strong governance structure.</p> <p>Control (2.2) NES staff attend all Corporate Finance Network and Director of Finance meetings to ensure that we are aware of the latest requirements from SG in terms of monthly reporting and Annual Accounts.</p> <p>Control (3.1) We have established a revised approach to the field work required for the audit of the annual accounts with External Auditors which worked well for both the 2019-20 and 2020-21 audit and will be repeated for 2021-22 Accounts.</p> <p>Control (3.2) We have an agreed Annual Accounts process timetable which is based on completion of the accounts by the end of June. Progress against the timetable is monitored for early signs of potentials to delay the completion and audit of the accounts.</p> <p>Control (3.3) working with the External Auditors, we will take advantage of any SG-provided extension should it not be possible to complete the audit by the end of June.</p>	
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Reputational/Credibility Risks/ over

12.	NES Technology	(ii)Vaccination Programmes Risk Owner (Lead Director): Christopher Wroath	<ul style="list-style-type: none"> The current Vaccination programmes require multiple stakeholders to agree and implement a solution. NES Technology Service involved in developing different aspects of the enabling technology to support this programme. 	<ul style="list-style-type: none"> Wider challenges in respect of this high-profile vaccination programmes may adversely impact the reputation of NES, given NES's role in supporting the technology. 	Primary 1 4 x 4	Primary 1 4 x 4	<p>Action (1) Ensure clear communication about the contribution which NES is making and the elements which are completely within our control.</p> <p>Control (1) NES engagement of SG Vaccination programme at Silver Command and via multiple operational level forums to lead understanding of programme outcomes and delivery roles.</p> <p>Control (2) Significant resource applied to ensure clarity of requirement at business process and digital and data layers of the programme.</p> <p>Control (3) Delivery by NES digital group on time and to spec of first-cut architecture to meet go live in early December 2020 - Achieved.</p>	CAUTIOUS (Score Range 4 - 9)
18.	NES Clinical Directorates	Failure to meet health and safety obligations for trainees in NES employment Risk Owner: Karen Reid	<ul style="list-style-type: none"> Pressures in the healthcare system, as boards continue to respond to the pandemic, impact on the workload of trainees, the time available to study, training and progression. 	<ul style="list-style-type: none"> Excessive and sustained workload demands and career development anxieties adversely impact trainees physical and mental health and well-being Stakeholders' perception of NES duty of care responsibility negatively impacted Legal and reputational risk. 	Primary 2 3 x 4	Contingency 3 x 2	<p>Control (1) Directorates' ongoing monitoring of trainee health and well-being</p> <p>Control (2) Careful monitoring of trainee sickness with concerns followed up and documented timeously</p> <p>Control (3) Workload concerns raised with directorates followed up and documented timeously</p> <p>Control (4) Professional support and guidance provided to trainees through existing BAU channels</p>	CAUTIOUS (Score Range 4 - 9)

Accountability/Governance Risks over/

Accountability/Governance Risks								
Risk No.	Directorate	Risk Title	Cause	Effect	Inherent Priority I x L	Residual Priority I x L	Mitigation Measures (Controls/Actions)	NES Risk Appetite
13.	Planning and Corporate Resources	Ability and Capacity to meet Board Governance Standards Risk Owner (Lead Director): Donald Cameron	<ul style="list-style-type: none"> The governance arrangements in place to respond to the different phases of the COVID-19 pandemic may fail to provide sufficient oversight of the emerging priorities and the on-going business of the Board and strategic decision making, effective scrutiny and assurance will be compromised. The Chief Executive and the Executive Team come under increasing pressure to meet reporting requirements when they are required to manage the NES response to the public health emergency. Meetings held without key stakeholders and public involvement. 	<ul style="list-style-type: none"> NES as an organisation fails to meet some governance standards <p>Cont'd over/</p>	Contingency 4 x 2	House-keeping 2 x 2	<p>Control (1). The Board remain prepared to implement 'Governance Light' arrangements if and when required in accordance with interim governance arrangements, agreed with the Board, which were previously implemented in three phases:</p> <ul style="list-style-type: none"> Phase one: 'Gold Command' and 'Core Board Governance' 26 March 2020 – 27 August 2020 Phase two: 'Development of Board Governance: COVID-19 lessons Learnt and Remobilisation' 27 August 2020 – 5 January 2021 Phase three: 'Governance Light' 5 January – 31 March 2021. <p>Control (2) The NES Executive Team met formally every two weeks during COVID-phase one governance and subsequently reverted to meeting every four weeks. This arrangement has now been further developed to focus on regular meetings of the Extended Executive Team (EET) for decision making enacted through the COVID-19: NES Contingency Plan which includes the EET meeting regularly (depending on the stage of the pandemic) and NES Internal Coordinating Group: COVID-19 (always on-call and incorporating 2 weekly meetings of People and Facilities Recovery groups and a Steering Group) using MS Teams for communication, incident management. Strategic decision making - all recorded and reported.</p> <p>Control (3) Over the COVID-19 Governance period we have prepared NES Re-Mobilisation plans for the approval of the Board. The 2020-21 AOP went through the 23 March 2020 Board and was subsequently paused as per SG direction, the 30 July 2020 Board approved RMP2 and 11 February 2021 Board approved the RMP3 for submission to Scottish Government for their comment and approval. We reported all phases of COVID-19 governance arrangements to Scottish Government. In January 2021 we defined and agreed our approach to 'Governance Light' with the Board and remain prepared to implement this approach if and when required. RMP4 was submitted to the Scottish Government at the end of September 2021 and preparation of the 2022-25 Delivery Plan is underway.</p> <p>Action (1) Review NES standing committees, management groups and planning/performance functions, considering the governance arrangements put in place for COVID-19, and re-start corporate governance with agreed changes where appropriate. Action Owners: Della Thomas and Donald Cameron 10/12/21 Update: New arrangements for NES Board standing committees and management groups based on best practice from wave 1 of COVID-19 are now well established and being kept under review for further improvement. In addition, and in response to the appearance of the Omicron variant in December 2021, we remain prepared to implement a 'Governance Light' approach if required.</p>	AVERSE Score Range (1 – 3)

14.	<p>Planning and Corporate Resources</p>	<p>Current NES properties and facilities will not be fit for purpose in the 'post COVID-19' world in terms of training, meeting and office space</p> <p>Risk Owner (Lead Director): Donald Cameron</p>	<ul style="list-style-type: none"> NES will be unable to provide training, meeting and office facilities which comply with the requirements (still to be formulated) of a post COVID-19 world. 	<ul style="list-style-type: none"> Ability to deliver NES activities, in line with our current modes of business delivery and workplace utilisation, is compromised. 	<p>Primary 1 4 x 5</p>	<p>House-keeping 2 x 3</p>	<p>Control (1) The ability to work remotely using cloud-based systems and communications technology is already in place. Control (2) The ability to reconfigure NES facilities in line with new guidance while NES staff continue to work remotely. Control (3) The development of 'remote friendly' workstyles supported by a new 'cloud based' facilities management system to manage site capacity safely in line with ever changing national guidance for 'non-clinical' NHS sites.</p> <p>Action (1) Maintain all NES property transactions 'on hold' and put in place a short-term extension to the Phase 1 lease at CfHS to coincide with the Phase 2 lease expiry. This is to give us time to consider post-COVID property requirements and ensure our total property needs in Inverness are considered together when it becomes clearer (post COVID-19). Action Owner: Nicola Todd 10/12/21 Update: The Phase 1 lease has now been extended (with full NES Board and SG approval) until the Phase 2 lease expiry in 2023. Property use during COVID is being monitored through the new 'Booker' facilities management system. Current data shows no space pressure and data will be collected once SG guidance changes from WfH (if you can) and remote friendly working has been fully implemented and in operation for 100 days. This will help indicate what changes are required to NES sites e.g. if more training space and less desk space is required when existing leases start to expire in 2023.</p> <p>Action (2) Compile common standards for all NES sites in line with post COVID-19 national guidance/policy and for locally managed sites, PFM will support their reconfiguration as required working with local facilities management colleagues in dental and medical so that NES sites are prepared and signed off as COVID-19 secure in line with a Facilities Recovery Plan. Action Owner: various –PFM, local site Facilities Managers (Medicine and Dentistry) and staff side. 10/12/21 Update: National NES 'Safe Office Working' guidance has been developed based on SG guidance along with local site guidance for those currently working in NES sites. This will be more formally rolled out when our new 'Remote Friendly' workstyles are launched (when SG WfH message changes). All NES sites are being maintained as COVID-19 secure in line with available national guidance.</p>	<p>AVERSE</p> <p>(Score Range 1 – 3)</p>
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Accountability/Governance Risks cont'd over/

Accountability/Governance Risks (cont'd)								
Risk No.	Directorate	Risk Title	Cause	Effect	Inherent Priority I x L	Residual Priority I x L	Mitigation Measures (Controls/Actions)	NES Risk Appetite
15.	Workforce Directorate	The implementation of COVID-19 health protection measures could result in an unintended adverse impact on staff health and wellbeing Risk Owner (Lead Director): Tracey Ashworth-Davies	<ul style="list-style-type: none"> Sustained home working as result of COVID-19 pandemic mitigation measures 	<ul style="list-style-type: none"> Staff feel disconnected and/or isolated from organisation and workplace. Health and safety issues as a result of lack of suitable equipment/space or ergonomic workstation set-up. 	Primary 2 4 x 3	Contingency 3 x 2	<p>Control (1.1) Regular communications from the Chief Executive are posted on the intranet. Regular corporate communications issued to all NES staff and a series of FAQs developed.</p> <p>Control (1.2) Guidance issued to managers on the importance of keeping touch and regular virtual team and individual check-ins. Strong partnership links have been maintained to inform these communications.</p> <p>Control (1.3) Management matters e-newsletters issued regularly to support managers to mitigate staff health and well-being challenges.</p> <p>Control (1.4) Guidance and training resources on using Microsoft Teams and remote working are available on Turas Learn.</p> <p>Control (1.5) The NES Healthy Working Lives Strategy Group promotes a focus on health and wellbeing in the current context.</p> <p>Control (1.6) People Recovery Group in place to manage people risk and have implemented various staff engagement and wellbeing measures e.g. parent and carer groups, diversity networks, line manager webinars and Spaces for Listening.</p> <p>Control (1.7) Trickle App launched to encourage communication, ideas, and a means of dynamically monitoring staff concerns.</p> <p>Control (2.1) The Executive Team, through the Internal Coordinating Group, are supportive of staff health and wellbeing, and implementing reasonable adjustments in the home working environment, by taking steps to provide staff with the required or appropriate computing equipment, other elements of digital infrastructure (phones, access, etc) and also making available for their home workstations, customised chairs or other equipment previously purchased for them. Application of an Addendum to Homeworking Policy to cover homeworking arrangements during the pandemic.</p> <p>Control (2.2) Support is available from Health and Safety Adviser including workstation ergonomics self-assessment support.</p> <p>Control (2.3) Agile Working Health and Safety module available as part of staff essential learning.</p> <p>Control (2.4) The majority of NES staff are working from home. All NES sites remain accessible for essential staff and those with extenuating circumstances who have the option to work in the office as their key workplace subject to completed risk assessments and return to the workplace approvals from their line manager and HR.</p> <p>Control (2.5) Following the change in SG guidance and pending the Once for Scotland Homeworking Policy, implementation of hybrid working arrangements to enable staff to work safely at home or from the office as required, including Safer Office Working Guidance, Return to Office assessments, relaunch of Our Way and the desk booker system.</p> <p>Control (2.5) Undertaking a questionnaire covering the first 90 days of hybrid working arrangements to gain insights on the impact on staff and to inform future ways of working.</p> <p>Control (2.6) Review and recommendations being progressed on First Aider and Fire Warden arrangements for NES offices in the future.</p>	<p>AVERSE</p> <p>Score Range (1 – 3)</p>
16.	Workforce Directorate	Failure to comply with legislative and statutory requirements Risk Owner (Lead Director): Tracey Ashworth-Davies	<ul style="list-style-type: none"> Failure to comply with legislative and statutory requirements these include employment legislation, Equality & Diversity legislation and Health & Safety reporting. 	<ul style="list-style-type: none"> NES staff placed in danger due to NES failure to comply with and fulfil health and safety obligations. Employment Tribunal claims where NES has 	Primary 2 4 x 3	Contingency 3 x 3	<p>Control (1) Ensuring robust health and safety arrangements are in place for all NES employees, including those who work in placement organisations.</p> <p>Control (2) Continued access to sufficient HR expertise to support Directorates in any employee relations cases.</p> <p>Control (3) Maintenance of data across systems including eESS, SSTS and Turas to inform reporting and performance dashboard.</p>	<p>AVERSE</p> <p>Score Range (1 – 3)</p>

16. Cont'd)	Workforce Directorate	Failure to comply with legislative and statutory requirements. Risk Owner (Lead Director): Tracey Ashworth-Davies		<p>failed to fulfil employment obligations or is found to have discriminated against an employee.</p> <ul style="list-style-type: none"> Inadequate staff governance and reporting. Failure to deliver the Directorate's operational plan. 	Primary 2 4 x 3	Contingency 3 x 3	<p>Control (4) Ensuring compliance with Staff Governance Standard for NES employees across all settings: <u>Well Informed</u>: via regular Corporate, Directorate and line manager led communications, including Hub and intranet sites. <u>Appropriately trained and developed</u>: ensuring induction, essential learning and development activity continues to be managed through usual processes including PDP&R activity. Updating materials to reflect new working arrangements. <u>Involved in decisions which affect them</u>: continued strong working in partnership. Ensuring Directors and line managers have regular two-way communication across teams. Mechanisms to gather feedback from staff on impact of Covid19 on work life. <u>Dignity and respect</u>: promotion of NES values across all communications. HR support to any formal and informal grievance or dignity at work issues. <u>Health, safety and wellbeing</u>: updated policies to reflect new working arrangements, including refreshed risk assessments. Clear statements on responsibilities (employee, line manager, employer, placement). Healthy Working Lives Group Campaigns. Control (5) Manage any compliance risk, by publishing a brief report by the statutory date of 30 April 2025 which describes equality progress; equality outcomes; workforce KPIs; workforce data statistics, including occupational segregation analysis; overview of existing equal pay statement, and plans for equality outcomes and equal pay statement review in the following year. Control (6) Regular review and updating of progress against the operational plan, flagging any areas not being progressed for a further risk assessment.</p>	<p>AVERSE (Score Range 1 - 3)</p>
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Closed Risks - Summary								
Risk No.	Directorate	Risk Title	Inherent Priority I x L	Residual Priority I x L	Risk Category	Closure Details	Date Closed	
16	NMAHP/ Workforce	Students employed by NES, deployed to non-NHS placement such as care homes, where the rate of COVID-19 is higher than the general population. Risk Owner (Lead Director): Karen Wilson/Tracey Ashworth-Davies	Primary 1 5 x 4	Primary 2 3 x 4	Accountability/ Governance	4/02/21 Update (Audrey McColl) - All outstanding additional hours payments have now been made. It was recommended that this risk is now closed.	12/2/21	
7	Workforce	Failure to Recruit NES Staff and Trainees: <ul style="list-style-type: none"> Failure to Recruit Staff through the COVID-19 Accelerated Recruitment Portal (CARP) Risk Owner (Lead Director): Tracey Ashworth-Davies	Primary 1 5 x 4	Primary 2 3 x 4	Operational/ Service Delivery	Following discussion at the Audit and Risk Committee on 28 January 2021 it was agreed appropriate to close the COVID-19 Accelerated Recruitment Portal element of risk 7.	12/2/21	
2	NES Clinical Directorates: Pharmacy	Interruption/delay/adverse impact to training programme delivery including Scottish Government mandated training: <ul style="list-style-type: none"> Pharmacy: Potential workforce issues due to alternative recruitment arrangements required for 2021/22 PRPS (Pre-registration Pharmacist Scheme) Owner: Anne Watson	Primary 1 4 x 4	Contingency 3 x 3	Operational/ Service Delivery	24/2/21 Update (Anne Watson) - This element of risk 2 now closed - alternative recruitment model has been successfully implemented.	24/2/21	
12	Workforce/ Digital/Finance	(i) COVID-19 Accelerated Recruitment Portal <ul style="list-style-type: none"> The development of the Portal was at the request of Scottish Government and required to be available in a week. The residual risk relates to NES role and contribution via CARP, incorrectly represented in Scottish Government communications to NHS Boards Risk Owner (Lead Directors): Tracey Ashworth- Davies/Christopher Wroath/ Janice Sinclair/Karen Wilson			Reputational/ Credibility	It was agreed at EET Business Meeting on 12/1/22 that this element of risk 12 should be closed since the CARP service is no longer in operation.	12/1/22	

Board Paper

1. Title of Paper

2021-22 Quarter 4 Performance Report

2. Author(s) of Paper

Karen Howe, Planning and Corporate Governance Manager
Donald Cameron, Director of Planning and Corporate Resources

3. Situation/Purpose of paper

This paper provides a summary of performance using RAG exception reporting against the NES phase 4 Re-mobilisation Plan (RMP4) for Quarter 4 of 2021/22.

4. Background

- 4.1 Performance is reported quarterly to the NES Board using RAG exception reporting for the activities, outcomes and targets which underpin the NES RMP4. This report covers Quarter 4 to 31 March 2022.
- 4.2 During 2021/22 we started to review our strategic vision and future operating model. This includes improvements to our corporate performance framework by establishing strategic key performance indicators (KPIs), which will measure business outcomes rather than activities, using evidence-based performance measurement methodology (PuMP® – Performance Measurement Programme).
- 4.3 This cover paper begins the transition towards more detailed reporting against our strategy, which will be more fully reflected in 22/23 performance reports. The full benefits of our move to outcomes focused performance measurement will not be wholly realised until the strategy and strategic KPIs are complete and specific measurement data is available.

5. Assessment/Key Issues

RMP4 contains 578 targets, of which 49 are red, 69 are amber, and 460 are green. Of the 55 priority targets, 3 are red, 5 are amber and 47 are green. Figure 1 shows that when targets are reviewed by strategic theme, then strategic themes 1 (Quality Learning & Employment Environment) and 2 (National Infrastructure for attraction, recruitment, training and retention) are showing the highest percentage of green targets (84% and 82%, respectively), while strategic theme 5 (high performing NES) is showing the lowest percentage of green targets (73%). Figure 2 shows that there has been little change in the RAG ratings allocated to targets across the year.

Figure 1 - Q4 Performance by Strategic Theme

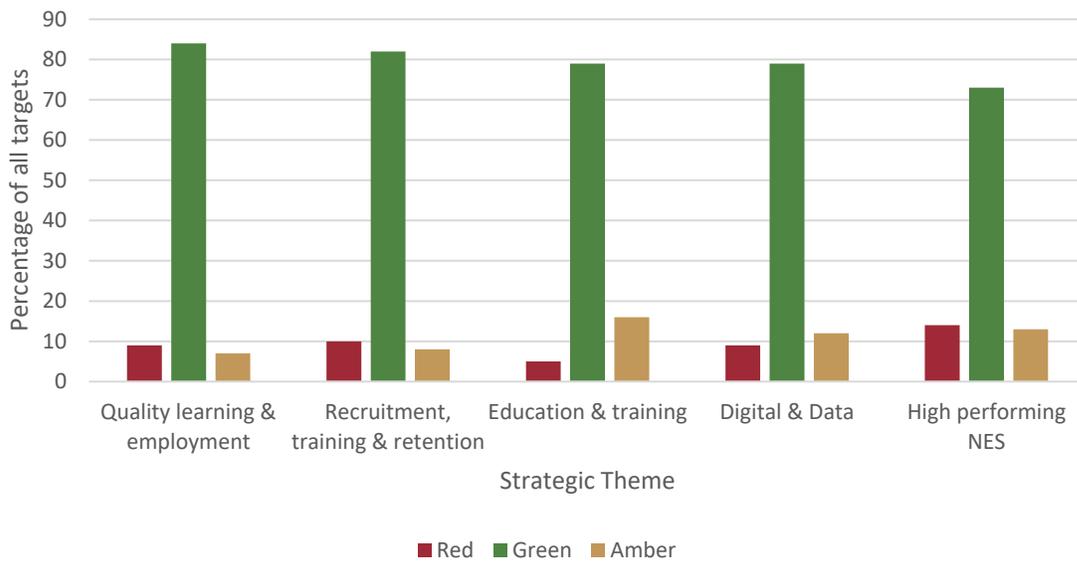
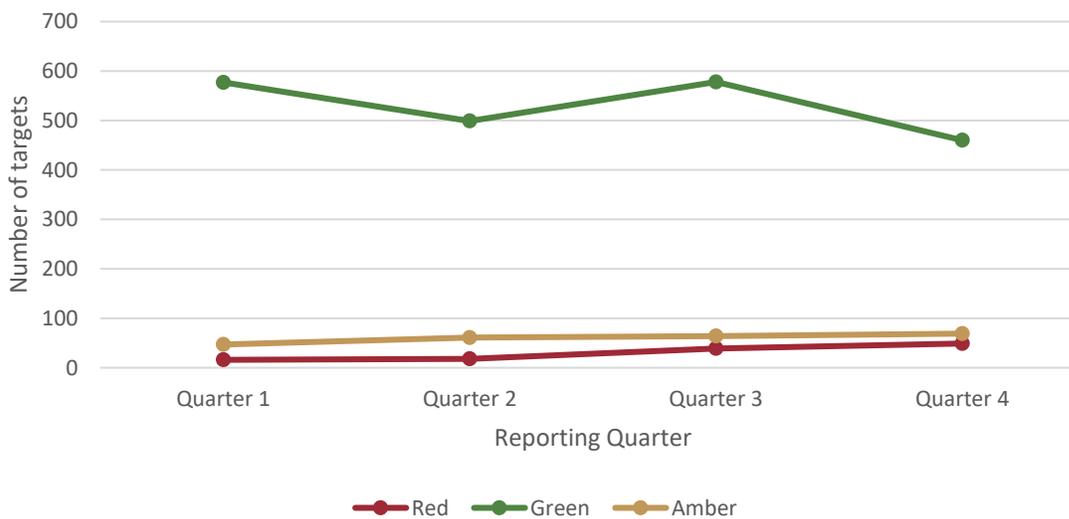


Figure 2 - Overview of RAG Performance Reporting throughout 21-22



6. Recommendations

The Board is asked to review and approve 2021-22 Quarter 4 performance against the NES RMP4 and comment on the revised presentation of the data within the cover paper.

Author to complete

Have Educational implications been considered?

Yes

No

a. Is there a budget allocated for this work?

Yes

No

b. Alignment with [NES Strategy 2019-2024](#)

1. A high-quality learning and employment environment

2. National infrastructure to improve attraction, recruitment, training and retention

3. Education and training for a skilled, adaptable and compassionate workforce

4. A national digital platform, analysis, intelligence and modelling

5. A high performing organisation (NES)

Have key risks and mitigation measures been identified?

Yes

No

c. Have Equality and Diversity and health inequality issues been considered?

Yes

No

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

Yes

No

Karen Howe

28/04/22

NES

NHS Education for Scotland – 2021/22 Quarter 4 Performance Report

1. Enhancing Performance Reporting

- i. During 2021/22 we started to review our strategic vision and future operating model. This will include improvements to our corporate performance framework by establishing performance measures and strategic key performance indicators (KPI's), which measure true business outcomes and key results across NES, following evidence-based performance measurement methodology.
- ii. The outcome of this work will be improved performance reporting and assurance, providing the NES Board with improved data and intelligence through aligned performance reporting on key strategic and business priorities, evidencing impact towards achieving the NES vision. In addition, it will provide assurance to Scottish Government linked to the NES annual review, aligned to strategy to support identification of areas for improvement and establishing ownership for KPI's at all levels to drive improvement. While we transition to this new approach, this existing report does give an overview of performance (Red, Amber and Green) in relation to the existing NES strategic themes to identify key areas which might require additional focus. (see 'Targets by Strategic Theme' in Diagrams 1 and 2).
- iii. Phase 1 of the programme, supported by Rubica (our external partner), is complete. This phase included training and familiarisation with performance measurement methodology linked to a measurable strategy to support continuous improvement and strategic progression. Phase 2 of the programme has established an implementation team who will cascade training and work with others to create strategic Key Performance Indicators, linked to our revised strategy, once this is available.

2. Summary of Performance

- i. This report covers 2021/22 quarter 4 performance against RMP4. There are 578 targets, of which 55 (10%) are priority targets. Diagram 1 shows the performance across the priority targets and diagram 2 outlines performance across all targets. Performance is measured using RAG (Red, Amber, Green) ratings, definitions of which are set out below:
 - **Red** – progress has not been satisfactory. The target is more than 10% off the stated goal and/or delayed by more than 3 months.
 - **Amber** – progress against this target/outcome has not been fully satisfactory. The target is up to 10% off the stated goal AND/OR is delayed by up to (and including) 3 months.
 - **Green** – progress against this target/outcome has been satisfactory, with 100% of the target achieved or exceeded AND meeting all time deadlines.

Note: Red and Amber targets that have been impacted by COVID 19 are highlighted in the tables in BLUE.

3. Corporate Dashboard

- i. Full performance data can be found in the [Corporate Insights](#) area of TURAS | Data Intelligence which presents corporate metrics in one place.

Note: this requires a TURAS user sign in.

4. Priority Targets

- i. Of the 55 priority targets, 3 are red, 5 are amber and 47 are green (see Diagram 1). All priority target updates were reviewed to ensure they accurately reflected the content of the target and that the RAG rating was correct. Eight targets were followed up for further clarification, with two targets changing from green to amber and one target moving from amber to red.
- ii. An audit of performance management recommended that the Planning and Corporate Governance team verify supporting documentation behind a sample of the updates to provide additional assurance that they are correct, complete, and representative of the RAG status. Therefore, 10% (n=5) of the priority targets were checked, which involved reviewing meeting agendas/papers, intranet/internet content and screenshots of documentation. All the information collected verified the updates that had been supplied and no changes were made.
- iii. A spreadsheet with all 55 priority targets along with their quarter 4 updates and RAG status can be found [here](#) - further details of the red and amber priority targets are outlined in Tables 6.1 and 6.2 below. Throughout the report, Digital and NDS will now be referred to collectively as 'Technology Services', following the recent organisational change.

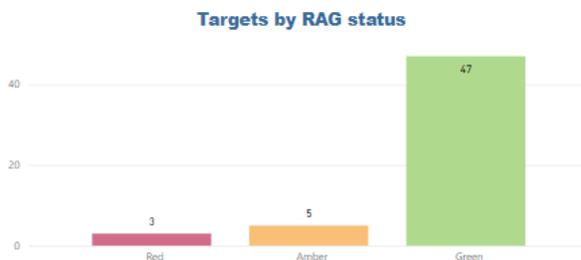
Diagram 1 – Summary of performance for priority targets (Q4, 2021/22, n=55)

Performance (Priority Targets)

Clear all filters

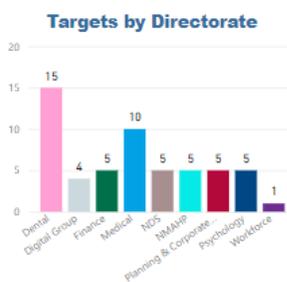
Targets by Directorate and RAG

DirectorateName	Red	Amber	Green	Total
Dental	2	2	11	15
Digital Group			4	4
Finance			5	5
Medical			10	10
NDS			5	5
NMAHP	1		4	5
Planning & Corporate Resources		1	4	5
Psychology		2	3	5
Workforce			1	1
Total	3	5	47	55



Targets by Strategic Theme and RAG

StrategicThemeName	Red	Amber	Green	Total
Digital and Data			7	7
Enhanced Educational Infrastructure	3	3	17	23
High Performing NES		1	11	12
Quality Learning and Employment			4	4
Skilled Workforce		1	8	9
Total	3	5	47	55



5. All Targets

- i. Overall, there are 578 targets, of which 49 are red, 69 are amber, and 460 are green (see Diagram 2). As part of quality control, the red and amber targets were reviewed and 10% (n=50) of the green targets were selected to ensure the update accurately reflected the content of the target and that the RAG rating was correct. Following review, 15 targets were checked further (excluding priority targets), with the following changes being made: 2 targets moved from green to amber; 1 moved from red to green; 2 moved from amber to red; and 2 moved from amber to green. The remaining targets were left unchanged.
- ii. The red non-priority targets are outlined in Table 6.3 (*Note: priority targets have been excluded from Table 6.3 to avoid duplication*).

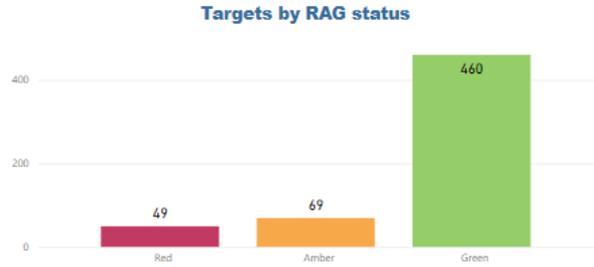
Diagram 2 – Summary of performance for all targets (Q4, 2021/22, n= 578)

Performance (All Targets)

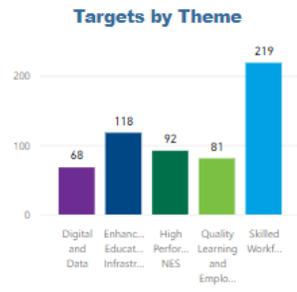


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DirectorateName	Red	Amber	Green	Total
Dental	7	6	77	90
Digital Group	7	6	47	60
Finance	7	5	28	40
Medical	3	9	94	106
NDS		2	10	12
NMAHP	7	13	74	94
Planning & Corporate Resources	2	2	17	21
Psychology	8	18	79	105
Workforce	8	8	34	50
Total	49	69	460	578



StrategicThemeName	Red	Amber	Green	Total
Digital and Data	6	8	54	68
Enhanced Educational Infrastructure	12	9	97	118
High Performing NES	13	12	67	92
Quality Learning and Employment	7	6	68	81
Skilled Workforce	11	34	174	219
Total	49	69	460	578



WarehouseAlpha

6. Tables

6.1 Red Priority Targets Q4

6.2 Amber Priority Targets Q4

6.3 Red Non-Priority Targets Q4 (excludes priority reds)

6.4 All non-priority amber targets Q4 (excludes priority ambers)

Table 6.1 – Red priority targets Q4 2021/22 (COVID 19 impacted targets highlighted in BLUE).

Priority Target	Update
Dental - To provide up to 163 training posts for Dental Vocational Training (DVT) to match the final output of the Scottish Dental Schools by July 2021. (TAR0004129)	COVID Impact - Target will not be met as there will be no Scottish Dental School output in July 2021.
Dental - Up to 92 Dental Core and up to 45 (40 NES-funded) Specialty and post Certificate of Completion of Specialist Training (CCST) trainees achieving the learning outcomes of the relevant curricula to the GDC (General Dental Council) standards. Supported by relevant digital systems and trainers who can access support from NES. (TAR0004158)	72 DCT posts are currently filled. This is due to a combination of posts unfilled at national recruitment, withdrawals following recruitment and resignations since post commencement. A small number of local recruitment exercises have had very limited success and some centres have selected to recruit to vacancies.
NMAHP - Subject to funding, we will develop online content for Prison Healthcare and Care Home Nursing and redesign current General Practice Nursing and District Nursing resources to form a single resource with core and specific areas for District Nurses, General Practice Nurses, Care Home and Prison Health Care Nurses by March 2022. (TAR0004534)	COVID DELAY - Owing to service pressure within the Prison Service, the subject matter expert that was identified to complete the work was not released to undertake this work.

Table 6.2 – Amber priority targets Q4 2021/22 (COVID 19 impacted targets highlighted in BLUE).

Priority Target	Update
<p>Optometry - Subject to SG funding. By end of Q4, to accredit a minimum of 75% (40 places) of Optometrists enrolled in the second cohort of NES accredited training, SQA level 11 course, to manage ocular hypertension and glaucoma in the community. To include online learning, training sessions, reflective practice, clinical placement, theoretical and clinical assessment. (TAR0003987)</p>	<p>34 currently expected to pass (following output of exam board). Results will be sent out early April 2022 due to repeat OSCE requirements. Hoped to be on target by end of June 22.</p>
<p>Dental - Provide access for up to 130 places for trainee dental nurses to undertake a blended learning pre-registration programme to achieve the SQA (Scottish Qualifications Authority) Scottish Vocational Qualification & Professional Development Award in Dental Nursing in order to gain registration with the General Dental Council. (TAR0004165)</p>	<p>21-22 cohort - 79 commenced in September 2021 and continue on track with programme, despite 2 early leavers. A wide range of blended learning post-registration programmes available throughout operational year 21-22. Total number of places available - 131 places across 13 PDA/HN unit SQA Programmes offered. 95 places booked.</p>
<p>Psychology - Support 68 clinical psychology trainees to complete pre-registration training by the end of March 2022. Commission and recruit up to 210 clinical psychologist training places over three years, including 5 additional trainees per year for the next 2 years to enhance perinatal mental health capacity. Will commission and recruit up to 70 clinical trainees by the end of March 2022. (TAR0004473)</p>	<p>59 clinical psychology trainees completed training by March 2022, further 7 have required extensions with aim to complete 2022/23. 80 clinical trainees commenced training in September 2021. This included additional trainees to enhance perinatal mental health capacity.</p>
<p>Psychology - Support 40 trainees for psychological therapies in primary care (PTPC) and 30 MSc trainees in applied psychology for children and young people (APCYP) to complete training by January/February 22. Commission and recruit up to 120 MSc trainees in psychological therapies in primary care (PTPC) and 90 MSc trainees in applied psychology for children and young people (APCYP) over the next three years. Will commission and recruit 40 MSc PTPC trainees and 30 MSc APCYP trainees for commencement in January/February 2022. (TAR0004474)</p>	<p>37 PTPC trainees completed by end of Jan 2022 - 2 trainees extended to completed by end of April 2022, 1 trainee on mat leave from July 21. 29 APCYP trainees completed training by end of Feb 2022 (1 trainee withdrew). Recruitment events took place in Q3. 45 PTPC trainees and 36 APCYP trainees commenced training in Jan/Feb 2022.</p>
<p>Planning & Corporate Resources - As a result of and subject to COVID 19; review our property requirements to help fully understand the impact of new ways of working on the commercial property market and our own requirements by the end of March 2022. (TAR0004563)</p>	<p>With the implications of the pandemic and TEL / hybrid working not yet clear, work continues on an ongoing basis to understand the impact of workstyles upon space requirements. There are ongoing pieces of work at National Board Collaborative level to understand the implications of this and identify where opportunities lie to share knowledge and space. In order to develop clear direction in advance of the expiry of two sites leases in 2023, work is ongoing to discuss what opportunities there are across National Boards as well as with Landlords to</p>

Priority Target	Update
	ensure sufficient space is available to ensure continuity of occupation should this be required.

Table 6.3 – Red non-priority targets Q4 2021/22 (COVID 19 impacted targets highlighted in BLUE) (excludes priority reds)

Target	Update
Dental - To provide a preparatory Train the Trainer programme (START) for 100% of new Therapist Vocational Trainers appointed for academic year 2021-22. (TAR0004134)	COVID Impact - No new therapy trainers will be recruited for 2021/22 as a result of delayed output from some universities and no Therapist Vocational Trainees being recruited.
Dental - Develop and delivery of a half days training, on community eyecare to a GP audience (as part of the GP trainee half day ophthalmology training, with usual audience around 60 GPs), to support the expanding support offered by Optometric practice. To deliver to the west of Scotland trainee GPs in Q1 and Q3. (TAR0003998)	Due to Covid-19 restrictions we have not been re-engaged with by the GP trainee team with regards to this running again in 21/22. We have engaged with GP training to promote the use of our EyeSi Slit lamp simulator.
Dental - Provide blended delivery of training for Enhanced Skills Practitioner - Domiciliary Care programme for up to six cohorts (2-3 days training & mentoring each) with up to 20 participants in each, as directed by SG and with funding from overseas ACT (Additional Costs of Teaching) levy; maintain the supporting e-portfolio for 100% of participants. (TAR0004146)	COVID DELAY - No further training is planned before the end of Q4 due to COVID restrictions with the mentoring element of the course due to the Health Boards being unable to accommodate the practical mentoring sessions in Care Homes.
Dental - To deliver appropriate online learn resources that support outcomes for optometrists around improving their current performance in diagnosing and managing medical retina conditions. The modalities will be determined from scoping work and most likely include webinar and discussion workshop modalities. Outcomes to be aligned to RCO's OCCCCF (Royal College of Ophthalmology's Ophthalmic Common Clinical Competency Framework) Medical Retina. Apply for CET (Continuing education and training) points from the regulator which supports Optometrists' and dispensing opticians' revalidation. (TAR0003994)	There continues to be no clear direction from SG around the requirement on education, until further direction we will not pursue this work. Given the current significant workforce shortage in the optometry team this target is not expected to be met in 2021/22.

Target	Update
Dental - To provide up to 20 training posts for Therapist Vocational Training (TVT) by July 2021. (TAR0004132)	COVID Impact - No recruitment to Therapist Vocational Training will be provided for the 2021-22 training year due to extension of current TVTs being provided until November 2021.
Technology Services - - Ensure there is a suitable technical replacement to support Operational Planning when our SNOW licence agreement ends. (TAR0004307)	COVID DELAY: This work has been deprioritised in part due to ServiceNOW licences being extended for a further 2 years in April 2021. After discussion in Operational Planning, this target has been reset for 2022/23 with it being that a suitable solution is found but not implemented by March 2023.
Technology Services - Subject to Directorate Funding. Sum currently not shown in Digital numbers. Deliver efficiencies and improve accessibility to appraiser training by introducing remote learning and online applications. (TAR0004262)	No funding received, so work cannot go ahead. Target to be closed.
Technology Services - Subject to funding. By March 2022 improve the quality of education by extending Turas Quality Management (currently used by NES Pharmacy) to cover other NES Directorates. (TAR0004257)	No funding available. Work will not be completed - target to be closed.
Technology Services - Develop link between Turas Learn and Turas. Appraisal allowing learning record to be viewed and created as part of the PDP. (TAR0004261)	No further work has taken place on this due to COVID priorities. Remains red and to be closed.
Technology Services - Subject to Funding from potential carry over of remainder of Transformation Fund. Develop and Operate a mechanism to integrate the e-Rostering data with SSTS. (TAR0004277)	No further work has taken place on eRostering integration as we await direction from the national programme. Target to be closed.
Technology Services - Subject to funding Proportion of costs of Digital senior team and other staff included in these numbers. Figures not included in above numbers. Continue to support wider rollout and further development of the Turas Clinical Assessment tool for use in other NHS Scotland boards. (TAR0004320)	SG have put this on hold pending work on other priorities and will consider it at a later date.
Technology Services - Subject to Directorate Funding. Sum currently not shown in Digital numbers. By March 2022 improve the reporting of the current quality of Education Providers by extending Turas Quality Management reports (currently used by NES	No funding received, so work cannot go ahead. Target to be closed.

Target	Update
Pharmacy) to cover all NES Directorates. (TAR0004260)	
Finance - Design & implement Customer satisfaction questionnaire to review and compare satisfaction levels. (TAR0004071)	This activity has been delayed due to the vacant Head of MIS post. Recruitment of the post is planned in 22/23 and progress towards the achievement of this target will be made after the post is filled.
Finance - Develop a suite of BOXI Reports which are available to Analysts and Finance Managers to support financial reporting to budget holders. (TAR0004068)	This activity to improve the reporting available to budget holders has been delayed due to the vacant Head of MIS post. Recruitment of the post is planned in 22/23 and progress towards the achievement of this target will be made after the post is filled.
Finance - Work with NDS and Scottish Government colleagues to agree a recurrent baseline budget position for NDS. (TAR0004113)	Recurring funding for the NDS element of NTS has yet to be confirmed, although SG have confirmed funding for 22/23. We will continue to discuss future budget requirements in light of restricted funding at SG and necessity to identify recurring funding.
Finance - Scope the potential for using the NES Corporate Dashboard for internal financial reporting. (TAR0004070)	This activity has been delayed due to the vacant Head of MIS post. Recruitment of the post is planned in 22/23 and progress towards the achievement of this target will be made after the post is filled.
Finance - Work with Digital to develop a process to enable approx. 200 Lecturers per month to submit their claims electronically and export the data to e-payroll. (TAR0004060)	NES Technology Services have had to prioritise their available resources across a number of projects and as a result, work on the Lecture Fees process will not now begin until 2022/23.
Finance - Department will provide a variety of training events for all staff to develop their skills and understanding of the role of the finance and procurement functions. This will be achieved in part from the I Want to Know More about sessions which will be held at least 6 times each year. (TAR0004106)	The IWTKMA sessions for finance staff have not been delivered as planned, and we are reviewing their future format and content to ensure the desired outcome is achieved in future years. Ad-hoc training and development is taking place within teams in the meantime.
Finance - Complete a review of reporting needs within Finance incl. Finance Business Partnering model. (TAR0004069)	This activity has been delayed due to the vacant Head of MIS post. Recruitment of the post is planned in 22/23 and progress towards the achievement of this target will be made after the post is filled.

Target	Update
<p>Medical - Deliver the LaMP programme to up to 385 medical and dental trainees, SAS doctors, GPs and Consultants. (TAR0004241)</p>	<p>COVID DELAY Our original target was to offer 385 places on LaMP. Delivering LaMP virtually has halved the number of places we have on each course, with the same faculty commitment i.e. 1 day. A member of our team, involved in the delivery of LAMP, was off on long-term sickness absence and with clinically-based faculty being unable to commit to course delivery due to COVID pressures, this significantly impacted our ability to deliver LaMP between April 2021 and March 2022. Our colleague has now completed a phased return to work, and with the appointment of new and returning faculty, we are gradually able to offer more LaMP courses however we fall some way short of our original target with only 248 places offered by year end.</p>
<p>Medical - In partnership with territorial and special NHS Boards jointly fund a key workforce member to commence academic training in Human Factors and Ergonomics by March 2022. Looking for funding (88k) to support each Board to identify a key workforce member to undertake academic training in Human Factors over 1-2 years at an accredited university and NES safety, skills and improvement research collaborative to undertake related evaluation. (TAR0004227)</p>	<p>This objective/target has been ongoing for several years but as yet has not attracted appropriate funding. As such, it has therefore been decided to remove this target until such funding is identified.</p>
<p>Medical - Complete the pilot and evaluate a multi-disciplinary LaMP programme for clinical staff by November 2021. Provide an evaluation report for the L&M Forum by December 2021. (TAR0004242)</p>	<p>This target remains on hold at present due to covid restrictions, re-prioritising of our workload and whilst we wait for a clearer direction of travel from the leadership and management forum as they reconnect with the NES Executive team. There has been no change since the Q1 update.</p>
<p>NMAHP - Subject to funding, we will commission an evaluation of the impact of the Graduate Diploma Integrated Community Nursing by March 2022. (TAR0004598)</p>	<p>COVID DELAY. Capacity was not available in this financial year but funding has been requested to undertake this in 2022/23</p>

Target	Update
<p>NMAHP - By March 2022, we will scope the current education provision for the Specialist Nurse Practitioner / Advanced Nurse Practitioner and Clinical Nurse Specialist/ Advanced Clinical Nurse Specialist and engage with stakeholders to align this with the NES NMAHP Development Framework and NES Education and Career Development Pathway model. (TAR0004639)</p>	<p>COVID DELAY. Following the pause required due to the Pandemic, discussions have been initiated with CNOD to explore supporting Boards to progress work against paper 8 in the Transforming Roles series, to report their CNS workforce. The NES role in the emerging national work will be dependent upon a future commission and related funding. It is anticipated that a future commission will include both Digital and NMAHP Directorates.</p>
<p>NMAHP - By March 2022, in collaboration with cross-directorate NHS Education for Scotland Medical and Ophthalmic colleagues we will scope service and education needs for adoption of the Ophthalmic Practitioner Training in Scotland. (TAR0004513)</p>	<p>Following a change in strategy from Scottish Government, work pertaining to Ophthalmic practitioner training will not be mobilised via NES. This need is now being explored within the Centre for Sustainable Delivery (CfSD), whom also hold the related budget and is no longer a target for NES NMAHP or the NES Optometry team. This objective is now closed. This target needs to be closed as it is complete.</p>
<p>NMAHP - Subject to funding, we will continue to develop the community pathway to specialist and advanced levels, and commission education to deliver this to up to 150 nurses by March 2022. (TAR0004597)</p>	<p>Funding was not available in this financial year but has been requested for 2022/23.</p>
<p>NMAHP - Subject to funding, at least 3 projects will be completed by the end March 2022 by the Enhancement of Pre-registration Nursing (SCEPRN) and Midwifery Education Group Scotland (MEGS) to provide programme enhancement and development for the Future Nurse/Midwife Programmes across Scotland. (TAR0004499)</p>	<p>Due to the COVID related pressures on workforce within health and care settings and universities none of the 3 projects were commenced this year.</p>
<p>NMAHP - By March 2022, subject to external or additional funding, we will develop and design the criteria, process and secure stakeholder agreement by which Allied Health Professions (AHP) innovations are selected and implemented through using a Quality Improvement methodology. The outcome will be to support innovation and reduce variation of practice across Scotland. (TAR0004536)</p>	<p>COVID DELAY - Owing to a shift in focus to sustaining AHP Careers Fellowship output, it was decided that delivery of two similar quality improvement targets was unsustainable. This target will not proceed any further and should be closed.</p>

Target	Update
<p>PCR - Deliver the annual cycle of operational planning and performance with identified priority targets over the next three years and support the development of KPIs for the new standing committees of the Board by end of September 2021. (TAR0004570)</p>	<p>Planning and performance cycles fully delivered and on time. KPI work is underway, but work on strategic KPIs cannot be completed until the revised strategy is available, therefore the KPI element of this target has not been fully delivered.</p>
<p>PCR - By March 2022, all scheduled education programmes are subject to rigorous Educational Governance scrutiny. (TAR0004553)</p>	<p>This target is no longer relevant following a review of Educational Governance arrangements. The agreed Quality Assurance model will no longer involve scrutiny of individual programmes (except where they are subject to external regulation). Target to be closed.</p>
<p>Psychology - To develop and deliver digital learning programmes to support the provision of Low Intensity Psychological Interventions in Secure Mental Health Settings and Training for Trainers in An Introduction to CBT for Anxiety for 30 staff. (TAR0004426)</p>	<p>Content for the LIPI in Secure Mental Health settings continues in development. The work to develop the T4T ICBT-A training resources has been paused due to EPP delivery. Content for the Substance Misuse and Trauma education resources to support the MAT standards is being developed.</p>
<p>Psychology - Scope, develop and deliver a tailored Core Psychological Therapies and Interventions Training programme, for adults that meet the needs of Autistic people with anxiety, depression, substance misuse, psychosis and forensic mental health before the end of March 2022. (TAR0004470)</p>	<p>Delayed due to ongoing vacancy (preferred candidate now identified). Pilot has been planned, can be delivered when post-holder in place, likely falling into Q1 2022-3 due to recruitment timescales.</p>
<p>Psychology - By March 2022 complete 165 annual review processes that involve employer and education provider in a comprehensive review of trainee development across all settings. (TAR0004377)</p>	<p>N = 14 (total = 116). ILP schedule was moved for UoG/GG&C trainees. Staff shortages meant coordinating the three way meetings was very difficult.</p>
<p>Psychology - Over the course of 2021-22, onboard the three remaining programmes (APCYP, PTPC, DCLinPsy Edinburgh) and continue to refine existing resource to ensure usability (trainee and supervisors) and data analysis processes. Consolidate use of existing Portfolio functionality across all four Applied Psychology Programmes. (TAR0004380)</p>	<p>Discussions/development has continued with new management teams. Portfolio has not been taken up by the 2022 cohort. Cohort commencing Jan 2023 are expected to be using the system.</p>
<p>Psychology - Provide 10 Connecting with Parents' Motivations (CwPM) trainings (face-to-face or remote) to 150 multi-sector practitioners by March 2022 and 1 CwPM</p>	<p>9 CWPM trainings have been delivered to 99 practitioners in total. 1 CwPM 'Train the Trainer' training has been delivered to 12 practitioners.</p>

Target	Update
'Train the Trainer' training to 12 practitioners by December 2021. (TAR0004417)	
Psychology - Support 50 further completions of the eModule on supervising psychological interventions. Review content in line with the ongoing updates to 'The Matrix (2015): A Guide for Delivering Evidence based Psychological Therapies' and new training programmes (e.g. Enhance Practitioner training programme) that may influence the supervision of psychological therapies. (TAR0004463)	2 people completed the Supervision of Psychological Interventions Module in Q4. For full FY, 26 people completed the Supervision of Psychological Interventions E-learning module. Revised content has been submitted to digital for changes to be made, however changes are not yet made.
Psychology - Psychology Trainee survey - continue work on presenting a review of the survey's first year of implementation (after delays due to Covid-19) and agree a process for the publication of survey results from year 2 onwards. (TAR0004378)	COVID DELAY RED Continuing delays as previously indicated. Digital now have this planned for 22-23
Psychology - Subject to SG confirmation of funding, offer a minimum of 2 training events (120 places in total) on each of the advanced Training in Psychological Skills - Paediatric Healthcare (TIPS PH) training on: "Improving Adherence/Concordance; Advanced Communication and MI Skills"; "Significant Conversations, Life Limiting Conditions and Palliative care" and "Understanding Persistent Physical Symptoms in Paediatric Healthcare" to paediatric healthcare staff across Scotland. (TAR0004409)	COVID DELAY. One training event (Persistent Physical Symptoms) was held locally (joint Fife and Forth Valley) in Q4 (20 places offered and 19 attended) and therefore 1 training event in total across the year. Two planned national training events (Persistent Physical Symptoms and Significant Conversations) were cancelled and one local event for Fife, Forth Valley and D&G (Promoting Engagement) postponed in Q4 (before advertising) due to NES policy and advice around limiting non-essential training offered during the period of the Omicron variant and availability of staff to attend. Similarly, local training could not be planned due to staff not being released to attend training in many boards and trainers not having capacity to deliver it. Covid pressures have therefore been a barrier to achieving this aim. These modules will be prioritised for national delivery in the next financial year.
Workforce - Work closely with Directorate Management Teams to use quarterly performance data and staff feedback to identify, understand and address key attraction, recruitment and retention issues	Reduced HRBP support to Directorates in Q4 due to increased levels of transactional HR activity and absences across team and all resource focused on essential payroll, ER and recruitment work.

Target	Update
<p>arising during recovery and renewal. (TAR0003969)</p>	
<p>Workforce - We will improve our equality and diversity data gathering and analysis by ensuring quarterly reviews of our programmes and learner participation across all planned activities to ensure all equality and diversity outcomes relevant to our department activities are identified, reviewed, planned for and proactively managed. (TAR0004104)</p>	<p>Lack of capacity in team has restricted progress.</p>
<p>Workforce - By March 2022 A) carry out the development phase to produce a foundation level leadership & management development resource, and B) Pilot on-line materials and methods with two multidisciplinary groups across the Health & Care System. (TAR0004086)</p>	<p>Discussions have concluded at senior level. L&M Forum will now provide clear direction as to what the resource should cover in anticipation of the working group to recommence. Targets have been put back to following financial year 2022/23</p>
<p>Workforce - Pilot joining up recruitment campaigns across the organisation via the Workforce Plan and through working with Directorate Management Teams, by November 2021. By March 2022 evaluate pilot for positive impact on recruitment outcomes and time to fill. (TAR0003966)</p>	<p>Review of use of talent pools has not taken place in Q4 due to current high levels of recruitment across NES and a lack of capacity to resource a review.</p>
<p>Workforce - Continue to support Directorates in improving their compliance rates for Personal Development Planning & Review and Essential Learning through design and delivery of an effective and timely programme of learning and peer support for new and current managers ensuring 60% of new line managers participate in programme. (TAR0004636)</p>	<p>There are significant issues in this area of work, due to capacity issues. A review has been initiated to identify issues and develop an action plan for 2022.</p>
<p>Workforce - Lead on the establishment of a sustainable cross directorate infrastructure to enable clear education and career pathway routes in NES by implementing the Youth Employment Strategy and increasing the number of all levels of apprenticeships employed in NES by 10%. (TAR0004093)</p>	<p>Significant commitment has been made to the GCAS internship programme which supports recent graduates. Significant risk around resourcing this, especially within HR. This is a national initiative that should be considered a risk.</p>
<p>Workforce - Subject to funding, source and implement an online matching platform for a National Health and Social Care coaching and mentoring collaborative, recruiting up to 50</p>	<p>No resources allocated for this work in 2021-22</p>

Target	Update
coaches from partnering organisations. (TAR0004081)	
Workforce - By September review impact of implementation of Values Based Recruitment on recruitment outcomes and identify any areas for further refinement to achieve continuous improvement. (TAR0003968)	No progress made in Q4 due to increased levels of transactional HR activity and absences across team and all resource focused on essential payroll, ER and recruitment work.

Table 6.4 – All non-priority amber targets Q4 (COVID 19 impacted targets highlighted in BLUE) (excludes priority ambers)

Target	Update
Optometry - To host a national conference to support community eyecare, with a minimum 225 eyecare professionals registering in Q3. Recruiting experts to design and deliver CPD in line with professional needs; apply for CET (Continuing education and training) points from the regulator which supports Optometrists' and dispensing opticians' revalidation. High tutor levels required due to good practice guidance from regulator around facilitator:learner ratios for CET delivery. (TAR0003990)	The national conference took place in October. Delivery was on-line and occurred at the end of a 3 year CPD cycle. 207 external delegates received CPD, tutors and facilitators also received CPD points.
Optometry - In 2020/2021 we aim to deliver a medically orientated CPD package to the Optometry profession, and being accessible to a sufficient number of practitioners to meet the demands. This work will require a scoping exercise to determine outcomes that align IP optometrists to level 3 of the RCO's OCCCf (Royal College of Ophthalmology's Ophthalmic Common Clinical Competency Framework) on emergency eyecare. Apply for CET (Continuing education and training) points from the regulator which supports Optometrists' and dispensing opticians' revalidation. High tutor levels required due to good practice guidance from regulator around facilitator:learner ratios for CET delivery. (TAR0003989)	Due to capacity issues within the team (30% reduced due to vacancy and illness) this work has been paused until the team is back to full capacity. The educational lead in charge of this piece of work was internally promoted and backfill not possible until ongoing SG funding confirmed.

Target	Update
<p>Dental - Deliver two national workshops to increase dental healthcare professionals' knowledge and skills for improving healthcare quality. Postgraduate training day offering up to 25 places and a joint event with the CPD workstream offering up to 120 places both with attendance of at least 90%. Delivery will be a balance of online and face-to-face, depending on the situation of the current COVID pandemic as the year progresses. (TAR0004182)</p>	<p>The joint day with CPD that had been planned did not go ahead due to a number of factors, including the restrictions we faced with the Omicron variant and restrictions not being lifted as early as predicted.</p>
<p>Technology Services - Develop a core data module in turas to store accurate info about NHS employees, thereby improving the employment experience through tailored employment support and advice. (TAR0004291)</p>	<p>Work is underway on employee data acquisition from eESS which underpins this work.</p>
<p>Technology Services - Enhance the updates of employee information related to employees joining or leaving NHS employment, or moving employment within the NHS. (TAR0004278)</p>	<p>JML launch delayed slightly - expected to roll out Q1 2022-23.</p>
<p>Technology Services - The transition plan for the migration of the SCI Diabetes platform from its current environment on ATOS to AWS will be developed during the final quarter of 2020/21. The target date to complete the migration securely is being set as March 2022 (subject to that date being supported by the planning process). (TAR0004615)</p>	<p>We are still in the early stages of planning the migration, and not at the stage where we can look at cancelling the contract. We were initially planning to move to AWS but are now moving to Azure. We now have an Azure environment where we can begin testing migration.</p>
<p>Technology Services - Work is being scoped during Quarter 4 of 2021-22 to determine the business requirements for a pre-diabetes service similar to SCI-D and the likely work required to deliver the digital and data componentry. While this has a high policy priority any work will only go forward in 2021-22 if the SG identifies additional resources to support the work. (TAR0004616)</p>	<p>Weight Management Tool in Turas platform for the capture of the weight management core dataset for reporting to Scottish Government.</p>

Target	Update
<p>Technology Services - Carry out 4 significant publicity campaigns around priority workstreams, as identified by ET/SOLG, (e.g. Year in Review, professional recruitment campaigns) including a range of appropriate communications channels, paid promotion, creation of marketing assets, internal communications, use of the corporate website, social media activity. Support other communications activity and projects as directed by the organisation, e.g. Smarter working, Coronavirus-related comms, careers and recruitment. (TAR0004328)</p>	<p>Q4 Year in Review campaign is in hand. We have also supported a range of other communications activity as directed by the Scottish Government (COVID-related) and the organisation (e.g. staff resilience, return to office comms). However, these operational priorities and the ongoing development of NES' strategic direction mean that we will be unable to progress other publicity campaigns this year.</p>
<p>Technology Services - Turas Learn external stakeholders have MoUs in place, are informed of developments and have mechanisms to request functionality. Facilitate 4 meetings a year of the National Learn User Group, produce the quarterly newsletter and circulate regular release notes to admins. Engage with all stakeholders to support them to benefit from functionality on Turas Learn. (TAR0004264)</p>	<p>Some MoUs signed but delays in renewals of Grampian and NHS24. National user group meetings hosted. Good engagement with Admins at Bootcamp and training for new functionality for sessions. Quarterly newsletters circulated.</p>
<p>Technology Services - Increase user awareness of the Office 365 applications and best uses, increase application usage/adoption of collaborative products such as Teams/OneDrive/SharePoint and reduce usage of email. (TAR0004287)</p>	<p>Continual enhancements to the platform, NES migration from non-enterprise to Enterprise version of Yammer, which will facilitate future integrations from the Digitally enabled Workforce group. SharePoint Communication sites under continual development with data transfer/migration work being undertaken only after managed project engagement with directorate/department with IG and data cleansing guidance being issued.</p>
<p>Technology Services - Enhance existing workforce data with new and more accurate coding that will allow NES to support workforce planning at a more detailed level. For example, more detailed occupational coding for Healthcare Science, Pharmacy, consultant Programmed Activities, consultant specialties, and for the staff of Elective Treatment Centres. (TAR0004314)</p>	<p>The target has not been fully met in 2021/22 due to emerging challenges and changing priorities around workforce data. However, several pieces of work relating to this target are underway or in the planning. We have carried out a review of occupational coding as it is implemented in eESS. We are supporting a review of service area and location variables for AHPs. A new data quality group chaired by NES is looking at coding of National Treatment Centre staff. NES is considering a request from Scottish Government for improvements to Mental Health workforce data and a business case for additional analyst resource is in preparation.</p>

Target	Update
<p>Finance - NES will lead on at least one procurement activity on behalf of the National Boards. (TAR0004052)</p>	<p>C19 - Limited progress in the quarter however the National Boards collaboration group reconvened in March for the first time since Covid interrupted activities. A new group chair has been appointed and it has been agreed to schedule quarterly meetings from April 22.</p>
<p>Finance - Completion of skill mix review as part of Single NHS Competency matrix. (TAR0004053)</p>	<p>C19 - No change to previous update. Preliminary work has been conducted by the Learning and Development team at NSS National Procurement and it is expected that an agreed suite of roles descriptions will be available for the Competency Framework in 22/23. This has not prevented relevant training and development to be delivered to the Procurement team as identified within the appraisal process.</p>
<p>Finance - Review, update and monitor KPIs and update HoS (Heads of Service Group) dashboard on a regular basis, as dictated by demands of pandemic. (TAR0004049)</p>	<p>Covid - As previously reported, re-prioritisation of activities has meant this has not been a focus. A combined review for Finance and Procurement has been scheduled for Q4 to determine applicability of ongoing baseline detail (also links to latest board requirements)</p>
<p>Finance - Work with Digital to transfer approx. 60 weekly Study Leave payments currently paid by Cheque to be processed by BACS, including the capture of bank details and interface of those into e-financials. (TAR0004057)</p>	<p>There is a short delay in the project due to limited resources in NTS which has resulted in the transition over to BACS not yet having taken place. Applications for the first study leave payments of 2022/23 will still be dealt with using existing processes. The expectation is that this will be completed in Q1 2022/23.</p>
<p>Finance - Internal and external audit recommendations for finance will be reviewed and responses provided within required timescales. (TAR0004059)</p>	<p>The external audit actions have been implemented as part of the yearend process. The Internal Audit recommendation to review the Invoicing process for Medical Practices is in draft form however finalisation of this has been slightly delayed due to staff absence but will be completed in early 2022/23.</p>
<p>Medical - Develop, pilot, roll-out and evaluate simulation-based training for years 1-3 of the Core Psychiatry Training programme. By August 2021, pilot a year 1 Apex course and develop resources for year 2 & 3 by March 2022. If we get government funding then the courses will start in August and the number of courses will depend on COVID restrictions at the time. (TAR0004246)</p>	<p>Plans to film a mock Tribunal to allow us to create a VR resource have been delayed and this will now take place in April. The development of this resource has been delayed by organisational complexities e.g. availability of a Tribunal suite, cast etc. This VR resource will be incorporated into a 2-part programme which will consist of an online module and a face-to-face course. Development of these new materials will be completed soon and in time for the VR materials to be incorporated.</p>

Target	Update
<p>Medical - implement and deliver actions and plans arising from action plans generated by Deanery SJDC and MSG/SJDC Group meetings to take forward improvements to junior doctors working lives including any actions arising from Scottish Government recommendations in response to Expert Working Groups and other recommendations. (TAR0004045)</p>	<p>Work commencing on review of code of practice for recruitment in December 21. Workforce meetings including core steering group suspended to February 22 due to covid activity. Moved to Amber due to ongoing high level of covid activity and NHS remaining on emergency footing into March 22. Code of practice and review of rota patterns work recommencing April 22. Workforce Meetings also recommencing April 22.</p>
<p>Medical - Ensure the main CSMEN delivery units (for pre-hospital care, surgical skills, simulation based education and the MSU) continue to provide standard, relevant clinical skills training in line with new SSIB (Safety, Skills & Improvement Board) strategy enhancing collaboration and cross disciplinary skills education and training. As part of SSIB, develop impact markers for collaboration. Training will include delivery of 70 remote and rural courses; 3 online emergency care programmes, surgical skills training for 100 multi-professional trainees, and support for 50 simulation based educational training courses. The MSU will visit 20 remote and rural locations and train 1000 multi-professional participants. (TAR0004208)</p>	<p>All delivery units progressing well. SCSCHF and Pre-hospital Emergency care on target. Surgical skills training was £30,000 under budget due to being out of contract for 3 months. This contract has now been renewed and signed and is valid from 1 Oct 2021 to 30 Sept 24. Numbers for endoscopy training continue to be reduced as physical distancing is still a requirement. In addition due to ongoing pressures in the territorial board 3 out of 5 MSU visits were cancelled (to Wick, Skye and Aberdeen). We continue to provide faculty development training and have trained a further 18 people, including a FD course on location in Inverness. We continue to work with the HB to prioritise their individual training and to provide national courses where appropriate, recognising that each HB is unique and faces different pressures.</p>
<p>Medical - By March 22 have audited all 8 specialty group programmes to ensure consistent data capture and accurate data in TPM system to support reporting and monitoring of COVID-19 related derogation from training pathway including redeployment and ARCP additional outcomes. (TAR0004043)</p>	<p>Work delayed due to board activity and priority of clinical work of TPDs and HR colleagues. Reporting tool now complete and on Turas data intelligence.</p>
<p>Medical - Develop, pilot and publish eLearning module on structured handover training by March 2022. Evaluation with test groups - aim to increase knowledge and confidence using structured handover in 80% of those completing module. It is possible to measure reported changes in knowledge and confidence as part of built in evaluation using Kirkpatrick framework. As some users of</p>	<p>COVID DELAY - This e-learning module will be completed within three months (end May 2022). Delays have been due to available time for clinical staff and accessing suitable filming locations due to COVID.</p>

Target	Update
resources may have existing experience in these areas, agreement by development team that 80% reasonable as a target to indicate success of resources. (TAR0004225)	
Medical - By July 2021, develop and pilot a formal evaluation process for the new RoT process. The formal evaluation will be conducted between July and December 2021 and a report prepared for MDET by the end of March 2022. (TAR0004240)	We have now addressed anomalies within our trainer data and can now move forward with our evaluation. Staffing issues will be an issue in the next month or so, will cause a slight delay to our reporting.
Medical - Review the experience of Training Practices hosting GP Returners from a support and workload perspective to inform future development of the programme. (TAR0004236)	COVID Delay - It was not possible to take forward this activity as the GP Education Fellows focused their work capacity as other projects that had become a priority in GP Education during the COVID pandemic. GP Practices we too busy to engage in qualitative research. At the moment there are no issues with the quality and suitability of placements and this work was to inform future possible development.
Medical - Complete the redesign and move to an automated request and approval process in partnership with lead employer for LTFT (Less Than Full-time Training) and continued monitoring of existing LTFT working arrangements. To develop an online OOP (Out of Programme) request process. (TAR0004041)	Work now in plan for Q1 - Q3. Initial discovery taking place in Q4 to ensure work commences to plan and reflects changes to Trainee Development and Wellbeing Service.
Medical - Deliver a minimum of 4 online development learning events for NES GPN Educational Advisors and GPN Education Supervisors by end of Mar 2022. Learning opportunities to be delivered by NES across a full range of education utilising models and resources to enable ES and EA to enhance their knowledge and confidence around leadership and governance to support effective role-modelling to the wider GPN workforce across Scotland. (TAR0004213)	Three meetings of the four have taken place. The fourth meeting was cancelled due to pressures within Primary Care in the early part of 2022 due to Covid. The 4th meeting has been arranged for late April 2022.

Target	Update
<p>NMAHP - Adapt and recommence the Continuing Professional Development programme using blended learning to engage a minimum of 50 Family Nurses and Supervisors by March 2022. The principles within the NES Inclusive Education and Learning Policy will be included and evidence of engagement impact. (TAR0004316)</p>	<p>COVID DELAY. Due to NES guidance and service need priorities to reduce the impact on non-essential education on service delivery, the Continuing Professional Development (CPD) programme was paused in January 2022. A new CPD programme for 2022/23 has been circulated and uptake has been encouraging.</p>
<p>NMAHP - Aligned to the Health and Care Professions Council recommendations, by March 2022 we will: (1) publish the national guidance to support Allied Health Professions' return-to-practice placements online, (2) design one e-resource to facilitate learners to arrange supervised practice placements in Boards and social care settings through the Practice Education Leads' Network, and (3) develop a business case to establish a national approach to cover the pre-requisites for prospective Allied Health Professions' returners to practice. (TAR0004540)</p>	<p>COVID DELAY: Following delay to recruiting people through the Expression of Interest route three people were funded to support return to practice. They have written Frequently Asked Questions, website content, and guidance for arranging supervised practice for returnees. Two talking head videos have been recorded to share returnees experiences, a draft blog has been written, an Advisory Group has met three times, and the draft guidance was released for feedback - with 25 responses. AHP Practice Education Leads have agreed to be organisational key contacts for NHS Boards. Work on a NES Facebook page to support returnees has commenced.</p>
<p>NMAHP - By March 2022 we will maintain, update and develop where necessary, acute COVID-19 related educational resources for NMAHP workforce. (TAR0004515)</p>	<p>We continue to experience challenges in accessing specialty clinical staff qualified to support the review and update of acute resources collated in response to initial covid (acute care) needs. This relates to current clinical covid challenges and very limited staff availability.</p>
<p>NMAHP - By March 2022, we will initiate the development of a national midwifery career framework and education framework working in collaboration with key stakeholders. (TAR0004640)</p>	<p>The development of a national midwifery career framework and education framework is under discussion with the new Chief Midwifery Officer for Scotland. There has been active collaboration with Scottish Government Policy leads, anticipating establishment of a working group to progress this work during next year.</p>
<p>NMAHP - We will continue to refine our virtual Healthcare Support Workers Masterclass model and deliver Healthcare Support Worker role development virtual workshops with two health boards (up to 20 participants per health board) who are able to engage with us in the delivery by March 2022. (TAR0004502)</p>	<p>Allied Health Profession (AHP) scoping work/Masterclass offer not taken up by AHP Team, will not be carried forward to Q1. NHS Tayside HCSW Masterclass dates pushed back to Q1 at NHS Tayside's request - planning work continues in collaboration with Women Children & Young People team and NHS Tayside Midwifery Leads. Dates agreed for Masterclass sessions 1 and 2 in Q1, follow up session 3 will take place in September 2022.</p>

Target	Update
<p>NMAHP - Based on an Equality and Diversity impact assessment, 3 further resources at the Skilled level of the NES/Public Health Scotland Knowledge and Skills Framework for Mental Health Improvement, Self-Harm and Suicide Prevention Framework that address particular and prioritised population needs will be published by September 2021. (Psych Target : TAR0004405) (TAR0004357)</p>	<p>Covid Delay - Further resources at the Skilled level of the NES/Public Health Scotland Knowledge and Skills Framework for Mental Health Improvement, Self-Harm and Suicide Prevention Framework are being progressed alongside the wider skilled level activity (TAR0004353) through the development of digital resources to ensure that we have an equality and diversity lens embedded within our future digital resources.</p>
<p>NMAHP - Deliver a minimum of 15 courses to support continuity of care as part of Best Start by March 2022. Courses will be responsive to individual NHS Board requirements and delivered virtually where possible, with face-to-face delivery maintained where required. (TAR0004348)</p>	<p>COVID DELAY. 5 Best Start 'Birth in the community' workshops were delivered in January-February 2022, involving 56 midwives and 6 student midwives. A HCSW masterclass is also provisionally booked for April 2022. This brings the total to date to 12 courses delivered which is less than the anticipated 15. This target continues to be impacted by the pause to the Best Start implementation across Scotland due to COVID19. Courses will continue to be anticipated and informed by service need.</p>
<p>NMAHP - Subject to funding, by March 2022, we will address clinical skills learning needs of AHPs for COVID-related redeployment and the Framework for Recovery and Rehabilitation after COVID-19 through: development of 2 e-resources; recruitment of a minimum of 3 Clinical Skills Simulation Faculty Members; and delivery of 8 simulation sessions to 64 AHPs and 3 webinars to a total 240 people. (TAR0004529)</p>	<p>COVID DELAY: An outline of a Clinical Skills Education Framework has been created for the NMAHP Directorate. Six more non-technical skills scenarios have been created and reviewed by subject matter experts and simulation experts. Owing to challenges with recruiting people through expressions of interest, CSMEN undertook the scoping activity of regional and local simulation infrastructure across NHS Scotland, and three Clinical Skills webinars will be held in the next financial year to share the results regionally. Three AHPs completed the CSMEN Faculty Training in November 2021. NES digital has created the online NMAHP Clinical Skills Toolkit and a Clinical Skills Structured Observational Marker System for Nursing, Midwifery and Allied Health Professions.</p>

Target	Update
<p>NMAHP - We will support the commissioning, recruitment and delivery of a new digital dementia champions programme with 100 participants completing by March 2022. (TAR0004641)</p>	<p>The new digital Dementia Champions' Programme, which commenced on 16th August 2021 cira150 participants, continues to be delivered by the University of the West of Scotland. Participants have been allocated into 6 regional groups. The course is being delivered online through a series of 5 learning packages - being a dementia champion, person-centred care, stress distress and unmet need, care and support at the end-of-life and expert masterclasses. Discussions are ongoing with boards to ensure completion of programmes. Not every champion has fully completed yet, hence the amber rating.</p>
<p>NMAHP - By March 2022 we will work with stakeholders to develop a minimum of 2 case studies/ user stories (a) to showcase Healthcare Support Workers as leaders and service improvers and (b) illustrate the role of masterclass model in influencing thinking around HCSW skills mix and decisions linked to service re-design/transformation. (TAR0004504)</p>	<p>Case Study 1 around Healthcare Support Worker Band 4 role development and supporting education is complete and available on Support Worker Central. Case Study 2 is being story-boarded from the content of support workforce virtual learning week workshop "Making things even better." NES TEL team have been asked for advice on best tool for maximum engagement. Case study 2 will be completed during Q1.</p>
<p>NMAHP - 4 virtual learning events will be delivered by March 2022 to a total of 100 targeted health, social care, and wider public health staff in a training, facilitation and improvement role, to enable capacity building to deliver the Skilled Level resources developed via the NES/Public Health Scotland Knowledge and Skills Framework for Mental Health Improvement, Self-Harm and Suicide Prevention. (Psych Target : TAR0004406) (TAR0004358)</p>	<p>Covid Delay - Large scale event for facilitators planned and delivered online on 29th March and will target those people who have already accessed the informed level facilitators packs. The events are specifically targeting health, social care, and wider public health staff in a training, facilitation and improvement role, to enable capacity building to deliver and test the Skilled Level resources developed via the NES/Public Health Scotland Knowledge and Skills Framework for Mental Health Improvement, Self-Harm and Suicide Prevention. The events will also promote the Skilled Level Facilitators Resources developed to date - Supporting a person in distress or crisis (Cross reference TAR0004353). Additional facilitator resource currently with NES Design - Supporting a person at risk of suicide or self-harm.</p>

Target	Update
<p>NMAHP - By March 2022, as part of the Scottish Government national health protection and infection prevention and control workforce review programme, undertake a scoping exercise exploring existing education and competency frameworks, career frameworks in Infection Prevention and Control in order to inform the development of a new career knowledge and skills framework and develop associated educational resources. (TAR0004613)</p>	<p>Workstream meetings set to recommence end of March. Scottish Govt. IPC Workforce Strategy currently out for consultation. NES ARHAI have reviewed and provided a response.</p> <p>£60,000 funding based on best estimate of work that will be commissioned by Scottish Government is included in the CNOD bundle request for 2022-23 Internal NES meetings ongoing to discuss re-organisation of IPC Zone and development of HEI signposting (via compendium or section on TURAS Learn IPC Zone, TBC).</p>
<p>NMAHP - Produce 4 eLearning resources at the Skilled level of the NES/Public Health Scotland Knowledge and Skills Framework for Mental Health Improvement, Self-Harm and Suicide Prevention by September 2021 covering the following areas: Promoting mental health and tackling inequalities; Supporting People in Distress and Crisis; Supporting People at risk of self-harm; Supporting People at risk of Suicide; Supporting Recovery and Quality of Life for People Living with Mental Ill-Health. (Psych Target : TAR0004401) (TAR0004353)</p>	<p>Covid Delay - Additional skilled level resources developed - Distress and Crisis and Suicide and Self-harm (Adult and CYP) for facilitation. Also in development is the elearning module combining Distress/Crisis and Suicide and Self-harm as one resource to enhance learning within this area. Currently these products are within design concepts and in later stages of design. Completion is anticipated within the next couple of months. Linked to (Psych Target : TAR0004405)</p>
<p>PCR - Complete an Educational Governance review of a nominated NES directorate by January 2022. (TAR0004554)</p>	<p>Educational Governance review of the NMAHP Directorate completed on 1 March 22. To be reported to EQC in May 22.</p>
<p>Psychology - To deliver the essential CAMHS supervisor training (face-to-face, remote, blended) to 20 new essential CAMHS supervisors. To continue to promote the implementation of the essential CAMHS learning resource and to work with digital colleagues in NES to improve the tracking and reporting functions of the learning programme on Turas Learn. (TAR0004386)</p>	<p>Essential CAMHS supervisor training delivered to 15 CAMHS clinicians in q4 taking the total trained this year to 27. Continued liaison with digital around improving the reporting of essential CAMHS on Turas learn to make it easier to extract completion data for different learning programmes as well as the open access modules. NES CAMHS continue to promote and support the essential CAMHS programmes and check approvals on a daily basis</p>

Target	Update
<p>Psychology - Deliver two education and training sessions (face-to-face or remote) to promote the launch of and support the use of the Early Intervention Framework by September 2021. (TAR0004421)</p>	<p>One recorded education and training session involving Allison Metz was undertaken in Q4. Case study meetings with participants from one health board area have been completed, and will be incorporated into a webinar to be run during May/June 2022.</p>
<p>Psychology - Monitor recruitment and employment diversity data for the NES funded Psychology Training programmes and provide regular robust data to inform individual training programme activities. Annual reports produced in response to recruitment for 6 Training Programmes. Monthly trainee activity reports collated to monitor changes in Trainee training circumstances. (TAR0004361)</p>	<p>Monitoring of recruitment and employment diversity data for psychology training programmes has continued however there has been some impact on data collection processes as a result of challenges with staff resource/capacity. Plans to resume monitoring and data analysis in 22/23 Q1.</p>
<p>Psychology - 4 virtual learning events will be delivered by March 2022 to a total of 100 targeted health, social care, and wider public health staff in a training, facilitation and improvement role, to enable capacity building to deliver the Skilled Level resources developed via the NES/Public Health Scotland Knowledge and Skills Framework for Mental Health Improvement, Self-Harm and Suicide Prevention. (TAR0004406)</p>	<p>Covid Delay - Large scale event for facilitators planned and delivered online on 29th March and will target those people who have already accessed the informed level facilitators packs. The events are specifically targeting health, social care, and wider public health staff in a training, facilitation and improvement role, to enable capacity building to deliver and test the Skilled Level resources developed via the NES/Public Health Scotland Knowledge and Skills Framework for Mental Health Improvement, Self-Harm and Suicide Prevention. The events will also promote the Skilled Level Facilitators Resources developed to date - Supporting a person in distress or crisis (Cross reference TAR0004353). Additional facilitator resource currently with NES Design - Supporting a person at risk of suicide or self-harm.</p>

Target	Update
<p>Psychology - Support the review process of 'The Matrix (2015): A Guide for Delivering Evidence based Psychological Therapies' by developing guidance on the training pathways and supervision structures for therapies and interventions contained within the resource and disseminating the results to key stakeholders (e.g. Psychological Therapies Training Coordinators, service leads) and the wider NHS and partnership workforce. (TAR0004462)</p>	<p>In line with requirements from Scottish Government to await the publication of the Psychological Therapies Standards, the guidance formed in Q1&2 on governance and training pathways for psychological therapies are on hold until summer 2022. Regular updates have been held with stakeholders - HOPS, PTTCs, Heads of specialist services. Wider engagement of the workforce is underway through participation in the SLWGs for each review topic. The template for the Matrix web resource will be completed in Q4 ready for populating with the output of the review process. Two tables are at stage of final sign off, 1 table is in final draft. There is a further 8 table reviews in process.</p>
<p>Psychology - Produce 4 eLearning resources at the Skilled level of the NES/Public Health Scotland Knowledge and Skills Framework for Mental Health Improvement, Self-Harm and Suicide Prevention by September 2021 covering the following areas: Promoting mental health and tackling inequalities; Supporting People in Distress and Crisis; Supporting People at risk of self- harm; Supporting People at risk of Suicide; Supporting Recovery and Quality of Life for People Living with Mental Ill-Health. (NMAHP target ref TAR0004353) (TAR0004401)</p>	<p>Covid Delay - Additional skilled level resources developed - Distress and Crisis and Suicide and Self-harm (Adult and CYP) for facilitation. Also in development is the elearning module combining Distress/Crisis and Suicide and Self-harm as one resource to enhance learning within this area. Currently these products are within design concepts and in later stages of design. Completion is anticipated within the next couple of months. Linked to (Psych Target : TAR0004405)</p>

Target	Update
<p>Psychology - Continue with the delivery of the Psychological Interventions in Response to Stress & Distress in Dementia Training for Trainers programme. Deliver 1 Stress and Distress in Dementia Training for Trainers programme to 20 health and social care staff by March 2022. Further support the implementation of formulation-led approaches to manage and reduce distressed behaviour by delivering two Stress and Distress in Dementia coaching workshops to 30 health and social care staff by March 2022. Training and coaching to be delivered face-to-face, remote or blended approach. (TAR0004436)</p>	<p>Achieved: 2 digital workshops have been produced to support psychologically informed practice in relation to the experience of altered reality, a common source of distress for people living with dementia. These will be shared with existing trainers in April 2022 and will be incorporated into existing programmes including Psychological Interventions TFT, Essentials TFT and can be used as a standalone training resource.</p> <p>COVID REDUCED CAPACITY - 1 face to face delivery of Psychological Interventions TFT went ahead in Jan '21 and places were offered to 14 H&SC staff. Unfortunately staff sickness and service pressures reduced attendees to 10.</p> <p>Coaching masterclasses for existing Psychological Interventions trainers were offered in May '21 and June '21 and were attended by 28 trainers from across Scotland. Further training workshops will be provided in early fin 22/23.</p>
<p>Psychology - Develop a Turas Learn e-learning programme for Let's Introduce Anxiety Management (LIAM) by December 2021. (TAR0004393)</p>	<p>Delayed by Digital improvements to functionality on TURAS Learn. To be completed 2022/23</p>
<p>Psychology - Ongoing review of NES/Scottish Government's 'The Matrix: A Guide for Delivering Evidence based Psychological Therapies' will be progressed by disseminating the updated contextual chapters and delivering a minimum of a further 3 updated 'evidence tables', as informed by the national prioritisation process. (TAR0004428)</p>	<p>In line with requirements from Scottish Government to await the publication of the Psychological Therapies Standards, the guidance formed in Q1&2 on governance and training pathways for psychological therapies are on hold until August 2022. Regular updates have been held with stakeholders - HOPS, PTTCs, Heads of specialist services. Wider engagement of the workforce is underway through participation in the SLWGs for each review topic. The template for the Matrix web resource will be completed in Q4 ready for populating with the output of the review process. Two tables are at stage of final sign off, 1 table is in final draft. There are a further 8 table reviews in process.</p>

Target	Update
<p>Psychology - To continue to provide Cognitive Behavioural Therapy (CBT) training at various levels including: 1. To continue to provide CBT training to certificate (1 year course) and diploma level (additional 1-year course) to 18 ongoing clinicians who started/will start in Sept 20/Jan 21, and new cohort of 15 clinicians in Sept 21 (dependent on confirmation of SG funding for 22/23). 2. To continue to provide CBT supervision training to 20 CAMHS clinicians delivered in two training cohorts. 3. To deliver training for trainers in CBT based interventions such as Low Intensity Anxiety Management (LIAM) or Behavioural Activation (BA) to support implementation of these interventions in CAMHS. 4. To deliver highly specialist CBT courses in CBT for eating disorders to 15 clinicians. Training will be delivered face-to-face, remotely or blended as per government guidance. (TAR0004384)</p>	<p>Sept 20 certificate start - 3 completed and 1 ongoing, Sept 20 diploma start - 3 completed. Jan 21 certificate start: 2 completed, 3 in training, 1 interruption and 5 withdrawals. A new cohort of 17 clinicians started training in Sept 21: Sept 21 certificate start - 9 in training and 2 interrupted. Sept 21 diploma start - 3 in training, 2 interrupted and 1 withdrawn. 2. Planned repeat of CBT supervision training in March 22 had to be moved to April 22 due to unexpected circumstances. 10 Trained in CBT supervision this year. 3. Brief BA cascade of training into CAMHS continues to be active over 5 health board areas, with a total of 156 staff trained in BA over 21/22 (due to crossover in posts and delivery, this is also reported within TIPS-EIC.) 4. CBT-ED training complete.</p>
<p>Psychology - Provision of 'Train the Trainers' training (face-to-face, remote, blended) for 12 psychological therapists in the LD adapted version of Safety & Stabilisation. Support and review of implementation of this with specialist learning disability staff in at least 5 health board areas (n = 60 staff) (TAR0004414)</p>	<p>LD staff in post from Q3 hence some amendment or addition to delivery. • S&S T4T - 4 LD staff from 2 health boards trained - AMBER (12 staff initially planned for). • LD S&S cohort delivered (20 staff), further events in 2022-23 planned and participants booked on to two cohorts (q1 and q3 2022-23) (at least 60 participants over 3+ cohorts)</p>
<p>Psychology - Support 20 people to complete the group supervision resources and adjust the content based on early feedback. (TAR0004465)</p>	<p>Feedback has been obtained from 17 people. No updates have been made to the module. Planned for Q1 of 22-23.</p>
<p>Psychology - Based on an Equality and Diversity impact assessment, 3 further resources at the Skilled level of the NES/Public Health Scotland Knowledge and Skills Framework for Mental Health Improvement, Self-Harm and Suicide Prevention Framework that address particular and prioritised population needs will be published by September 2021. (NMAHP target ref TAR0004357) (TAR0004405)</p>	<p>Covid Delay - Further resources at the Skilled level of the NES/Public Health Scotland Knowledge and Skills Framework for Mental Health Improvement, Self-Harm and Suicide Prevention Framework are being progressed alongside the wider skilled level activity (TAR0004353) through the development of digital resources to ensure that we have an equality and diversity lens embedded within our future digital resources.</p>

Target	Update
<p>Psychology - Support the development of a trauma informed workforce in justice services and organisations, including: create and disseminate a Knowledge and Skills framework for the Justice Workforce to recognise the impact of trauma on victims and witnesses, reduce re-traumatisation and support recovery; create and pilot 2 Justice Trauma Informed Leaders Training low intensity high volume webinars, and 3 high intensity low volume workshops by March 2022. (TAR0004448)</p>	<p>Covid Delay. The National Trauma training programme have created a draft Knowledge and Skills framework for the Justice Workforce to recognise the impact of trauma on victims and witnesses, reduce re-traumatisation and support recovery. The framework is out to Consultation with all key stakeholders, with a survey and planned consultation event on 29th March 2022. Due to substantial constraints in the justice system in dealing with covid related backlog to court trials, there has not been appetite for the planned pilot of 2 Justice Trauma Informed Leaders Training webinars, and 3 high intensity low volume workshops by March 2022.</p>
<p>Psychology - Develop a Turas Learn e-learning programme for Behavioural Activation (BA) by December 2021. (TAR0004394)</p>	<p>Delayed by Digital improvements to functionality on TURAS Learn. To be completed 2022/23</p>
<p>Psychology - Continue with the delivery of the Essentials in Psychological Care - Dementia training programme with a specific focus on Care at Home, in line with Scottish Government priorities. Train 50 Care at Home staff by March 2022. In line with this, we will gather and review data from the adaptations made for the pilot of remote delivery of the Essentials training programme with the aim of further disseminating this online model for the Care at Home workforce. Develop online resources to support the dissemination and the implementation of the Essentials online/remote delivery model. (TAR0004332)</p>	<p>COVID DELAY - Planning work with two pilot sites has progressed in Greater Glasgow and Clyde and Lanarkshire. Each site will test two different Home Care models, including private providers and local authority funded services. Three delivery dates have been agreed for each pilot area, offering places to a total of 40 staff members spanning a range of job roles within home care organisations. These will be delivered across April and May 2022. Initial feedback mechanisms and pre and post training outcomes will be incorporated into each pilot delivery date and further role specific focus groups are in planning.</p>
<p>Workforce - Develop a Service Level Agreement with the recruitment shared service provider and NES that meets NES requirements by December 2021. Influence development of the shared service through regular active participation in the east Region programme Board and the Jobtrain National Governance group. (TAR0003965)</p>	<p>Discussions recommenced with all East Region Boards on a timeline for implementation in 2022/23. Mid July has been agreed for NES transition to the new service. Implementation work will recommence in April requiring input and time from NES.</p>
<p>Workforce - Collaborate with regional and national planning networks to create a suite of educational resources to increase workforce planning capability across health and social care organisations and facilitating 3</p>	<p>Activities had been delayed due to delays in SG publication of the national Workforce Plan. Two national network meetings were held in line with requests from regional planning leads.</p>

Target	Update
regional events to share and support peer learning. (TAR0004095)	
<p>Workforce - Continue to develop the equality and diversity resources on TURAS Learn, delivering up to 3 new learning objects or programmes and expanding learning support on human rights, subject to resources. Work with sector partners to curate quality existing resources on a national basis. Deliver webinar programmes on specialist topics, informed by guidance from the Equalities and Human Rights site programme board and the NHSS diversity staff networks. Facilitate a community of practice of Equalities and Human Rights educators across NHSScotland to share and develop resources and educational practice, with a focus on supporting and enabling technology enhanced learning. (TAR0004032)</p>	<p>A new post has been advertised for the E&D and Human Rights team to support the development of educational resources on the E&D Zone in Turas and will be in post in Q1 in 2022. An e-learning module has been developed in partnership with NES and the EHRC for NHS Board members on equality and the public sector equality duties. This is out for comments from the working group and will be finalised by May 2022. Work continues with PHS on the resources on gender-based violence. A community of practice for E&D and links with the TEL team will be progressed as part of the new team's work plan in 2022/23.</p> <p>Mitigating Actions: Post has now been recruited to and new E, D and HR team in place to scope this out with partners, including SG Health Directorate.</p>
<p>Workforce - Subject to funding, provide leadership; input to Turas People as Subject Matter Expert, and project management support for all elements of implementation of the Lead Employer project, including extension to ~300 dentists in training, in accordance with the workplan agreed with Chief Executives November 2020 to enable moving into business as usual activity from 2022. (TAR0003977)</p>	<p>Lead employer programme was largely paused during Q4 due to covid. Lead Employer Team progressed VDP timeline and completed a consultation with Trainers as requested by SG.</p>
<p>Workforce - Support the development of a community of change agents from health and social care organisations, hosting 4 community events and providing support to 20 paired learning partners. Offer 20 places on Do OD development programme. (TAR0004074)</p>	<p>All OD Essentials places allocated across the system for 2021/22 and another 20 places secured for 2022/23. The NHS OD Leads Network have organised an OD Community event, which has been delayed from March due to service pressures and is now scheduled for 25th May 2022. The 'Connecting as an OD Community' will be an opportunity for colleagues across health and social care to connect, build connections and consider what can be co-created as a community.</p>

Target	Update
<p>Workforce - Subject to funding, through the course of 2021/22 design and deploy phase 2 policies which include 34 policies (17 PIN policies) and approximately 715 supporting documents by April 2022 which is in line with the OFS (Once for Scotland) Policies Programme Board timelines. Delivering phase 2 policies involves providing content and user experience expertise and providing the website infrastructure to host these policies and the resources to migrate policy content onto the website. (TAR0004017)</p>	<p>This programme has been put on hold by Scottish Government till April 2022</p>
<p>Workforce - Establish baseline data metrics for our integrated learning up and look to increase traffic to the hub by 25% as part of continuing support for improved and widened access to relevant learning and development for a comprehensive range of non-clinical health care support workers. (TAR0004096)</p>	<p>Virtual learning week for all HCSWs (clinical and non-clinical) delivered, driving traffic to the Turas Hub. Total visits have increased in excess of 25% and we are exploring this in more detail to identify changes in Hub access. Second phase of LNA (E&F specific) unable to progress due to limited staff resource .</p>
<p>Workforce - By November the HR service desk, HR intranet resources (policies, FAQs, guidance) and HR Business Partnering deliver HR interventions that are informed by the People and OD Strategy, Workforce Plan and reviews with Directorates of performance data. (TAR0003976)</p>	<p>Service desk usage has increased over Q4 and is running to a high level requiring additional HR resource/ capacity. A triage approach has been implemented, in particular to identify payroll related queries.</p>

Board Paper

1. Title of Paper

Model Code of Conduct

2. Author(s) of Paper

Della Thomas, Board Secretary & Principal Lead, Corporate Governance

3. Situation/Purpose of paper

This paper provides Board members with the new Model Code of Conduct for discussion and approval.

4. Background

- 4.1 The new Model Code of Conduct has been issued by the Scottish Ministers, with the approval of the Scottish Parliament, as required by the Ethical Standards in Public Life etc. (Scotland) Act 2000 (the “Act”).
- 4.2 All members of public bodies must adhere to the Model Code of Conduct. In NES this applies to the ten non-executive directors of the Board and the four executive directors of the Board.
- 4.3 The new Model Code will replace the current NES Board [2014 Code of Conduct](#).
- 4.4 NES Board members responded to the new Model Code of Conduct Consultation in February 2021.
- 4.5 The “[Model Code of Conduct for members of devolved public bodies revised edition December 2021](#)” was published on 7 December 2021. Board members were notified of this by correspondence on 20 December 2021 along with the following information:
 - A hyperlink to the new Code
 - A note of the main revisions (declarations of interest; social media; equality and diversity and bullying and harassment).
 - Hyperlinks to the Standards Commission published guidance
 - The instruction from Scottish Government (SG) for NHS Boards not to adopt the new Model Code as work would be progressed to produce a Once for NHS Scotland Model Code along with revisions to the advice notes as appropriate. This work would be progressed by the Chairs Group and the Board Secretaries Group.

- 4.6 The Once for NHS Scotland Model Code and updated guidance was circulated to all NHS Boards on 6 May 2022 with an instruction for all NHS Boards to approve this and publish on their websites by 10 June 2022.
- 4.7 The Once for NHS Scotland Model Code (Appendix I) and the [updated guidance](#) was issued by correspondence to NES Board members on 11 May 2022 and added to the 26 May Public Board meeting agenda for discussion and approval.

5. Assessment/Key Issues

(include identification of any strategic risks)

- 5.1 The adoption of the Once for NHS Scotland Model Code by the NHS Board mitigates any risk of the NES Board members not conducting themselves in with the conduct expected of those who serve on the Boards of public bodies in Scotland.
- 5.2 The Once for NHS Scotland Model Code is attached as Appendix 1 of this paper. This is the same as the Model Code for all devolved bodies with the exception of two small changes: These are the paragraph reference in Section 4 (paragraph 4.15 referred to 4.19 but should have referred to 4.20) and the text “or of which I am a member by reason of, or in implementation of, a statutory provision” was added in Section 5 (paragraph 5.4).
- 5.3 Additions were made to the [advice note for members on distinguishing between their strategic role and any operational work](#) to reflect the role of, in particular, NHS Board Chairs.
- 5.4 The Standards Commission have updated and issued a range of other advice notes (for example, social media; gifts and hospitality; bullying and harassment; declaring an interest etc.) to support members with other aspects of the Code of Conduct. The advice notes are available on the Standards Commission website [here](#).
- 5.5 The NES Standards Officer is Della Thomas, Board Secretary and Corporate Governance Principal Lead. As per the [advice note on the role of a Standards Officers in respect of the ethical standards framework](#), a short presentation outlining the main changes relating to the new Model Code of Conduct will be provided at the 26 May 2022 Board Meeting.

6. Recommendations

The Board is invited to:

- review and approve the Code of Conduct NHS 6 May 2022 and
- note that further to this approval SG will be informed and NES Board will adopt the new Code and publish on our website by 10 June 2022.

Author to complete

a) Have Educational implications been considered?

- Yes
- No

b) Is there a budget allocated for this work?

- Yes
- No

c) Alignment with [NES Strategy 2019-2024](#)

- 1. A high-quality learning and employment environment
- 2. National infrastructure to improve attraction, recruitment, training and retention
- 3. Education and training for a skilled, adaptable and compassionate workforce
- 4. A national digital platform, analysis, intelligence and modelling
- 5. A high performing organisation (NES)

d) Have key risks and mitigation measures been identified?

- Yes
- No

e) Have Equality and Diversity and health inequality issues been considered?

- Yes
- No

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

- Yes
- No

DT
NES
15 May 2022

Code of Conduct for Members of INSERT NAME OF ORGANISATION

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ANNEXES

Annex A Breaches of the Code

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SECTION 1: INTRODUCTION TO THE CODE OF CONDUCT

1.1 This Code has been issued by the Scottish Ministers, with the approval of the Scottish Parliament, as required by the [Ethical Standards in Public Life etc. \(Scotland\) Act 2000 \(the “Act”\)](#).

1.2 The purpose of the Code is to set out the conduct expected of those who serve on the boards of public bodies in Scotland.

1.3 The Code has been developed in line with the nine key principles of public life in Scotland. The principles are listed in [Section 2](#) and set out how the provisions of the Code should be interpreted and applied in practice.

My Responsibilities

1.4 I understand that the public has a high expectation of those who serve on the boards of public bodies and the way in which they should conduct themselves in undertaking their duties. I will always seek to meet those expectations by ensuring that I conduct myself in accordance with the Code.

1.5 I will comply with the substantive provisions of this Code, being sections 3 to 6 inclusive, in all situations and at all times where I am acting as a board member of my public body, have referred to myself as a board member or could objectively be considered to be acting as a board member.

1.6 I will comply with the substantive provisions of this Code, being sections 3 to 6 inclusive, in all my dealings with the public, employees and fellow board members, whether formal or informal.

1.7 I understand that it is my personal responsibility to be familiar with the provisions of this Code and that I must also comply with the law and my public body’s rules, standing orders and regulations. I will also ensure that I am familiar with any guidance or advice notes issued by the Standards Commission for Scotland (“Standards Commission”) and my public body, and endeavour to take part in any training offered on the Code.

1.8 I will not, at any time, advocate or encourage any action contrary to this Code.

1.9 I understand that no written information, whether in the Code itself or the associated Guidance or Advice Notes issued by the Standards Commission, can provide for all circumstances. If I am uncertain about how the Code applies, I will seek advice from the Standards Officer of my public body, failing whom the Chair or Chief Executive of my public body. I note that I may also choose to seek external legal advice on how to interpret the provisions of the Code.

Enforcement

1.10 [Part 2 of the Act](#) sets out the provisions for dealing with alleged breaches of the Code, including the sanctions that can be applied if the Standards Commission finds that there has been a breach of the Code. More information on how complaints are dealt with and the sanctions available can be found at [Annex A](#).

SECTION 2: KEY PRINCIPLES OF THE CODE OF CONDUCT

2.1 The Code has been based on the following key principles of public life. I will behave in accordance with these principles and understand that they should be used for guidance and interpreting the provisions in the Code.

2.2 I note that a breach of one or more of the key principles does not in itself amount to a breach of the Code. I note that, for a breach of the Code to be found, there must also be a contravention of one or more of the provisions in sections 3 to 6 inclusive of the Code.

The key principles are:

Duty

I have a duty to uphold the law and act in accordance with the law and the public trust placed in me. I have a duty to act in the interests of the public body of which I am a member and in accordance with the core functions and duties of that body.

Selflessness

I have a duty to take decisions solely in terms of public interest. I must not act in order to gain financial or other material benefit for myself, family or friends.

Integrity

I must not place myself under any financial, or other, obligation to any individual or organisation that might reasonably be thought to influence me in the performance of my duties.

Objectivity

I must make decisions solely on merit and in a way that is consistent with the functions of my public body when carrying out public business including making appointments, awarding contracts or recommending individuals for rewards and benefits.

Accountability and Stewardship

I am accountable to the public for my decisions and actions. I have a duty to consider issues on their merits, taking account of the views of others and I must ensure that my public body uses its resources prudently and in accordance with the law.

Openness

I have a duty to be as open as possible about my decisions and actions, giving reasons for my decisions and restricting information only when the wider public interest clearly demands.

Honesty

I have a duty to act honestly. I must declare any private interests relating to my public duties and take steps to resolve any conflicts arising in a way that protects the public interest.

Leadership

I have a duty to promote and support these principles by leadership and example, and to maintain and strengthen the public's trust and confidence in the integrity of my public body and its members in conducting public business.

Respect

I must respect all other board members and all employees of my public body and the role they play, treating them with courtesy at all times. Similarly, I must respect members of the public when performing my duties as a board member.

SECTION 3: GENERAL CONDUCT

Respect and Courtesy

3.1 I will treat everyone with courtesy and respect. This includes in person, in writing, at meetings, when I am online and when I am using social media.

3.2 I will not discriminate unlawfully on the basis of race, age, sex, sexual orientation, gender reassignment, disability, religion or belief, marital status or pregnancy/maternity; I will advance equality of opportunity and seek to foster good relations between different people.

3.3 I will not engage in any conduct that could amount to bullying or harassment (which includes sexual harassment). I accept that such conduct is completely unacceptable and will be considered to be a breach of this Code.

3.4 I accept that disrespect, bullying and harassment can be:

- a) a one-off incident,
- b) part of a cumulative course of conduct; or
- c) a pattern of behaviour.

3.5 I understand that how, and in what context, I exhibit certain behaviours can be as important as what I communicate, given that disrespect, bullying and harassment can be physical, verbal and non-verbal conduct.

3.6 I accept that it is my responsibility to understand what constitutes bullying and harassment and I will utilise resources, including the Standards Commission's guidance and advice notes, my public body's policies and training material (where appropriate) to ensure that my knowledge and understanding is up to date.

3.7 Except where it is written into my role as Board member, and / or at the invitation of the Chief Executive, I will not become involved in operational management of my public body. I acknowledge and understand that operational management is the responsibility of the Chief Executive and Executive Team.

3.8 I will not undermine any individual employee or group of employees, or raise concerns about their performance, conduct or capability in public. I will raise any concerns I have on such matters in private with senior management as appropriate.

3.9 I will not take, or seek to take, unfair advantage of my position in my dealings with employees of my public body or bring any undue influence to bear on employees to take a certain action. I will not ask or direct employees to do something which I know, or should reasonably know, could compromise them or prevent them from undertaking their duties properly and appropriately.

3.10 I will respect and comply with rulings from the Chair during meetings of:

- a) my public body, its committees; and
- b) any outside organisations that I have been appointed or nominated to by my public body or on which I represent my public body.

3.11 I will respect the principle of collective decision-making and corporate responsibility. This means that once the Board has made a decision, I will support that decision, even if I did not agree with it or vote for it.

Remuneration, Allowances and Expenses

3.12 I will comply with the rules, and the policies of my public body, on the payment of remuneration, allowances and expenses.

Gifts and Hospitality

3.13 I understand that I may be offered gifts (including money raised via crowdfunding or sponsorship), hospitality, material benefits or services (“gift or hospitality”) that may be reasonably regarded by a member of the public with knowledge of the relevant facts as placing me under an improper obligation or being capable of influencing my judgement.

3.14 I will never **ask for** or **seek** any gift or hospitality.

3.15 I will refuse any gift or hospitality, unless it is:

- a) a minor item or token of modest intrinsic value offered on an infrequent basis;
- b) a gift being offered to my public body;
- c) hospitality which would reasonably be associated with my duties as a board member; or
- d) hospitality which has been approved in advance by my public body.

3.16 I will consider whether there could be a reasonable perception that any gift or hospitality received by a person or body connected to me could or would influence my judgement.

3.17 I will not allow the promise of money or other financial advantage to induce me to act improperly in my role as a board member. I accept that the money or advantage (including any gift or hospitality) does not have to be given to me directly. The offer of monies or advantages to others, including community groups, may amount to bribery, if the intention is to induce me to improperly perform a function.

3.18 I will never accept any gift or hospitality from any individual or applicant who is awaiting a decision from, or seeking to do business with, my public body.

3.19 If I consider that declining an offer of a gift would cause offence, I will accept it and hand it over to my public body at the earliest possible opportunity and ask for it to be registered.

3.20 I will promptly advise my public body’s Standards Officer if I am offered (but refuse) any gift or hospitality of any significant value and / or if I am offered any gift or hospitality from the same source on a repeated basis, so that my public body can monitor this.

3.21 I will familiarise myself with the terms of the [Bribery Act 2010](#), which provides for offences of bribing another person and offences relating to being bribed.

Confidentiality

3.22 I will not disclose confidential information or information which should reasonably be regarded as being of a confidential or private nature, without the express consent of a person or body authorised to give such consent, or unless required to do so by law. I note that if I cannot obtain such express consent, I should assume it is not given.

3.23 I accept that confidential information can include discussions, documents, and information which is not yet public or never intended to be public, and information deemed confidential by statute.

3.24 I will only use confidential information to undertake my duties as a board member. I will not use it in any way for personal advantage or to discredit my public body (even if my personal view is that the information should be publicly available).

3.25 I note that these confidentiality requirements do not apply to protected whistleblowing disclosures made to the prescribed persons and bodies as identified in statute.

Use of Public Body Resources

3.26 I will only use my public body's resources, including employee assistance, facilities, stationery and IT equipment, for carrying out duties on behalf of the public body, in accordance with its relevant policies.

3.27 I will not use, or in any way enable others to use, my public body's resources:

- a) imprudently (without thinking about the implications or consequences);
- b) unlawfully;
- c) for any political activities or matters relating to these; or
- d) improperly.

Dealing with my Public Body and Preferential Treatment

3.28 I will not use, or attempt to use, my position or influence as a board member to:

- a) improperly confer on or secure for myself, or others, an advantage;
- b) avoid a disadvantage for myself, or create a disadvantage for others or
- c) improperly seek preferential treatment or access for myself or others.

3.29 I will avoid any action which could lead members of the public to believe that preferential treatment or access is being sought.

3.30 I will advise employees of any connection, as defined at [Section 5](#), I may have to a matter, when seeking information or advice or responding to a request for information or advice from them.

Appointments to Outside Organisations

3.31 If I am appointed, or nominated by my public body, as a member of another body or organisation, I will abide by the rules of conduct and will act in the best interests of that body or organisation while acting as a member of it. I will also continue to observe the rules of this Code when carrying out the duties of that body or organisation.

3.32 I accept that if I am a director or trustee (or equivalent) of a company or a charity, I will be responsible for identifying, and taking advice on, any conflicts of interest that may arise between the company or charity and my public body.

SECTION 4: REGISTRATION OF INTERESTS

4.1 The following paragraphs set out what I have to register when I am appointed and whenever my circumstances change. The register covers my current term of appointment.

4.2 I understand that regulations made by the Scottish Ministers describe the detail and timescale for registering interests; including a requirement that a board member must register their registrable interests within one month of becoming a board member, and register any changes to those interests within one month of those changes having occurred.

4.3 The interests which I am required to register are those set out in the following paragraphs. Other than as required by paragraph 4.23, I understand it is not necessary to register the interests of my spouse or cohabitee.

Category One: Remuneration

4.4 I will register any work for which I receive, or expect to receive, payment. I have a registrable interest where I receive remuneration by virtue of being:

- a) employed;
- b) self-employed;
- c) the holder of an office;
- d) a director of an undertaking;
- e) a partner in a firm;
- f) appointed or nominated by my public body to another body; or
- g) engaged in a trade, profession or vocation or any other work.

4.5 I understand that in relation to 4.4 above, the amount of remuneration does not require to be registered. I understand that any remuneration received as a board member of this specific public body does not have to be registered.

4.6 I understand that if a position is not remunerated it does not need to be registered under this category. However, unremunerated directorships may need to be registered under Category Two, "Other Roles".

4.7 I must register any allowances I receive in relation to membership of any organisation under Category One.

4.8 When registering employment as an employee, I must give the full name of the employer, the nature of its business, and the nature of the post I hold in the organisation.

4.9 When registering remuneration from the categories listed in paragraph 4.4 (b) to (g) above, I must provide the full name and give details of the nature of the business, organisation, undertaking, partnership or other body, as appropriate. I recognise that some other employments may be incompatible with my role as board member of my public body in terms of paragraph [6.7](#) of this Code.

4.10 Where I otherwise undertake a trade, profession or vocation, or any other work, the detail to be given is the nature of the work and how often it is undertaken.

4.11 When registering a directorship, it is necessary to provide the registered name and registered number of the undertaking in which the directorship is held and provide information about the nature of its business.

4.12 I understand that registration of a pension is not required as this falls outside the scope of the category.

Category Two: Other Roles

4.13 I will register any unremunerated directorships where the body in question is a subsidiary or parent company of an undertaking in which I hold a remunerated directorship.

4.14 I will register the registered name and registered number of the subsidiary or parent company or other undertaking and the nature of its business, and its relationship to the company or other undertaking in which I am a director and from which I receive remuneration.

Category Three: Contracts

4.15 I have a registerable interest where I (or a firm in which I am a partner, or an undertaking in which I am a director or in which I have shares of a value as described in paragraph 4.20 below) have made a contract with my public body:

- a) under which goods or services are to be provided, or works are to be executed; and
- b) which has not been fully discharged.

4.16 I will register a description of the contract, including its duration, but excluding the value.

Category Four: Election Expenses

4.17 If I have been elected to my public body, then I will register a description of, and statement of, any assistance towards election expenses relating to election to my public body.

Category Five: Houses, Land and Buildings

4.18 I have a registrable interest where I own or have any other right or interest in houses, land and buildings, which may be significant to, of relevance to, or bear upon, the work and operation of my public body.

4.19 I accept that, when deciding whether or not I need to register any interest I have in houses, land or buildings, the test to be applied is whether a member of the public, with knowledge of the relevant facts, would reasonably regard the interest as being so significant that it could potentially affect my responsibilities to my public body and to the public, or could influence my actions, speeches or decision-making.

Category Six: Interest in Shares and Securities

4.20 I have a registerable interest where:

- a) I own or have an interest in more than 1% of the issued share capital of the company or other body; or
- b) Where, at the relevant date, the market value of any shares and securities (in any one specific company or body) that I own or have an interest in is greater than £25,000.

Category Seven: Gifts and Hospitality

4.21 I understand the requirements of paragraphs 3.13 to 3.21 regarding gifts and hospitality. As I will not accept any gifts or hospitality, other than under the limited circumstances allowed, I understand there is no longer the need to register any.

Category Eight: Non-Financial Interests

4.22 I may also have other interests and I understand it is equally important that relevant interests such as membership or holding office in other public bodies, companies, clubs, societies and organisations such as trades unions and voluntary organisations, are registered and described. In this context, I understand non-financial interests are those which members of the public with knowledge of the relevant facts might reasonably think could influence my actions, speeches, votes or decision-making in my public body (this includes its Committees and memberships of other organisations to which I have been appointed or nominated by my public body).

Category Nine: Close Family Members

4.23 I will register the interests of any close family member who has transactions with my public body or is likely to have transactions or do business with it.

SECTION 5: DECLARATION OF INTERESTS

Stage 1: Connection

5.1 For each particular matter I am involved in as a board member, I will first consider whether I have a connection to that matter.

5.2 I understand that a connection is any link between the matter being considered and me, or a person or body I am associated with. This could be a family relationship or a social or professional contact.

5.3 A connection includes anything that I have registered as an interest.

5.4 A connection does not include being a member of a body to which I have been appointed or nominated by my public body as a representative of my public body or of which I am a member by reason of, or in implementation of, a statutory provision, unless:

- a) The matter being considered by my public body is quasi-judicial or regulatory; or
- b) I have a personal conflict by reason of my actions, my connections or my legal obligations.

Stage 2: Interest

5.5 I understand my connection is an interest that requires to be declared where the objective test is met – that is where a member of the public with knowledge of the relevant facts would reasonably regard my connection to a particular matter as being so significant that it would be considered as being likely to influence the discussion or decision-making.

Stage 3: Participation

5.6 I will declare my interest as early as possible in meetings. I will not remain in the meeting nor participate in any way in those parts of meetings where I have declared an interest.

5.7 I will consider whether it is appropriate for transparency reasons to state publicly where I have a connection, which I do not consider amounts to an interest.

5.8 I note that I can apply to the Standards Commission and ask it to grant a dispensation to allow me to take part in the discussion and decision-making on a matter where I would otherwise have to declare an interest and withdraw (as a result of having a connection to the matter that would fall within the objective test). I note that such an application must be made in advance of any meetings where the dispensation is sought and that I cannot take part in any discussion or decision-making on the matter in question unless, and until, the application is granted.

5.9 I note that public confidence in a public body is damaged by the perception that decisions taken by that body are substantially influenced by factors other than the public interest. I will not accept a role or appointment if doing so means I will have to declare interests frequently at meetings in respect of my role as a board member. Similarly, if any appointment or nomination to another body would give rise

to objective concern because of my existing personal involvement or affiliations, I will not accept the appointment or nomination.

SECTION 6: LOBBYING AND ACCESS

6.1 I understand that a wide range of people will seek access to me as a board member and will try to lobby me, including individuals, organisations and companies. I must distinguish between:

- a) any role I have in dealing with enquiries from the public;
- b) any community engagement where I am working with individuals and organisations to encourage their participation and involvement, and;
- c) lobbying, which is where I am approached by any individual or organisation who is seeking to influence me for financial gain or advantage, particularly those who are seeking to do business with my public body (for example contracts/procurement).

6.2 In deciding whether, and if so how, to respond to such lobbying, I will always have regard to the objective test, which is whether a member of the public, with knowledge of the relevant facts, would reasonably regard my conduct as being likely to influence my, or my public body's, decision-making role.

6.3 I will not, in relation to contact with any person or organisation that lobbies, do anything which contravenes this Code or any other relevant rule of my public body or any statutory provision.

6.4 I will not, in relation to contact with any person or organisation that lobbies, act in any way which could bring discredit upon my public body.

6.5 If I have concerns about the approach or methods used by any person or organisation in their contacts with me, I will seek the guidance of the Chair, Chief Executive or Standards Officer of my public body.

6.6 The public must be assured that no person or organisation will gain better access to, or treatment by, me as a result of employing a company or individual to lobby on a fee basis on their behalf. I will not, therefore, offer or accord any preferential access or treatment to those lobbying on a fee basis on behalf of clients compared with that which I accord any other person or organisation who lobbies or approaches me. I will ensure that those lobbying on a fee basis on behalf of clients are not given to understand that preferential access or treatment, compared to that accorded to any other person or organisation, might be forthcoming.

6.7 Before taking any action as a result of being lobbied, I will seek to satisfy myself about the identity of the person or organisation that is lobbying and the motive for lobbying. I understand I may choose to act in response to a person or organisation lobbying on a fee basis on behalf of clients but it is important that I understand the basis on which I am being lobbied in order to ensure that any action taken in connection with the lobbyist complies with the standards set out in this Code and the [Lobbying \(Scotland\) Act 2016](#).

6.8 I will not accept any paid work:

- a) which would involve me lobbying on behalf of any person or organisation or any clients of a person or organisation.
- b) to provide services as a strategist, adviser or consultant, for example, advising on how to influence my public body and its members. This does not prohibit me from being remunerated for activity which may arise because of, or relate to, membership of my public body, such as journalism or broadcasting, or involvement in representative or presentational work, such as participation in delegations, conferences or other events.

ANNEX A: BREACHES OF THE CODE

Introduction

1. [The Ethical Standards in Public Life etc. \(Scotland\) Act 2000](#) (“the Act”) provided for a framework to encourage and, where necessary, enforce high ethical standards in public life.
2. The Act provided for the introduction of new codes of conduct for local authority councillors and members of relevant public bodies, imposing on councils and relevant public bodies a duty to help their members comply with the relevant code.
3. The Act and the subsequent Scottish Parliamentary Commissions and Commissioners etc. Act 2010 established the [Standards Commission for Scotland](#) (“Standards Commission”) and the post of [Commissioner for Ethical Standards in Public Life in Scotland](#) (“ESC”).
4. The Standards Commission and ESC are separate and independent, each with distinct functions. Complaints of breaches of a public body’s Code of Conduct are investigated by the ESC and adjudicated upon by the Standards Commission.
5. The first Model Code of Conduct came into force in 2002. The Code has since been reviewed and re-issued in 2014. The 2021 Code has been issued by the Scottish Ministers following consultation, and with the approval of the Scottish Parliament, as required by the Act.

Investigation of Complaints

6. The ESC is responsible for investigating complaints about members of devolved public bodies. It is not, however, mandatory to report a complaint about a potential breach of the Code to the ESC. It may be more appropriate in some circumstances for attempts to be made to resolve the matter informally at a local level.
7. On conclusion of the investigation, the ESC will send a report to the Standards Commission.

Hearings

8. On receipt of a report from the ESC, the Standards Commission can choose to:
 - Do nothing;
 - Direct the ESC to carry out further investigations; or
 - Hold a Hearing.
9. Hearings are held (usually in public) to determine whether the member concerned has breached their public body’s Code of Conduct. The Hearing Panel comprises of three members of the Standards Commission. The ESC will present evidence and/or make submissions at the Hearing about the investigation and any conclusions as to whether the member has contravened the Code. The member is entitled to attend or be represented at the Hearing and can also present evidence and make submissions. Both parties can call witnesses. Once it has heard all the evidence and submissions, the Hearing Panel will make a determination about whether or not it is satisfied, on the balance of probabilities, that there has been a contravention of

the Code by the member. If the Hearing Panel decides that a member has breached their public body's Code, it is obliged to impose a sanction.

Sanctions

10. The sanctions that can be imposed following a finding of a breach of the Code are as follows:

- **Censure:** A censure is a formal record of the Standards Commission's severe and public disapproval of the member concerned.
- **Suspension:** This can be a full or partial suspension (for up to one year). A full suspension means that the member is suspended from attending all meetings of the public body. Partial suspension means that the member is suspended from attending some of the meetings of the public body. The Commission can direct that any remuneration or allowance the member receives as a result of their membership of the public body be reduced or not paid during a period of suspension.
- **Disqualification:** Disqualification means that the member is removed from membership of the body and disqualified (for a period not exceeding five years), from membership of the body. Where a member is also a member of another devolved public body (as defined in the Act), the Commission may also remove or disqualify that person in respect of that membership. Full details of the sanctions are set out in section 19 of the Act.

Interim Suspensions

11. Section 21 of the Act provides the Standards Commission with the power to impose an interim suspension on a member on receipt of an interim report from the ESC about an ongoing investigation. In making a decision about whether or not to impose an interim suspension, a Panel comprising of three Members of the Standards Commission will review the interim report and any representations received from the member and will consider whether it is satisfied:

- That the further conduct of the ESC's investigation is likely to be prejudiced if such an action is not taken (for example if there are concerns that the member may try to interfere with evidence or witnesses); or
- That it is otherwise in the public interest to take such a measure. A policy outlining how the Standards Commission makes any decision under Section 21 and the procedures it will follow in doing so, should any such a report be received from the ESC can be found [here](#).

12. The decision to impose an interim suspension is not, and should not be seen as, a finding on the merits of any complaint or the validity of any allegations against a member of a devolved public body, nor should it be viewed as a disciplinary measure.

ANNEX B: DEFINITIONS

“Bullying” is inappropriate and unwelcome behaviour which is offensive and intimidating, and which makes an individual or group feel undermined, humiliated or insulted.

"Chair" includes Board Convener or any other individual discharging a similar function to that of a Chair or Convener under alternative decision-making structures.

“Code” is the code of conduct for members of your devolved public body, which is based on the Model Code of Conduct for members of devolved public bodies in Scotland.

"Cohabitee" includes any person who is living with you in a relationship similar to that of a partner, civil partner, or spouse.

“Confidential Information” includes:

- any information passed on to the public body by a Government department (even if it is not clearly marked as confidential) which does not allow the disclosure of that information to the public;
- information of which the law prohibits disclosure (under statute or by the order of a Court);
- any legal advice provided to the public body; or
- any other information which would reasonably be considered a breach of confidence should it be made public.

"Election expenses" means expenses incurred, whether before, during or after the election, on account of, or in respect of, the conduct or management of the election.

“Employee” includes individuals employed:

- directly by the public body;
- as contractors by the public body, or
- by a contractor to work on the public body’s premises.

“Gifts” a gift can include any item or service received free of charge, or which may be offered or promised at a discounted rate or on terms not available to the general public. Gifts include benefits such as relief from indebtedness, loan concessions, or provision of property, services or facilities at a cost below that generally charged to members of the public. It can also include gifts received directly or gifts received by any company in which the recipient holds a controlling interest in, or by a partnership of which the recipient is a partner.

“Harassment” is any unwelcome behaviour or conduct which makes someone feel offended, humiliated, intimidated, frightened and / or uncomfortable. Harassment can be experienced directly or indirectly and can occur as an isolated incident or as a course of persistent behaviour.

“Hospitality” includes the offer or promise of food, drink, accommodation, entertainment or the opportunity to attend any cultural or sporting event on terms not available to the general public.

“Relevant Date” Where a board member had an interest in shares at the date on which the member was appointed as a member, the relevant date is – (a) that date; and (b) the 5th April immediately following that date and in each succeeding year, where the interest is retained on that 5th April.

“Public body” means a devolved public body listed in Schedule 3 of the Ethical Standards in Public Life etc. (Scotland) Act 2000, as amended.

“Remuneration” includes any salary, wage, share of profits, fee, other monetary benefit or benefit in kind.

“Securities” a security is a certificate or other financial instrument that has monetary value and can be traded. Securities includes equity and debt securities, such as stocks bonds and debentures.

“Undertaking” means:

- a) a body corporate or partnership; or
- b) an unincorporated association carrying on a trade or business, with or without a view to a profit.

NHS Education for Scotland and NHS Golden Jubilee

MINUTES OF THE THIRD NHS SCOTLAND ACADEMY JOINT STRATEGIC PROGRAMME BOARD MEETING HELD ON 22 FEBRUARY 2022

***This meeting was held via Microsoft Teams due to the COVID-19 pandemic ***

Present: David Garbutt (DG), Board Chair, NES (Joint Chair – rotational)
Susan Douglas-Scott (SD-S) Board Chair, NHSGJ (partial attendance until item 6)
Douglas Hutchens (DH), Non-Executive Director, NES
Linda Semple (LS), Non-Executive Director, NHSGJ

In attendance: Tracey Ashworth-Davies (TAD), Director of Workforce, NES
Serena Barnatt (SB), Director of Human Resources, NHSGJ
Jim Boyle (JB), Executive Director of Finance, NES
Catherine Calderwood (CC), National Clinical Director, NHSGJ
Anne-Marie Cavanagh (AMC), Director of Nursing & Allied Health Professionals, NHSGJ
Gerard Gardiner (GG), Head of Corporate Governance, NHSGJ
Jann Gardner (JG), CEO, NHSGJ
Kevin Kelman (KK), NHS Scotland Academy Director
Mark MacGregor (MMacG), Medical Director, NHSGJ
Colin Neil (CN), Director of Finance, NHSGJ
Rowan Parks (RP), Deputy Director of Medicine, NES
Karen Reid (KR), CEO, NES
Sandie Scott (SS), Head of Communications and Corporate Affairs, NHSGJ
Jeanette Stevenson (JS), Associate Director, NHSGJ
Della Thomas (DT), Board Secretary & Principal Lead (Corporate Governance), NES
Emma Watson (EW), Executive Medical Director, NES (from 1 April 2022)
Karen Wilson (KW), Executive Director of Nursing, Midwifery and Allied Health Professionals, NES
Rhona Wilson (RW), Head of Management Accounts, NHSGJ

1. Welcome to the third meeting of the NHS Scotland Academy Joint Strategic Programme Board and Apologies

- 1.1. The NHS Education for Scotland (NES) Board Chair welcomed everyone to the third meeting of the NHS Scotland Academy Joint Strategic Programme Board.
- 1.2. The Chair noted that whilst Susan Douglas-Scott had joined the meeting initially, she would leave very shortly for another meeting and therefore had offered her apologies. He also noted apologies from Janice Sinclair, Head of Finance (NES).

2. Declarations of interest

2.1. There were no declarations of interest in association with the items of business for this meeting.

3. Draft Minutes from the 30 November 2021 NHS Scotland Academy Joint Strategic Programme Board Meeting NES/NHSGJ/22/02

3.1 The draft minutes from the meeting held 30 November 2021 were approved.

4. Matters arising from the Minutes and Notification of Any Other Business

4.1 There were no matters arising from the Minutes and no items of any other business were notified.

5. Actions from previous Joint Strategic Programme Board Meetings

5.1 There was one action from the previous meeting and the Joint Strategic Programme Board were content to approve this as completed.

6. Performance Items

***NHS Scotland Academy 2021/22 Programme Plan:
Progress Report***

NES/NHSGJ/22/04

6.1 The Chair invited Kevin Kelman to make any opening remarks in relation to this paper.

6.2 Kevin Kelman highlighted that this report provided an overview of the progress being made across the range of projects within the current NHS Scotland Academy programme. He outlined that to demonstrate the progress on the 26 individual projects, they have all been categorised into the status categories of exploration, development and delivery.

6.3 The Chair opened the meeting for questions.

6.4 The Joint Strategic Programme Board asked if the delivery timescales referred to in the paper were now signed off by the Scottish Government (SG) Health and Social Care Delivery Group. Kevin Kelman responded to clarify that the funding had been signed off, but the timescales had not been set by the Health and Social Care Group. Karen Reid added that as the SG review and progress the NHS Recovery Plan and the Workforce Plans, we expect timescales to be further clarified.

6.5 The Joint Strategic Programme Board commented on the developmental work in relation to Widening Access Routes in respect of the NHS Scotland Youth Academy and Military Service Leavers and enquired about plans for supporting the Care Sector and understanding their needs. Karen Reid reported that NES has just appointed to the new role of Director of Social Care and it will be important to clarify the role of NES in relation to the Care Sector and the accelerated training role of the NHS Scotland Academy. Tracey Ashworth-Davies added that there were on-going conversations between SG, NES and the Convention of Scottish Local Authorities (COSLA) in relation to international recruitment.

- 6.6 The Joint Strategic Programme Board commented that Scottish candidates are required to travel to the Objective Structured Clinical Examination (OSCE) Test Centre at the University of Ulster in Northern Ireland and asked if there were plans to build an OSCE Test Centre in Scotland.
- 6.7 Karen Wilson recognised the issue of considerable travel, especially if the candidate didn't pass the first time. She reported that the Nursing and Midwifery Council (NMC) procure Tests sites and that there is currently not an opportunity to build a new Test Centre in Scotland, but there is an appetite for a virtual Test Centre. She clarified that the approach currently is a Scottish preparation centre with the possibility of linking with a newly proposed Northumbrian mobile Test Centre, as this develops. Tracey Ashworth-Davies added that the OSCE capacity issue was driven by all 4 nations accelerating international recruitment.
- 6.8 Catherine Calderwood reported that there was a lot of enthusiasm within the Centre for Sustainable Delivery (CfSD) for the creation of alternative practitioner routes, negating the requirement to attend University. The Joint Strategic Programme Board commented on the importance of demonstrating alternative routes and approaches to learning and training. Karen Reid advised the meeting that she would raise the creation of a Scottish OSCE Centre with the SG NES sponsor, so that this opportunity could be revisited. **Action: KR**
- 6.9 The Joint Strategic Programme Board raised a question in relation to item 26 of the report which referred to the exploration of a relationship between the NHS Scotland Academy and the Strathclyde University and asked if this was appropriate given that relationships should be considered with all Universities.
- 6.10 Jann Gardner advised that this aspect was a very specific opportunity relating to the Hospitals for the Future Department and aligned with NHS Golden Jubilee and CfSD work. She went on to explain that there may be an aspect that is appropriate for the NHS Scotland Academy and that required to be further explored.
- 6.11 Catherine Calderwood also clarified that, in this instance, there was a unique alignment and she offered to invite the representative from the Strathclyde University to the Joint Strategic Programme Board to present the detail of this work.
- 6.12 Tracey Ashworth-Davies highlighted the National Robotic Centre at Edinburgh University as another example of a University with specific areas of expertise.
- 6.13 Karen Reid advised that it was not appropriate to invite individual Universities to present to the Joint Strategic Programme Board. These were operational and delivery relationships.
- 6.14 The Joint Strategic Programme Board concluded that inclusive relationships with all Universities should be considered in order to progress the work of the NHS Scotland Academy. The meeting noted in certain very specific instances, due to speciality national departments, individual relationships with certain Universities were being explored.
- 6.15 The Chair thanked Kevin Kelman and the team for the Programme Plan Progress Report.

- 6.16 The Chair invited Catherine Calderwood to take the meeting through the previously circulated PowerPoint slides.
- 6.17 Jann Gardner and Catherine Calderwood presented to the Joint Strategic Programme Board, highlighting that the CfSD Strategic Board had been established (chaired by John Burns, NHS Scotland Chief Operating Officer) and also that a CfSD Programme Delivery Group had been formed. They mentioned that there was over 50 workstreams across 4 Programmes and that CfSD was collaborating with partner organisations in support of delivery, taking an agile approach to work across organisational boundaries.
- 6.18 Catherine Calderwood highlighted that CfSD reports into the NHSGJ Strategic Portfolio Governance Committee. She advised that NES and NHS Scotland Academy are part of the CfSD governance structure, allowing the early identification of collaborative working opportunities as the workplan of CfSD evolves.
- 6.19 The Chair thanked both Jann Gardner and Catherine Calderwood for the presentation and opened the meeting up for questions.
- 6.20 The Joint Strategic Programme Board asked if the CfSD would support paramedics and suggested that CfSD might wish to liaise with Tom Steele, Chair of the Scottish Ambulance Service.
- 6.21 The Joint Strategic Programme Board queried how further reports in relation to alignment of work between NES, the NHS Scotland Academy and CfSD would be received. This will be clarified by Catherine Calderwood, Karen Wilson and Kevin Kelman.

Action: KK/KW/CC

- 6.22 The Chair thanked Catherine Calderwood for her report and the presentation.

Quarter 3 Financial Report

NES/NHSGJ/22/06

- 6.23 The Chair invited Colin Neil to present the quarter 3 financial report to the meeting.
- 6.24 Colin Neil reported a projected balanced budget by the end of the financial year and that there had been some helpful dialogue with SG to re-phase the capital funding into the next financial year.
- 6.25 The Chair opened the meeting up to questions.
- 6.26 The Joint Strategic Programme Board requested further information about the hotel referred to on page 3 of the report. Jann Gardner explained that there is close interaction between the NHSGJ hotel and conference centre and the NHS Scotland Academy. The NHS Scotland Academy is viewed as a VIP customer and there is rapid enactment of a number of budget and workstreams to ensure the hotel and conference centre are maximised to the benefit of the work of the NHS Scotland Academy.

6.27 The Joint Strategic Programme Board discussed the format of the report and advised that more information was required on the capital costs beyond the narrative and questioned if a part of the paper was incomplete. Colin Neil agreed to prepare a separate Appendix in relation to capital costs. It was also agreed that Douglas Hutchens, Linda Semple, Colin Neil and Jim Boyle would meet to discuss the overall structure of the next financial report. **Action: DH/LS/CN/JB**

6.28 The Joint Strategic Programme Board moved on to discuss the three-year strategic plan for the NHS Scotland Academy and asked how the financial plan and the workforce plan would be developed alongside the NHS Scotland Academy strategic plan. Karen Reid responded to advise that the parent Boards would agree the NHS Scotland Academy plans and include this same form of words and financial figures within the NES and NHSGJ three year financial, workforce and delivery plans.

6.29 Jann Gardner reported that in terms of CfSD strategic planning and the strategic recovery required, there was a critical and valuable role for the national Boards, and it would be clarified which pieces of work in relation to workforce were the responsibility of NES, NHSGJ, CfSD and NHS Scotland Academy.

6.30 The Chair thanked Colin Neil and the other members of the respective finance teams for the report.

7. Strategic Planning

Draft 2022/23 NHS Scotland Academy Annual Operational Plan, key strategic performance indicators and approach to risk NES/NHSGJ/22/07

7.1 The Chair invited Kevin Kelman to introduce the paper.

7.2 Kevin Kelman highlighted that now the start-up phase for the NHS Scotland Academy is drawing to a close, with the full senior team now in place, the approach to planning and reporting that encompasses the strengths of the full team is being developed. This approach will include the 2022-23 annual operational plan – which will align with the three-year plans for the parent Boards, identification and reporting of risk and the development of strategic key performance indicators.

7.3 The Chair opened the meeting for questions.

7.4 The Joint Strategic Programme Board noted that Appendix 1 was referred to as a draft operational plan and suggested that this was more an outline delivery framework and asked how the draft operational plan will be developed. The Programme Board commented that it would be helpful if this could be formatted using a similar structure to the parent Boards operational plans.

7.5 The Joint Strategic Programme Board highlighted that the risk report in Appendix 2 did not contain any risks and was headed as project level risks. The Programme Board asked if they could see a report that identified the NHS Scotland Academy strategic risks.

- 7.6 Jeanette Stevenson reported that this was an interim piece of work and the NHS Scotland Academy's work would be aligned with the parent Board's three-year plans and strategic risks would be identified.
- 7.7 The Joint Strategic Programme Board requested a further iteration of the paper including strategic risks and their mitigation and the three-year operational plan to the next Programme Board meeting. **Action: KK/JS**
- 7.8 The Chair thanked Kevin Kelman and Jeanette Stevenson for their paper.

8. NHS Scotland Academy Governance

NHS Scotland Academy approach to Equality and Diversity, Data Protection Impact Assessment (DPIA), Records management and asset registration; Whistleblowing; Business Conduct; Freedom of Information; Internal Audit; Complaints and Ethical Sponsorship NES/NHSGJ/22/08

- 8.1 The Chair invited Gerard Gardiner to introduce the paper.
- 8.2 Gerard Gardiner presented the paper to the meeting and highlighted the overall premise that the governance areas detailed in the paper should follow existing NHS procedures and Scottish Government guidance or directives and be in line with the existing procedures and processes for each of the parent Boards.
- 8.3 The Chair invited the Joint Strategic Programme Board to pose any questions.
- 8.4 The Programme Board noted that only some of the protected characteristics were listed in Appendix 1, paragraph 2 and suggested that instead a reference should be made to the nine protected characteristics and the Fairer Scotland Duty. **Action: JS**
- 8.5 The Programme Board asked if the governance process gave sufficient clarity on how the Joint Strategic Programme Board would receive reports on these various aspects detailed with the paper.
- 8.6 Della Thomas highlighted that the NHS Scotland Academy governance processes were indeed still iterative and developing and advised that the NES Audit and Risk Committee had requested an internal audit of the NHS Scotland Academy governance structures and processes. She added that NES and NHSGJ were discussing how the internal audit of the NHS Scotland Academy will work between the two Audit and Risk Committees and reports shared and joint audit recommendations and actions progressed.
- 8.7 The Chair thanked Gerard Gardiner and the staff involved in the development of this report for their work.

9. Any Other Business

- 9.1 There was no other business that required consideration at this meeting, however Catherine Calderwood stated that she wished to express her thanks to Kevin Kelman for his work to date and that NHS Scotland Academy represented an extraordinary opportunity.

10. Date and Time of Next Meeting

- 10.1 The next meeting of the NHS Scotland Academy Joint Strategic Programme Board will be held on 17 May 2022 and will be Chaired by Susan Douglas-Scott.

11. Items for Noting

- 11.1 None

NES/NHSGJ/NHSSA

May 2022

Approved

v.03

AUDIT AND RISK COMMITTEE

Minutes of the seventh Audit and Risk Committee held on Thursday 27 January 2022 via Microsoft Teams

Present: Jean Ford (Chair)
Anne Currie (Left at 11:50 after Item 10)
Linda Dunion
Sandra Walker

In attendance: Jenn Allison, Senior Officer (minute taker)
Joanne Brown, External Audit, Grant Thornton
Jim Boyle, Director of Finance Designate
David Garbutt, NES Chair
James Lucas, KPMG
Karen Reid, Chief Executive
Janice Sinclair, Interim Director of Finance
Della Thomas, Board Secretary
Paula Tovey, Interim Deputy Director of Finance
Christopher Wroath, Director of NES Technology Service (item 08c)

1. Welcome and Introductions

- 1.1 The Chair welcomed everyone to the meeting, particularly Jim Boyle, who will be taking up post as Director of Finance from 01 February 2022. The Chair thanked Janice Sinclair for her support to the Audit and Risk Committee (ARC) during her time as Interim Director of Finance.
- 1.2 Paula Tovey, Interim Deputy Director of Finance was welcomed to the meeting as an observer as was Christopher Wroath, Director of NES Technology Service who was joining for item 08c, Internal Audit Cyber Security Report.
- 1.3 The Chair advised the Committee that NES is currently operating under Governance Light. As such papers will be taken as read and presenters were requested to focus only on key issues and any material updates since submission of papers
- 1.4 As part of Governance Light, the agenda/ Schedule of Business had been reviewed in advance of the meeting and the following changes made:
 - Deferred – Counter Fraud Strategy (CFS) Action Plan and Self-Assessment Check list. This will be submitted to the October 2022 meeting and annually thereafter
 - Deferred – the Counter Fraud Policy will be added to the October agenda, alongside the CFS Strategy.
 - Deferred – Board Assurance Framework will return as a standing item to the April 2022 Committee.
 - Deferred – Procurement Update will be scheduled for the April 2022 meeting.

- Removed – Proposal regarding introduction of a NES Standing Committee Self-Assessment process for 2021/22 as this is being delayed due to Covid and Governance Light. This will now be submitted to the ARC October 2022 meeting for approval if still appropriate ready for implementation during annual reviews for 2022/23.

2. Apologies for absence

2.1 Apologies were received from Neil Thomas, Internal Auditors KPMG and Anne Currie from 11:50hrs.

3. Declarations of interest

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

4. Notification of any other urgent business

4.1 There was no other business raised for discussion.

5. Minutes of the Audit and Risk Committee, 07 October 2021 NES/AR/21/65

5.1 The minutes were approved as a correct record.

6. Action list of the Audit and Risk Committee NES/AR/21/66

6.1 Members noted out of 16 actions, 11 were complete, 5 were in progress and 1 has been paused.

6.2 Item 08a-b 07/10/2021 – It was noted that the format of Internal Audit reports has been updated as agreed in relation to strengthening wording regarding management actions and risk, however that this has not yet flowed through to all the reports submitted to the meeting. This format will be implemented in all future reports.

6.3 Item 08d 07/10/2021 – It was noted that requirements for the Audit and Risk Committee (ARC) to review Internal and External Audit Effectiveness would be covered adequately as part of the ARC Self-Assessment.

6.4 Item 18c 29/04/2021 – It was noted that wording has been provided to clarify that the action concerning developing Internal Audit Key Performance Indicators (KPIs) is in relation to developing quality focused KPI's for Internal Audit work. James Lucas added that discussions will take place regarding this in advance of the April 2022 ARC meeting. **Action: JL**

6.5 Item 9b 30/04/2020 - It was agreed that the action to discuss timelines with Communication colleagues regarding the Stakeholder survey can be closed as this will be monitored by the NES Board who are due to receive a paper outlining

the approach to external engagement and stakeholder involvement in the development of the new Strategy at the 10 February 2022 Board meeting.

7. Matters arising

7.1 There were no matters arising from the minutes.

8. Internal and External Audit

Internal Audit

a) Training Grade – Financial Management

NES/AR/22/02

8.1 James Lucas introduced the report which reviewed the approach to managing and forecasting the budget for medical training grade programmes for the financial year 2021/22.

8.2 The overall assessment of the arrangements is one of 'Significant assurance'. The report found that the NES Finance team makes robust assumptions in order to forecast a budget which is then appropriately scrutinised and reviewed, with positive stakeholder engagement throughout the process.

8.3 The report raised one low rated finding (housekeeping point) in relation to the lack of a central document which outlines the end-to-end budget setting process.

8.4 Discussion took place regarding the risk areas identified in the audit. James Lucas confirmed that audit report risks are the "theoretical" risks on which the audit is based. These "theoretical" risks are not necessarily an existing risk to the organisation. He added that if internal auditors felt that a risk was required to be added to the Corporate risk register, then this would be raised within the recommendations. The Committee asked that the form of words used in the Audit reports clarified and referred to theoretical risks. James Lucas recognised that this has been previously raised by the Committee and agreed to make these revisions to flow through into future reports. **Action: JL**

8.5 The Committee noted the report and assurance provided and were content with the agreed management actions.

b) Core Financial Systems Review

NES/AR/22/03

8.6 James Lucas introduced the report which reviewed the interaction between eESS and the National Services Scotland (NSS) payroll system.

8.7 The overall assessment of the arrangements is one of 'Significant assurance with minor improvement opportunities'. The report found that NES is responsible for making payroll payments but does not itself have direct oversight of starters,

leavers and amendments which take place within the health boards, it is critical that there is strong review and validation controls in place.

- 8.8 The report raised one medium rated finding in relation to the approval process of core staff and one lower risk finding in relation to the review and amendment of payroll errors.
- 8.9 The committee raised a question regarding how NES compared to other NHS Boards in terms of the interaction between eESS and NES Payroll. James Lucas confirmed that other NHS Health Boards also operate via uploads from payroll to eESS.
- 8.10 The Committee raised a query regarding the four levels of approval in Kenexa (the recruitment system) and why all these four levels were required. Janice Sinclair explained that a new post is currently created in Kenexa, approved by a senior manager in the Directorate and by Finance and HR before being finally approved by the Executive Team Sub-group on Recruitment (ETSR). Once approved HR do a quality check on the information before uploading the information into eESS. James informed the Committee that the job post approval process on Kenexa, which is a NES system, will eventually be replaced by enhanced functionality on the National recruitment system, JobTrain.
- 8.11 Following discussion, the Committee were content with the report and the agreed management actions.

c) Cyber Security

NES/AR/22/04

- 8.12 James Lucas introduced the report which assessed the approach taken, and progress made against the implementation of the actions raised in the 2020 Network and Information Systems (NIS) audit and the adequacy of the NES Cyber Security arrangements against three of the nine KPMG Core Cyber domains: Leadership and Governance; Human Factors; and Security Operations.
- 8.13 The overall assessment of the arrangements in place is one of “Partial assurance with improvements required”.
- 8.14 Four medium rated and one low rated recommendation have been made. The medium rated recommendations relate to further action still being required to address the NIS priority recommendations and the need for improved formal tracking, a lack of specific training needs analysis over Cyber skills, the requirement for an annual penetration testing exercise and updates required on the tool for managing firewall alerts appropriately.

8.15 The Committee raised concern regarding the outcome of the audit and in particular the outstanding actions from the 2020 NIS Audit. The Committee Chair invited Christopher Wroath to provide some additional management perspective and context.

8.16 Christopher Wroath advised the Committee that the report does not reflect a complete picture of the wider context and the amount of work that has already been done to implement the NIS recommendations.

8.17 Christopher informed the Committee that only 12 of the 103 NIS Audit recommendations remain open and that of the 4 red rated actions, 2 are not yet due and 2 relating to Business Continuity Planning are on pause until NES is no longer operating under a live Business Continuity Plan. He went on to remark that NES has one of the most secure networks within NHS Scotland and that the information security team are working to complete the actions. He added that a further NIS Audit was undertaken in December 2021 and the result of this will be reported to the Digital and Information Committee (DIC) once it is available.

8.18 Christopher Wroath suggested that if the report had included information regarding the wider NES and NHS Scotland context, this may have helped to assure members of the ARC that the risks in relation to Cyber Security in NES are well mitigated. It was agreed that it would be useful if all future Internal Audit reports included information regarding the wider context within the executive summary. James Lucas agreed to consider how this could be incorporated.

Action: JL

8.19 The Committee discussed the development of a training matrix by July 2022 and a query was raised if it would be more appropriate to implement the actual training by this date as opposed to just a training matrix. Christopher Wroath explained that this work is taking place at a national level in partnership with NHS Scotland Board Digital e-health leads, NSS and Dundee University as part of the development of the NHS Scotland Security Centre hence the extended timeline.

8.20 Christopher Wroath advised the Committee that the Cyber Security Internal Audit report and an update on the progress of the 2020 and 2021 NIS Audits is on the agenda for the February 2022 DIC.

8.21 The Committee agreed that the additional information provided by Christopher Wroath was very welcome and did provide further assurance, however production of a short paper to record the Cyber Security strategic context and capture the work already done has been requested and this will be circulated to members via correspondence in due course.

Action: CW

d) Status Update and Follow up

NES/AR/22/05

- 8.22 James Lucas introduced the status update and follow up report which highlights the status of Internal Auditors' progress with the 2020/21 Internal Audit plan and progress against the agreed management actions.
- 8.23 Progress against the plan is on track, with 5 of the 9 internal audit reports now having been reported to the ARC. Two are currently in draft and one is outstanding.
- 8.24 Since the previous report to the 7 October 2021 ARC, 4 actions have been added to the tracker and 3 actions have been implemented. There are now 13 outstanding actions, 10 of which are overdue.
- 8.25 James updated the Committee that 3 of the overdue actions (Internal Audit Ref. 12, 26, 28) are now complete and that final evidence to support this will be provided in due course. Action Ref. 24 should have been marked as complete in the follow up report and Action Ref. 3 regarding Workforce Planning, will likely be superseded by recommendations being made as part of the Workforce Plan Audit which is currently in progress.
- 8.26 The Committee noted that a meeting has been scheduled between Internal Auditors and NES Management to discuss the outstanding actions and agree a more efficient follow up approach. Auditors will also work directly with action owners of overdue actions to ensure that relevant evidence is provided in order to close these actions prior to the April 2022 ARC meeting.
- 8.27 The Committee requested that wording in the Internal Audit cover papers is amended in future to reflect the "active governance" role of the Committee and that rather than noting the reports and the management actions, the cover papers asks that the Committee review and discuss the report and the actions.

Action: JL

- 8.28 The Committee requested that a column is added to future reports to indicate the person responsible for the implementation of the action as well as the lead Executive. Janice Sinclair advised that it would be more appropriate to refer to the job title rather than a named individual and this was agreed.

Action: JL

- 8.29 Following discussion, the Committee were content with the report and the assurance provided.

e) Draft Annual Internal Audit Plan 2022/23

NES/AR/22/06

- 8.30 James Lucas introduced the Draft Annual Internal Audit Plan for 2022/23, which requires 93 audit days for 8 proposed internal audits, plus quarterly follow up

reports. The audits will focus on the core elements of NES business from high level strategic planning to operational support and the methodology used to determine audit areas was detailed in the paper.

8.31 The Committee noted that there will also be an additional 10 days supplied for a consultancy report regarding Turas Learn refresh and noted the shortlisted audits relevant for inclusion in the plan for 2023/24 or beyond.

8.32 The Committee noted that details of the scope for the Internal Audit in relation to the NHS Scotland Academy between NES and Golden Jubilee is yet to be determined and requested that consistent language in relation to this work is used, noting that the Academy is not only for Medical training, but the entire Clinical workforce.

8.33 Following discussion, the Committee were content with the draft Internal Audit Plan for financial year 2022/23 and approved the plan, with the understanding that the scope of the NHS Scotland Academy Audit is yet to be determined.

9. Draft External Audit Plan 2022/23 NES/AR/22/07

9.1 Joanne Brown introduced the External Audit Plan for financial year ending 31st March 2022 and which sets out Grant Thornton's audit approach including significant audit risks, their wider scope approach, the audit timeline, materiality, and other matters required to be reported within the audit plan. There is no material change in approach from previous year.

9.2 The Committee noted that planning materiality and performance materiality remain unchanged at 2% expenditure (£12.4m) and 75% (£8.1m), respectively. Joanne Brown added that agreement for the External Audit fee is to be confirmed by Scottish Government and that a finalised plan will be submitted to the April 2022 ARC meeting.

9.3 The Committee were content with the draft External Audit Plan for financial year 2021/22 and noted that this is the 6th and final year that Grant Thornton will act as NES' external auditor.

10. 2022/23 Draft Financial Plan NES/AR/22/08

10.1 Janice Sinclair presented the paper which updated the Committee on progress on the development of the NES Draft Financial Plan for 2022/23. The report outlines the steps which will be required over the next 2 months to finalise this position.

10.2 The Committee noted that the figures are not yet final and are likely to change before the final submission to the Board in March and noted that following submission of the 1-year financial plan to Scottish Government (SG) in February, NES will also be required to submit 3-year Financial, Delivery and Workforce plans to SG in July 2022.

10.3 The Committee noted that discussions have been taking place with SG regarding fully costing any new SG directives and noted the current forecast gap in the budget of £3.1m. Janice Sinclair informed the Committee that there is work underway to identify bids that can be pulled forward into Q4 of financial year 2021/22 to mitigate this.

10.4 The Committee raised a question about the uplift for Medical and Dental ACT. Janice Sinclair advised the Committee that robust processes are in place to ensure this allocation is utilised for work that provided benefit to the students.

10.5 The Committee noted the progress in preparing the budget for 2022/23 and the proposals for identifying measures to support the achievement of delivering a balanced budget. The budget will be brought to a Private Board Meeting in March for approval.

11. Risk Management - Corporate and COVID19 Risk Registers

NES/AR/22/09

11.1 Janice Sinclair presented the NES Corporate Risk Register and COVID-19 Risk Annex as at 20 January 2022 and provided the Committee with an update on the progress of the Risk Management Group.

11.2 The Committee noted that the NES Extended Executive Team (EET) agreed:

- a) To reduce the residual scoring of Risk 9 - Payment of NES staff and suppliers is delayed or incorrect – as the effectiveness of controls over a sustained period evidences reduced risk.
- b) Addition of Risk 19 on the COVID19 risk register – Reduced capacity to deliver NES core work due to Scottish Government vaccination programme support requirements.
- c) Addition of Risk 20 on the COVID19 risk register – NES capacity to meet timescales for planned deliverables and programmes of work is compromised by the impact of the COVID pandemic.
- d) Remove Risk 12 – COVID19 Accelerated recruitment portal, as this work has now ceased.

11.3 The Committee noted that training for Risk Management Group (RMG) members was completed in November 2021. Supporting materials have been

made available to members through Microsoft Teams. Monthly RMG meetings have been arranged for the first six months of 2022.

11.4 The Committee noted the Corporate and COVID-19 Risk Registers and were content with the recent updates made to the register.

12. Counter Fraud

Verbal Update

12.1 Janice Sinclair updated the Committee regarding activities underway in NES which are aimed at supporting the Strategy to Combat Financial Crime in NHS Scotland and notified the Committee of a new case currently under investigation.

12.2 The Committee noted that there have been no declarations of gifts and hospitality since the October ARC meeting and noted the information provided regarding one active case.

12.3 Janice Sinclair informed the Committee that new Counter Fraud standards will be announced in February 2022, with implementation required by April 2022. She also welcomed Jim Boyle as NES' new Counter Fraud Champion and noted that she will remain NES' Fraud Liaison Officer.

12.4 The Committee were content with the update provided, noting that a report will be submitted to the April ARC meeting and that there will be a NES Counter Fraud awareness campaign in February.

13. ARC ToRs Review and ARC Draft Schedule of Business 2022/23

NES/AR/22/10

13.1 Della Thomas presented the ARC Terms of Reference (ToR) for annual review and approval and the Draft 2022/23 ARC Scheduled of Business (SoB) for approval.

13.2 The Committee noted changes to the ToRs in relation to financial reporting and that as the Board receive full financial reports, verbal updates regarding the financial position will now come quarterly to the ARC. The Financial Strategy has been provisionally scheduled to be submitted to the ARC in June 2022 for approval. **Action: JB**

13.3 The Committee noted that going forward the annual review of all Committee ToRs will be carried out at the Autumn Committee meetings. For ARC this will be at the October meeting.

13.4 The Committee approved the updated ARC ToRs and the 2022/23 ARC SoB.

14. Corporate Governance Package - Board Standing Orders, Standing Financial Instructions, Board Scheme of Delegation, Code of Conduct & Committee ToRs
NES/AR/22/11

14.1 Della Thomas presented the Corporate Governance Package for review and approval, including a cover paper which outlined the changes that have been made to the various components.

14.2 The Committee agreed that future work would be required to develop the Scheme of Delegation to further align this with the Standing Financial Instructions (SFI) and that this work would be taken forward between now and the next annual review in January 2023. **Action: DT/JB/JS**

14.3 The Committee requested that wording at point 18.5 of the SFIs regarding mandatory training is amended to add that monitoring of completion rates is in place and that wording at point 5.20.2 the General Nursing Council (GNC) should be referred to as a charitable trust. **Action: DT**

14.4 The Committee approved the changes to the Corporate Governance Package for onward scheduling to the Board for final approval.

15. Audit Scotland Reports

15.1 The Committee noted the following Audit Scotland reports:

- a. COVID19 Vaccination Programme
- b. Planning for Skills

16. Date and time of next meeting

16.1 The next meeting of the Audit and Risk Committee will be held on Thursday 28 April 2022.

17. Private meeting between Committee members and Auditors

17.1 A private meeting was held between the Internal and External Auditors and the non-executive ARC members.

NES
February 2022
JA/DT/JS/JB/JF

Minutes of the Seventy-fifth Meeting of the Staff Governance Committee held on Thursday 03rd February 2022 via Microsoft Teams

Present: Linda Dunion, Committee Chair, Non-executive Director
Anne Currie, Non-executive Director
Jean Ford, Non-executive Director
Gillian Mawdsley, Non-executive Director & Whistleblowing Champion
Lynnette Grieve, Non-Executive Director/Employee Director
James McCann, Ex-Officio member, Staff Side (Unison)
David Cunningham, Ex-Officio member, Staff Side (BMA)

In attendance: David Garbutt, Board Chair (Until Item 7)
Karen Reid, Chief Executive/ Executive Lead (Until Item 7)
Tracey Ashworth-Davies, Director of Workforce
Morag McElhinney, Head of HR
Della Thomas, Board Secretary and Principal Lead Governance
Ameet Bellad, Senior Specialist Lead, Workforce
Chris Duffy, Senior Admin Officer
Ann Gallacher, Senior Admin Officer
Katy Hetherington, Equality and Diversity Lead, Workforce

1. Chair's welcome and introduction

- 1.1 The Committee Chair welcomed all to the Committee and informed the Committee that as the Committee are operating under governance light the agenda has been kept deliberately short and some items have been moved to the noting section when they would normally be substantive business.
- 1.2 Ann Gallacher was welcomed to her first meeting of the Staff Governance Committee. Ann Gallacher will be observing the Committee today and will be taking over the Committee Secretary role from Chris Duffy after this meeting.
- 1.3 Katy Hetherington was also welcomed to her first meeting of the Staff Governance Committee. Katy Hetherington has taken up post as the new Equality and Diversity Lead in NES and is joining this meeting as an observer.
- 1.4 The Committee Chair informed the Committee that all papers will be taken as read.

2. Apologies for absence

- 2.1 No apologies were received.

3. Notification of any other business

- 3.1 There were no notifications of any other business.

4. Declaration of interests

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

5. Minutes of the Staff Governance Committee meeting held on 4th November 2021 (NES/SGC/22/02)

5.1 The Committee Chair informed the Committee that members had flagged a number of issues with the minute before the meeting, as these were more than typos it was agreed that Della Thomas would run through the required changes in order for them to be formally recorded.

5.2 Della Thomas put forward the suggested changes as follows;

- i. it is agreed that the style of minute taking in NES takes “the Committee asked”; “the Committee reviewed”; “the Committee agreed” etc. style of approach and individual non-executive directors are not named. Therefore, at para 6.1 it is suggested that this also applies to the Non-executive Whistleblowing Champion. The section of the minute would therefore be changed from “The Non-executive Whistleblowing Champion put forward a request to discuss the action relating to whistleblowing and the Committee Chair agreed that this would be covered under item 8 Whistleblowing update” to **“The Committee raised the action relating to whistleblowing and the Committee Chair agreed that this would be covered under item 8 Whistleblowing update”**.
- ii. Para 8.1 of the minutes refers to a role only Gillian can fulfil and therefore it is very difficult not to mention her or her role, “The Non-Executive Whistleblowing Champion introduced the whistleblowing report noting that NES remains with zero whistleblowing cases. It was highlighted to the Committee that some suggested revisions were included in the report, but some were not. It was agreed that a discussion would take place between Donald Cameron and the team who help produce the Whistleblowing report, to take on comments where appropriate to fully close the reporting loop”.

This could be changed to: **“Gillian Mawdsley introduced the whistleblowing report noting that NES remains with zero whistleblowing cases. She highlighted to the Committee that some of her suggested comments were included in the report, but some were not. It was agreed that a discussion would take place between Donald Cameron and the team who help produce the Whistleblowing report, to take on comments where appropriate to fully close the reporting loop”**.

- iii. Para 8.2 currently reads “It was also noted that work on the whistleblowing arrangements for the NHS Scotland Academy has not yet been fully finalised. Della Thomas is working with Gerard Gardiner from NHS Golden Jubilee on this and will advise Gillian Mawdsley in the outcome of the ongoing discussions”.

Changes as follows: **“In relation to points raised during the discussion of the NES whistleblowing report, the Committee asked for an update on the**

arrangements for the NHS Scotland Academy arrangements. It was also noted that work on the whistleblowing arrangements for the NHS Scotland Academy have not yet been fully finalised. Della Thomas is working with Gerard Gardiner from NHS Golden Jubilee on this and will advise Gillian Mawdsley on the outcome of the ongoing discussions”

- iv. Para 10.1 currently reads “The Committee asked for the schedule to be brought to this meeting. It was originally approved earlier in the calendar year but the Committee noted that it would maintain flexibility due to Covid pressures and other things”.

Change to “The Committee asked for the schedule to be brought to this meeting. It was originally approved earlier in the calendar year, but the Committee noted that it would maintain flexibility due to Covid pressures and other matters that might emerge in year”.

- v. Para 13 Currently reads “Morag McElhinney introduced this item and asked the Committee to note that the Lead Employer risk and whistleblowing risk are still under review and will come to the next meeting”.

Change to and update the action log

“Morag McElhinney introduced this item and asked the Committee to note that the Lead Employer risk and whistleblowing risk are still under review and will come to the next meeting. Action: Morag McElhinney

- 5.3 The Committee thanked Della Thomas and confirmed they were happy to approve the minutes with the suggestions put forward.

6. Action Status Report and other matters arising (NES/SGC/22/03)

- 6.1 The Committee raised the action relating to completing a self-assessment of Committee effectiveness. The approach to this piece of work was due to go to the Audit and Risk Committee in January 2022 for approval, due to governance light arrangements this item was not received, and it is therefore now sitting with the Audit and Risk Committee to pursue and action in due course. It is important that NES doesn't have two Committees overseeing progress, therefore it is was put forward that the Staff Governance Committee remove this action from their action status report and note on their schedule of business that Committee self-effectiveness review would be reinstated for the business year 2022-2023.

Action: Chris Duffy

- 6.2 The Committee agreed to the suggestion above and approved the action report. There were no matters arising.

Lead Executive Report

7. Director of Workforce Report (NES/SGC/22/04)

- 7.1 Tracey Ashworth-Davies introduced the report and highlighted a number of key areas which included, recovery and renewal work, working style approach, iMatter, Workforce

Planning, National Leadership Development Programme (NLDP), NHS Scotland Academy work, NES Internal continuing education fund, employee relations activity, Organisational Change policy, Once for Scotland homeworking policy and the Centre for Workforce supply.

- 7.2 Tracey Ashworth-Davies updated that, since writing her report, NES had agreed to implement hybrid working arrangements from 01 March 2022. This was previously approved by the EET in 2021 and will be monitored over the next 12 months and the arrangements adapted as necessary.
- 7.3 Tracey Ashworth-Davies went on to update on the National Leadership Development Programme (NLDP), NES is the strategic delivery partner for elements of this work, which is still being defined in detail. It will take the team who are working on Project Lift from five to twenty. A paper on this is scheduled for the Education and Quality Committee in May 2022. The Staff Governance Committee recognise that the governance of the NLDP has been delegated by the Board to the Education and Quality Committee but asked if they could be sighted on NLDP reports for their interest. Board services will report by correspondence when the Education and Quality Committee papers are published and email to signpost to them.

Action: Board Services

- 7.4 The Committee noted that an additional 15 people were joining the Project Lift team and asked that if the new model and approach is evolving how will there be clarity for their roles. Tracey Ashworth-Davies responded by saying the commission is not written but the NLDP will be much wider than Project Lift and they will be working on other programmes; for example, focussing on increasing the number of leaders from ethnic backgrounds. The NLDP work will require a focus on communications to make sure the work with Scottish Government is landing properly with different health boards. The roles are not just leadership designers and trainers. The danger is starting this work with no capacity or people and that is why resources are being brought in. The Board Chair indicated that he had a few further questions regarding this subject but will take them offline.

Action: David Garbutt/Tracey Ashworth-Davies

- 7.5 One further update was brought to the Committee's attention regarding the Organisational Change policy, work is ongoing on a new process and an updated policy. This will be circulated to the Committee via correspondence once the work is complete. The Committee were then invited to provide any comments or questions.

Action: Chris Duffy

- 7.6 The Committee noted the iMatter response rate and Employee Engagement Index (EEI) score, it is very pleasing to see and know that NES employees are willing to engage, the score deserves a lot of praise.
- 7.7 Regarding item 5 in the report, recruitment activity, more information was sought on NES co-ordinating a campaign that will assist boards in unmitigated competition. Morag McElhinney replied, Psychology have found before that boards compete with each other which means duplication of effort, interviewing, recruitment processes. This piece of work is a test for change to cut down activity. It is also hoped it will provide a better experience for the candidate.

7.8 The Committee welcomed the update on the youth academy and enquired about further updates coming to future meetings. Della Thomas will work with the executive leads of both the Staff Governance Committee and Education and Quality Committee to agree which Committee will be governing this and to also ensure all board members have access to the latest youth academy information.

Action: Della Thomas/Tracey Ashworth-Davies/Karen Wilson

7.10 The Committee enquired as to the nature of Service Level Agreements. Tracey Ashworth-Davies explained that there were occasions in which Scottish Government and NES supplied staff to each other for the provision of specific services for specific periods of time. These were covered by Service Level Agreements that had been produced with the Central Legal Office.

7.11 The Committee welcomed the inclusion of reference to whistleblowing in the employee relations update.

7.12 At this point of the meeting David Garbutt and Karen Reid left due to other commitments. David Garbutt took the opportunity to thank Tracey Ashworth-Davies and Morag McElhinney on behalf of the board for all their work during a very trying time. Tracey Ashworth-Davies extended this to the whole Workforce team.

7.13 The Committee enquired as to the demands on the Digital directorate given both the reference to organisational change in the minutes of the Change Management Programme Board and the lower level of completion of essential learning modules relative to that of other directorates. Tracey Ashworth-Davies and Morag McElhinney said that it was their understanding that the Digital directorate had been particularly stretched in response to Covid demands. This was expected to ease subject to Covid pressures. However, it was likely this has impacted essential learning completion during the last 12 months. An organisational change process to combine the previous two digital directorates into a unified NES Technology directorate was underway with the successful appointment of a Deputy Director of Technology, a new position in the structure. The next phase planned was the senior management structure which would take into account the work of the directorate going forward and the need to provide structural resilience.

7.14 The Committee asked if there was an equivalent to the Centre of Workforce Supply in other parts of the UK. Morag McElhinney said that she was aware of some similar types of service, but not specifically a dedicated Centre for Workforce Supply. For example, NES had liaised with HEE which had offered to provide complimentary training to NHSS Board International Recruitment Leads. Recruitment services were also being provided by other types of structures. For example, the Yeovil Trust which provided services to other NHS England Trusts and had offered recruitment support to NHSS Boards.

7.15 The Committee noted the Director of Workforce report.

Governance Items

8. 2022/23 Committee Schedule of Business

(NES/SGC/22/05)

- 8.1 Della Thomas introduced this item, the committee reviewed their previous schedule of business at the last meeting and approved their Terms of Reference. This schedule now gives members the opportunity for further comment or to highlight any gaps.
- 8.2 The Committee made no changes to the schedule and it was then approved.

Performance Items

9. **People & OD Dashboard** (NES/SGC/22/06)

- 9.1 This item was taken as read and the Committee noted that the changes made previously to this report have been very helpful and commended the current approach.
- 9.2 The Committee asked if there was any scope for delicate probing into the reasons why we are seeing an increase in absence. Morag McElhinney thanked the Committee for this very good point and confirmed the team will be working to understand this and how it may impact on other types of absence.
- 9.3 The Committee enquired if there is a disparity in the Whistleblowing training figures. Tracey Ashworth confirmed that the figures in the Whistleblowing report are all staff and the figures in the other report are line managers because a commitment has been made to have 80% of line managers complete by end of March and 95% by the end of June. There will be a push on essential training compliance. The Committee thanked Tracey Ashworth-Davies for the update and requested a further update on compliance rates in the middle of March.

Action: Tracey Ashworth-Davies

- 9.4 The Committee noted the People & OD Dashboard.

10. **Risk Register** (NES/SGC/22/07)

- 10.1 Morag McElhinney introduced this item, The purpose of this paper is to notify the Staff Governance Committee of the outcome of a recent review of a primary-1 inherent risk (RIS0001639) which pertains to the Lead Employer arrangements and NES' legal and staff governance responsibilities as the employer of Doctors and Dentists in training. Following review of the potential 'causes' of the risk, it has been determined that the overall score of the risk is reduced and the risk is therefore no longer rated as 'primary-1 inherent' and is thus removed from the corporate risk register; quarterly reporting to Staff Governance Committee on this risk will cease. The Committee is asked to note the removal of this risk from the corporate register and advise of any significant concern contrary to this outcome.
- 10.2 The Committee noted the steady growing success, collaborative working and problem solving of the Lead Employer programme, largely down to Morag McElhinney and the team. The Committee confirmed they were happy to approve the removal of the risk, noting that any exceptional reporting is brought back as required.

Items for noting

11. **iMatter Results** (NES/SGC/22/08)

11.1 The Committee noted the iMatter results.

12. Whistleblowing Update (NES/SGC/22/09)

12.1 The Committee noted the whistleblowing update.

13. Employment Tribunals (NES/SGC/22/10)

13.1 The Committee noted the employment tribunal update.

14. Policy/Scottish Government Director Letters as appropriate to Staff Governance Committee (NES/SGC/22/11)

14.1 The DL update was noted.

15. Remuneration Committee Business via Correspondence

15.1 There has been no Committee business since the last meeting.

16. Change Management Programme Board minutes (NES/SGC/21/12)

16.1 The Committee noted the change management programme board minutes.

17. Managing Health, Safety and Wellbeing Committee minutes (NES/SGC/21/13)

17.1 The Committee noted the Managing Health, Safety and Wellbeing Committee minutes.

18. Any other business

18.1 The Committee thanked Chris Duffy for his contributions to the Staff Governance Committee in his role as Committee Secretary.

20. Date and time of next meeting

20.1 The next meeting of the Staff Governance Committee will be held on Thursday 5th May 2022, 10:15

NES
February 2022
CD/DT/TAD/LD
V0.4 Final version

Minutes of the Fourth NES Digital and Information Committee held on Monday 28 February 2022 09:30 – 12:00 via Microsoft Teams.

Present: David Garbutt (Chair)
Jean Ford (from 10:44 during the Lead Executive Report)
Douglas Hutchens
Viki Nairn (until 12:00)
Angus McCann

In attendance: Jenn Allison, Senior Officer, Board / CEO Office
Tracey Ashworth-Davies, Director of Workforce
Paula Baird, Principal Lead, Workforce (for item 7)
Colin Brown, Head of Strategic Development
Jim Boyle, Director of Finance (joined at 10.23)
David Felix, Director of Dental and Caldicott Guardian
Katy Hetherington, Equality and Diversity Principal Lead
Heather Kilfara, Senior Finance Manager
Janice Sinclair, Deputy Director of Finance
Della Thomas, Board Secretary
Marisa Wedderspoon, Manager, Digital
Christopher Wroath, Director of NES Technology Service

1. Welcome and introductions

1.1 The Chair welcomed everyone to the meeting. He gave particular welcome to Katy Hetherington, who has recently taken up the post of Principal Lead, Equality and Diversity and is attending the Committee as part of her induction. Katy will be in attendance at future DIC meetings to present interim and annual equality and diversity reports.

1.2 Colin Brown was also welcomed to the meeting, who was attending as depute to the Chief Executive, Karen Reid.

2. Apologies for absence

2.1 Apologies were received from Karen Reid. Jean Ford gave apologies for the first half hour of the meeting and joined at 10:44 and Viki Nairn updated the Committee that she would have to leave the Committee at 12:00.

3. Declarations of interest

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

4. Notification of Any other business

4.1 There was no other business raised for discussion.

5. Minutes of the meeting 13 December 2021 (NES/DI/21/24)

- 5.1 The minutes were approved as a correct record.
- 5.2 A query was raised regarding progress of discussions with Scottish Government (SG) regarding the need to develop a National Information Governance Agreement. The Chair informed the Committee that he had raised this twice with Caroline Lamb, Chief Executive of NHS Scotland and that he would provide the Committee with an update on progress at a future meeting. **Action: DG**

6. Committee Rolling Action Log (NES/DI/21/25)

- 6.1 The Committee noted that of the 7 actions, 5 have been marked as complete. 1 had been paused and 1 had been closed. The Committee agreed the completed actions.

7. Executive Lead Officer's Report (NES/DI/22/02)

- 7.1 Christopher Wroath introduced the paper to provide the Committee with an overview of progress on delivery since the last meeting in December 2021. This included an update on the status of commissions from Scottish Government (SG) and highlighted key areas of risk. The report provided a summary of expenditure to date and a current forecast of the end of year anticipated position, identifying significant over or under spends.
- 7.2 Christopher Wroath informed the Committee that the NES Technology Service (NTS) have been progressing stakeholder engagement with the Digital Health and Care Enabling Technology Board (DHCETB) and the Digital Citizens Board to further identify priorities for the National Digital Health and Care Platform. A proposal is currently in development identifying what the Platform will deliver against the Digital Health and Care Strategy. This will be submitted to a future meeting. **Action: CW**
- 7.3 The Committee asked about the implications of recurrent funding if the proposal is agreed. Christopher Wroath informed the Committee that an interim agreement has been made with SG to provide £3.3m of funding to extend staff contracts and that at present there is a verbal agreement to ensure funding for the agreed workplan is covered.
- 7.4 Discussion took place regarding the challenges of retaining staff on fixed term contracts and the Committee expressed their aspiration for written confirmation from SG for recurrent funding to support the continued development of the National Digital Health and Care Platform. Jim Boyle added that discussions are taking place with SG regarding the impact of non-recurrent funding across NES.
- 7.5 A query was raised regarding anything further that could be done to retain staff. The Committee noted that generally contractors are less likely to be looking for permanent posts but that length of contracts is a key factor and commented that NES needs to make ourselves as attractive as possible to retain staff where appropriate.

- 7.6 A query was raised regarding how the work would link with Primary Care, in particular the General Practitioner (GP) data and to the Vaccination Programme. Christopher Wroath explained that the work will not replace GP data but it will be pulled together from different sources to provide an augmented service. Accessing relevant data sets is a key element of the next stage of work.
- 7.7 Discussion took place regarding the importance of ensuring timely Digital and Information Committee (DIC) governance of the National Digital Health and Care Platform work in a potentially fast-moving programme of work. It was noted that the digital workplan aims to capture the current and emerging work and key aspects will be reported to the DIC.
- 7.8 The Committee asked if stakeholder engagement regarding Platform requirements were also taking place with the Care Sector and Christopher Wroath informed the Committee that specific work has taken place to gather user requirements from the Care Sector.
- 7.9 The Committee questioned the continued delays to the Organisational change to bring NES Digital and NES Digital Service (NDS) into one service. Christopher Wroath explained that as NES Digital and NDS operated differently and that it had been important to foster a shared culture and vision as one Directorate. The Committee asked if the ambition was still to have one Directorate with everyone on the same terms and conditions. Christopher Wroath assured the Committee that this was very much the case and added that as senior posts are filled the structure of the teams will be recruited to.
- 7.10 A query was raised as to when the new eRostering system would be nationally deployed and what was being done to address the overspend on Azure. Christopher Wroath explained that NES are no longer directly involved in the eRostering system, which is being rolled out by National Services Scotland (NSS) within the next three years and that a meeting has been scheduled with Azure providers to seek clarity regarding consumption and associated charges.
- 7.11 Discussion took place regarding the format of the Lead Executive report and it was agreed that future reports to the DIC would use the same SG template as reports that will be submitted to the Digital Enabling Technology Board once the delivery plan has been agreed. It was noted that the delivery plan will also be submitted to the DIC. **Action: CW**
- 7.12 The Chair thanked Christopher Wroath and his team for their work.
- 7.13 The Chair welcomed Paula Baird to the meeting to provide an update regarding the Digital Skills Programme. Paula Baird offered a brief outline of her paper and the Committee noted that the programme was on track against the workplan.
- 7.14 The Chair thanked Paula Baird for her report and she left the meeting.

8. Cyber Security Audits and Strategic Landscape

(NES/DI/22/03)

- 8.1 Christopher Wroath presented the paper to provide the Committee with a strategic view of the Cyber and Information Security posture of NES in the context of the NHS in Scotland, and a recent NES Internal Audit regarding the NES Technology Service (NTS) cyber and information security services.
- 8.2 Christopher Wroath explained that an annual Network and Information Systems (NIS) audit is a requirement for public bodies in Scotland who process citizen data. NES' first NIS audit took place in December 2020 and results were reported to the Audit and Risk Committee (ARC), via the Annual Information Governance and Security report, during COVID-19 governance when the Digital Committee was stood down.
- 8.3 The Committee noted that the 2021 NIS audit report, which was received last week, will be submitted to the DIC meeting in April.
- 8.4 The Committee noted the KPMG Internal Audit report, assessed the approach taken, and progress made against the implementation of the actions raised in the 2020 NIS audit and the adequacy of the NES Cyber Security arrangements.
- 8.5 Christopher Wroath informed the Committee that the ARC had raised concern regarding the Internal Audit recommendations. He had explained to the ARC that the report does not reflect a complete picture of the wider context and the amount of work that has already been done to implement the 2020 NIS recommendations, and had this been included then this may have helped to assure the ARC that the risks in relation to Cyber Security in NES are well mitigated.
- 8.6 As a result of the discussions at the ARC it was agreed that a paper highlighting the wider context of information security and cyber security would be issued to ARC members for information and to the DIC as a supporting paper to the Internal Audit report.
- 8.7 The Committee raised a query regarding how the NHS Scotland Cyber Security Operating Centre linked in with SG. Christopher Wroath confirmed that the Centre, which will become part of NS S, is in collaboration with SG and the University of Abertay.
- 8.8 The Committee requested that further information was provided regarding the priority 2020 NIS recommendations. It was noted that further information would be provided as part of the NIS 2021 audit report to the DIC April meeting.
- Action: CW**
- 8.9 The Committee noted the minutes from the NES Information Security Forum on 25 January 2022 and asked for further information regarding the drop in the Organisational exposure score. Christopher Wroath explained that this a Microsoft-determined rating which reflects how vulnerable the organisation's devices are to cybersecurity threats. A lower exposure score means devices are

less vulnerable from exploitation. He added that in the context of NHS Scotland and Public Bodies, NES is doing very well.

8.10 The Committee asked David Felix for his views as NES' Caldicott Guardian. David Felix assured the Committee that he is comfortable that adequate arrangements are in place in NES to protect patient identifiable information.

9. NTS Risk Register (NES/DI/22/04)

9.1 The Chair invited Christopher Wroath to introduce the NTS Risk Register which aims to provide the Committee with an overview of areas of project risk associated with budget, time and quality.

9.2 Christopher Wroath informed the Committee that NTS colleagues have been working closely with the Risk Management team to improve the articulation of NTS Directorate Risks. He highlighted that developing a consistent approach to risk reporting will further improve as part of the work of the NES Risk Management Group (RMG).

9.3 The Committee noted that the risks were reported on an exception only basis, where red or amber areas have been identified across the programme of work. They also noted that risks are presented showing reference to the associated projects and operational domains and to the Governance/Commissioning Body and the NES and Digital Health & Care Strategies.

9.4 The Committee commented that the risk register could be further strengthened to clarify the key strategic risks associated with the programmes of work. It was noted that it would be helpful to see a mitigation column to help understand the size and impact of the risk. The Committee advised that although it was helpful to have an overview of amber and red operational risks, it would be helpful to have an overview of key strategic risks, such as Cyber Security, regardless of the RAG status. **Action: CW**

9.5 The Chair thanked Christopher Wroath and his team for the risk paper.

10. Draft 2022/23 Schedule of Business (NES/DI/22/05)

10.1 The Chair asked Della Thomas to introduce the Draft 2022/23 Schedule of Business for the Committees approval.

10.2 The Committee raised a query regarding reporting of finances to the Committee. Della Thomas advised that it may not be appropriate to bring detailed financial reports through the Committee and suggested that key high level financial reporting could be included within the Executive Leads report to provide a progress update on how any additional in year funding is progressing. The Committee remarked that an enhancement within the executive leads report would be helpful.

10.3 Colin Brown added that there are ongoing discussions taking place with the SG sponsorship team regarding streamlining the sponsorship process for all NES Commissions.

10.4 The Committee agreed that a flexible approach to Committee business may be required during the next financial year and agreed that relevant financial information, including resourcing and funding continues to be reported in the Lead Executive's report.

10.5 The Committee noted and approved the 2022/23 Schedule of Business and the Chair thanked Della Thomas for the paper.

11. Identification of any new risks emerging from this meeting

11.1 The Committee requested assurance that risks in relation to Cyber Security and impact of staff resourcing challenges are sufficiently reflected in NES Risk Registers. **Action: CW/JB**

11.2 Discussion took place regarding the importance of ensuring that NES Committees are sighted on significant risks and issues as soon as possible and that this would be built into new processes agreed as part of the Risk review in NES.

12. Any Other Business

13.1 There was no other business discussed.

13. Review of Effectiveness of Meeting

13.1 The Committee were satisfied with the effectiveness of the meeting.

14. Date and time of next meeting

14.1 The next meeting of the Digital and Information Committee will be held on Monday 11 April 2022 via Microsoft Teams.

NES
March 2022
JA/DT/CW/DG

NHS Education for Scotland

EDUCATION & QUALITY COMMITTEE

Approved minutes of the sixth meeting of the Educational & Quality Committee (EQC) (which is the forty-fifth meeting of the Educational and Research Governance Committee) held on Thursday 3 March 2022 via Microsoft Teams

Present: Douglas Hutchens, Chair, Non-Executive Director
Sandra Walker, Non-Executive Director
Annie Gunner Logan, Non-Executive Director
Gillian Mawdsley, Non-Executive Director and Whistleblowing Champion
Vicki Nairn, Non-Executive Director

In attendance: David Garbutt, Chair of NES Board (not in attendance for items 8 and 9)
Karen Wilson, Director of Nursing Midwifery & Allied Health Professionals (NMAHP) and EQC Executive Lead
Katy Hetherington, Principal Lead for Equality, Diversity and Human Rights
Kevin Kelman, Director of NHS Scotland Academy
Della Thomas, Board Secretary/Principal Lead Corporate Governance
Rob Coward, Principal Educator/Executive Secretary
Alastair McLellan, Postgraduate Dean (For Item 7)
Janice Gibson, Associate Director – Organisational Development Leadership and Learning (ODLL) (For Items 10 and 11)
Chris Duffy, Senior Admin Officer/Committee Secretary

1. Welcome and introductions

1.1 The Committee Chair welcomed everyone to the meeting. Katy Hetherington, Principal Lead for Equality, Diversity and Human Rights was welcomed to the meeting as an observer as part of her induction to NES.

2. Apologies for absence

2.1 Apologies were received from Karen Reid, Chief Executive and Rowan Parks, Deputy Medical Director. David Garbutt offered his apologies for some of the meeting, due to another meeting he had to attend.

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. Minutes of the meeting held on 19th August 2021

5.1 The minutes were accepted as an accurate record of the meeting.

6. Action Status Report and other matters arising

- 6.1 The Committee approved all the completed actions, and these will now be removed from the report. There were then no outstanding actions on the report.

7. Education & Quality Executive Lead Report

- 7.1 The Chair welcomed Alastair McLellan to the meeting to assist with item 7 and invited Karen Wilson to introduce her report.

Karen Wilson drew the Committee's attention to the critical emerging issue in Perth Royal Infirmary, noting that it has been escalated as high as possible and was being actively managed. The Committee asked if there is a reputational issue for NES as a result of this. Alastair McLellan replied that this is a potential risk to the organisation and merits consideration on the risk register. An action was taken to notify the Committee via correspondence of what actions have been taken to provide assurance, at the end of March.

Action: Alastair McLellan

- 7.2 The Committee asked how NES finds out about issues such as these. Alastair McLellan confirmed that a substantial part of work in the Quality workstream in Medicine is to monitor this. It includes the General Medical Council (GMC) survey results, Scottish training survey results and at the end of each post, there are direct feeds into the system through trainee/trainer notifications of concern.
- 7.3 The Committee went on to ask how NES receives assurance that actions are being taken to address the issues. Alastair McLellan advised that there is an action planning process, and this is being sharpened up by embedding SMART objectives. The introduction of SMART objectives has completed its pilot phase and is now becoming a routine part of all the quality management visits. It has been designed to be much more engaging to drive a better outcome more rapidly. NES has direct engagement with the boards and we actively follow up actions with Medical Directors and Directors of Medical Education. Assurance is then sought against progress on action plans and commitments. The Committee requested that a paper on the updated process with the incorporation of SMART objectives comes back to a future Committee meeting.
- Action: Alastair McLellan**
- 7.4 The Committee enquired about how much information, in relation to Enhanced Monitoring cases, is in the public domain. Alastair McLellan confirmed that all of the Enhanced Monitoring cases are detailed on the GMC website and this includes progress reports. The Deanery website publishes all the visit reports.
- 7.5 The Board Chair highlighted a concern when some cases don't seem to improve and asked what the role of NES was in raising awareness of this. He asked if other Boards themselves know about their enhanced monitoring cases. Alastair McLellan reported that he has links with other Boards through the Sharing Intelligence for Health & Care Group (SIHCG). Plans are underway to develop this aspect into the NHS Blueprint for Good

Corporate Governance so aiming to improve educational governance at the level of the NHS Board. It was agreed that David Garbutt and Alastair McLellan will take forward Enhanced Monitoring NHS Board level educational governance discussions with Scottish Government, following a meeting with Health Improvement Scotland (HIS)

Action: David Garbutt/Alastair McLellan

- 7.6 Whilst discussing Enhanced Monitoring further, the Committee asked if there had been an opportunity for the Board Chair to raise Enhanced Monitoring at the NHS Board Chairs Group Meeting. The NES Board Chair confirmed this had been raised, but a further opportunity should be created to bring the associated intelligence documents to a future meeting. The Committee agreed that David Garbutt and Alastair McLellan will notify the NHS Board Chairs of the details of the latest enhanced monitoring sites.

Action: David Garbutt/Alastair McLellan

- 7.7 The Committee enquired about the frequency of NES reaching the sanction to withdraw trainees. Alastair McLellan confirmed that in certain situations there is judgement to be exercised by NES and the GMC. There has been one situation in the last three years where a single trainee has been removed from a site due to the inadequacy of the supervisory structure. This was not an Enhanced Monitoring site.

- 7.8 The Committee asked if the longevity of sites remaining on Enhanced Monitoring would be a factor that reduced the desirability of this site for future trainees. Alastair McLellan confirmed that this can be an issue and added that there are signs of improvement in survey results indicating that progress is being made.

- 7.9 Alastair McLellan moved on to inform the Committee of a new emerging issue. A site in NHS Lanarkshire received a quality visit two days ago and based on results of the visit, GMC agreement is being sought to raise to escalate to Enhanced Monitoring. The Committee noted that this site has previously been on Enhanced Monitoring for similar issues. The Committee agreed that David Garbutt and Alastair McLellan would discuss this directly with the NHS Lanarkshire Board Chair. The Committee Chair declared an interest, having worked with this Enhanced Monitoring site previously.

Action: David Garbutt/Alastair McLellan (Linked to action in 7.6)

- 7.10 The Chair drew the Enhanced Monitoring discussions to a close, with the Committee agreeing a final action for the Enhanced Monitoring risk to be reviewed. David Garbutt then left the meeting. **Action: Rob Coward**

- 7.11 The Committee moved on to other aspects of the Executive Lead's Report and discussed the Dental Reducing Inequalities Programme and asked if more information on evaluation and impact of the programme could be provided. Rob Coward agreed to provide this information.

Action: Rob Coward

- 7.12 The Committee noted that a Product review was in progress and asked why this was being completed for all products annually. Karen Wilson confirmed that this is a new process and is the first Product Review NES has undertaken. Therefore, this initial review will be comprehensive in nature and thereafter by exception.
- 7.13 The Committee discussed the 'Ready for Work' resource and asked where the learners not affiliated to NHS Boards are based. Karen Wilson confirmed that the affiliation of learners includes colleagues from National Boards, third sector organisations, the Care Inspectorate and Further Education and Higher Education.
- 7.14 Regarding the NHS Scotland Academy local huddles, the Committee asked if there are any plans to adopt a similar widening access around social care. Kevin Kelman confirmed that the huddles originated within the NHS National Treatment Centre space with a focus on healthcare. He went on to report that this work is now moving into Social Care and broadened to include school-based apprenticeships.
- 7.15 The Committee discussed the Caring for Smiles work and asked, given the increase in people receiving care in their own homes, is there any scope for more care in the community. The related member of staff able to answer this question was not in attendance at the Committee and Karen Wilson agreed to obtain the response to this question and report back to the Committee via correspondence. **Action: Karen Wilson**
- 7.16 The Committee noted the accessibility review of TURAS Learn and asked to see the survey results by correspondence. **Action: Annette Thain**
- 7.17 The Committee Chair thanked Karen Wilson for the report and commented that this had provided a high quality of assurance. He also thanked Alastair McLellan for his contributions to the Enhanced Monitoring discussions. The Committee noted the Lead Executive Report. Alastair McLellan then left the meeting.
- 8. NHS Scotland Academy Update: Process of Quality Assurance**
- 8.1 The Chair invited Karen Wilson to introduce this paper. Karen Wilson reminded the Committee that a previous draft had appeared at the last meeting and that comments have now been incorporated. The paper has been brought to seek approval on the educational quality assurance processes.
- 8.2 The Committee asked how often the Academy Educational Programmes will be reported through the EQC. Karen Wilson proposed that a report showing programme progress will be added as an appendix to the Lead Executive Report every 6 months and the Committee will receive a fuller Annual report. The Committee agreed this proposal. The EQC Schedule of Business will be updated to reflect this.
Action: Karen Wilson/Kevin Kelman/Chris Duffy

8.3 The Committee asked if patients will be involved as part of the stakeholder involvement advisory group. Karen Wilson clarified that, yes, this would be the case for certain programmes. The Committee suggested that the terminology used in Appendix 1, page 13, should be changed from 'is this an original programme' or a 'competitor' to ask instead in an 'existing version available' and in 4.3, a change to include other stakeholders as well as NHS organisations'. Maria Pollard will update the document based on these revisions. **Action: Maria Pollard**

8.4 The Committee also highlighted that that section 18 referred to the NES inclusive learning policy from 2014 and this requires to be updated. This action would fall to the NES Equality and Diversity Lead. **Action Katy Hetherington**

8.5 The Committee approved the NHS Scotland Academy process of educational quality assurance with the revisions highlighted above.

9. Quality Dashboard and Strategic KPI Annual Report: Progress Update

9.1 The Chair invited Rob Coward to introduce the paper. Rob Coward highlighted the key points from this paper noting that the core project team are working up a pilot under the direction of an advisory group. They are moving on to addressing strategic KPIs based on a revised corporate strategy. He remarked that education and training will have a central focus.

9.2 The Committee noted the progress update.

10. Organisational Development Leadership and Learning (ODLL) Update

10.1 The Chair welcomed Janice Gibson to the meeting and David Garbutt rejoined the meeting. Janice Gibson delivered a presentation that described the progress achieved across the current NES programmes, set out the ambition for the future (National Leadership Development Programme – NLDP) and discussed how ODLL provide connection, evaluation and assurance. Following the presentation, the Chair opened up the meeting to questions.

10.2 The Committee discussed the Management Trainee Scheme (MTS), and asked if it was possible to identify where those who have completed the programme are now in their careers. Janice Gibson confirmed that this data is reviewed and monitored.

10.3 Further discussion on the MTS explained how this year the scheme will go under review. The Committee requested that the review should take this opportunity to map out a stronger process and pathway out of the programme. The MTS should be strongly evaluated and the Committee should receive updates on the progress of this work through the new quarterly report that will come to Committees. **Action: Janice Gibson**

10.4 The Committee discussed the Talent Management programme and noted that there are high numbers registering an interest, but there wasn't a clear

understanding on why some don't take the programme up. It was noted that there was a need to identify if there are barriers that they are experiencing.

Action: Janice Gibson

10.5 The Committee discussed some potential issues relating to the consultation of NHS Chief Executives in the development of the leadership success profile. Janice Gibson was not aware of this issue and agreed to follow up at pace.
Action: Janice Gibson

10.6 The Committee discussed the various different leadership approaches and models available and asked if the "systems" leadership approach was included in the design of NES leadership training. Janice Gibson confirmed that it was and will be included as one of the next offers. The present working title is the "Senior Systems Leadership Programme"

10.7 The Committee Chair thanked Janice Gibson for the presentation and the Committee noted the update.

11. Schedule of Business 2022/23

11.1 The Chair invited Della Thomas to introduce the paper, Della Thomas confirmed that the areas requiring the Committees attention were detailed in the cover paper and particularly drew the Committees attention to the request to schedule a longer meeting for the December Committee.

11.2 The Committee approved the schedule of business and agreed to an earlier start time for the December 2022 meeting.

12. Internal Audit Report – Turas Learn – Update on progress with actions

12.1 The Chair invited Rob Coward to provide a verbal update on the progress of actions resulting from the internal audit report of Turas Learn. Rob Coward highlighted that one of the recommendations was to produce standards that will be used to govern digital learning resources. These standards have been worked on by a short life working group, the Technology Enhanced Learning (TEL) governance group and NLDP leads group. The first draft of standards, once checked, will be subject of consultation internally by TEL colleagues and externally by NLDP leads. They are expected in April.

12.2 The Committee asked if work is being progressed to undertake a complete refresh of Turas Learn and queried if this type of commitment might require additional funding from Scottish Government. Karen Wilson confirmed that leads within NES are being identified along with the funding required.

12.3 The Committee asked for an updated target date for the Comms plan. Rob Coward confirmed that this was June 2022.

12.4 The Committee noted the update.

13 Risk Report

13.1 The Chair invited Rob Coward to introduce this report. Rob Coward noted that the risks have been reviewed further and have been brought up to date.

Discussions at Education and Quality Executive Group resulted in some adjustment of how these risks are scored, the impact downgraded although this doesn't affect the residual score.

- 13.2 The Committee highlighted the need to review the enhanced monitoring risk and the risk report was noted.

14 Identification of any new risks emerging from this meeting

- 14.1 The Committee agreed to re-review the Enhanced Monitoring risk. No new risks were identified at this meeting.

15. Consultations Log and Parliamentary business update

- 15.1 Committee members noted the consultation log and asked if the consultation end date could be included. The Committee also asked for a note of when contributions from Committee and/or Board members are being invited.

Action: Chris Duffy

23. Scottish Government and NES Educational policies

- 23.1 There were no new policies to report.

Review of Effectiveness of Meeting

The Committee members confirmed they were getting the right assurance and the quality of papers were of a high standard.

24. Any other business

- 24.1 There was no other business to discuss.

25. Date and time of next meeting

- 25.1 The next meeting of the Education and Quality Committee will be held on Thursday 12 May 2022, 10:15 a.m.

CD/DT/KW/DH
May 2022
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