

Agenda

B/22/34

NSS BOARD FORMAL

FRIDAY, 9 DECEMBER 2022 COMMENCING 0930HRS IN BOARDROOMS 1&2, GYLE SQUARE, EDINBURGH (AND VIA TEAMS)

Lead: Keith Redpath, NSS Chair

In Attendance: Lee Neary, Director SPST
Hayley Barnett, Assoc. Dir Governance and Board Services (Board Secretary)
Marc Turner, Director SNBTS
Karen Nicholls, Committee Services Manager [Minutes]

Apologies:

Observers: Matthew Cook, Member of the Public
Ruth Robin, Member of the Public
Fiona Callan, NSS Staff Member
Andrew Beveridge, NSS Staff Member
Natalie Rintoul, NSS Staff Member
Tracey Maxwell, NSS Staff Member
Beáta Jenei, NSS Staff Member
Tracy Bone, NSS Staff Member
Stephanie Knight, Scottish Government
Liz Maconachie, Audit Scotland

0930 – 1100 hrs

1. Welcome and Introductions

2. Items for Approval

- 2.1 Minutes of the previous meeting held on 23 September 2022 and Matters Arising **[B/22/35 and B/22/36]** - **Keith Redpath**
- 2.2 NSS Risk Appetite **[B/22/37]** – **Lee Neary** updated paper will follow post NSS Audit & Risk Committee 6 December 2022



Chair
Chief Executive

Keith Redpath
Mary Morgan

3. Items for Scrutiny

- 3.1 Chairs Report - **Keith Redpath**
- 3.2 Chief Executive's Report - **Mary Morgan**
- 3.3 Integrated Performance Report **[B/22/38]** (Board Paper) – **Lee Neary**

4. Items for Information

- 4.1 NSS Committees Approved and Draft Minutes **[B/22/39]**
- 4.2 Board Forward Programme **[B/22/40]**

5. Any other business

- 5.1 Date of next meeting: Thursday, 9th March 2023 at 09:30 am – Hybrid Meeting

Minutes

Board Services
Area 27
Gyle Square
1 South Gyle Crescent
EDINBURGH EH12 9EB
Telephone 0131 275 6000
Text Relay 18001 0131 275 6000



www.nhsnss.org

NHS NATIONAL SERVICES SCOTLAND BOARD

MINUTES OF MEETING HELD ON FRIDAY 23 SEPTEMBER 2022 IN BOARDROOMS 1&2, GYLE SQUARE, EDINBURGH AND VIA TEAMs DIGITAL PLATFORM AT 0930 HRS

Present:

Keith Redpath, NSS Chair
Lisa Blackett, Non-Executive Director
Julie Burgess, Non-Executive Director
Ian Cant, Employee Director
Gordon Greenhill, Non-Executive Director
Arturo Langa, Non-Executive Director
John Deffenbaugh, Non-Executive Director
Carolyn Low, Director of Finance
Mary Morgan, Chief Executive
Alison Rooney, Non-Executive Director
Beth Lawton, Non-Executive Director
Lorna Ramsay, Medical Director

In Attendance:

Jacqui Jones, Director of HR and Workforce Development
Lee Neary, Director Strategy, Performance and Service Transformation
Jacqui Reilly, Director of Nursing
Neil Redhead, NSS Head of Estates and Facilities [In Private Session]
Karen Nicholls, Committee Services Manager [Minutes]

Apologies:

Observers:

Carol Grant, Audit Scotland
Stephanie Knight, Scottish Government
11 Members of NSS Staff

1. WELCOME AND INTRODUCTIONS

- 1.1 K Redpath welcomed all to the meeting, which was being held in person and with some attendees and observers joining via the TEAMS platform. A warm welcome was extended to the Members of Staff and other Observers who had joined the meeting. Before starting the formal business of the meeting, K Redpath asked the Board Members if they had any interests to declare in the context of the Agenda items to be considered. No interests were declared.



Chair Keith Redpath
Chief Executive Mary Morgan

NHS National Services Scotland is the common name of the Common Services Agency for the Scottish Health Service.

2. MINUTES AND MATTERS ARISING [Papers B/22/26 and B/22/27 refer]

- 2.1 Members discussed the minutes and, subject to minor corrections, these were approved in full.

Action: Board Services to update minute as approved.

- 2.2 Members noted that there were no outstanding actions on the action list. However, an additional action in relation to the updating of the NSS Standing Financial Instructions was to be added to the master document from the previous meeting.

Action: Board Services to add action to master document.

3. NSS ANNUAL FEEDBACK AND COMPLAINTS REPORT [Paper B/22/28 refers]

- 3.1 L Neary spoke to the paper which reported on the feedback and complaints received during the year to 31 March 2022, and noted the governance route to the meeting. L Neary confirmed that all previous comments had been incorporated in this final version.

- 3.2 After a short discussion Members approved the report in full and thanked all those involved.

4. CHAIR'S REPORT

- 4.1 K Redpath took Members through a verbal report and highlighted the following;

- The recruitment for a new Non-Executive Director had now completed and Beth Lawton had now been appointed to the NSS Board as of 1 September 2022;
- Chair's had received an update on the overall system pressures in NHS Scotland with a focus on delayed discharge identified as a major factor;
- The Chair, L Blackett and B Lawton had attended the recent NSS Senior Leadership Forum event and the output from this session would form part of the next Board Development session with the NSS Executive Management Team (EMT);
- Final confirmation of a venue for the forthcoming EMT/Board development session would be provided as soon as possible;
- M Morgan had represented NSS at the service at St Giles Cathedral, Edinburgh following the death of her Majesty Queen Elizabeth II;
- Feedback from the recent NHS Scotland Chair's away day would be provided as soon as available. **Action: K Redpath to share presentations outwith meeting.**

5. CHIEF EXECUTIVE'S REPORT

- 5.1 M Morgan provided a verbal update and noted the following;

Director Recruitment

- Appointment to the Legal Advisor to NHS Scotland had been progressed with interviews held 22 September 2022. An announcement of the successful candidate would be made once due diligence has been completed. The Central Legal Office (CLO) and would continue to report through the finance business unit and Carolyn Low for the foreseeable future.

- The new Associate Director of Governance, Hayley Barnett would start on 3 October and NSS looked forward to strengthening board governance through her appointment.

Events attended:

- NSS held a Senior Leadership Forum on 23 August – attendees were Associate Directors and Partnership Forum members and focussed on the NSS four strategic objectives. There were 67 attendees. Outputs were currently being collated and would form the basis of the Board and EMT development session in October. A follow up event was being planned for 28 November;
- On 8 September, M Morgan and C Low attended the Covid 19 Recovery Committee at the Scottish Parliament to give evidence in respect of the Covid-19 recovery pre-budget scrutiny. Also attending were Dr Nick Phin (PHS) and Dr Graham Foster (Chair of Directors of Public Health). The session was televised and the committee report had now been published;
- A meeting was held with the Chair and Chief Executive of Zero Waste Scotland – to build relationships and to develop mutual support for building the circular economy. There were no specific outputs from this introductory meeting;
- A meeting was held with the Chief Executive of the NHS Credit Union and there was an agreement made to support increasing awareness of this facility for staff, especially at this time of cost of living increases. The respective communications teams were currently working together on how best to increase staff awareness;
- The most recent NSS sponsor meeting had taken place focusing on budgets, but did provide confirmation that feedback on the NSS Draft Annual Delivery Plan would be available by the end of October 2022 and would be published, along with the NSS performance update;
- A video encouraging NSS staff to take part in the Speak Up week, commencing 3 October 2022, had been completed and would be shared imminently.

Additional Resilience matters

- NSS have supported NHS Scotland (Health and Social Care) in the response to the well-publicised cyber-attack on One Advanced who provide a number of health and social care IT systems.

6. FINANCE REPORT [paper B/22/32 refers]

6.1 Members discussed the report in detail and noted the following;

- NSS was still reporting break even at year end and work was ongoing to manage the risks associated with meeting this, due to the major issues within NHS Scotland and the wider economy;
- Further work was underway to manage inflationary pressures and ensuring remaining support to COVID-19 was fully managed within current funding;
- Scottish Government had made it clear that finance would be included in the escalation criteria again (note: this had been excluded during the pandemic);

- There were a significant amount of allocations not yet received but these were being closely monitored with relevant sponsors;
- Further internal controls, and review of spend, were ongoing across the organisation to support break-even. This would include review of agency staff and vacancy management and continued impact of over-time payments in relation to COVID-19 response;
- A full review of service costs was essential in terms of their delivery, cost recovery and impact on other Boards, to ensure they were kept fully aware of any funding implications;
- Financial risks associated with pay increases and rising inflation were being closely monitored;
- The forthcoming NSS resource allocation process this year would focus on the impact of stopping/not implementing previously identified developments, and what the service impact may be as a result. However, it was noted that programmes would continue where there was a clear, positive financial impact in the short to medium term. For example the estates management plans and transformation programme in Practitioner and Counter Fraud Services strategic business unit.

6.2 Members thanked C Low for her detailed report and noted it in full, endorsing the recommendations and actions already underway.

7. ITEMS FOR INFORMATION

7.1 Members were content to note, in full, the contents of the following papers which had been presented for information:

- NSS Committees Approved and Draft Minutes **[B/22/30]**
- Board Forward Programme **[B/22/31]**

7.2 NSS Finance, Procurement and Performance Committee (FPPC) held on 24 August 2022 - K Redpath advised that the item in relation to Meridian Court (discussed at the FPPC meeting) had been removed from the Board agenda as NSS was not currently in a position to formally approve the final business case and this paper would therefore come to a future meeting. **Action: Board Services to add to forward programme.**

8. ANY OTHER BUSINESS

8.1 There was no further public business to discuss.

This concluded the public session of the Board meeting. Members at this point resolved that under Section 5.2 of the NSS Standing Orders it was appropriate to exclude the press and public from its consideration of the remaining agenda items.

IN PRIVATE SESSION – MEMBERS ONLY

9. CLINICAL WASTE MANAGEMENT – [paper IP/22/05 refers]

- 9.1 N Redhead took Members through the in private paper presented. Members discussed the recommendations in full including the purpose of the acquisition. It was noted that whilst NSS would effectively own the property on behalf of NHS Scotland, it would not be responsible for the work done on site, but rather as part of a strategic partnership approach with the commercial entity.
- 9.2 After a detailed discussion Members were content to approve the recommendation to proceed to purchase as outlined in the paper.

Meeting concluded at 1116 hours.

NSS BOARD - Action List 2022/23

[B/22/36]

Formal Meeting held: 23.9.22

Item 4 Chair's Report

Assigned to: Keith Redpath
Action: Circulate slides/feedback from Chair's Away Day September 2022
Deadline: Outwith meeting
Status:

Item 7.2 Items for Information

Assigned to: Board Services
Action: Add Meridian Court item to forward programme for future meeting.
Deadline: Immediately
Status: Complete.

Formal Meeting held: 29.7.22

Item 9.3 Integrated Performance Report

Assigned to: M Neilson/C Low and J Jones
Action: M Neilson, C Low and J Jones to consider including a graph to illustrate the financial impact of staff turnover.
Deadline: Next iteration of the report
Status: Complete for next iteration of the report.

Item 9.4 Integrated Performance Report

Assigned to: Board Services
Action: BS to arrange a development session to look at the presentation of the BAF information.
Deadline: 9.9.22
Status: Complete.

Formal Meeting held: 10.3.22

2022-03-10 Item 4.2 Chief Executive's Report

Assigned to: M Morgan/G Beattie

Action: M Morgan and G Beattie to review risks in relation to the European supply routes and business continuity implications.

Deadline: Outwith meeting

Status: Complete.

2022-03-10 Item 5.1 Integrated Performance Report

Assigned to: All

Action: All to provide feedback on style, content of first version of the IPR.

Deadline: Prior to development session

Status: In progress – see development session 9.9.22

Assigned to: L Neary

Action: LN to liaise with Board Services to identify additional development session.

Deadline: Outwith meeting.

Status: Complete.

2022-03-10 Items for Information

Assigned to: J Jones/A Rooney

Action: Buy back of annual leave discussion

Deadline: Outwith meeting.

Status: Complete.

In Private Session

2022-03-10 Covid Status App

Assigned to: ARC

Action: ARC to follow up on any outstanding actions arising from the ICO's response.

Deadline: Outwith meeting.

Status: Complete.

| | |
|--|--|
| Meeting | NSS Board |
| Meeting date | Friday 9 December 2022 |
| Title | Revised Risk Appetite |
| Paper Number | B/12/37 |
| Responsible Executive/Non-Executive | Lee Neary, Director Strategy Performance & Service Transformation |
| Report Author | Caroline McDermott, Head of Planning |

1. Purpose

- 1.1 The paper is presented to the Board for approval.

2. Recommendation

- 2.2 The Board is recommended to approve the NSS Risk Appetite Statement which is presented after endorsement by the NSS Audit and Risk Committee at their meeting held on 6 December 2022.

3. Executive Summary

- 3.1 The NSS Risk Appetite statement was last approved by the Board in December 2020. Prior to a full review of the Integrated Risk Management Approach the Risk Appetite has been updated to take into account the new Strategic Objectives agreed in February 22. It is recommended that the Risk Appetite remains as follows:

- Business – high
- Clinical – Low
- Information Governance – Low
- Reputational – Medium
- Staff – Medium.

4. Impact Analysis

4.1 Quality/ Patient Care

Patient safety is paramount to NSS and as such it retains a low appetite for clinical risk This has been reviewed by the Clinical Governance and Quality Improvement Committee.

4.2 Equality and Diversity, including health inequalities

There are no specific equality and diversity, or inequalities issues identified within this paper.

4.3 Data protection and information governance

This paper does not include personal data. NSS places high importance on using and handling information properly. Having the correct information when required is vital to patient care and effective service delivery. NSS has set a low risk appetite to safeguard sensitive data and ensure regulatory compliance is maintained.

5. Risk Assessment/Management

5.1 The risk appetite is a fundamental pillar of our Integrated Risk Management Approach.

6. Financial Implications

6.1 None / not applicable for this paper.

7. Workforce Implications

7.1 Staff are critical to NSS achieving its objectives. NSS therefore invests heavily to support and develop its people to thrive and be successful. This medium appetite allows NSS scope to implement initiatives and procedures that seek to inspire staff and support transformational change whilst ensuring it remains a safe place to work. Staff engagement, involvement and empowerment are all themes that emerge from this medium risk stance.

8. Route to Meeting

8.1 This paper was discussed at the NSS Audit and Risk Committee meeting held on 6 December 2022 who endorsed it for approval by Board.

8.2 This paper has been reviewed by the Clinical and HR teams and by the Chief Executive as Accountable Officer.

9. List of Appendices and/or Background Papers

- Appendix A NSS Risk Appetite Statement

Appendix A NSS Risk Appetite Statement (draft Dec 22)

Statement

NHS National Services Scotland (NSS) has a considered and responsive approach to its risk appetite in pursuit of our strategic objectives:

- Service Excellence - We will continuously improve the way in which we deliver existing and new services, with a focus on quality, to ensure they are safe, efficient, effective and meet the needs of our service users, partners and stakeholders.
- Workforce Sustainability - A diverse, knowledgeable and skilled workforce deployed in an environment where the organisation is adaptable to the changing lifecycle of employees and delivers leadership and behaviours reflecting the values of NHS Scotland
- Financial Sustainability - An organisational financial stewardship culture that will drive effective use of assets, infrastructure and value for money
- Climate Sustainability - Embed climate sustainability in everything that we do to ensure that NHSScotland becomes a net zero greenhouse gas emissions health service by 2040 or earlier

Where risks to new and on-going activities are identified, that fall outside our preferred level of risk appetite, NSS will always attempt to mitigate the likelihood or impact of the risk to a level judged to be acceptable in the prevailing conditions. This is in line with the NSS Integrated Risk Management Approach.

Governance

The level of risk which NSS is willing to take is continually assessed and reviewed through the strategic and operational planning process. This includes senior management reviews across all areas, monthly Executive Management Team (EMT) meetings, NSS Board Committees and biannually by the NSS Board. The NSS Risk Appetite will be reviewed by the NSS Audit and Risk Committee and approved by the NSS Board, on an annual basis.

Articulated below are the risk categories and current risk appetite together with an explanation of why.

| Risk Category | Current Risk Appetite | Why |
|------------------------|------------------------------|--|
| Business | High | NSS places high importance on services, processes and on quality improvement. NSS has a high risk appetite aimed at improving its frontline services and the corporate services that underpin them. The high risk appetite also allows NSS to explore opportunities to enable health and care transformation with new services along with innovative approaches. |
| Clinical | Low | Patient safety is paramount to NSS and as such it has a low appetite for clinical risk. |
| Information Governance | Low | NSS places high importance on using and handling information properly. Having the correct information when required is vital to patient care and effective service delivery. NSS has set a low risk appetite to safeguard sensitive data and ensure regulatory compliance is maintained. |
| Reputational | Medium | To sustain a high reputation NSS has set a medium appetite for risk. NSS seeks to conduct its activities in a way that maintains its reputation; mitigating anything that might jeopardise this and result in adverse publicity. Building and maintaining the trust and |

| | | |
|-------|--------|---|
| | | confidence of its existing stakeholder base remains central to NSS values. However, it is accepted that some risk exposure is taken when enabling health and care transformation with new services. |
| Staff | Medium | Staff are critical to NSS achieving its objectives. NSS therefore invests heavily to support and develop its people to thrive and be successful. This medium appetite allows NSS scope to implement initiatives and procedures that seek to inspire staff and support transformational change whilst ensuring it remains a safe place to work. Staff engagement, involvement and empowerment are all themes that emerge from this medium risk stance. |

NHS National Services Scotland

| | |
|---|---|
| Meeting: | NSS BOARD |
| Meeting date: | Friday, 9 December 2022 |
| Title: | NSS Integrated Performance Report |
| Paper Number: | B/22/38 |
| Responsible Executive/Non-Executive: | Lee Neary, SPST Director Carolyn Low, Finance Director Jacqui Jones, HR & Workforce Development Director Julie Critchley, NHS Scotland Assure Director |
| Report Author: | Caroline McDermott, Head of Planning Matthew Neilson, Associate Director SPC |

1. Purpose

- 1.1 The Integrated Performance Report (IPR) provides a summary of NSS service, finance, people, and environmental performance at the end of October 2022 (M7).

2. Recommendation

- 2.1 It is recommended that the Board scrutinise the IPR for M7

3. Executive Summary

3.1 Introduction

NSS performance remains positive with 19 of 27 key performance indicators across service, finance, people and environmental measures achieving or exceeding targets. However, increasing challenges and growing risk and uncertainty in several areas suggest pressures are building that could impact performance.

- Over 80% of our annual delivery plan (ADP) has been achieved or is on track to be achieved with plans being developed to help us achieve the 90% target.
- User engagement scores remain above target although trend analysis is showing a decline in performance since the pandemic.
- All statutory financial targets for 2022/23 are still on course to be met while we continue to experience high levels of financial uncertainty and risk.
- Training levels remain high, but staff absence and turnover are increasing as we account for changes following the removal of NHS Scotland's emergency footing.

We are closely monitoring these areas to ensure we continue to achieve our strategic objectives.

3.2 Satisfaction in our services is variable

The most recent user survey was conducted by Practitioner Services. This saw variable results across dental, medical, ophthalmic and pharmacy services with a high of 87% satisfaction in ophthalmic services and a low of 38% in dental services. Analysis of the dental service results suggest that scores may have been impacted by dissatisfaction with Scottish Government's financial support measures during the COVID-19 pandemic.

Earlier in the year, National Services Division (NSD) saw their results drop below target for the first time with a 67% satisfaction score. User feedback focused on uncertainties about roles and responsibilities, a challenging commissioning environment and issues with communications.

It is noticeable that both dental and NSD service areas paused or reduced their services during the pandemic. The results may therefore reflect challenges and uncertainties as services are fully reinstated, suggesting we need to work more closely with users to better understand the present and ongoing challenges they may be facing and adapting accordingly. Good communications and engagement appear to be a key area of action.

3.3 Financial uncertainty and risk in NHS Scotland and NSS remain high

An NHS Scotland pay deal is still to be agreed (at the time of writing) and there is risk of industrial action. Our initial assumption was for a 2% increase and each additional % increment will cost c£1.8m. Additionally, approximately £120m of expected allocation funding remains outstanding. We continue to engage Scottish Government on these points as further delay reduces the time we have to generate savings or reduce costs to ensure we meet our financial targets through our financial sustainability programme.

Non-pay inflation is at record levels. Electricity costs have increased from £1.5m to £1.66m (10.7%), when comparing this year with last year. Similarly, gas costs have risen with the total cost to NSS increasing by 38% on last year. Although some of the change can be accounted for by the addition of two warehouses, we are also expecting gas prices to rise by 70%. Recent reductions in energy consumption, achieved through climate initiatives, will

have helped limit the impact of price rises. They also show the need for continuing with energy saving initiatives, particularly in under-utilised buildings.

The Scottish Government budget announcement for 2023/24 on 15 December will provide further clarity on funding expectations and savings requirements in the longer term. Meanwhile, NSS will continue to limit additional discretionary spend given the underlying level of risk and uncertainty.

3.4 Emerging staff pressures

NSS staff turnover at the end of October 2022 is 14.1% and the year-end forecast is 23.2%. This unusually high figure is driven primarily by a 45.8% staff turnover rate in the National Contact Centre (NCC), where all staff are on fixed term contracts due to end in January 2023. The high turnover rate, combined with recruitment challenges, has resulted in the use of fixed term contracts (514 employees) and agency staff (203 employees) to cover vacant roles across NSS. HR are working with strategic business units (SBUs) to try and find solutions to our recruitment and retention challenges and have asked SBU Directors to review the position of long-term agency staff.

Sickness absence has risen back to pre-pandemic levels of over 4%. Some of this is the result of changes in the COVID-19 Special Leave policy for all non-patient facing staff as COVID-19 absences are now recorded in sickness absence reporting. However, anxiety/stress/depression remains the most common reason for absence, making up 30% of the cost of absence for October. Discussions have taken place at the Occupational Health and Safety Advisory Committee and the Wellbeing Group on further interventions which may be put in place to support staff suffering with mental health issues. HR continue to work with line managers and support the organisation in proactively managing sickness absence. We will continue to monitor and manage sickness absence with wellbeing support in place for our staff.

Overall, NSS is experiencing pressures on all its strategic objectives. This is not unsurprising given the global and local system pressures created by external factors. However, services remain alert and are responding well.

Service Excellence (Appendix A)

| Key Performance Indicators | Target | This Report | Last Report |
|---|--------|-------------|-------------|
| Annual Delivery Plan Completion (Quarterly – Q2 position) | 90% | 81% | - |
| User Satisfaction Score (Rolling – M6 position) | 70% | 74% | 79% |
| User Effort Score (Rolling – M6 position) | 62% | 63% | 76% |
| Net Promoter Score (Rolling – M6 position) | 0% | 18% | 17% |
| Complaints Responded to Within 3 Days (Quarterly – Q2 position) | 90% | 100% | 98% |
| Staff Behaviour and Attitude Complaints (Quarterly – Q2 position) | 10 | 10 | 15 |

Financial Sustainability (Appendix B)

| Key Performance Indicators | Target | This Report | Last Report |
|--|--------|-------------|-------------|
| NSS Revenue Outturn (Core) (Monthly – M7 position) | £0m | £5.4m | £0.8m |
| NSS Revenue Outturn (COVID-19) (Monthly – M7 position) | £2.5m | £0m | - |
| NSS CRES Savings Total (Monthly – M7 position) | £7.3m | £3.4m | £1.3m |
| NSD CRES Savings Total (Monthly – M7 position) | £10.4m | £5.1m | £0m |
| Capital Outturn (Monthly – M7 position) | £0m | £0.5m | £0m |

Workforce Sustainability (Appendix C)

| Key Performance Indicators | Target | This Report | Last Report |
|--|--------|-------------|-------------|
| Sickness Absence (Monthly – M7 position) | 4% | 4.2% | 3.9% |
| Staff Turnover (Cumulative – M7 position) | 7% | 14.1% | 3.2% |
| Annual Leave Utilisation (Monthly – M7 position) | 100% | 57% | 41% |
| Appraisal Compliance (Monthly – M7 position) | 90% | 78% | 74% |
| Objective Compliance (Monthly – M7 position) | 90% | 79% | 74% |
| Personal Development Plan Compliance (Monthly – M7 position) | 90% | 77% | 72% |
| Statutory Training Compliance (Monthly – M7 position) | 90% | 93% | 95% |
| Mandatory Training Compliance (Monthly – M7 position) | 90% | 94% | 94% |

Climate Sustainability (Appendix D)

| Key Performance Indicators | Target | This Year | Last Year |
|---|---------------|-----------|-----------|
| Domestic Waste Total (tonnes) (Rolling – M4 position) | Reduce | 250 | 248 |
| Domestic Waste to Landfill (Rolling – M4 position) | ≤5% | 0% | 0% |
| Domestic Waste Recycled or Composted (Rolling – M4 position) | >70% | 90% | 81% |
| Fuel National Procurement Fleet CO2 (tonnes) (Rolling – M5 position) | Reduce | 1,360 | 1,380 |
| Fuel SNBTS Fleet CO2 (tonnes) (Rolling – M5 position) | Reduce | 357 | 372 |
| Gas CO2 (tonnes) – metered sites only (Rolling – M4 position) | Reduce | 1,879 | 1,953 |
| Electricity CO2 (tonnes) – metered sites only (Rolling – M4 position) | Reduce | 1,988 | 2,037 |
| Water M3 (volume) – metered sites only (Rolling – M4 position) | Reduce | 13,706 | 13,417 |

4. Impact Analysis

4.1 Quality/ Patient Care

The Clinical Governance Committee provides oversight for all quality and patient care performance.

4.2 Equality and Diversity, including health inequalities

Projects and services associated with the measures covered by this paper are required to carry out an equality impact assessment. There are no specific issues arising from this performance paper.

4.3 Data protection and information governance

This paper contains management information only. All projects and programmes of work covered by this paper are reviewed for any data protection or information governance risks or implications and are therefore reported at a programme/project level. These are therefore not reported in this document.

5. Risk Assessment/Management

5.1 Risks are managed in line with the Integrated Risk Management Approach

6. Financial Implications

6.1 Details within Finance Report.

7. Workforce Implications

7.1 Details within People Report.

8. Route to Meeting

8.1 This paper was discussed at the Executive Management Team at their meeting in November. The supporting reports included in the Appendix have been discussed at EMT and respective Committee meetings.

9. List of Appendices and/or Background Papers

9.1 Appendix A – NSS Service Excellence (M7)
Appendix B – NSS Financial Sustainability (M7)
Appendix C – NSS Workforce Sustainability (M7)
Appendix D – NSS Climate Sustainability (M4/M5)

NSS Financial Performance

October 2022

NHS National Services Scotland Board

Financial Performance – October 2022

Executive Summary



Performance Summary

At the end of month 7, NSS continues to forecast full achievement of all statutory financial targets despite significant and increasing underlying financial risk.

The reported core revenue surplus of £5.4m is driven NSD which is underspent by £4.2m mainly due to lower than planned high cost, low volume risk share activity. Any under spend will be returned to Boards hence the reported break-even forecast. The main area of pressure is SNBTS where savings targets cannot be met in full on a recurring basis – partly driven by inflationary pressures and resource dependencies.

NSS has now received the full C-19 revenue allocation (c£108m) for FY22/23. During M7, the year forecast has improved to a surplus position of £2.5m, predominantly due to a reduction in PPE costs. NSS continues to work in collaboration with SG and Boards to reduce C-19 costs further, with any surplus monies offsetting wider NHS Scotland cost pressures.

The year to date capital underspend (£0.5m) relates to a series of projects (such as Coddington; Radiology; Gartnavel, Curtain Wall & Racking) where actual expenditure is slightly lower than phased budgets.

Key Messages

The level of underlying financial risk and uncertainty is significant for NSS and across NHS Scotland – continued scrutiny of budgets and investment decisions is crucial in FY22/23, as well as further emphasis on Financial Sustainability in the longer term.

NSS continues to retain any available funds at this stage in the financial year given the level of risk and uncertainty.

The recent SG Emergency Budget Review did not place any further savings ask on NSS / NHS Scotland budgets directly in FY22/23 but the delayed UK fiscal statement (17th November) and SG budget announcement (15th December) means that significant uncertainty remains in the immediate financial year.

| NSS Targets | YTD £m | Forecast £m | RAG |
|----------------------------|-----------|----------------|-----|
| Revenue Outturn (Non C-19) | 5,375 | 0 | G |
| Revenue Outturn (C-19) | 0 | 2,507 | G |
| NSS CRES Total | 2,406 | 7,318 | G |
| NSD CRES Total | 5,072 | 10,440 | G |
| Capital Outturn | 0.510 | 0 | G |

Risks and Issues

The pay deal for FY22/23 remains unsettled with a subsequent risk of industrial action. SG is working within a funding envelope of c£400m for NHS Staff pay settlements. It is assumed that NSS will receive increased funding recurrently in FY22/23 (above the current level of 2%). Each additional % increment increases costs by c£1.8m.

Non-Pay inflation is also at record levels. Although this pressure has not materially manifested in the financial position to date, a longer term, recurring impact is anticipated with an average of 6.5% in FY23/24 likely. Our current plans assume underlying inflation at 2%. Each additional % increment will have a resulting pressure of c£0.8m.

In M7, NSS has received a further c£170m revenue funding: including the full C-19 budget (£108.1m) and NSD Risk Share (£39.4m). Despite this, approximately £120m expected allocation funding remains outstanding and we continue to engage with SG colleagues to secure confirmation of outstanding settlements. If funding and pay decisions are not made soon, this reduces the time which NSS has to either (1) generate savings / cost reductions to achieve financial targets in year or (2) advance and commit spending plans in line with accounting rules by 31/3/23.

SG Finance has recently advised that Boards should not enter into any new capital commitments without SG discussion and approval given overall funding pressures across NHS Scotland

NHS National Services Scotland Board

Financial Performance – October 2022

SBU Operational Performance

Main Movements by SBU

SBUs are reporting a total operating under spend of **£5.4m**

PCF – this is the main area of underspend (£4.6m) which is being driven by an NSD Underspend of £4.2m (Specialist Services are £1.4m underspent & Risk Share underspend £2.9m). Any surplus funding will be returned to Health Boards before the end of the Financial Year – the Corporate Finance Network is briefly monthly. Logistics YTD overspend £0.5m, Strategic Sourcing £0.6m and NHS Assure £0.3m underspent YTD, driven by vacancies and in year recruitment challenges. The full year forecast for PCF is a small surplus of £0.2m.

SNBTS - the YTD deficit of £526k is being driven by unmet savings targets (£1.1m) with vacancies in Pay (£0.8m) partially offsetting this pressure. The breakeven year-end forecast position is predicated on budget for HepB and PfMs SG funded underspending projects being retained.

CLO – YTD overspend (£0.1m) through vacancies in fee earning roles. FY forecast overspend of £60k for the year, reduced in-year demand for our Property services as a result of Covid 19 but mitigated by savings from our CLO Office function and potential underspend against budget on the CMS project costs for 22/23.

DaS – currently reporting a YTD surplus of £0.4m - largely due to recharge information which was either not provided or partially complete for a number of services across DaS, resulting in an adverse variance of £1.9m. Finance continues to work with DaS with agreement to set out a clear protocol for month end recharging, including the responsibility and process for DaS to capture information to allow Finance to recharge costs timeously and accurately. This position is partially offset by underspends within National Services, after an ongoing review of year end accruals. Any surpluses with in these areas will need to be managed with SG - Digital Health & Care.

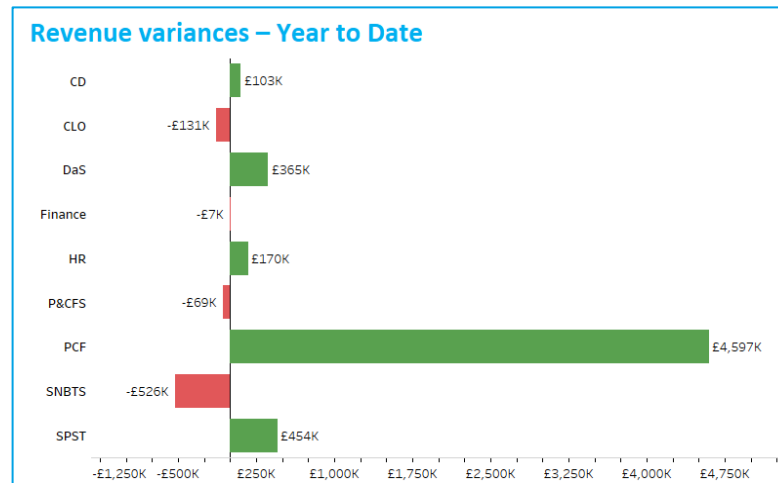
Finance –YTD overspend £7k predominantly driven by planned non-recurrent Blackline cost, covered by an underspend in pay due to vacancies. The investment in Blackline software (non-pay) will generate productivity across the team whilst increase compliance and greater visibility on task delivery.

HR – reporting a YTD underspend £170k - driven by an underspend of £79k on pay, additional Income £51k and Training underspend £46k. The forecast currently assumes £57k underspend and will continue to be monitored closely during Q3 and Q4

P&CFS – the month 7 position is showing a small overspend (£69k). This overspend is due to costs within the Digital Enablement Programme which has been partially offset by income received late for work provided in 21/22. Currently reporting a £20k overspend year end position, due to the Digital Enablement programme which is currently not budgeted for, this will be monitored closely over the next few months, and any change will be reported.

Clinical – YTD under spend (£103k) is being driven primarily by under spends on SG funded programmes. FY £40k underspend related to Pay savings.

SPST - (including T&V) M6 YTD position shows an underspend of £0.5m, driven by an increase in income recovered by PGMS during M4 to M7. The pay underspend is covering the costs of the new Board Secretary and the Public Enquiry team, as well as some pressure within the FMS Programme and the Events team. The T&P current spend is £58m with a YTD break even position, with FY reporting a £1.5m underspend which favourable impacts on the overall NHS Scotland position.



NHS National Services Scotland Board

Financial Performance – October 2022

Revenue Analysis



The main income and expenditure variances largely offset each other – and is due to the way in which the budget has been coded and phased historically. This will be reviewed and improved for FY23/24 onwards to ensure focus on true, underlying variances rather than material variances which offset

Health Board Income - The variance across Health Board Income includes a number of favourable positions - **most of which are offset by corresponding expenditure overspends** as below. Some of the key variances are plasma income; maintenance pass through; oxygen concentrator income; Logistics Income; and also DaS Project Income (PACs, eRostering)

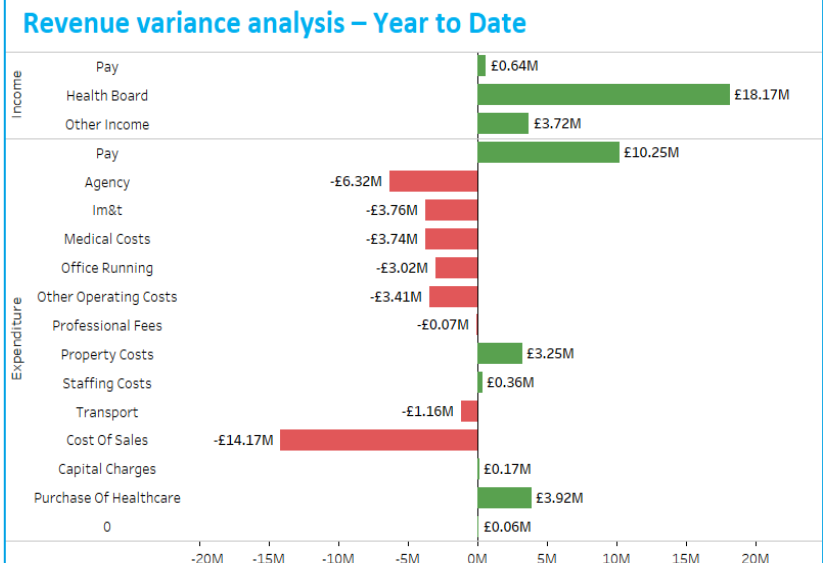
Other Income - Higher income in year than planned from the SWAN, CLO and PGMS

Total Pay – the overall payroll underspend of £5m includes £11m through payroll with a number of vacancies, with £6m spend on agency in filling some of these gaps. The pay position includes £1.8m which has been accrued in relation to the planned pay increase of 2% (which is now likely to settle much higher)

Medical costs - £4m relate to maintenance pass through costs offset against income above.

Other Operating Costs The majority of the adverse position relates to recharge variances which are offset by a corresponding favourable income variance as above.

Cost of Sales relates to plasma products higher costs and increased oxygen concentrator costs, both of which are recharged in full to Boards with no impact to NSS bottom line for FY22/23



NHS National Services Scotland Board Financial Performance – October 2022 COVID-19



Summary

- NSS continues to actively work with SG and Health Board colleagues to support and influence decisions to reduce C-19 costs within the reduced funding envelope. **Whilst all T&P costs will be funded based on spend, all other C-19 funding is capped at £108m, with a c£2.5m surplus currently.**
- Since the start of the Financial Year, the overall forecast cost has reduced by c£17.9m**
- This has largely been within PPE where SG and NSS have reviewed the glove forecast (split between BAU and pandemic)

| | 22/23 SG Funding | 22/23 YTD | 22/23 Forecast | Funding v Forecast | Capital Forecast |
|---|------------------|---------------|----------------|--------------------|------------------|
| Covid-19 Expenditure | | | | | |
| Test & Protect | £000 | £000 | £000 | £000 | £000 |
| Pay costs | | 1,660 | 2,759 | | |
| Non-pay costs | | | | | |
| Contact tracing | | (25) | 108 | | |
| Testing | | 1,294 | 3,319 | | 1,077 |
| Local lab testing | | 8,246 | 62,437 | | |
| Genomic sequencing | | 3,006 | 8,096 | | |
| Digital costs (NSS only) | | 1,417 | 1,715 | | |
| Test & Protect Envelope | 78,435 | 15,598 | 78,435 | 0 | 1,077 |
| Covid-19 | | | | | |
| Additional PPE | | 20,528 | 41,990 | | - |
| Covid-19 Vaccination | | 18,806 | 31,105 | | - |
| Flu Vaccination | | 16,287 | 19,259 | | - |
| Additional Equipment and Maintenance | | 4,629 | 7,853 | | - |
| Other (Clinical Waste, Private Hcare, Oxygen, SNBTS Blood Collection) | | 1,193 | 2,244 | | - |
| Additional Bed Capacity/Change in Usage | | 1,764 | 2,410 | | - |
| Scale up of Public Health Measures | | 222 | 422 | | - |
| Loss of Income | | 0 | 0 | | - |
| Additional Staff Costs (Permanent) | | 75 | 255 | | - |
| Additional Staff Costs (Temporary, overtime, buyout, exit payments) | | 13 | 13 | | - |
| Covid-19 Envelope | 108,057 | 63,518 | 105,550 | 2,507 | 0 |
| Grand Total | 186,492 | 79,116 | 183,985 | 2,507 | 1,077 |

Test, Protect and Vaccinate Update

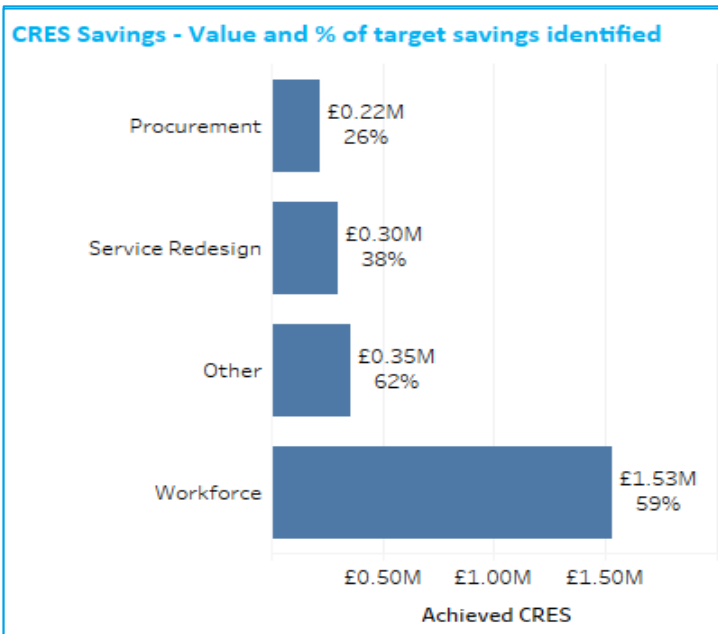
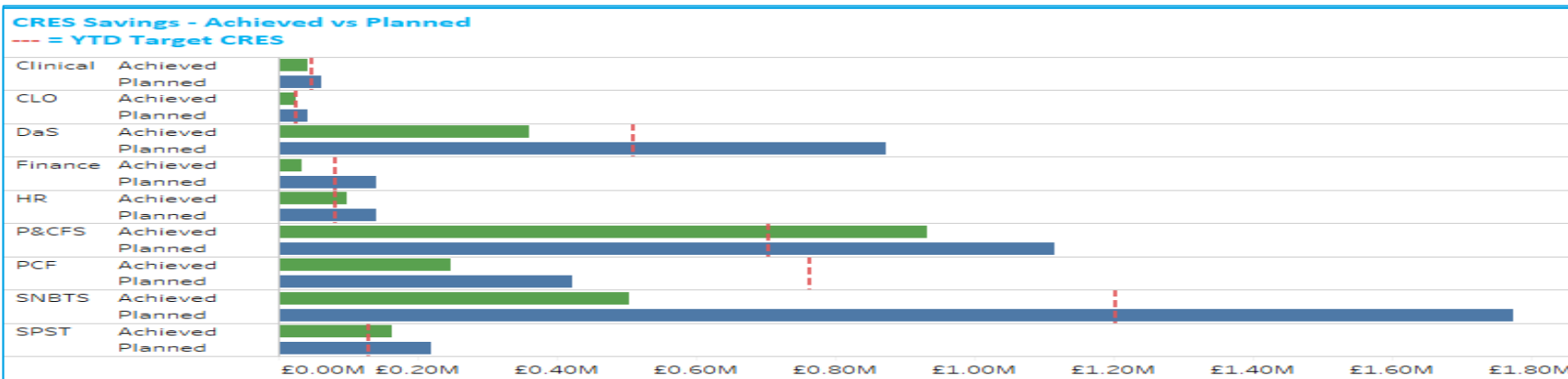
- Expenditure to the end of P7 for Test, Protect and Vaccinate is £56.4m with a forecast break-even position. Test & Protect Allocation of £64m was received P6 with a further £16m to be confirmed in Q4 based on need.
- The new financial year has brought much change in this area as SG transition to an endemic model and still operational delivery questions that remain unanswered. A budget for 22/23 has therefore not been finalised with SG. Questions largely pertain to NCC staffing levels and the position SG wishes to accommodate on the risk / service continuum.
- National contact tracing came to a close at end of April with NCC staff moving to support Flu and Covid Vaccine programmes.
- Although general public symptomatic and asymptomatic testing has ceased, targeted testing pathways including health and social care continued through the first half of the year requiring continuing NSS supply chain and logistics support. These were paused as of 1st October and we await any decision from SG as to whether they will restart during the winter period based on ongoing surveillance programmes.

NHS National Services Scotland Board

Financial Performance – October 2022

Delivery of Cash Releasing Efficiency Savings

In FY22/23, NSS removed 5% budget from SBUs as CRES at the start of the Financial Year so NSS' CRES target is achieved if SBUs achieve a break-even or surplus outturn. The graphs below show how SBUs have evidenced the achievement to date.



The NSD annual savings target is £10.45m – achieved YTD £5.1m and forecasting full target is achieved.

The SBU CRES target is £7.3m – including £4.8m planned savings and £2.5m savings to be identified **which Business Controllers are working with SBU to evidence.**

Despite this, it should be noted that **5% SBU baseline funding is removed from budgets and retained centrally** (to fund cost pressures and priority developments) at the start of the year. A level of non-recurring savings is required to achieve the overall recurring target.

A particular risk has been identified within **SNBTS in terms of the delivery of the recurring CRES target, including the adverse impact of unmet balances carried forward from previous years.** This is driving the current and forecast deficit reported by SNBTS with NSS Reserves providing cover in year for Blood Inquiry costs and Workforce pressures.

NHS National Services Scotland Board

Financial Performance – October 2022

Services delivered on behalf of NHS Scotland



FY22/23 Outturn

- NSS manages services on behalf of NHS Scotland with a **full year budget of £703m.**
- eHealth SLA, Scotcap and MESH are all delivering within plan or small underspends.
- ATOS £450k, PAC's £143k and CHI £284k underspends, but expected to breakeven at year end.
- There are overspends in O365 £64k, eRostering £128k, GP IT £2k & SIBBS £2k, all expect full year breakeven.
- NDC is showing a YTD deficit position of £483k with a forecast break even position for the year.
- Due to the agency relationship which impacts accounting treatment, Rebates have been transferred to the balance sheet and no longer impact the revenue outturn position.

Services delivered on behalf of Scotland - YTD Position

| Hosted Fund | Expenditure | Variance |
|--------------------|--------------|------------|
| ATOS | £19,637,395 | £450,484 |
| CHI | £2,608,930 | £283,817 |
| eHealth | £14,888,318 | £0 |
| eRostering | £791,277 | £-128,000 |
| GP IT | £1,103,045 | £-1,593 |
| MESH | £256,808 | £0 |
| NDC | £135,775,352 | £-483,490 |
| NSD | £169,334,523 | £4,241,176 |
| O365 | £21,823,839 | £-64,075 |
| PAC's | £1,733,186 | £143,436 |
| Scotcap/Cytosponge | £1,161,981 | £0 |
| SIBBS | £63,721,546 | £-2,333 |
| Grand Total | £432,836,200 | £4,439,422 |

NSD

NSD has a YTD under spend of £4.2m – around £2.9m of the under spend relates to the Ultra Orphan Drug Pathway Risk Share Scheme. More specifically, the £2.9m relates to the fact that there have been zero SMA1 births in Scotland, so far this financial year. The other £1.4m under spend relates to specialist services, several of which are still suffering the impact of Covid on activity levels. With various services attempting catch-up in the latter part of the year, it is difficult to forecast a year end position accurately, at this stage. However, should covid activity match anticipated/planned levels in Q3&4, an under spend of around £2.5m to £3.5m is likely, across the portfolio. Q2 data for the vast majority of risk share has been received in the last couple of days. This should allow a much firmer forecast for risk share at the close of P8.

A balanced year end position will be achieved by handing back specialist service under spend, and reducing the risk share allocations, to bring spend in line with funding. **Discussion continues with Boards and SG Finance via Corporate Finance Network each month so that all parties are sighted on forecasts, assumptions and scenarios – so that this is factored into respective financial plans.**

NHS National Services Scotland Board

Financial Performance – October 2022

Scottish Government Funding Allocation Tracker

Outstanding

On the October allocation letter from SG **£170m was received**, including Covid Funding £108m & NSD funding £55m. **A large number of non-recurring allocations are still outstanding**

Business Controllers continue to work with SBUs to understand levels of risk – considering national programmes and the specific impact to NSS.

The RED risks now relate to Covid BAU costs £1.1m – mainly £0.8m SNBTS staff who were recruited permanently during the pandemic. The financial impact of these risks is reflected in our Reserves position given the identified risk

Most allocations are in the AMBER category on the basis that we have been advised to plan for allocations to a similar level to that of FY21/22

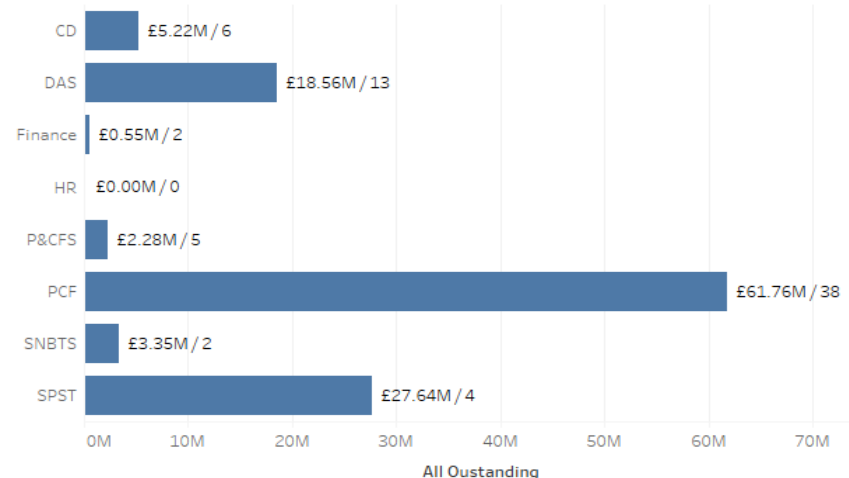
NSS still awaits £1.5m NBC savings return into baseline – this will be allocated to NSS upon confirmation and quantification of full £15m delivery

Review of Recurring allocations to baseline

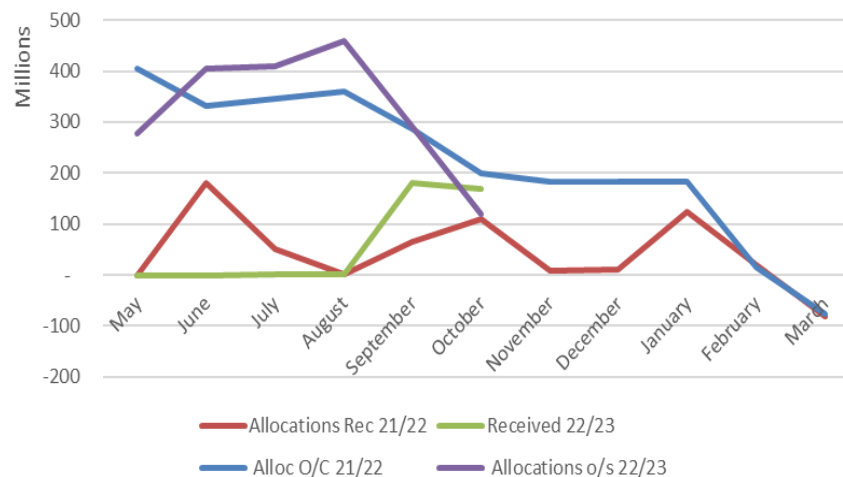
During FY21/22, Finance drafted a paper on transfer of recurring allocations to baseline, in response to Audit Scotland's recommendation on NSS' reliance on non recurring funding.

Despite the economic conditions, SG Finance have advised they still plan to maximise NSS' baseline moving forward where possible

SG Allocations - Outstanding - Total Amount / No. of Allocations



Allocations Received v Outstanding



| SBU | Green | Amber | Red | Total |
|----------|---------------|----------------|--------------|----------------|
| SNBTS | 36 | 2,072 | 1,240 | 3,348 |
| PCF | 7,974 | 53,422 | 366 | 61,762 |
| Reserves | 283 | | | 283 |
| DaS | 1,200 | 17,361 | | 18,561 |
| P&CFS | 1,592 | 689 | | 2,281 |
| SPST | 2,107 | 25,533 | | 27,640 |
| Clinical | 3,570 | 1,651 | | 5,221 |
| Finance | 552 | | | 552 |
| | 17,314 | 100,727 | 1,606 | 119,647 |

NHS National Services Scotland Board Financial Performance – October 2022 Capital Programme Delivery



FY22/23 Outturn

Budget comprising **NSS formula allocation of £2.927m** of which £2.531m has been allocated to recurring requirements/projects £1.610m and slippage from 21/22 of £0.920m. Possible overspends identified in 2 projects of £206k, **leaving funding of £0.202m available.**

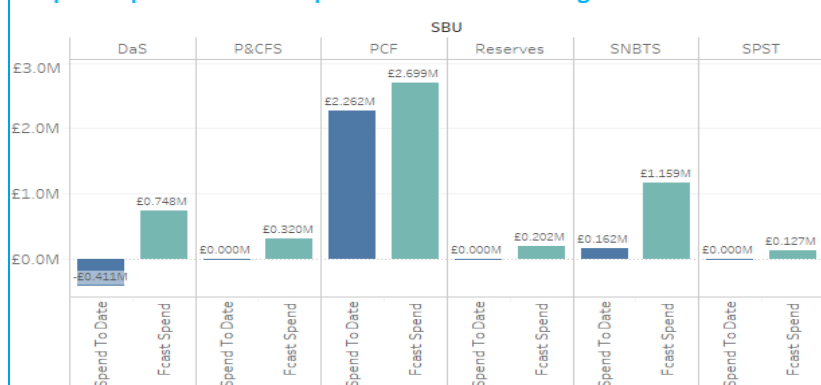
Additional SG funding for equipment of £417k has been confirmed for SNBTS via the National Infrastructure Board (NIB).

SG additional capital of £2.3m is still to be confirmed and includes slippage on warehousing fitout of £1.1m.

Capital Developments – the £0.4m funding confirmed by NIB releases NSS core formula allocation to cover emerging pressures / developments. However, SG Finance has recently advised that Boards should not enter into any new commitments or plans without SG discussion and approval given overall funding pressures across NHS Scotland

| NSS CAPITAL DEVELOPMENT FUNDING | | Budget | FY | Movement |
|-----------------------------------|---|---------------|---------------|------------|
| Opening position | Opening AOP | 2,927 | 2,927 | 0 |
| | Opening position total | 2,927 | 2,927 | 0 |
| Critical projects approved | nDCVP | -155 | -320 | 165 |
| | SNBTS Equipment Rolling Replacement | -450 | -450 | 0 |
| | SNBTS Fleet Modernisation | -105 | -105 | 0 |
| | Breast Screen Unit | -630 | -630 | 0 |
| | DaS Network Replacement | -175 | -175 | 0 |
| | FM CAFEM System | -87 | -129 | 42 |
| | Gartnaval Water Replacement | -514 | -514 | 0 |
| | Curtain Wall Air System Upgrade | -70 | -70 | 0 |
| | Racking & MHE Charging Alterations | -144 | -144 | 0 |
| | eProgesa Semester Patch | -200 | -187 | -13 |
| | Committed | -2,531 | -2,725 | 194 |
| Available for Developments | | 396 | 202 | 194 |
| Projects to be confirmed | eDRM Donor Relationship Mangement Tool | | -170 | 170 |
| | Development of three discreet equipment/eProgesa inte | | -60 | 60 |
| | Order comms bi-directional interface to eTraceline | | -30 | 30 |
| | Hybrid Working - Building changes | | -324 | 324 |
| Capital Funding Remaining | | 396 | -381 | 364 |

Capital Expenditure - YTD Spend versus Revised Budget



| SG CAPITAL DEVELOPMENT FUNDING | | Budget | FY | Movement |
|--------------------------------|--|--------------|--------------|--------------|
| Confirmed | NIB - SNBTS Equipment | 0 | 417 | -417 |
| Awaiting Confirmation | CHI | 3,189 | 1,488 | 1,701 |
| | Radiology | 127 | 127 | 0 |
| | Breast Screen Unit - additional | 135 | 135 | 0 |
| | Covid - Warehousing | 1,077 | 1,077 | 0 |
| | LIMS Software - Vat recovery | -915 | -915 | 0 |
| | Blood Group Analysers x2 | 1,000 | 0 | 1,000 |
| | NSD Capital Funding - to Health Boards | 800 | 800 | 0 |
| Total SG Funding | | 5,412 | 3,128 | 2,284 |

NHS National Services Scotland Board

Financial Performance – October 2022

Reserves Overview



The 2022/23 Financial Plan included provision for a number of **identified opportunities and risks** which more or less offset each other. These are being managed in year within Reserves. Between M6 and M7, the key movement has been (1) 21/22 Surplus £272k has been received and (2) BAU costs previously included within Covid Funding have reduced.

At the end of October, NSS has net revenue resources available of c£2.5m which can be used to mitigate against **significant underlying financial risk** including (1) uncertainty over funding allocations (2) risk of pay increases >5% and (3) record levels of non-pay inflation.

Two key corporate initiatives, MDR compliance and leadership development to support Workforce Sustainability have been identified as priorities for additional investment in the current year. Work is underway to quantify the investment required. **It is recommended that remaining funds are retained** until the SG Budget (15th December), following UK Budget announcement (17th November) provides more clarity. EMT will prepare plans to spend any available revenue and capital funds during Q4 – to enable savings and reduce cost pressures in FY23/24. Any surplus funding at year end in core budget will be returned / offset wider system pressures.

| | Opening Assumptions | SEPT EMT | OCT EMT | NOV EMT | |
|--------------------------------------|---------------------|------------------|------------------|------------------|--|
| Available Revenue Funding | 465,335 | 638,335 | 638,335 | 831,594 | Likely opportunities which have occurred transferred here |
| Likely Opportunities | 4,585,000 | 4,512,000 | 4,780,000 | 4,508,000 | incl £1m contingency, £1m Depreciation, £0.75m A/L, WRP £0.6m |
| Maximum Available | 5,050,335 | 5,150,335 | 5,418,335 | 5,339,594 | |
| Likely Risks / Pressures | | | | | |
| SNBTS Deficit | 550,000 | 0 | 0 | 0 | Currently forecasting Breakeven |
| 21/22 Underspend | 272,000 | 272,000 | 272,000 | 0 | Received M7 |
| Inventory Mgt System | 633,700 | 633,700 | 633,700 | 633,700 | Cost Pressure - funding received from SG capped at £600k |
| 5% Impact of Pay rise | 5,610,000 | 0 | 0 | 0 | SG Funding to 5% |
| SG Allocations at Risk | | 0 | 0 | 0 | |
| UK Blood Inquiry | 650,000 | 650,000 | 650,000 | 650,000 | Funding at Risk - NSS able to cover in 21/22, included in Developments |
| 800 Laptops | 490,560 | 603,630 | 603,630 | 603,630 | Delivery April 22, so 22/23 |
| CHI and CH - Value for Money | | | | | Assumed SG funded |
| Covid - Public Enquiry | | | 112,000 | 0 | Public Enquiry costs £245k less SPST Underspend |
| Covid - SNBTS Blood Collection Staff | | | 836,000 | 859,000 | Recruited permanently due to changes to how SNBTS collect blood |
| Covid - Catering Income | | | 160,000 | 0 | Reduced footfall, Catering review under way to mitigate costs |
| | | | | | |
| Total Risks / Pressures | 8,206,260 | 2,159,330 | 3,267,330 | 2,746,330 | |
| Net Position Revenue | - 3,155,925 | 2,991,005 | 2,151,005 | 2,593,264 | |



NSS
Finance

NSS People Report – October 2022

Headcount

The current headcount for NSS is 3,490 and the total WTE is 3,233.5, last month there were a total of 3,569 staff with a WTE of 3,135.8. Please note the headcount on the dashboard does not include agency/bank staff.

Agency Staff and Fixed Term

There are currently 203 agency employees across NSS, the majority of these are within PCF (117), SPST (39) and DaS (30). There are a total of 514 employees on fixed term contracts. There were 589 fixed term staff last month. The majority of these are within NCC (280), DaS (68), PCF (47) and SNBTS (44). There are 85 fixed term contracts expiring in the next six months, 46 of which are due to expire in March 2023 alone.

Sickness Absence

The year to date sickness absence rate as at October is 4.19%. September's figure was 4.24%, 0.24% over the NSS target. Long term year to date absence is at 2.73% and short term absence is 1.47% as at October 2022. Sickness absence rates are now in line with Pre-Pandemic figures of more than 4%. With the end of the Covid Special Leave policy for all non-patient facing staff, the regular sickness absence data is now reflective of the inclusion of COVID-19 absences. Absence cost was £348k in October 2022. September 2022's cost was £337k. The total cost of absence this financial year is £2.15m, this time last year it was £1.75m. Anxiety/stress/depression remains the most common reason for absence, making up 30% of the cost of absence for October. 'Cold, cough, flu - influenza' and 'Covid related illness' were the second and third most common reasons.

Statutory Training

Compliance with 3 Year Mandatory Training is at 94% (no change from last month) and Statutory Training is at 93% (+1% from last month). This increase is due to only one out of 10 SBUs now being non compliant in the Fire Safety course instead of four non compliant SBUs last month.

Appraisal/PDP/Objectives

The compliance rates are currently at 78% for Appraisal, 77% for PDP and 79% for Objective. Appraisal compliance increased by 1% whilst PDP and Objectives remained the same.

Turnover

NSS turnover at the end of October 2022 is 14.12%. Using historical data to predict future turnover, the turnover year end forecast is 23.23%, well above the agreed target of 7%. SPST NCC has a year to date turnover rate of 45.8%. HR and Finance have turnover rates of 9% and 11%, respectively.

COVID-19 Special Leave

The cost of COVID-19 special leave in October is £8.9k with a total of 690 hours lost. September 2022 recorded an absence cost of £9k and 608 hours lost. The total COVID-19 special leave cost for this fiscal year is £598.2k.

Statistical Process Control

The total year to date sickness absence rate for October was 4.19%. Last month it was 4.24%, breaching the 4% NSS target by 0.24%. The total monthly sickness absence rate is 5.16%. Last month's total was 4.96%. The increase in rates coincides with historical seasonal sickness absence trends and the recent inclusion of COVID-19 in regular absence reporting processes. Sickness absence rates historically rise after each reporting month due to retrospective absence updates from line managers to SSTs. HR re-run sickness absence reports each month to maximise accuracy and capture retrospective changes.

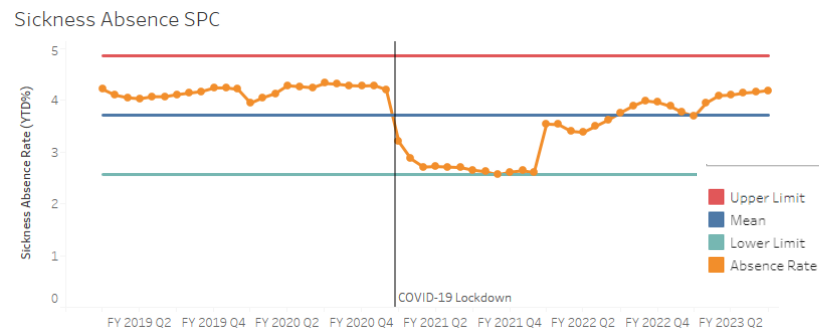
NSS Sickness Absence is sitting above the mean of 3.71%. **HR, DaS, Finance** and **P&CFS** are sitting between the Lower Control Limit and Mean. **CLO, Clinical, PCF, SNBTS** and **SPST** are sitting between the mean and the upper control limit. **PCF** recorded an absence rate of **6.62%** in October 2022, 2.62% above the 4% target, and close to exceeding **PCF's** upper control limit of 6.95%. PCF's year to date absence was 6.75% last month. HR are working with PCF to develop interventions to improve sickness absence levels. SNBTS has a year to date sickness absence rate of 4.56%.

Forecast - Based on the previous three years of absence data, year to date sickness absence is forecast to finish the year at 3.48%. The final figure is predicted to be as the forecast calculation includes lower than average COVID-19 absence periods, specifically in 2019/20.

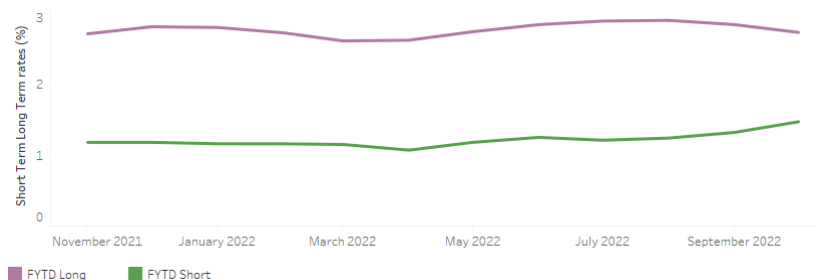
Long and Short Term Absence - October 2022 recorded a Long Term year to date sickness rate of 2.73% (2.91% last month), with Short Term year to date absence recording 1.47% (1.33% last month).

Trends & 5 Year Comparison - Sickness absence data is now performing similarly to Pre Pandemic levels. The sickness absence rate this month is 4.19%, compared to 4.33% in October 2019. October 2018 recorded an absence rate of 4.11%.

PCF Year to Date Total Sickness Absence SPC



NSS Long and Short Term Year to Date Absence Rates



Year to Date Absence Data, 5 Year Comparison

| | | Year to Date Absence Data, 5 Yearly Comparison | | |
|-------|---------|--|------------------|-------------|
| | | Long Term YTD % | Short Term YTD % | Total YTD % |
| 18/19 | October | 2.51% | 1.48% | 4.11% |
| 19/20 | October | 2.87% | 1.46% | 4.33% |
| 20/21 | October | 1.82% | 0.82% | 2.65% |
| 21/22 | October | 2.63% | 1.12% | 3.76% |
| 22/23 | October | 2.73% | 1.47% | 4.19% |

■ Covid 19 Pandemic
 ■ Previous Year
 ■ This Month

Sickness Absence Cost

October's cost of absence was £348k for NSS. September 2022 recorded costs of £337k. October 2021 recorded a cost of £356k. Retrospective absences entered onto the system account for an average increase of 15-25% in hours lost and subsequent costs, which impacts the current month reporting figure. The total cost of absence this financial year is £2.15m, this time last year it was £1.75m.

'Covid related illness' is now included in the absence data and subsequent sickness absence cost data. 'Covid related illness' accounted for £26.3k cost of absence (£30.5k last month) and 1,654 hours lost (2,100 hours lost), representing 8.7% and 8.3% of both measures respectively, and was the third most common absence reason. There are COVID-19 instances in Special Leave amounting to £8.9k and 690 hours this month.

The cost of absence is higher each month of this fiscal year than the last fiscal year, underlined by an overall yearly point in time increase of 40% in hours lost. This financial year there has been 151,328 hours lost, compared to 108,075 hours lost by this time last year.

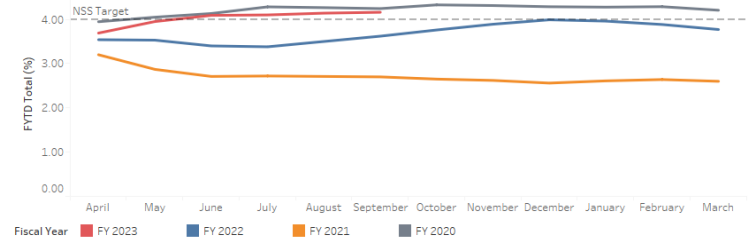
The top five absence reasons for October make up 64% of the cost of absence for the month, **these are listed in the graphic to the right.**

Last month's report noted '**Anxiety/Stress/Depression**', '**Covid Related Illness**' and '**Other Known Causes – Not Otherwise Classified**' as the top three reasons for absence (in order of cost).

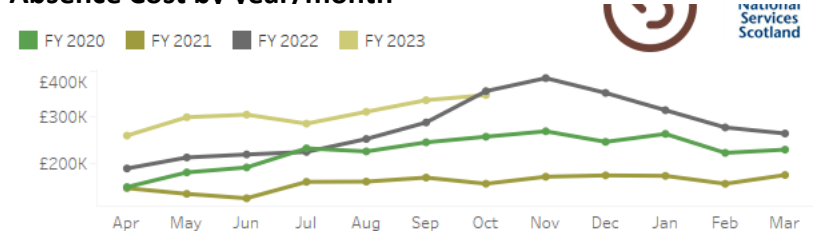
The SBUs with the highest cost and number of hours lost this month are those with the highest proportion of frontline workers (% total of this month):

- **PCF** - £113.9k cost (33%) and 8,801 absence hours (35%).
- **SNBTS** - £94.3k (27%) and 7,334 absence hours (28%).

Absence rate by month and year



Absence Cost by year/month



Top 5 most common absence reasons this month

| | | |
|---|----------|--------|
| Anxiety/stress/depression/other psychiatric illnesses | £104,204 | 29.79% |
| Cold, cough, flu - influenza | £35,541 | 10.16% |
| Covid-related illness | £34,646 | 9.91% |
| Other known causes - not otherwise classified | £24,846 | 7.10% |
| Back problems | £23,368 | 6.68% |

Absence Cost summary

| Current month | Current FY | Previous FY | Cost of absence |
|---------------|------------|-------------|-----------------|
| £347,874 | £2,149,866 | £1,748,129 | |
| 25,387 | 151,328 | 108,075 | Hours lost |

*The Hours Lost report (from where Cost of Absence is derived) is based on current employees only. Therefore, an employee on long term sick who leaves following case management would not be included in the following months hours lost and absence cost report.

*Employees estimated cost of absence is calculated using their current salary per hour.

COVID-19 Special Leave

Monthly Special Leave

There were 14 Special Leave requests relating to COVID-19 in October 2022. 100% (14) of the requests were due to 'Covid Positive' requests. In October 2022 there were 12 requests in total.

10 of the 14 absence episodes were from staff in SNBTS and PCF, equating to 72% of October's absences. Please note that each month's figure is impacted by retrospective manager data input.

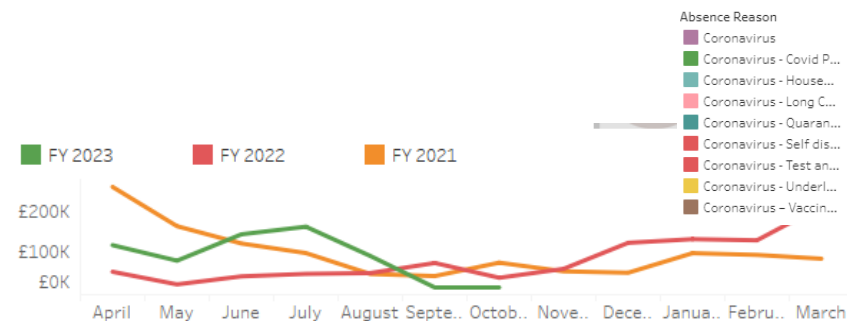
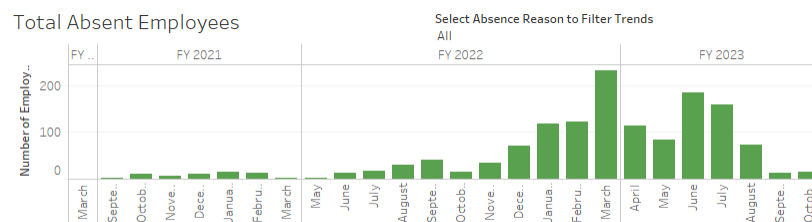
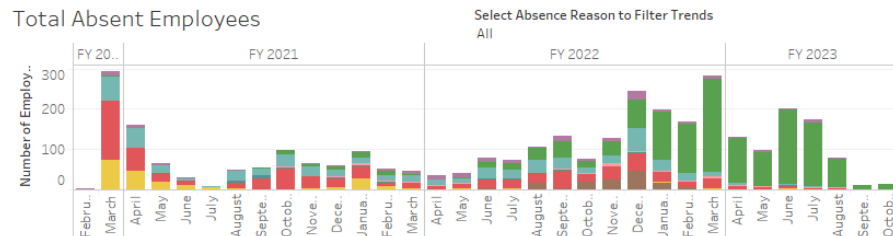
Removal of Temporary COVID-19 Policies

As of 1 September the temporary COVID-19 policies involving Special Leave absence recordings were removed. There were 12 instances of COVID-19 positive results recorded in Special Leave in October 2022.

HR & Workforce Development have created a new monthly reporting process in order to check that the new approach to COVID-19 is being adhered to and where possible ensure that manager's record absences correctly. This will ensure that COVID-19 absence is recorded as sickness absence where appropriate.

Absence Cost

The cost of COVID-19 special leave in October is £8.9k with a total of 690 hours lost. September 2022 recorded an absence cost of £9k and 608 hours lost. The total Special Leave COVID-19 cost for this fiscal year is £598.2k. These figures are subject to change if it is identified that managers have been incorrectly inputting Special Leave where in fact Sickness Absence was the correct recording method.



Case Management

Case Management

There are currently 132 active cases, with eight cases opened and 10 cases closed in October 2022. There were 137 cases active in September, therefore the active caseload has decreased by five cases.

Case data is updated retrospectively on a frequent basis and data quality checks can be actioned which, in addition to cases opened and closed that month, helps explain the change in numbers between each monthly report.

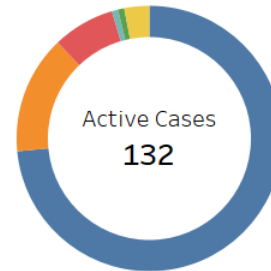
Following the removal of COVID-19 Special Leave interim measures it is expected that the number of cases could rise.

Absence Triggers

There are a total of 231 employees who have breached sickness absence triggers this month, of which 49 (22%) have active cases with HR. A total of 555 employees have reached an absence trigger in the rolling year, of which 129 (23%) have active cases with HR.

COVID-19 absence data is now included in the sickness absence reports, therefore COVID-19 related absences are likely to cause an increase in triggers.

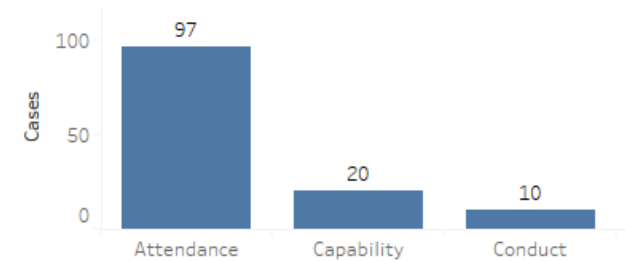
Active Cases



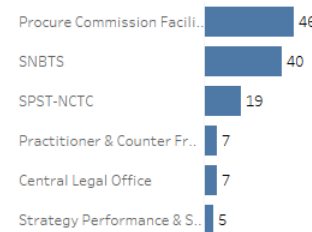
109 employees have reached a **28+ day** trigger in the current month

122 employees have reached a **4+ episode** trigger in the current month

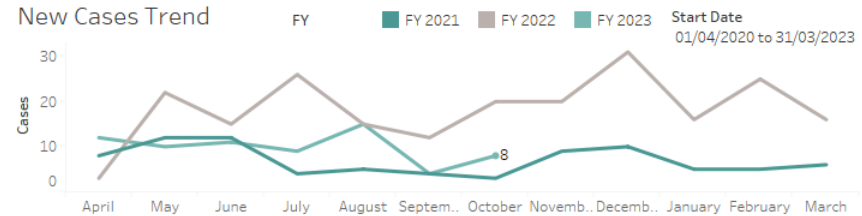
Case by Category



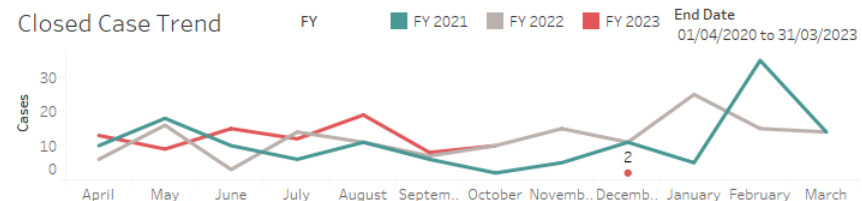
Active Cases per SBU



New Cases Trend



Closed Case Trend



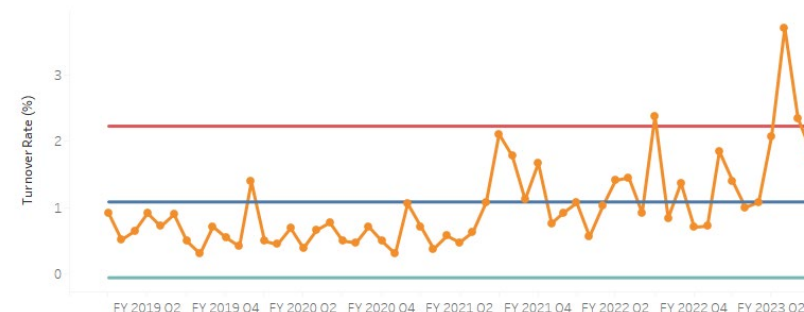
Turnover

NSS turnover year to date position is 14.12% as at October. Turnover currently indicates a year end forecast of 23.23%, above the agreed target of 7%. Last month the year to date turnover was 12.16%. The Turnover percentage includes bank staff. Of the 333 employees who left this financial year, 53% were on a Permanent contract and 47% were on a Fixed Term contract.

Turnover Insights

- Similarly to last year SPST NCC is having a significant impact on the overall NSS Year to Date Turnover percentage. Last year's NCC Turnover was 17.8%. This year at October it is 45.8%. This includes both regular staff and bank staff. In October alone the figure was 7.6%.
- Finance and HR have a higher than average Year to Date Turnover Rate however this is due to eight staff leaving each SBU and this represents a high percentage due to their relatively small headcounts of around 70-80 and 90-100 staff.

Turnover SPC



New starts and leavers by SBU

| Division | Count leavers in FY (overall) | Count leavers in current month (overall) | Count new starters in FY (overall) | Count new starters in current month (overall) |
|---|-------------------------------|--|------------------------------------|---|
| Central Legal Office (Div/CHP) | 4 | 0 | 10 | 0 |
| Clinical (Div/CHP) | 0 | 0 | 8 | 1 |
| Corporate & Clinical Affairs (Div/CHP) | 0 | 0 | 0 | 0 |
| Digital and Security (Div/CHP) | 30 | 1 | 22 | 3 |
| Finance (Div/CHP) | 8 | 0 | 3 | 0 |
| HR & Workforce Development (Div/CHP) | 8 | 0 | 3 | 1 |
| NSS Workforce Resources (Div/CHP) | 0 | 0 | 0 | 0 |
| Practitioner & Counter Fraud (Div/CHP) | 17 | 2 | 17 | 2 |
| Procure Commission Facilities (Div/CHP) | 40 | 3 | 41 | 7 |
| Public Health Scotland (Div/CHP) | 0 | 0 | 0 | 0 |
| SNBSTS (Div/CHP) | 76 | 9 | 66 | 7 |
| SPST-NCTC (Div/CHP) | 131 | 3 | 0 | 0 |
| Strategy Performance & Service Transformati.. | 19 | 4 | 9 | 1 |
| Grand Total | 333 | 22 | 179 | 22 |

Turnover by SBU

| SBU | Current month Turnover | Current Turnover YTD |
|---|------------------------|----------------------|
| Central Legal Office (Div/CHP) | 0.00% | 2.53% |
| Clinical (Div/CHP) | 0.00% | 4.00% |
| Digital and Security (Div/CHP) | 0.45% | 7.42% |
| Finance (Div/CHP) | 0.00% | 11.11% |
| HR & Workforce Development (Div/CHP) | 0.00% | 8.96% |
| Practitioner & Counter Fraud (Div/CHP) | 0.85% | 4.30% |
| Procure Commission Facilities (Div/CHP) | 0.74% | 5.88% |
| SNBSTS (Div/CHP) | 1.38% | 8.60% |
| SPST-NCTC (Div/CHP) | 7.61% | 45.80% |
| Strategy Performance & Service Transformation (Div/CHP) | 0.76% | 7.50% |
| NSS (Div/CHP) | 1.86% | 14.12% |

Reason for leaving

| Leaving Reason | Count leavers in FY (overall) | Count leavers in current month (overall) |
|--------------------------------------|-------------------------------|--|
| Death In Service | 3 | 0 |
| Dismissal | 3 | 0 |
| End of FTC | 36 | 1 |
| Ill Health | 1 | 0 |
| New Employment with NHS outwith Sc.. | 6 | 1 |
| New Employment with NHS Scotland | 50 | 6 |
| Other | 77 | 4 |
| Retirement - Age | 43 | 2 |
| Retirement Other | 15 | 1 |
| V.E Retirement+Actuarial red. | 1 | 0 |
| Vol. Resignation - Lack of Opps. | 3 | 0 |
| Vol. Resignation - Other | 98 | 7 |
| Vol. Resignation - Promotion | 9 | 0 |

Agency Length of Service

Agency

There are currently **203 (203 WTE)** agency employees across NSS. There were **209** agency staff last month.

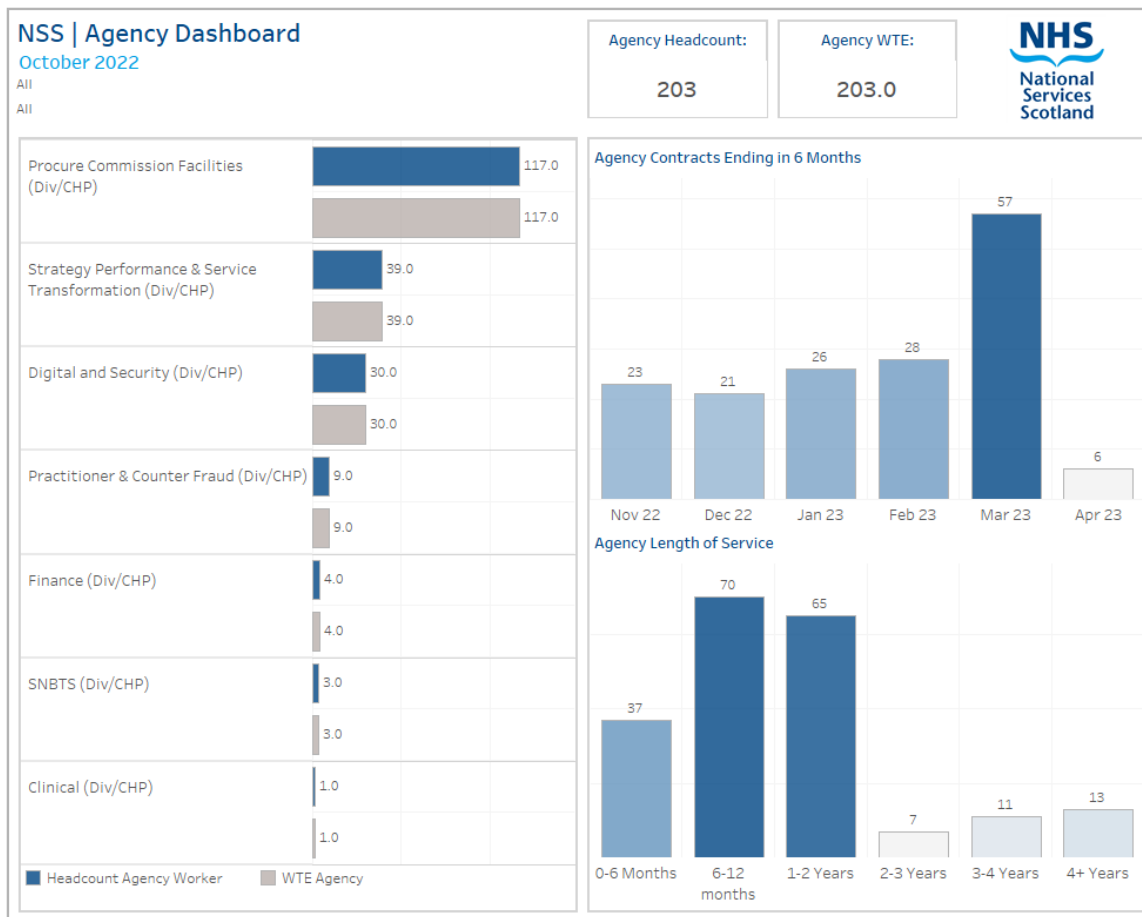
The majority of these are within:

- **PCF – 117 (123 last month)**
- **SPST – 39 (40 last month)**
- **DaS – 30 (30 last month)**

135 (66%) of agency contracts are due to end within the next six months.

13 agency employees have been with NSS for more than four years (13 last month). Further detail of the 13 staff are listed below:

- Clinical (Div/CHP) - 1
- SNBTS (Div/CHP) - 1
- Digital and Security (Div/CHP) - 4
- Procure Commission Facilities (Div/CHP) - 7



Fixed Term Length of Service

Fixed Term

There are a total of **514 (421.7 WTE)** employees on fixed term contracts. There were **589** fixed term staff last month.

The majority of these are within:

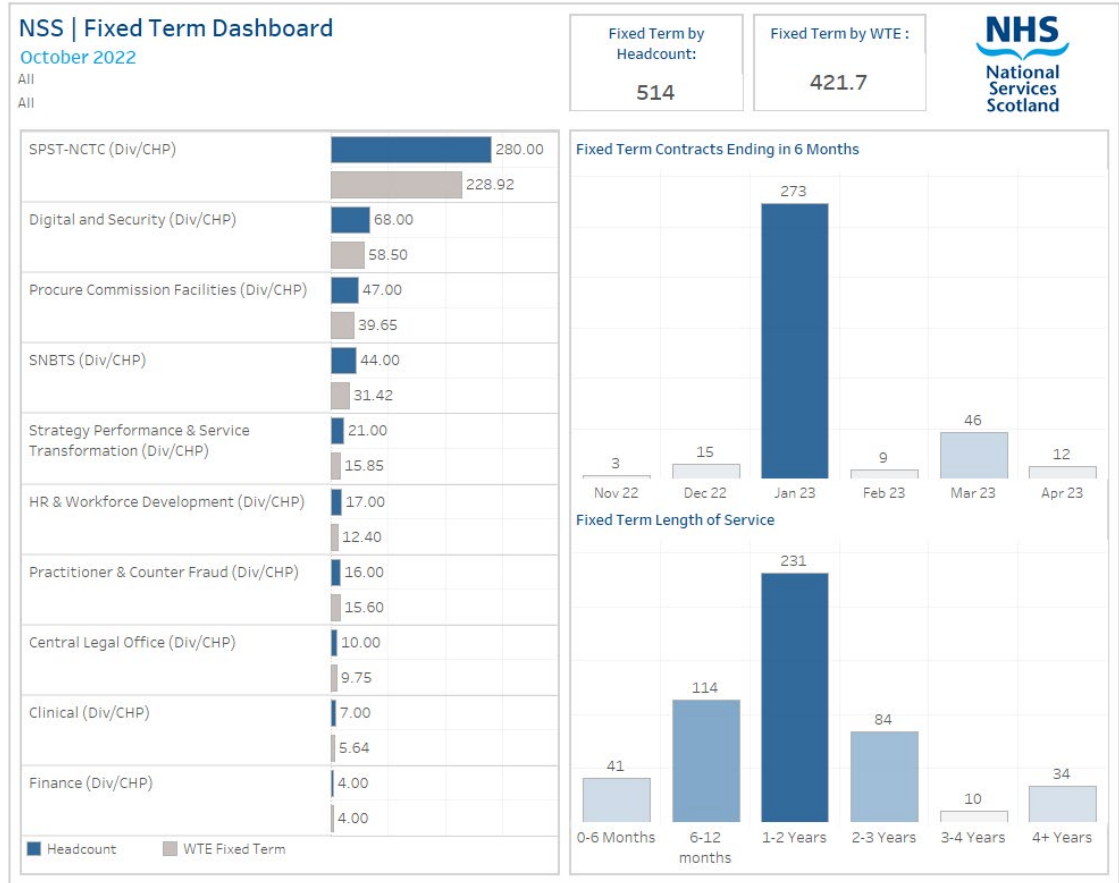
- **NCC - 280 (348 last month)**
- **DaS - 68 (71 last month)**
- **PCF - 47 (48 last month)**
- **SNBTS - 44 (46 last month)**

85 of the **514 (16.5%)** fixed term contracts are due to end within the next six months.

August's People Report stated that there were 607 fixed term employees and that 290 contracts were due to expire in September 2022. The report also stated that NCC had 374 fixed term contracts.

SPST - NCC accounts for 280 of the total 514 staff members on Fixed Term Contracts (54%). In particular, 260 of the 280 employees have fixed term contract end dates of 31 January 2023.

34 fixed term employees have been with NSS for more than four years. **315** of the total **514** fixed term staff have been in the organisation between one to two years.



Redeployment

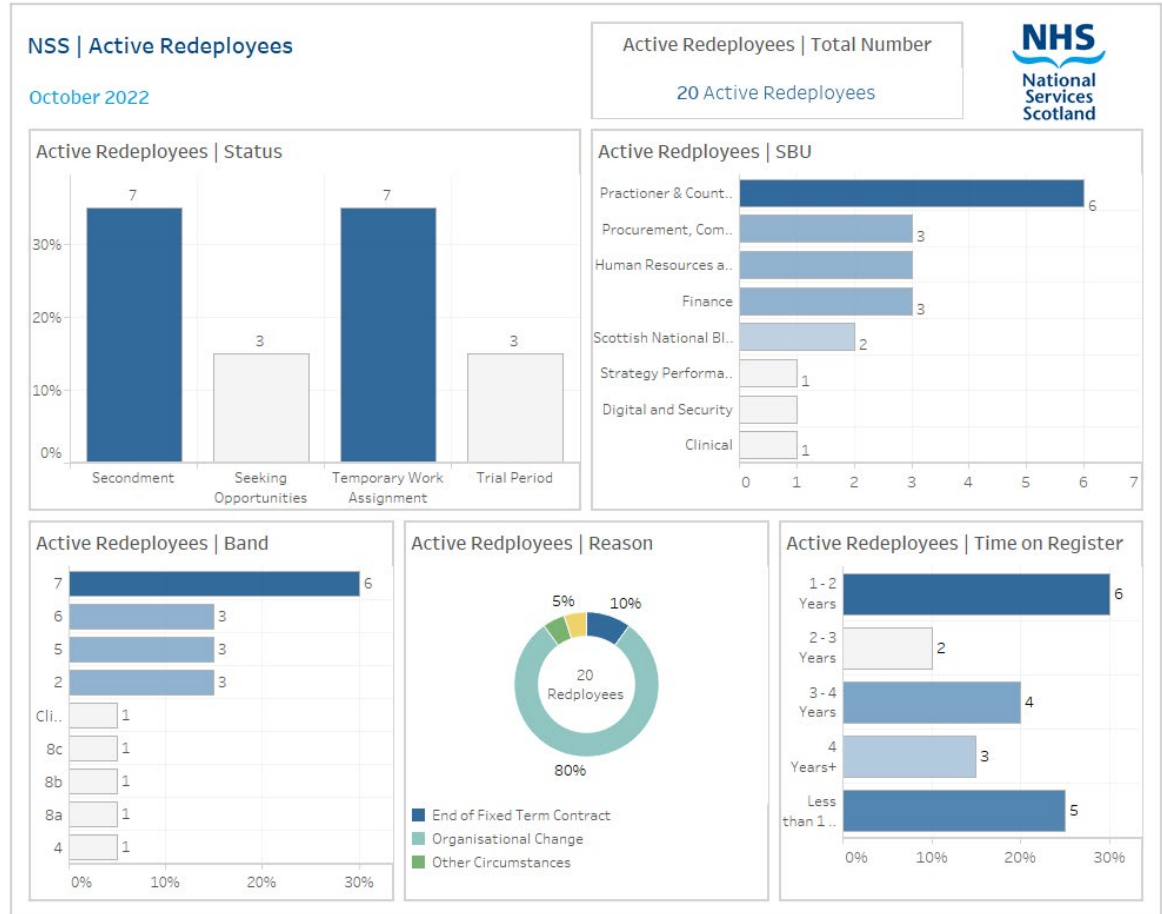
Highlights

Currently there are **20** Active Redeployments within NSS (three less than last month). Of those on active redeployments:

- **Seven** staff are on temporary work assignments.
- **Seven** are on secondment.
- **Three** are seeking opportunities.
- **Three** are on a trial period.
- **45%** are from P&CFS and PCF.
- **26%** have been on the register for less than a year and **15%** have been on for over four years.

Additional Information

The total number of redeployees this fiscal year is 13. Since then, five have been successfully redeployed and four are still active.



Recruitment

There have been **284** jobs advertised year to date (based on a closing date within the current fiscal year), with **20** new jobs posted in October. There has been a total of **420** vacancies – 65% of vacancies relate to permanent posts and 30% fixed term or secondment. SNBTS and PCF account for **167** of the **250** jobs (60%).

The current average time to hire for the last two years (24 month rolling sample), inclusive of HR and Hiring Manager involvement, is **65** working days.

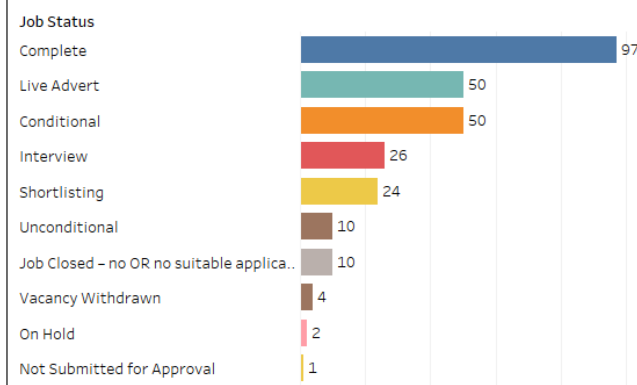
Included within this timeframe is:

- **20** working days for time to advert (no change from last month).
- **2** working days on average for managers to complete shortlisting and recommend candidates for interview.
- **15** working days between the candidate’s interview notification email to manager offering the job to successful candidate (accounts for full interview process - no change from last month).
- **15** working days for pre employment checks to be completed (-1 day from last month’s report) – this stage includes full recruitment pre employment process sign off including references (two if external, one if internal), occupational health pre placement sign off and Disclosure Scotland checks (if required).

Jobs and Vacancy Breakdown by SBU

| Job Division | Count Job Reference | Number of Vacancies |
|--|---------------------|---------------------|
| Central Legal Office (Div/CHP) | 6 | 9 |
| Clinical (Div/CHP) | 6 | 6 |
| Digital and Security (Div/CHP) | 43 | 92 |
| Finance (Div/CHP) | 8 | 10 |
| HR & Workforce Development (Div/CHP) | 12 | 15 |
| Practitioner & Counter Fraud (Div/CHP) | 24 | 27 |
| Procure Commission Facilities (Div/CHP) | 93 | 151 |
| SNBTS (Div/CHP) | 74 | 97 |
| SPST-NCTC (Div/CHP) | 1 | 1 |
| Strategy Performance & Service Transformation (Div/..) | 7 | 12 |

Job Status



Timeline (Working Day Averages)



Note: in October 2022 report the time to hire analysis period moved from the full job train data set over four years to the ‘last two years’ or 24 month rolling sample. This provides a more accurate and recent time to hire and reflects improvements in recruitment processes.

Mandatory/Statutory Training

At NSS level, both 3 Year Mandatory Training and Statutory Training Compliance are above the 90% target at 94% (no change from last month) and 93% (+1% from last month).

Category level insights:

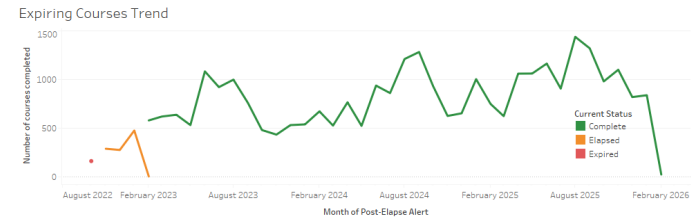
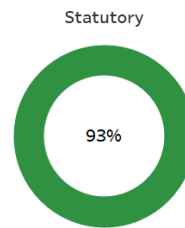
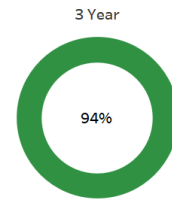
- One SBU is non compliant in the Statutory category and one SBU non compliant in the 3 Year course category. Last month there were four SBUs non compliant in the Fire Safety Statutory course.

Course level insights:

- DaS** are compliant in four out of nine courses. (no change from last month)
- DaS** is non compliant on **NSS: Fire Safety (Statutory)**.
- Finance, PCF, SNBTS** and **P&CFS** are now non-compliant in one course.
- CLO, Clinical, HR** and **SPST-NCC** are fully compliant in all courses.

The tables show compliance rates by category and course for each SBU.

Bank Staff (**NCC Bank**) Learning is at 82% for 3 Year Compliance (+1%) and 91% for Statutory Compliance (+1%from last month), seven out of nine courses are non compliant.



| | | |
|---|-----|-----|
| Strategy Performance & Service Transformation | 92% | 91% |
| SPST-NCTC | 96% | 98% |
| SNBTS | 93% | 95% |
| Procure Commission Facilities | 94% | 90% |
| Practitioner & Counter Fraud | 95% | 93% |
| HR & Workforce Development | 95% | 94% |
| Finance | 95% | 97% |
| Digital and Security | 89% | 88% |
| Clinical | 93% | 94% |
| Central Legal Office | 95% | 94% |

| | NSS: Equality and Divers.. | NSS: Freedom of Informa.. | NSS: Health and Safety Induction | NSS: Information Governance.. | NSS: Manual Handling P.. | NSS: NHS Scotland Counter Fr.. | NSS: Risk and Resilience | NSS: Standing Financial I.. | NSS: Fire Safety |
|---------------------------|----------------------------|---------------------------|----------------------------------|-------------------------------|--------------------------|--------------------------------|--------------------------|-----------------------------|------------------|
| Central Legal Office | 96% | 93% | 93% | 99% | 98% | 96% | 96% | 92% | 94% |
| Clinical | 94% | 90% | 90% | 90% | 97% | 97% | 90% | 93% | 94% |
| Digital and Security | 90% | 89% | 88% | 92% | 91% | 91% | 86% | 85% | 88% |
| Finance | 97% | 97% | 92% | 96% | 99% | 100% | 94% | 88% | 97% |
| HR & Workforce Delv.. | 95% | 95% | 94% | 94% | 97% | 97% | 94% | 93% | 94% |
| Practitioner & Counter .. | 95% | 96% | 96% | 97% | 95% | 97% | 94% | 91% | 93% |
| Procure Commission F.. | 95% | 95% | 95% | 95% | 95% | 95% | 93% | 89% | 90% |
| SNBTS | 93% | 93% | 94% | 96% | 96% | 96% | 92% | 88% | 95% |
| SPST-NCTC | 97% | 96% | 95% | 99% | 98% | 98% | 94% | 95% | 98% |
| Strategy Performance .. | 94% | 92% | 91% | 94% | 93% | 93% | 91% | 88% | 91% |

Whistleblowing

Please see the table for current compliance figures for employees and managers combined. Please note that the headcount is the Turas Headcount figure. Completions relate to the number of staff who have completed all applicable modules. As at October 2022, ex employees and bank workers have now been removed from the completed totals.

| Whistleblowing | TURAS Headcount | Complete | Compliance % |
|-------------------|-----------------|----------|--------------|
| Employee/Managers | 3,420 | 1,708 | 49% |
| Managers | 788 | 533 | 68% |

Turas Appraisal

The compliance rates are currently at 78% for Appraisal, 77% for PDP and 79% for Objective. Appraisal compliance increased by 1% whilst PDP and Objectives remained the same.

- **CLO, HR and P&CFS** have appraisal compliance rates of 88%, 89% and 89%. **SPST** have an appraisal compliance of 83%.
- **SNBTS, PCF and Finance** have an appraisal compliance above or equal to 76%. **SPST NCC** has an appraisal compliance rate of 71%.
- **Clinical** and **DaS** have increased their appraisal compliance rate by 2% and 4% to 57% and 67%.

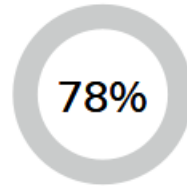
There are 239 TURAS records belonging to New Starts in the last 12 months who have no appraisal data. There are 162 TURAS records belonging to New Starts in the last 12 months who have appraisal data input.

There are **376 (453 last month)** previously compliant employees who are now non compliant. The majority of these employees last appraisal were in 2021, mostly signed off between **March and September 2021**.

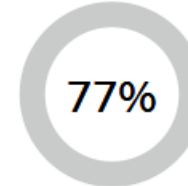
There are **419 employees who have no previous complete appraisal history (390 last month)**. This number includes new starts and well established staff.

There are **61 employees whose appraisal compliance is going to expire in the next three months, 24 of which are within SNBTS**.

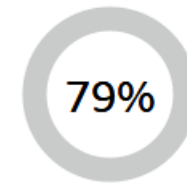
Appraisal Compliance



PDP Compliance



Objective Compliance

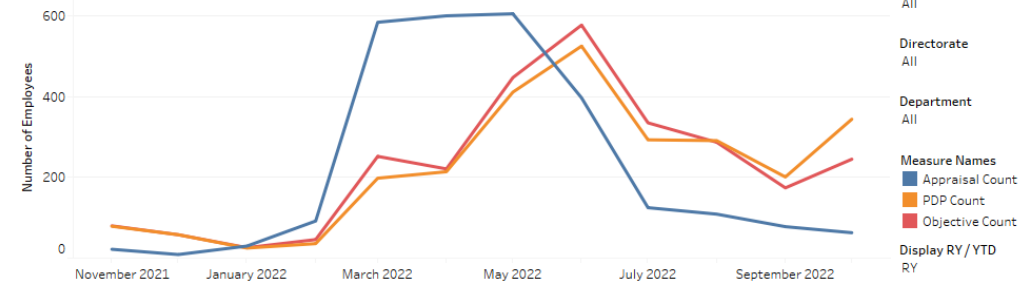


Turas Appraisal

Agenda for Change Appraisal



Trend



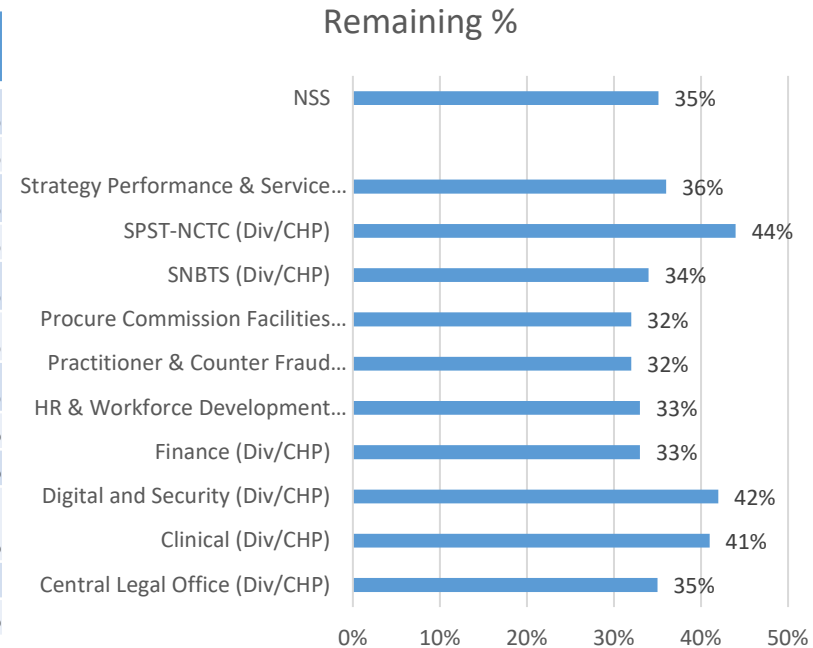
Compliance Categories by SBU

| SBU | % Appraisal Compliance Switch | % Objective Compliance Switch | % PDP Compliance Switch |
|-----------------------------|-------------------------------|-------------------------------|-------------------------|
| Central Legal Office | 88% | 88% | 91% |
| HR & Workforce Develop.. | 89% | 91% | 90% |
| Digital and Security | 67% | 63% | 67% |
| SNBTS | 76% | 77% | 77% |
| Procure Commission Facili.. | 78% | 82% | 81% |
| Practitioner & Counter Fr.. | 89% | 90% | 90% |
| Finance | 77% | 77% | 77% |
| SPST-NCTC | 71% | 70% | 45% |
| Clinical | 57% | 86% | 86% |
| Strategy Performance & S.. | 83% | 81% | 76% |

Annual Leave

The current position indicates that approximately 9% annual leave has been planned, 49% already taken and 42% remaining for this fiscal year.

| SBU | Planned % | Taken % | Remaining % |
|---|-----------|---------|-------------|
| Central Legal Office (Div/CHP) | 11% | 54% | 35% |
| Clinical (Div/CHP) | 2% | 57% | 41% |
| Digital and Security (Div/CHP) | 9% | 49% | 42% |
| Finance (Div/CHP) | 16% | 52% | 33% |
| HR & Workforce Development (Div/CHP) | 9% | 58% | 33% |
| Practitioner & Counter Fraud (Div/CHP) | 13% | 55% | 32% |
| Procure Commission Facilities (Div/CHP) | 7% | 61% | 32% |
| SNBTS (Div/CHP) | 4% | 62% | 34% |
| SPST-NCC (Div/CHP) | 0% | 56% | 44% |
| Strategy Performance & Service Transformation (Div/CHP) | 14% | 50% | 36% |
| NSS | 8% | 57% | 35% |



*Information collated in this exercise is at 30 October 2022 and is a combination from Crown Flexi and eESS/SSTS. This is only an estimate of employees of NSS and excludes Bank Staff, contingent workers, honorary contracts and secondees. Where employees don't use Flexi, eEES system data is used.

Health & Safety - Accident / Incident Management

RIDDOR

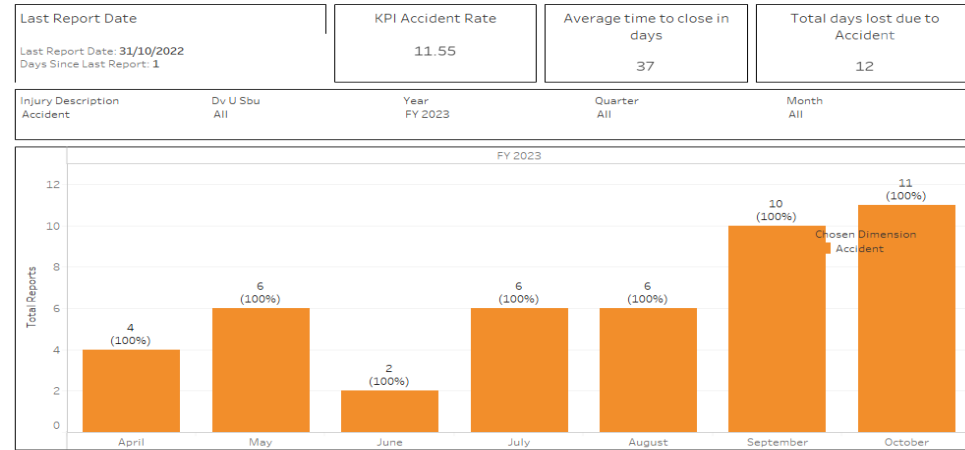
There were no RIDDORs submitted in October to the Health & Safety Executive (HSE). There have been no RIDDORs submitted this fiscal year.

Accidents

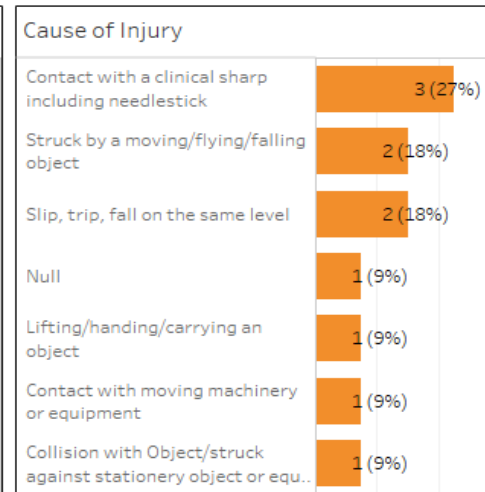
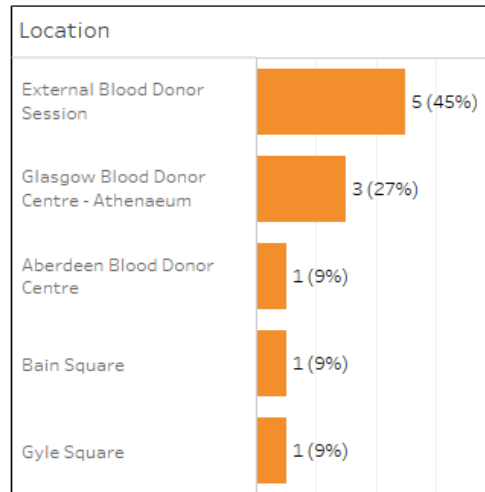
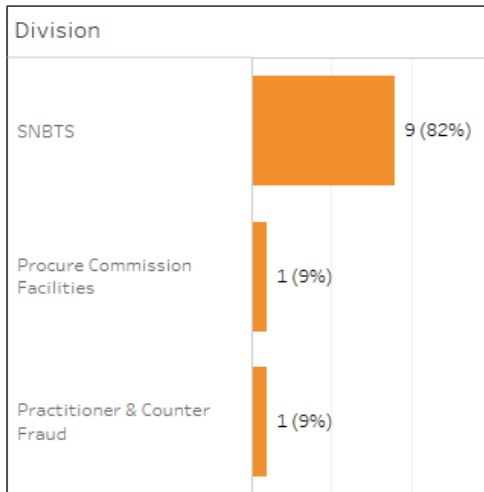
A total of 11 accidents have been submitted in October. There have been 45 accidents resulting in 12 days absence this fiscal year.

The accident rate was 2.82 in October, 11.55 this fiscal year which is well below the fiscal year target of 35.42.

The average time to close an accident is 37 days on average this fiscal year, which is seven days above the agreed 30 day KPI.



A summary of October's figures are below:

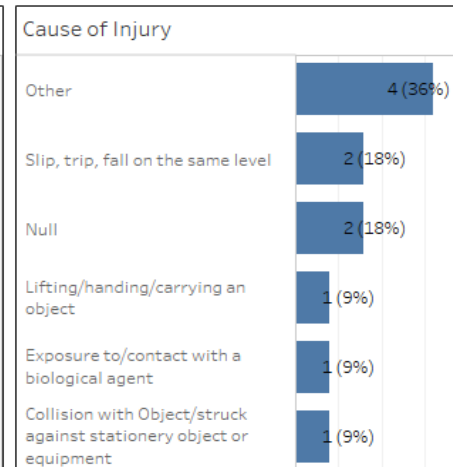
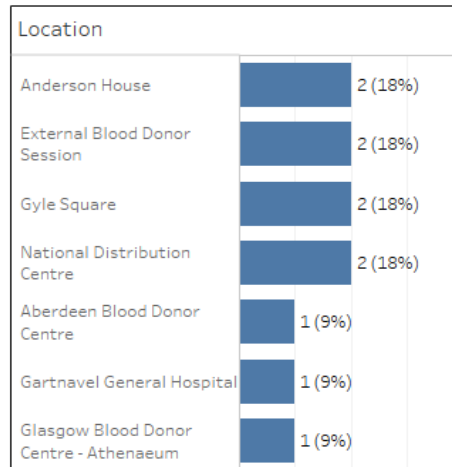
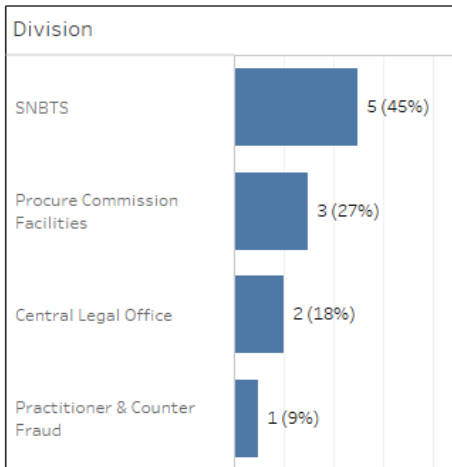
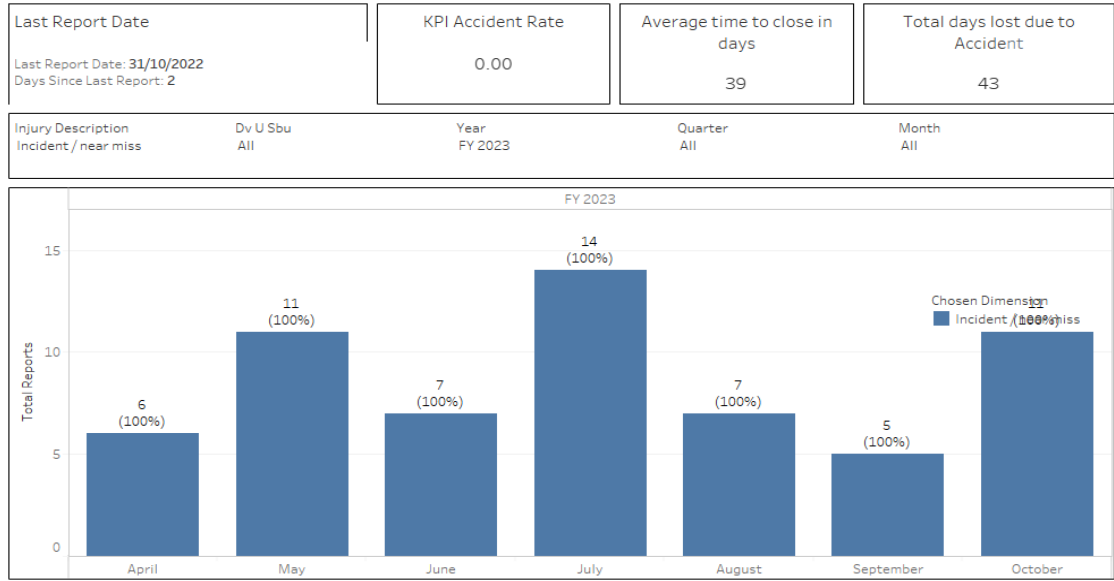


Health & Safety - Accident / Incident Management

Incidents/near misses

A total of 11 incidents/near misses were submitted in October. There have been 61 incidents/near misses this fiscal year. There have been 43 absence days lost in relation to incidents in October which were not work related but happened on a NSS site. Average time to close for the fiscal year is currently 39 days, which is nine days above the agreed 30 day KPI.

A summary of October's figures are below:



Occupational Health Activity

Management & Self Referral/Review Appointments

In October there have been a total of 67 (63 last month) appointments offered of which:

- 54 were virtually delivered (47)
- 5 were DNA appointments (5)
- 3 future pending appointments (7)
- 4 were rescheduled (4)
- 1 was cancelled (0)

Management and Self Referrals

During October there have been 40 new referrals received (44 last month), 266 referrals this fiscal year. The breakdown for this month is as follows:

- Management Referrals: 34 (93%)
- Self Referrals: 6 (7%)

The main reason for referrals are in relation to:

- Anxiety/stress/depression and other psychiatric illness - 30%
- 'Other musculoskeletal problems' – 20%
- 'Genitourinary & gynaecological disorders' - 10%
- 'Gastro-intestinal problems', 'Headache/migraine', 'Long COVID Symptoms' and 'Heart, cardiac & circulatory problems' - 10%

The average time taken to triage was one day in October, with two days on average for this fiscal year overall.

Pre Placements

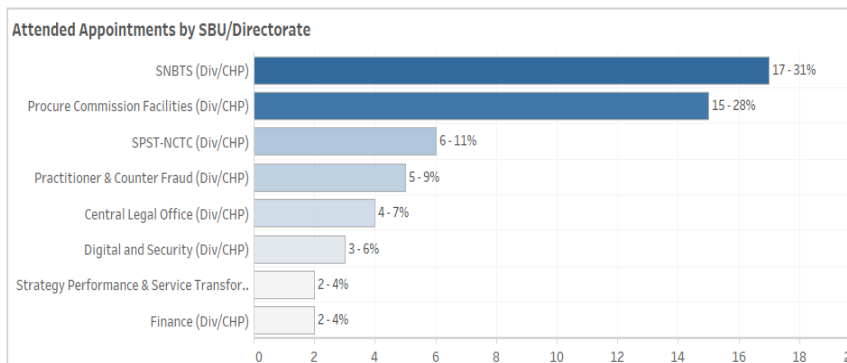
19 pre-placements have been received in October (29 last month) with 19 cleared (100%). There have been 312 pre-placements this year.

PCF and DaS accounted for 63% of the pre placements received in October.

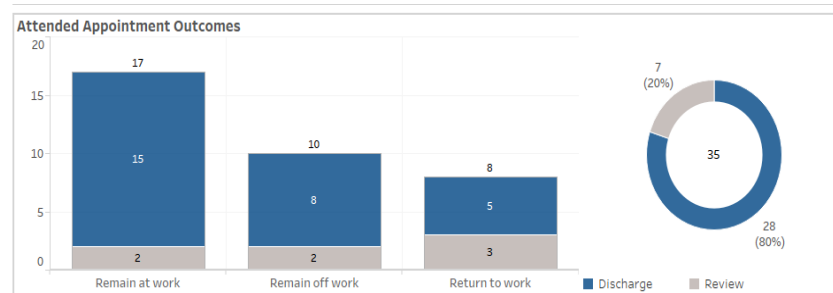
Attended Appointment Trend this fiscal year



Total Appointments SBU October 2022



Appointment Outcomes October 2022



Sustainability Report

| Key Performance Indicators | Latest* | Target | Variation | Assurance | Comment |
|---|-----------|--------------|---------------------|-----------|--|
| Domestic Waste Total (tonnes) | 250.18 | Achieved | + 1.76 Tonnes | N/A | The respective increase is likely to be linked to an increased return to buildings by staff. |
| Domestic Waste to Landfill | 0% | Below 5% | N/A | N/A | All residual waste from recycling process goes to incineration to produce energy from waste as opposed to landfill |
| Domestic Waste Recycled or Composted | 90% | 70% or above | + 9% | N/A | Increased recycling % reflects an overall increase in waste across estate. This is proportionally higher in comparison, which shows an improvement in recycling and segregation. |
| Fuel NP fleet CO2 (tonnes) | 1360.12** | Reduce | - 19.91 Tonnes | N/A | Reduction in rolling year |
| Fuel SNBTS fleet CO2 (tonnes) | 357** | Reduce | - 14.72 | N/A | Reduction in rolling Year |
| Gas CO2 (tonnes) (metered sites only) | 1878.8 | Reduce | - 74.2 Tonnes | N/A | Reduction in rolling year |
| Electricity CO2 (tonnes) (metered sites only) | 1987.59 | Reduce | - 48.96 Tonnes | N/A | Reduction in rolling year |
| Water M3 (volume) (metered sites only) | 13706.44 | Reduce | +289 M ³ | N/A | Water increases due to correction of previously estimated usage at 2 sites. |

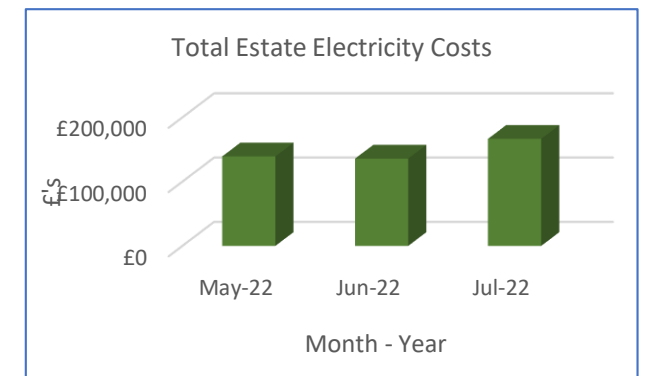
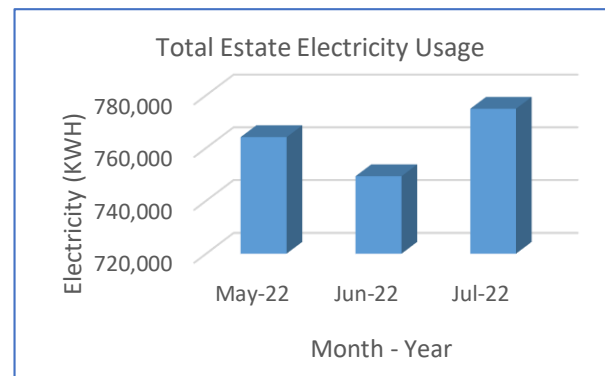
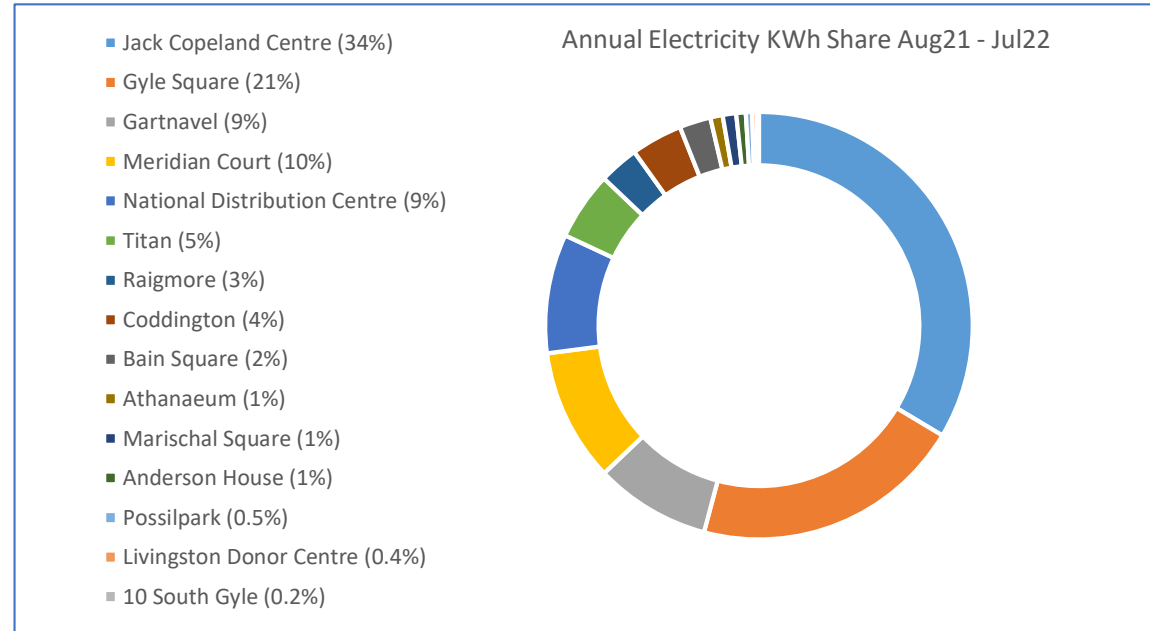
• All data is to the the end of Jul 2022, except where otherwise indicated and relates to rolling totals for the last 12 months to that month

• ** Data is to the end of Aug 22.

Sustainability Report

Energy Reporting - Electricity

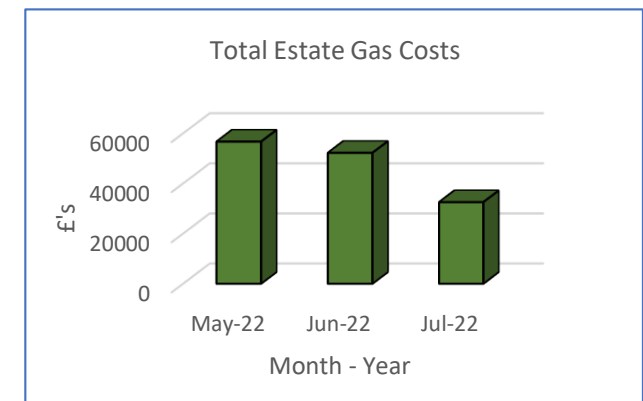
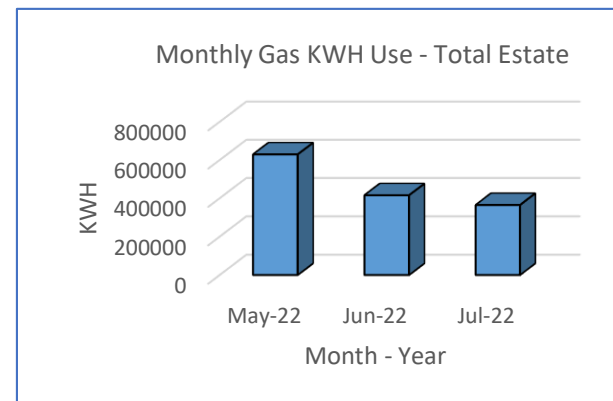
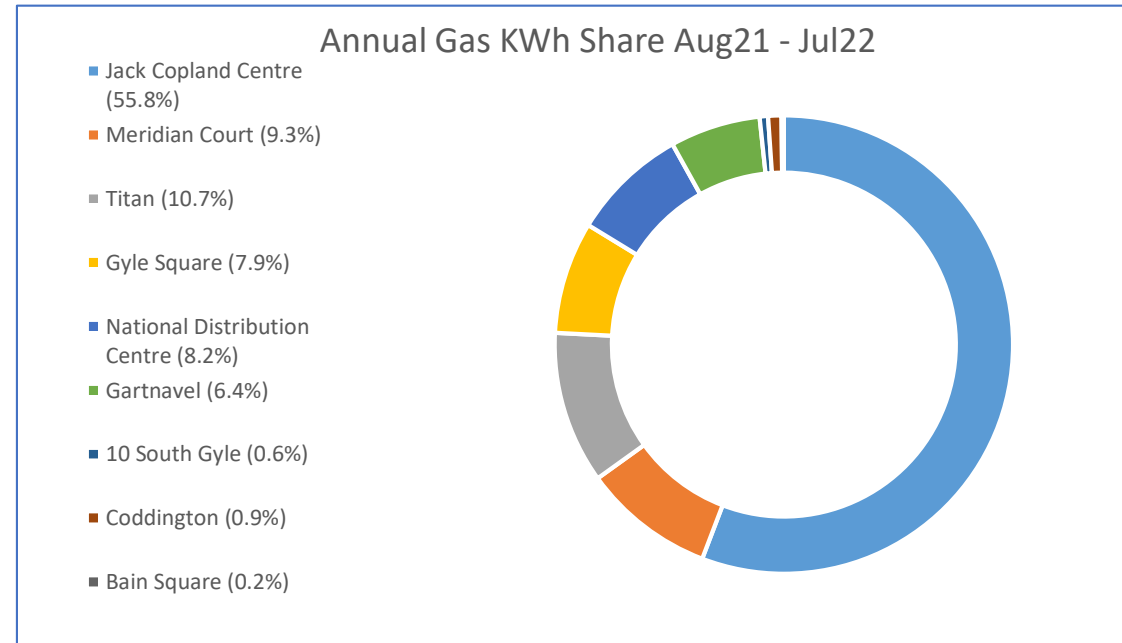
- Total annual cost of Electricity in the rolling year to July 2022 is £1.66M which has increased from the FY21/22 spend of £1.5M. This is due in part to unit price increases, however the addition of 2 Warehouses has increased estate consumption.
- Electricity prices are expected to rise later this year by 7.8%, further increasing costs and contributing to the expected £310K revenue increase forecasted for combined utilities.
- A ~10% saving will be possible from the release of Meridian court, however part of this will be offset by costs incurred from alternative accommodation. This will however help to reduce the expected price increase forecasted.



Sustainability Report

Energy Reporting - Gas

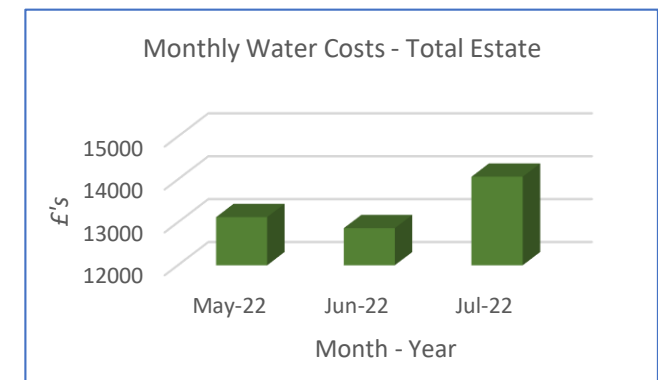
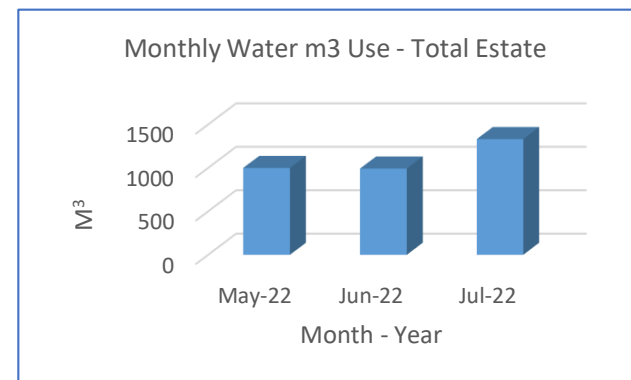
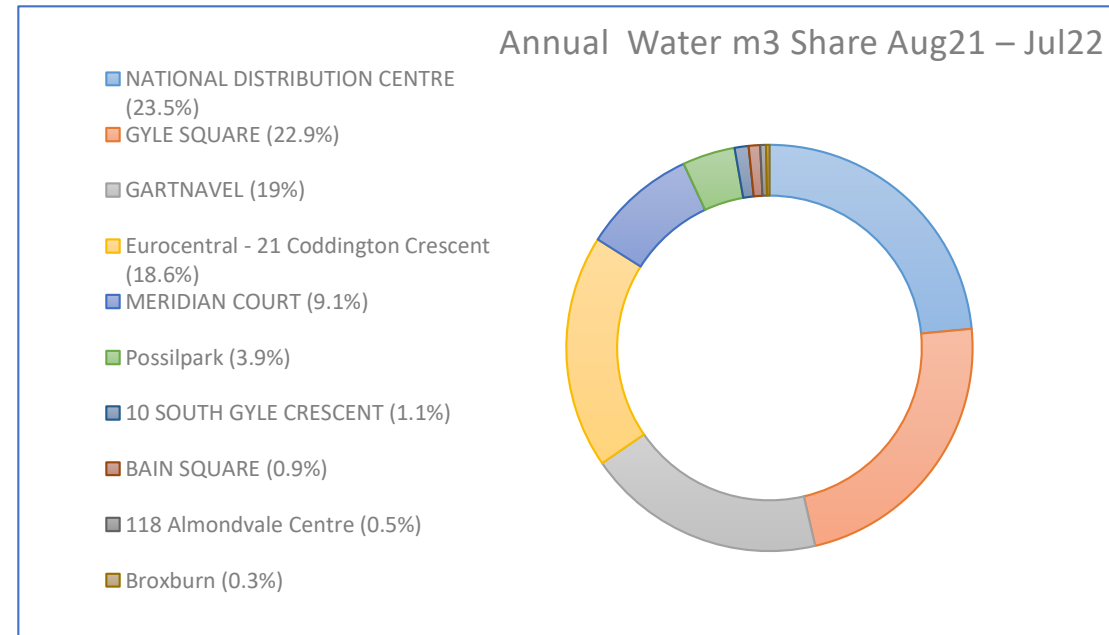
- Jack Copland continues to be the biggest gas consumer across estate, due to the conversion of gas to electricity via combined heat and power (CHP).
- During the rolling year to July 2022 we have spent £414K, compared with the total spend of ~£300K in FY21/22. This is due in part to unit price increases, however the addition of 2 Warehouses has increased estate consumption.
- There is an expected 70% increase in the price of Gas. This forms part of the expected ~£310K utilities cost increase projected for next year for NSS.
- A ~9% saving will be possible from the release of Meridian court, however part of this will be offset by costs incurred from alternative accommodation.



Sustainability Report

Energy Reporting - Water

- The national distribution remains the biggest consumer of water, however we are aware that full reporting is still to be put in place for new warehouses. The national distribution centre has the water consuming tote wash in addition to vehicle washing facilities. Investigation into whether water efficiency saving can be made by adapting frequency or operation of these should be undertaken.
- Gartnavel has disproportionately high usage for size, however this is linked to a flush of system as part of water infrastructure upgrade earlier this year and linked to H&S requirements.



Sustainability Report

Development Updates



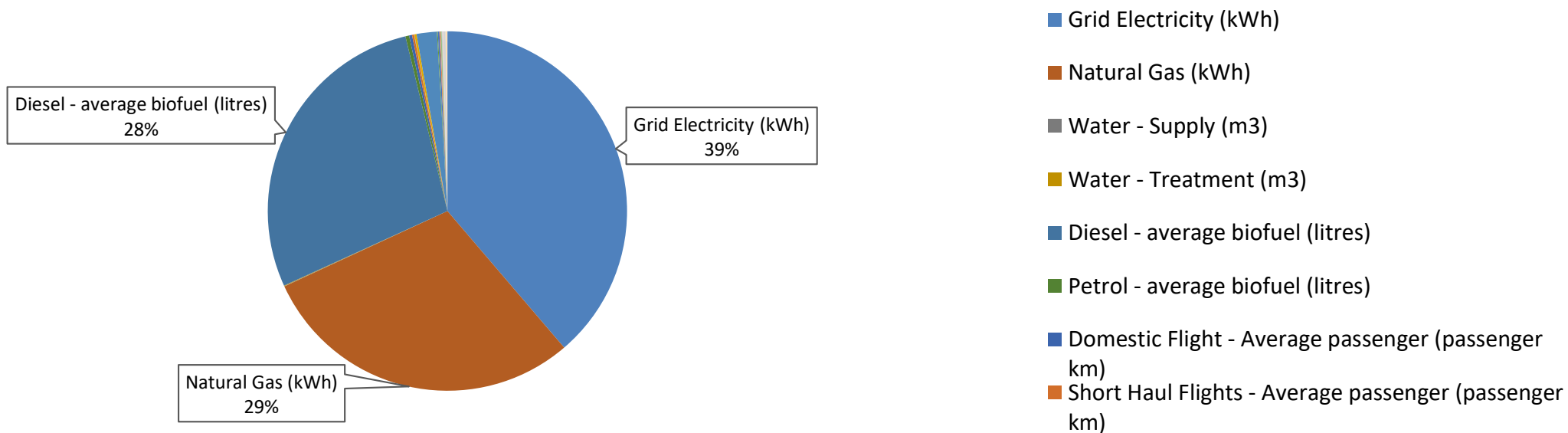
- The Public Bodies Climate Change Duties report for NSS for FY21/22 has been compiled and approved through SIB for onwards sharing with analysis through FPPC.
- The current Programme Manager (Sustainability and Strategy) will be moving to NHS Lothian with recruitment required to backfill ongoing.
- The Sustainability and Infrastructure board has been reduced to quarterly to aid accurate, timely and informative reporting with the Sustainability and Infrastructure Operational Delivery group, now providing a first avenue of governance.
- Finance have engaged with sustainability to improve proactive data collection from the wider business and as a part of reporting through RAM processes to provide better transparency.

Sustainability Report

Public Bodies Climate Change Duties Report – summary highlights

| Year | Carbon Footprint (tCO2e) | | | | Comments |
|---------|--------------------------|---------|---------|--------|--|
| | Scope 1 | Scope 2 | Scope 3 | Total | |
| 2017/18 | 2,736 | 3,418 | 2,026 | 8,180 | |
| 2018/19 | 2,614 | 2,758 | 2,082 | 7,454 | |
| 2019/20 | 2,447 | 2,289 | 2,101 | 6,837 | |
| 2020/21 | 7,483 | 4,797 | 1,912 | 14,192 | NHS Louisa Jordan included |
| 2021/22 | 2,157 | 2,118 | 1,674 | 5,949 | 2 Additional warehouses and blood donor centre added to estate. NHS LJ removed |

Carbon Footprint - split by emission type (tCO2e)



Minutes

(Approved)

Board Services
Area 27
Gyle Square
1 South Gyle Crescent
EDINBURGH EH12 9EB
Telephone 0131 275 6000
Text Relay 18001 0131 275 6000

www.nhsnss.org



NHS NATIONAL SERVICES SCOTLAND FINANCE, PROCUREMENT AND PERFORMANCE COMMITTEE (FPPC)

B/22/39

MINUTES OF MEETING HELD ON WEDNESDAY 24 AUGUST 2022 VIA TEAMS DIGITAL PLATFORM AT 0930 HRS

Present:

Gordon Greenhill – Non-Executive Director and Committee Chair
Ian Cant – Non-Executive Director
Mark McDavid – Non-Executive Director
Keith Redpath – NSS Chair

In Attendance:

Gordon Beattie – Director of National Procurement
Martin Bell – Director of PCFS (Items 1-3)
Carolyn Low – Director of Finance
Andy McLean – Deputy Director of Finance
Kris Lindsay – NSS Head of Procurement (Item 8)
Stevie McLaughlin – Head of Governance - PCF (Item 7)
Mary Morgan – Chief Executive
Matthew Neilson – Associate Director of Strategy, Performance and Communication
Kathryn Brady – Finance Business Partner [Observer]
Lynsey Bailey – Committee Secretary (Minutes)

Apologies:

Julie Burgess – Non-Executive Director
Lisa Blackett – Non-Executive Director
Lee Neary – Director of Strategy, Performance and Service Transformation

1. WELCOME AND INTRODUCTIONS

- 1.1 G Greenhill welcomed all to the meeting, his first as Chair, which was being held virtually via the TEAMS platform. Apologies were noted as listed above.
- 1.2 Before starting the formal business of the meeting, G Greenhill asked Members if they had any interests to declare in the context of the agenda items to be considered. No interests were declared. G Greenhill also took the opportunity to thank M McDavid for his work during his tenure as Chair of the Committee.



Chair
Chief Executive

Keith Redpath
Mary Morgan

NHS National Services Scotland is the common name of the Common Services Agency for the Scottish Health Service.

2. MINUTES AND MATTERS ARISING [Papers FPP/22/34 and FPP/22/35 refer]

- 2.1 Members noted the minutes from 24 May 2022. G Beattie advised that there was an update required at minute 9.2 - the references to paramedics should actually refer to the Paramedical Strategic Sourcing Team. Following this discussion, Members were content to approve the minutes in full subject to the corrections being made.

Action: Board Services to correct minute 9.2 to refer to the Paramedical Strategic Sourcing Team rather than paramedics.

- 2.2 Members were pleased to note that all actions were either completed or programmed in for a future meeting.

[Secretary's Note: The following item was brought forward on the agenda]

3. MERIDIAN COURT OPTIONS APPRAISAL [Paper FPP/22/41 refers]

- 3.1 M Bell spoke to the paper, which set out the context around the Meridian Court relocation requirements and clarified that the aim was to agree the options to take forward for the business case. Members were informed that it had been agreed that this paper would also be presented to the NSS Staff Governance Committee due to the potential organisational change involved. Members were advised that, since the paper had been written, the situation had changed slightly following discussions with Healthcare Improvement Scotland, and that the recommendation was now that all three options be taken to business case.

- 3.2 Members noted that this did not change the timetable – M Bell was already starting the staff engagement process with townhall meetings, and the business case would be brought to the next FPPC meeting scheduled for 16 November 2022. Members sought clarification around the timescales for giving notice to the landlord for Meridian Court and M Bell confirmed that there had been input from the Central Legal Office and re-assured Members that NSS was within timescales. The intention was to give notice in September 2022 and then discuss the plan and timescales for vacating the building with the landlord.

- 3.3 Members asked when and where the Board would have the opportunity for its input. They were informed that this was on the agenda for the next formal NSS Board meeting on 23rd September, where the Board would have the opportunity to discuss and formally approve the decision to give notice to end the lease for Meridian Court. Members were reminded that they had already approved the strategic outline case which recommended a move from Meridian Court, but this would allow the Board to formally approve this decision.

- 3.4 Following these discussions, Members were content to agree the recommended options to be taken forward to the business case, and to recommend that the NSS Board endorse the decision to end the lease at Meridian Court.

4. FINANCE REPORT [paper FPP/22/36 refers]

- 4.1 Members considered the paper which updated on performance against NSS's financial plan as at 31st July 2022. Members were pleased to note that, despite significant financial risk, NSS was still on course to meet its statutory targets. Members were given a brief overview of the projections for a slight underspend in some areas and deficits in others, which balanced out to a break-even position

overall. Since the paper had been written, National Services Division had confirmed the detail of their cash-releasing efficiency savings. Negotiations were also ongoing regarding the pay increase for Agenda for Change staff.

- 4.2 The main underlying financial risk was in respect of funding and income as NSS remained reliant on non-recurring funding. This was something which C Low was in discussions with the Scottish Government about, particularly in respect of COVID-19. Members were advised that NSS was looking at every line of the COVID-19 spend to identify and explore all options for keeping it within funding. M Morgan informed Members that she had been asked to give evidence at the parliamentary committee on COVID-19 recovery funding so would be using that as an opportunity to build the case and make it clear to the Scottish Government that they needed to identify the priorities.
- 4.3 There was a capped budget for majority of COVID-19 work, with National Contact Centre costs managed separately. This was all in line with existing policy and there was a COVID-19 cost reduction plan (of which the focus was mainly on territorial Boards) but, for NSS, the biggest challenge was the digital ask around the vaccination programme. For NHSScotland as a whole the biggest challenge was the cost of staffing and bed capacity, which was a significant pressure. There was little more that could be done without changing policy so if that did not change then NSS would have no option but to overspend. NSS would be continuing the approach of providing Scottish Government with options and making it clear that the requests needed to be funded. Members welcomed the update and looked forward to hearing more at the next meeting.

5. STANDING FINANCIAL INSTRUCTION BREACHES [paper FPP/22/37 refers]

- 5.1 Members noted the paper which gave details of a recent breach in relation to a staff member's secondary employment and the actions taken in response. Members asked whether this would be elevated to a criminal offence but were informed that it was felt there was not enough to take it that far, so treating it as an HR case was sufficient at this point. The main concern for NSS was that the issue had been identified, the costs had been recovered, and the individual concerned had been dismissed. It would also be important to highlight the need to declare any additional jobs they had because this may increasingly become a reality for staff as they tackled the current cost of living crisis. Members noted that at the recent Executive Management Team meeting it had been agreed that this was more of an adverse event than a breach, and M Morgan had asked C Low to consider how the management and reporting of financial adverse events could be aligned with the process for other types of adverse events.

6. NATIONAL PROCUREMENT CONTRACT SCHEDULE [Paper FFP/22/38 refers]

- 6.1 G Beattie spoke to the paper which gave an update on procurement performance across National Procurement, NSS Procurement, and NHS Assure/Health Facilities Scotland. It also highlighted the main challenges associated with delivery (namely inflation, supply chain disruption, and recruitment) and the plans for managing these. Members were pleased to note that, even in the currently difficult economic environment, National Procurement were still on track to achieve secured cost savings of at least £10m and cost avoidance savings of around £20m. Members welcomed the work being done and, in particular, looked forward to hearing further updates on the measures introduced to manage the impact of inflation.

7. NATIONAL PROCUREMENT ANNUAL REPORT [paper FPP/22/39 refers]

- 7.1 S McLaughlin briefly spoke to the highlights of the paper, which detail the value delivered during the reporting period through National Procurement's procurement and supply activities within its sector. Members commended a very positive report. They added that, in future, they would like to see resilience and sustainability brought out more in respect of using the Scottish supply chain. G Beattie provided a brief overview of this work and how it would continue to be taken forward. Members confirmed that they were content to approve the report for publication.

8. NSS PROCUREMENT ANNUAL REPORT [paper FPP/22/40 refers]

- 8.1 K Lindsay spoke to the paper, which updated on NSS purchasing activities and publicised the performance and achievements in delivering NSS's procurement strategy. Members noted the highlights and were particularly pleased to see the work in respect of financial sustainability and maximising expenditure. Members sought and received clarity on what was meant by "sharing" with Ministers and what that entailed. Members also asked about publicity around this report and were informed that there was no specific plan for that. However, this could be discussed with the Marcomms (Marketing and Communications) team. Members also observed that, on page 19, the dates for the audit contract tendering needed to be updated to September 2022 and January 2023. Members discussed the publishing timelines for both this and the National Procurement Annual Report and it was agreed that neither should be published until NSS's Annual Report could also be published. Members were content to approve the report, subject to that embargo and correction of the dates mentioned.

Action: K Lindsay to correct the references to timelines for the audit contract tendering to refer to September 2022 and January 2023

9. PORTFOLIO MANAGEMENT GROUP (PMG) REPORT [Paper FPP/22/42 refers]

- 9.1 C Low was pleased to report that the paper presented an improving position in respect of the key national programmes being delivered by NSS. However, two programmes on the digital programmes watchlist were still tracking as "Red". The Community Health Index was one of the two but this was because it was being reset in terms of its ambitions and Atos was working closely with the project team on this. It was anticipated that this would change to "Green" once that work was completed. Picture Archiving and Communication System was the other "Red" programme as the roll-out had been delayed by an outage. This had now been rectified but the programme group asked for the status to remain "Red" while the rollout to the Boards was finalised. However, Members were informed that the rollout was making good progress.
- 9.2 On the general watchlist, Scan for Safety was new to PMG oversight. It was currently reporting "Red" while key implementation actions, which had been agreed between the Senior Responsible Officer and the Director of Digital and Security were being progressed. This would reduce once planned resource was in place and operational. Members also noted that the mPower programme had been formally closed, with a closure event taking place, attended by both K Redpath and M Morgan. Members were pleased to see a programme reaching completion in a positive place and felt

this illustrated the value of the PMG's work. Members commended the report and were content with the proposed escalations.

10. SERVICE EXCELLENCE REPORT [Paper FPP/22/43 refers]

10.1 Members noted that this was the same report which had been presented to the Board due to the rescheduling of the Board from June to July 2022. Members were pleased to note that it was a very positive report and discussed the timelines for reporting and how it should, and would, work in future. In respect of staff behaviours and complaints, Members discussed moving towards reflecting this as a rate per volume of interactions to provide more context and a better indication of the size of any issue. Members also briefly discussed the feedback on this report provided by the Board at their most recent meeting on 29 July 2022 and how that was being addressed.

11. RESILIENCE REPORT [Paper FPP/22/44 refers]

11.1 Members noted the report, which advised that there had been no incidents which had required the Resilience Management Team to meet. The report also included an overview of the four Digital and Security (DaS) incidents during the period April - June 2022. These were all technology-related incidents which had been managed by DaS, an SBAR report had been delivered following each incident with recommendations and actions being taken forward as appropriate. Following a brief discussion, Members were content with report and had nothing further to ask.

12. REVIEW OF BUSINESS RISKS [Paper FPP/22/45 refers]

12.1 Members were taken through an overview of the activity in relation to following highlighted risks and issues:

- Red Risk 6249 - P&CFS Bespoke System (Oracle 12C & Windows 7/XP)
- Red Risk 6282 – Devices with Windows 10 v1709 Build
- Red Risk 6554 – Skilled Resource Data Capture Validation and Pricing Replacement
- Red Risk 6208 – Hosted Desktop Expiry
- Red Risk 6799 – Industrial Action (which was in the process of being removed as a risk as per Board's request)
- Red Risk 6205 – Financial Sustainability in the Medium to Long Term
- Amber Risk 6121 – Unstructured and Unclassified Data
- Corporate Issue 6622 – Budgetary Pressure - Dependency (Digital Prescribing and Dispensing Pathways)
- Corporate Issue 6661 – Supply: Russia Ukraine Conflict

12.2 Members confirmed that, overall, they were satisfied with the assurances provided but would like to see more progress around 6799 as it should be addressed through normal resilience planning. Members queried the need to include complete historical data for each risk and suggested considering this at a future development session.

13. FORWARD PROGRAMME [paper FPP/22/46 refers]

- 13.1 Members noted the content of the Forward Programme and requested the following additions: Meridian Court Business Case, SEER Business Case, and the briefing on Intellectual Property.

Action: Board Services to update the forward programme with the additional items advised.

14. ANY OTHER BUSINESS

- 14.1 M Morgan suggested that a programme of development sessions for this Committee should be considered. Board Services would look to progress this.

Action: Board Services to liaise with G Greenhill and C Low to consider a programme of development sessions for the Committee.

There being no further business, the meeting closed at 1048hrs.

Minutes (Approved)

Board Services
Area 27
Gyle Square
1 South Gyle Crescent
EDINBURGH EH12 9EB
Telephone 0131 275 6000
Text Relay 18001 0131 275 6000

www.nhsnss.org



NHS NATIONAL SERVICES SCOTLAND CLINICAL GOVERNANCE AND QUALITY IMPROVEMENT COMMITTEE (CGQIC)

MINUTES OF MEETING HELD ON WEDNESDAY 7 SEPTEMBER 2022 VIA TEAMS DIGITAL PLATFORM AT 0930HRS

Present:

Alison Rooney – Non-Executive Director [Chair]
Lisa Blackett – Non-Executive Director
Gordon Greenhill – Non-Executive Director
Arturo Langa – Non-Executive Director
Beth Lawton – Non-Executive Director
Keith Redpath – NSS Chair

In Attendance:

Anna Lamont – Medical Director, PCF
Mary Morgan – Chief Executive
Lorna Ramsay – Medical Director & Executive Lead for Clinical Governance
Megan Rowley – Interim Medical Director SNBTS
Calum Thomson – Associate Director for Nursing, Clinical Governance & Quality Improvement
Lynsey Bailey – Committee Secretary [Minutes]

Apologies:

Jacqui Reilly – Nurse Director & Executive Lead for Quality Improvement

1. WELCOME AND INTRODUCTIONS

- 1.1 A Rooney welcomed all to the meeting, which was being held virtually via the TEAMS platform. Apologies were noted as above. A special welcome was extended to B Lawton, the newly appointed Non-Executive Director attending her first NSS meeting, and she was invited to introduce herself.
- 1.2 Before starting the formal business of the meeting, A Rooney asked Members if they had any interests to declare in the context of the agenda items to be considered. No interests were declared.

2. MINUTES AND MATTERS ARISING [Papers CG/22/02 and CG/22/03 refer]

- 2.1 Members discussed the minute from the previous meeting on 30 May 2022, and approved them as correct, subject to the correction of minute 9.2 to say that new processes were being developed rather than in place.



Chair
Chief Executive

Keith Redpath
Mary Morgan

NHS National Services Scotland is the common name of the Common Services Agency for the Scottish Health Service.

Action: Board Services to correct minute 9.2 to say new processes were being developed rather than in place.

2.2 Members were pleased to note that all action points had been completed with no actions outstanding.

3. MEDICAL DIRECTORS REPORT [Paper CG/22/11]

3.1 L Ramsay spoke to her report which provided an update on clinically related areas of NSS strategic/enabling activity, and relevant aspects of business-as-usual areas from a clinical perspective. Particular highlights were:

- The positive progress made in terms of medical devices compliance. It was noted that Paul Cushley, NSS's Director of Dentistry, would come to the development session scheduled for January 2023 to provide more detail on this.
- A new policy was being developed on safeguarding. There were several requirements, which had mainly been focused on patient-facing Boards, but NSS was looking at its services to see how this applied and what mechanisms need to be put in place.
- In respect of the pelvic mesh removal surgery, NSD colleagues had successfully concluded contractual arrangements, with a number of channels now in place and operational, thereby giving patients a range of options.
- The internal audit on clinical governance, postponed from last year, was now due to start in the coming month and conclude by the end of October 2022. The findings would then be reported to the NSS Audit and Risk Committee, scheduled in December 2022.

3.2 In respect of the pelvic mesh removal surgery, Members asked about the reimbursement of those who had already undertaken private treatment – specifically the available budget and anticipated costs. They were advised that this related only to procedures undertaken up to the July 2022 date set by Scottish Government. and was not an ongoing option within the current contract. It was also managed by the Scottish Government itself (although NSS may have a role in validating the surgery). The cost range stated was in reference to the clinical component of the alternative options available in Bristol and the United States of America (USA). It had been presented as a cost range in recognition of the complexity of the surgery and potential variation in individual requirements. Members were also provided with an overview of the restarting of the service provided by NHS Greater Glasgow and Clyde.

3.3 Members discussed the complexity of some of the reports and the need to be mindful that the content was clear and expressed in plain English as far as possible.

Action: All authors to ensure reports are expressed in Plain English as far as possible.

3.4 Members asked about the feedback from student nurses and were pleased to note that it had been positive. The feedback from those who had hosted the students had also been exceptional and showed how much the initiative was valued. Members wished to pass on their thanks to all those involved for the work on this and were particularly pleased to see that this had been managed during the challenging times of the pandemic. In discussing the quality improvement work, it was noted that there were a number of groups involved, and L Ramsay advised she would reflect on the level of detail needed and whether it could be summarised further. Members asked about the potential lung cancer screening programme and how likely it was to be introduced. They were advised that no decision had been made yet, but the

expectation was that it would go ahead with the NSS screening oversight team being asked to advise and lead on it.

- 3.5 Moving on to the Docman7 incident, Members sought clarity on the extent of NSS’s responsibility and position on it, as well as the expected timeframe of this issue (including its closure). Members were advised different GP Practices could be on different versions at different times, and therefore would be impacted to different degrees. They noted that NSS held the framework contract, but system implementation was up to the individual Boards. NSS has been providing coordinating support for consistent management across Boards. A look-back exercise had identified that numbers potentially affected were not as high as first thought. Work was ongoing at local level to identify any impact it may have had on patient care. Members asked about the Information Commissioner’s Officer’s (ICO) thinking on this and were advised that the ICO had been informed and were satisfied the incident was being appropriately addressed.
- 3.6 Discussing medical devices, Members asked if there was a “*pecking order*” of prioritisation to best ensure compliance. It was confirmed that the team were focussing on areas with the highest clinical risk to patients as well as other higher-risk areas. Members asked about the issues with Lateral Flow Devices mentioned and whether users might not report potential device failures, just assuming it was user error and repeating the test. L Ramsay clarified that this was more about point of care testing and incident reporting rather than a medical device regulations issue.
- 3.7 Members thanked L Ramsay for the report and responses to the questions. They confirmed that they felt sufficiently assured.

4. **BLOOD AND TISSUE QUALITY, SAFETY AND SUFFICIENCY REPORT [Paper CG/22/12]**

- 4.1 M Rowley spoke to the report, which assured committee members that NSS continued to meet all requirements in respect of quality, safety, and sufficiency. Members discussed the resilience of the blood supply and were given an overview of the level of supply aimed for and measures in place should levels drop below that. Members noted the post-pandemic blood supply challenges and resilience measures between the UK blood services which had meant supplies had been well-managed. Work was ongoing to look at the best use of blood products as well to help with the supply.
- 4.2 Members asked about the statement regarding the impact of the cost-of-living crisis. They were advised that with all the post-pandemic changes (e.g. moving away from community centres and people working from home more) meant that some donors were cancelling appointments as they could not afford to travel to the donor centre. Members asked if offering some form of reimbursement could be an option and were advised that this was not a strategy currently. The initial focus was more on how to move collections back to being closer to donors, but other options were still open for consideration. The situation would be kept under review, and it was acknowledged that it would be worth engaging with the wider public, at some stage, to establish the reasons for any reluctance to donate. Members asked about what the steps would be in the face of a shortage in which the whole of the UK was struggling and were given an overview of the integrated blood shortage action plan.
- 4.3 M Rowley also highlighted the progress of the Occult Hepatitis B testing look-back exercise and the swapping out of Cryoprecipitate (CP). Due to the rarity of the blood type, swapping out all the AB blood-type CP had proven to be particularly challenging. However, there was now only a small amount left to do. Members were given an

overview of the outcomes from testing, how that was being managed, and the development of the look back pathway with the involvement of the Deputy Chief Medical Officer. It was hoped to have a full look back pathway in place by the end of November 2022.

- 4.4 Members asked about the Dundee inspection and were pleased to note the positive outcome. Members also acknowledged that NSS would have a role in processing compensation payments resulting from the UK Infected Blood Inquiry.
- 4.5 Members scrutinised the report and confirmed they were content with the level of assurance provided. They also wished to congratulate the team involved on their successful management of the blood supply in particularly challenging circumstances.

5. CLINICAL ADVERSE EVENTS AND COMPLAINTS [Paper CG/22/013A]

- 5.1 Members discussed the paper which provided details of Clinical Adverse Events and Complaints. There were no Duty of Candour events or new complaints to highlight to the committee. In terms of adverse events there had been:
- Two external national category 1 clinical adverse events reported by PCF. Reviews were being led by the local health board where the events occurred.
 - Three external national category 2 clinical adverse events reported by DaS (2) and PCF (1). Reviews were being led by the local health board where the events occurred.
 - Three NSS national category 2 clinical adverse events reported by SNBTS. All had been reviewed and it was concluded that there was no deviation from SNBTS procedure.
 - 54 National category 3 (i, ii or iii) clinical adverse events reported by SNBTS (28 NSS), DaS (7 NSS, 2 external), NCC (13 NSS) and PCF (4 external) during the quarter.
 - Ten significant Good Manufacturing Practice (GMP) 'red' incidents reported by SNBTS. A review and appropriate actions were either completed or remained ongoing for each incident.
 - There were no clinical adverse event trends indicating areas of concern.
- 5.2 Members sought clarity about the targeted data protection awareness and training for NCC staff and asked C Thomson to look into expressing the progress of the training as a percentage in future reports to put it into context. Members also discussed assurance vs reassurance in respect of the report content and were given an overview of the upcoming discussions regarding the Board Assurance Framework and its anticipated impact.
- Action: C Thomson to look into expressing the progress of the data protection training as a percentage in future reports to put it into context.**
- 5.3 Following scrutiny of the report, Members were satisfied with the level of assurance provided.

6. CLINICAL RISKS QUARTERLY REPORT [Paper CG/22/13B]

- 6.1 Members discussed the paper, which provided details of corporate clinical risks on the NSS Risk Register, together with an opportunity to review all red and new amber clinical risks and challenge the actions taken. Members felt that the wording of the recommendation could be stronger and start with “It is recommended that the Committee...”. L Ramsay and C Thomson agreed to review this for the next meeting in relation to all papers brought to the Committee.

Action: L Ramsay to ensure the wording of the recommendation in the cover sheet for all papers was stronger (i.e., It is recommended that the Committee...)

- 6.2 Members scrutinised the report and were content with the level of assurance provided.

7. HEALTHCARE ASSOCIATED INFECTION (HAI) QUARTERLY REPORT [Paper CG/22/14]

- 7.1 Members noted the paper, which demonstrated that NSS was compliant with all current policies related to infection prevention and control (inclusive of the management of COVID-related incidents across the organisation) and that the reportable key performance indicators for HAI had all been met for SNBTS in the quarter. Members commended both the report and the positive position NSS was in and were keen that these thanks and recognition be passed on to all involved.

8. FORWARD PROGRAMME [Paper CG/22/16]

- 8.1 Members noted the current draft of the Forward Programme and were reminded to contact Board Services if any additions/changes were required.

9. AOCB

- 9.1 It was confirmed that the next Clinical Governance and Quality Improvement Development Session was scheduled for 31 October 2022 and would focus on the draft findings from the KPMG internal audit of clinical governance and provide an overview of the Clinical Directorate’s roles and responsibilities, governance, structure, and interaction with business units.

10. DATE OF NEXT MEETING:

- 10.1 Members were reminded that the next meeting was scheduled for Wednesday, 30 November 2022 at 0930hrs.

There being no further business, the meeting finished at 1100hrs.

Minutes

Board Services
Area 27
Gyle Square
1 South Gyle Crescent
EDINBURGH EH12 9EB
Telephone 0131 275 6000
Text Relay 18001 0131 275 6000



www.nhsnss.org

NHS NATIONAL SERVICES SCOTLAND STAFF GOVERNANCE COMMITTEE

MINUTES OF MEETING HELD ON FRIDAY 9th SEPTEMBER 2022 VIA TEAMS DIGITAL PLATFORM AT 0930 HRS

Present:

Lisa Blackett – Non-Executive Director and Committee Chair
John Deffenbaugh – Non-Executive Director
Gordon Greenhill – Non-Executive Director
Tam Hiddleston – Trade Union Representative
Arturo Langa – Non-Executive Director
Gerry McAteer – Trade Union Representative
Beth Lawton – Non-Executive Director
David Allan – Trade Union Representative
Keith Redpath – NSS Chair

In Attendance:

Jacqui Jones – Director of HR and Workforce Development
Mary Morgan – Chief Executive
Martin Bell – Director, Practitioner and Counter Fraud Services
Gordon Beattie – Director, Procurement and Facilities
Marc Turner – Director, Scottish National Blood Transfusion Service
Karen Nicholls - Committee Services Manager [Minutes]

Apologies:

Ian Cant – Non-Executive Director
Suzanne Milliken – Trade Union Representative

1. WELCOME AND INTRODUCTIONS

- 1.1 L Blackett welcomed all to the meeting, which was being held virtually via the TEAMS platform, noting the apologies as recorded above. As a mark of respect, the Members held a one-minute silence to mark the passing of Her Majesty, Queen Elizabeth II.
- 1.2 Before starting the formal business of the meeting, L Blackett asked Members if they had any interests to declare in the context of the items on the agenda. No interests were declared.

2. MINUTES AND MATTERS ARISING [Papers SG/22/22 and SG/22/23 refer]

- 2.1 Members noted the minutes from 12 May 2022 and, following a brief discussion, approved them in full. Members noted that there were no outstanding actions.



Chair Keith Redpath
Chief Executive Mary Morgan

NHS National Services Scotland is the common name of the Common Services Agency for the Scottish Health Service.

3. MERIDIAN COURT OPTIONS APPRAISAL [Paper SG/22/24 refers]

- 3.1 M Bell took members through the paper, which was being presented for approval, and noted the following;
- Although the decision-making governance route was via the NSS Finance, Procurement and Performance Committee (FPPC), it had been agreed with Trade Union colleagues that due to the organisational change this move would necessitate, ensuring the engagement and consultation processes were reported to the NSS Staff Governance Committee was essential;
 - The options paper was produced by Avison Young (AY) (Appendix 1) and set out the context around the Meridian Court relocation requirements. It also covered what actions had been taken to date, short-listing decisions taken by the Sustainability and Infrastructure Board (SIB) and included both financial and non-financial analyses for the options presented;
 - SIB established the Meridian Court Project Group in June 2022 to review suitable office accommodation in central Glasgow as an alternative to Meridian Court. NSS had already commissioned AY to assist in this process. Ten sites were reviewed by the Group, with a smaller delegation reviewing Delta House as it only became available later;
 - A significant staff engagement programme was now live with the first event attracting 350 attendees. Plans were to have a single SharePoint site for staff contact.
- 3.2 Members discussed the three options detailed in the paper and noted that discussions had also taken place at the NSS Finance, Procurement and Performance meeting held on 24th August 2022. G McAteer commented that in relation to Delta House, the Health Improvement Scotland (HIS) staff discussions did not mirror those in NSS. M Bell advised that he was unable to comment for another Board but that the proposals were being put to HIS Committee on 28th September.
- 3.3 D Allan asked for clarity on the 'retained estate' option and M Bell advised that this focused on existing NSS estate in the area including Gartnavel, the Athenaeum and warehouse accommodations. This would be in conjunction with further reviews of Gyle Square in response to larger meeting and conference space requirements.
- 3.4 Members were content to approve the paper and looked forward to future updates.

4. NSS WORKFORCE PLAN [Paper SG/22/25 refers]

- 4.1 J Jones took Members through the paper and noted the governance route it had taken. Official guidance had been received from Scottish Government (SG) in April 2022 and the plans for each SBU were then retrofitted around this guidance. The draft plan had been submitted to SG for comment/approval in August 2022 and J Jones would now chase for a response to enable any changes to be made prior to formal submission on 31st October 2022. **Action: J Jones to chase SG approval of NSS Workforce Plan.**
- 4.2 K Redpath commented that the Board had seen the document before and had asked that one section be removed, but this was still present in the version provided to the Staff Governance Committee. J Deffenbaugh added that it was important to also provide an Executive Summary for all documents. J Jones agreed to update the document appropriately outwith the meeting. **Action: J Jones to update NSS Workforce Plan based on the comments received.**

5. PEOPLE REPORT [Papers SG/22/26, SG/22/27 and SG/22/28 refer]

5.1 J Jones took Members through the People Report and highlighted the following areas:

- Work continued on the National Contact Centre to ensure this was managed down to a zero workforce by March 2023. The teams were working to ensure the staff concerned were fully supported during this period. This would include redeployment where possible and liaison with external recruitment agencies to assist individuals into new roles;
- There had been no incidents reportable under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDORs) to date;
- Statutory and Mandatory Training – Compliance with three-year mandatory training was at 94% and statutory training was currently at 95%;
- Appraisal/PDP/Objectives – Completion rates across the SBUs varied, with the majority of SBUs above 70% in Appraisal Compliance and above 70% in PDP & Objective Compliance. The compliance rates were currently at 75% for Appraisal, 74% for PDP and 76% for Objective;
- Sickness Absence – NSS Sickness Absence rate as at the end of July was 3.98% and in the following month it rose to 4.09%, breaching the NSS target of 4% by 0.09%. Sickness Absence rates were likely to increase as COVID-19 related absences moved from Special Leave reporting to standard absence reporting. HR continued to proactively engage with managers across the SBUs where an individual had hit a sickness absence trigger to establish what support was required to enable the individual to return to the workplace.

5.2 Members then discussed the sickness absence figures in more detail and asked that J Jones provide a deep dive report looking specifically at those relating to Stress/Anxiety and Depression for a future meeting. It was acknowledged that the external uncertainty, particularly in relation to the economy, may lead to higher levels of stress for staff throughout the organisation. J Jones advised that she would be liaising with Trade Union colleagues and the Director of Finance to look at possible support options for staff. L Blackett asked if there was any correlation between sickness absence levels and the amount of overtime that had been required to respond to the pandemic. J Jones advised that she would work with the HR Business Partners (HR BPs) to review the detail and report back to a future meeting. **Action: J Jones to work with HR BPs to determine any links between excessive overtime and sickness absence.** M Morgan added that it was important to remember that NSS benchmarked very well against the other NHS Scotland Boards and this was due in no small part to the management of sickness absence internally.

5.3 Members thanked J Jones for the report and noted it in full.

5.4 Members then received a more detailed update from both Scottish National Blood Transfusion Service and Procurement and Facilities on their activities to reduce the number of RIDDORs in their services. M Turner and G Beattie both took Members through short presentations on progress against their action plans. Members acknowledged the amount of work in both areas to get to this much improved position and asked that their thanks be passed on to those involved.

Note: J Deffenbaugh left the meeting.

6. PARTNERSHIP FORUM UPDATE

- 6.1 M Morgan advised that the NSS Partnership Forum had not meet prior to the meeting to enable Trade Union colleagues to attend the NSS Senior Leadership Forum. For future updates Members agreed that the minutes from the NSS Partnership Forum would be included in the meeting papers. **Action: Board Services to add Partnership Forum minutes against this item to the forward programme as a standing item.**

7. iMATTER RESULTS UPDATE [Paper SG/22/29 refers]

- 7.1 J Jones took Members through the paper and all noted the excellent scores achieved. Whilst there was a slight drop in the specific 'trained and developed' figure on the previous year, the overall 76% achieved in year was still higher than in the previous five years. These results would now be reflected in the NSS Great Place to Work Plan and actions identified would be reported throughout the coming year.
- 7.2 Members thanked J Jones for her update and were pleased and encouraged by the results achieved.

8. GREAT PLACE TO WORK PLAN [Paper SG/22/30 refers]

- 8.1 Members noted the paper, which covered all key issues around compliance with the Staff Governance Standard and best employment practice. J Jones added that the plan would now be reviewed against the iMatter results but she did not anticipate any major changes required.

9. STAFF RISKS [Paper SG/22/31 refers]

- 9.1 Members discussed the paper in full and noted the staff related risks. Risk 6799 had already been discussed by Members who felt that this was not a risk that NSS had any power over and as such should just be built into existing business continuity plans. J Jones advised that a draft paper in relation to the proposed industrial action would be circulated to the NSS Executive Management Team (EMT) and Trade Union colleagues in due course. **Action: J Jones to circulate business continuity paper to EMT and Trade Unions once available.**

Note: T Hiddleston left the meeting.

10. WHISTLEBLOWING REPORT [Paper SG/22/32 refers]

- 10.1 J Jones took Members through the Quarter 1 report which had been presented for endorsement. Members noted that there had been no cases reported during the quarter, and that there was a clear action plan for engagement with staff and managers across the organisation, including the 'Speak Up' week planned for October 2022.
- 10.2 In response to the investigation into Whistleblowing by the Independent National Whistleblowing Officer (INWO), a full shared lessons learned exercise was to take place and would be reported on at a future meeting. SG colleagues had mentioned the INWO findings at a recent meeting but were content that NSS had learned lessons from the investigation, had appropriate action plans in place, and these action plans were being well managed. A Langa asked for clarification on the training figures in the report, as they did not match those given earlier in the People Report. J Jones agreed to double check the figures and update outwith the meeting. **Action: J Jones to check training figures and update outwith the meeting.**

11. FORWARD PROGRAMME [Paper SG/21/33 refers]

11.1 Members noted the current draft of the Forward Programme and were reminded to contact Board Services if any additions/changes were required.

12. ANY OTHER BUSINESS

12.1 Members had no other pertinent business to raise.

There being no further business, the meeting closed at 1115hrs.

DRAFT

Minutes (Draft)

Board Services
Area 27
Gyle Square
1 South Gyle Crescent
EDINBURGH EH12 9EB
Telephone 0131 275 6000
Text Relay 18001 0131 275 6000

www.nhsnss.org



NHS NATIONAL SERVICES SCOTLAND AUDIT AND RISK COMMITTEE (ARC)

MINUTES OF MEETING HELD ON THURSDAY 15 SEPTEMBER 2022 VIA TEAMS DIGITAL PLATFORM AT 0930 HRS

Members Present:

Julie Burgess – Non-Executive Director and Committee Chair
John Deffenbaugh – Non-Executive Director
Gordon Greenhill – Non-Executive Director
Arturo Langa – Non-Executive Director
Beth Lawton – Non-Executive Director
Alison Rooney – Non-Executive Director

In Attendance:

Steven Flockhart – Director of Digital and Security (DaS) and Senior Information Risk Owner
Carole Grant – Audit Scotland
Laura Howard – Associate Director of Finance
Carolyn Low – Director of Finance
James Lucas – Internal Auditor, KPMG
Mary Morgan – Chief Executive
Lee Neary – Director of Strategy, Performance, and Service Transformation
Lorna Ramsay – NSS Medical Director and Caldicott Guardian
Thomas Tandy – Internal Auditor, KPMG
Neil Thomas – Partner, KPMG
Lynsey Bailey – Committee Secretary [Minutes]

Apologies:

Rachel Browne – External Auditor, Audit Scotland
Inire Evong – External Auditor, Audit Scotland

1. WELCOME AND INTRODUCTIONS

- 1.1 J Burgess welcomed all to the meeting, which was being held virtually via the TEAMS platform. A special welcome was extended to B Lawton, attending for the first time
- 1.2 Before starting the formal business of the meeting, J Burgess asked Members if they had any interests to declare in the context of the agenda items to be considered but no interests were declared.

2. MINUTES AND ACTION LIST [Papers AR/22/66, AR/22/67 and AR/22/68 refer]

- 2.1 Members considered the draft minutes from the previous meetings on 9 June 2022 and 25 July 2022. Following a brief discussion, Members approved the minutes of 9 June 2022 as an accurate record of the meeting pending the correction of a few minor typographical errors as follows:
 - Re-word minute 8.1 to sound less potentially negative.



Chair
Chief Executive

Keith Redpath
Mary Morgan

NHS National Services Scotland is the common name of the Common Services Agency for the Scottish Health Service.

- Check that the minutes of item 9 was reflective of J Deffenbaugh's concerns and level of assurance.
- Specify the service audit areas in minute 13.1.
- At minute 14.1, clarify that the August 2022 timeline mentioned referred to the draft tender document and not the completion of the overall process.
- Consider whether there should be an action at 6.2 or if alternative wording was needed.

Action: C Low and Board Services to liaise for wording of minute 6.2 of 9 June 2022 meeting.

- 2.2 In respect of the minutes of the meeting held on 25 July, Members were content to approve as a correct record as seen and commended them as an exemplar.
- 2.3 Members noted that the majority of actions had either been completed or were covered by the agenda.

3. INTERNAL AUDIT PROGRESS [Paper AR/22/69 refers]

- 3.1 J Lucas spoke to the paper, which provided a summary of progress against the current year's internal audit plan. Members noted that there were three audits in progress and four more were currently being scoped. In respect of the actions – eight had been completed since the last report, nine were not yet due and six were seeking revisions. Members found the new format helpful. Members discussed the "For Information" box in the bottom right-hand corner of page three noting that, as a Committee, they would not look to get a follow-up on "For Information" items but would need assurance that the actions were timely and appropriate. Members also confirmed that they were content with the proposed extensions. They received clarification that the dates mentioned for the extensions on the cover sheet would be the new proposed dates.
- 3.2 Moving on to the actions from the Leadership and Management Development report, Members were still unclear on value for money and still looking for a logic model. They suggested that building the logic model should be the action. In respect of the Office365 Roles and Responsibilities, and the risk being raised about the payments, Members were given an overview of how this risk was being managed and what the agreed licensing position was. Applying the lessons learned for future contracts would be key. However, M Morgan agreed to speak with B Lawton outside of the meeting to provide more detail and context. Members also discussed the decision log and how decisions made before the implementation of the log were captured and S Flockhart provided a brief overview of how this was being managed. Members were content with the report with the caveat of strengthening the target date for actions relating to the Leadership and Management Development audit to ensure it did not drift.

Action: HR and KPMG to consider whether building the logic model should be the action about the Leadership and Management Development audit.

Action: M Morgan and B Lawton to liaise offline for an overview of the background and context for the Office365 report.

Action: HR and KPMG to strengthen the target date for actions from the Leadership and Management Development audit.

4. INTERNAL AUDIT: BLOOD STOCKS [Paper AR/22/70 refers]

- 4.1 Members noted the outcome of the audit, which was that it provided partial assurance with some improvements required. To address the six "Medium" findings a suite of robust

management actions had been agreed upon to help SNBTS going forward. There had been risks identified, along with mitigations. Members felt that some of the findings appeared to be quite rudimentary and asked the following questions:

- What had prompted the audit?
- Were there more fundamental requirements for budget holders to have a basic awareness?
- In an emergency, would there really be time to take for options to be appraised?
- In terms of the budget spike in March 2022 – was this an indication that the service was underfunded, was it due to new management or was it a legacy issue?

4.2 In response, to the questions, Members were advised that new management was a big part of the reason for the audit but also because this was a major manufacturing and stock holding area. There was budget training for managers, and it was felt that having come through the pandemic, the time was right to review and refresh it. In terms of being underfunded, SNBTS could always benefit from more money but not more so than many other areas of NSS. However, the budget was limited so this was where the planning came in. M Turner thanked the auditors for their help and work in this complex area. There had been nothing surprising in the report and SNBTS senior management was having conversations about how to address the findings. The purchase of laboratory instruments causing the budget spike had likely been year-end purchasing.

4.3 Members noted that all UK blood services were struggling with their stocks and were given an overview of how this was approached, along with the considerations taken before purchasing. However, failing to meet blood demand was not an option. Members were content to sign up to the idea of undertaking options appraisals, but only where the timing allowed. Members discussed how these findings may be indicative of the organisation as a whole going into a period of financial challenge. Members were advised that this was an area where the relationship between the service and finance was understood and formed part of the decision-making, but this was not seen so much in other areas. It also shone a light on what could happen if/when that relationship was not there.

4.4 Following these discussions, Members confirmed they were content with the level of assurance provided.

5. SERVICE AUDIT STEERING GROUP UPDATE [Paper AR/22/71 refers]

5.1 C Low updated Members on activity overseen by the Service Audit Steering Group since the last NSS Audit and Risk Committee meeting. It was early in the process of the audit, and the first round of testing was imminent. Members were advised that the position remained stable in terms of the controls and pre-planning.

6. SERVICE AUDIT: PROGRESS UPDATE [Paper AR/22/72 refers]

6.1 Members were updated on the debrief from last year's audit, along with the areas for improvement which had been identified and documented in the report. The report highlighted the timelines and roles and responsibilities which had been agreed upon. Members were pleased to note that there had been good engagement. However, the initial round of testing was not due to be complete until mid-October 2022 so this was when a more definite indication of how NSS was doing could be expected. Members discussed the possibility for more information to be provided on the impact of developments like STAR and Blackline.

6.2 In terms of the current level of assurance being provided, Members were pleased to note that Stage 1 of the service audit process had been completed as expected. Stage 2 had also generally worked as it should. Some areas (e.g., Atos and DaS) still had some outstanding information to provide at this stage but the timelines were on track and no deadlines had been missed yet. Members asked about the Service Audit Steering Group and the need for it going forward. They were advised that it would still meet quarterly due to the transformation going on. Members asked that future front covers provide a better summary of the key messages. Following some clarification of the handover procedures in the event of a change of auditor resulting from the upcoming tendering process, Members confirmed they were content with the update provided.

7. EXTERNAL AUDIT PROGRESS [Paper AR/22/73 refers]

- 7.1 C Grant spoke to the paper, which updated on progress made by management in addressing recommendations for improvement made by External Audit. She also provided an overview of Audit Scotland's reappointment as External Auditor and confirmed that a new team, still being led by C Grant, would be in place for the next meeting. C Grant also highlighted the closure of the Section 22 report in respect of the procurement of Personal Protective Equipment (PPE) during the pandemic. Members wished to record their thanks to I Evong and R Browne for their work and looked forward to meeting the new team in due course.
- 7.2 Members sought clarification about what was meant by "develop[ing] the external audit approach for the Practitioner Services payments which [were] accounted for as Family Health Services (FHS) expenditure in territorial health board accounts". They were advised that this was similar to the previous PPE work and confirmation of the intent to link into a wider assurance piece on what Boards submitted to NSS for processing.

8. EXTERNAL AUDIT RECOMMENDATIONS [Paper AR/22/74 refers]

- 8.1 Members were taken through the paper, which updated the responses to the recommendations from the external audit report. Of the five recommendations made, three were now closed. L Howard highlighted the updates on the remaining two. Members confirmed they were content with the progress being made.

9. INFORMATION GOVERNANCE AND SECURITY UPDATE [Paper AR/22/75 refers]

- 9.1 Members considered the paper, which updated on key aspects of enabling and underpinning activity in Information Security and Governance. The Information Commissioner's Office (ICO) audit of NHSScotland had been postponed to the fourth quarter of 2022/23 as the NHS was still in reinstatement and recovery mode. However, good progress was being made to prepare for it and Chief Executives were satisfied so far although there was some work still to be done. In respect of the Network and Information Systems audit action plan, Members were pleased to note the work and progress on improving third-party assurance. Members were also pleased to note the identified actions in response to the ICO's reprimand over the COVID-19 status app had all been completed. S Flockhart advised that a separate paper with further detail on this could be made available to Members upon request. Going back to preparations for the ICO audit, B Lawton offered to put S Flockhart in touch with former colleagues of hers who had experience of these types of audits to see if they could be of any assistance. S Flockhart welcomed this.
- 9.2 Moving onto adverse events, Members noted that there had been three reported within the period. One had been closed (ADV0000467 – Vaccination Certificate). One was awaiting closure following feedback from the ICO (ADV0000459 – Citizen PII). The third

had been resolved but was awaiting closure by the SBU following the recent confirmation from the ICO that they were satisfied that all appropriate actions had been taken. Members asked about the status of the Data Protection Officer role following Patricia Ruddy's secondment and advised that it had been filled on an interim basis at the moment, but the substantive recruitment process would conclude in the next month. In terms of the number of adverse events being raised, Members expressed concerns that this seemed to be a huge increase in the last 18 months. S Flockhart advised that there had been a big increase in interactions over the pandemic period and this was likely related to that. In addition, the emergence of more digital solutions created opportunities for questions/issues to be raised more easily. Members were also provided with an overview of the staff training programme which had increased awareness of adverse events and how to raise them. Looking at them as a proportion of the interactions, it was still a positive position but it was important not to be complacent so this would continue to be monitored.

- 9.3 Members then discussed the risks, asking for more information on the impact of the actions being taken. They were provided with a brief overview and noted that it was hoped the monthly sessions in place would push through these actions and provide that information, as well as ensure that staff understood the importance of compliance. Members discussed the sharing of audit results with Public Health Scotland (PHS) and were reassured that the reason for not having done so yet was that the evidence had not been available. It had only just become available so NSS was working through that and would share it with PHS in due course. For Risk 4577 (Information Governance Legislation Breach), Members sought and received reassurance that the update was likely to reduce the severity of the risk. Going back a little in the report, Members asked about adverse event ADV0000459 and why staff were still being allowed to use their own devices but were advised that this was a diminishing position and being managed out completely. Members also asked about whether the Cyber Centre of Excellence was still pursuing new customers and were given an overview of recent contact from some local authorities. Members thanked S Flockhart for the update.

10. FRAUD REPORT [Paper AR/22/77 refers]

- 10.1 Members noted the report, which provided a quarterly update on the fraud work within NSS. L Howard highlighted the investigations. Five allegations had been investigated - four of these had been closed (one of which had uncovered a genuine act of fraud) and one investigation was still ongoing. Members discussed concerns within NHS Scotland that the cost-of-living crisis might create issues around secondary employment and noted that L Howard was working with HR from a well-being perspective to ensure staff were appropriately supported. There were also plans to have a refresher training and awareness raising of the responsibilities and obligations of all staff under NSS's Standing Financial Instructions. Members noted that, in respect of the National Fraud Initiative exercise, work was underway and would have a more detailed update for a future meeting. Members were pleased to note the 95% mandatory training compliance rate, which was the highest it had ever been.

11. REVIEW OF GIFTS AND HOSPITALITY [Paper AR/22/78 refers]

- 11.1 Members considered the paper which assured that activity about the acceptance, or otherwise, of Gifts and Hospitality remained in line with NSS's Standing Financial Instructions. There were 13 entries in the register over the period and four offers of hospitality had been declined. This was broadly in line with previous years and all appropriate authorisation processes had been followed. Members confirmed they were content with the report, noting the intention to run a campaign to remind staff of the rules and obligations in respect of hospitality.

12. RISK MANAGEMENT [Paper AR/22/79 refers]

- 12.1 Members considered the paper, which updated the Risk Management activity across all risks, highlighting any red or new amber reputational risks. Members were given an overview of the red risks which had either been closed or had been superseded by other risks being considered.
- 12.2 Members asked whether the risk of unpatched software had been factored into the risk rating for risk 6249 (P&CFS Bespoke System) and what mitigations were in place. They noted that NSS was in discussion with Oracle about extended support and were given an overview of the licensing arrangements. In terms of Windows 7, discussions had been held with relevant directors and DaS had the necessary information on the affected machines and was planning how to manage this. There was no final answer yet, but this was being developed.
- 12.3 Members had the following feedback on the report:
- For risk 6072 (Overarching risk for CHI/Child Health), Members felt there needed to be more information on how the decoupled child health aspect would be managed.
 - For risk 6819 (Resourcing the COVID-19 Public Inquiry), Members could not see it being an option that NSS did not deliver the information requested by the public inquiry on time
 - For risk 6809 (COVID-19 Senior Leadership Capacity & Continuity), the description suggested there was no backup if certain senior people left which contradicted information presented elsewhere on succession planning.
 - Members asked for a more succinct summary of the key headlines and what the level of assurance was
 - While Members acknowledged the work on reviewing the risk register, they still had some queries about confidential risks and how they were monitored as well as the fact that risks were showing as red even after mitigation and some risks which had still not been closed off after seven years.
- 12.4 One or two Members had some other comments which were being picked up offline. L Neary agreed to address the feedback given above with those additional comments for the next report.

ACTION: L Neary and C McDermott to address Members' feedback as provided for the next Risk Management Report.

13. ANNUAL FEEDBACK REPORT [Paper AR/22/80 refers]

- 13.1 Members noted the paper, which provided a summary of the activity surrounding feedback, comments, concerns, and complaints received by NSS from 1 April 2021 to 31 March 2022. Members were pleased to note that customer satisfaction had increased significantly, along with the volume of positive feedback. While there had been an increase in the number of complaints, this was due to the inclusion of figures from the National Contact Centre (which had previously been separated) and Members were reassured that the other areas which had seen an increase in their complaints figures had responded with improvement plans. Complaints, as a proportion of interactions, remained low overall and none had been referred to the Ombudsman. Members also noted the inclusion of positive feedback per feedback from the Executive Management Team. Members noted that the statement about complaints being reviewed by this Committee on page 29 was not factually accurate and asked for it to be corrected. They also asked if NSS had a customer satisfaction/journey strategy and were advised that NSS had recently refreshed its customer experience strategy, which would be shared with Members

following the meeting. Members confirmed that they were content to approve the report, subject to the correction being made on page 29.

Action: Statement about complaints being reviewed by ARC to be corrected before publication of the final version.

14. FOR INFORMATION

14.1 Members noted the following papers which had been provided for information:

- ICPO Inspection Report- Communications Data - [paper **AR/22/82** refers]
- Forward Programme - All [paper **AR/22/82** refers]

15. ANY OTHER BUSINESS

15.1 Members had no further business to raise within the main agenda and were ready to move onto the In Private session.

[Secretary's Note: All those In Attendance, except C Low and L Bailey, left the meeting at this point.]

16. IN PRIVATE: INTERNAL AND SERVICE AUDIT PROCUREMENT [Paper AR/22/83 refers]

16.1 Members considered the paper which presented the collaborative procurement strategy proposed to enable new Service Auditor and Internal Auditor appointments to be in place from 1 April 2023. Members noted the overview of the process and timeline, and how the lots would be allocated. The draft tender document had been included and Members were invited to provide feedback. However, they were also reminded of the elements (namely specification and weighting) that were still to be finalised at an upcoming meeting with the other Boards involved. Following a brief overview of the NSS Commodity Advisory Panel (CAP) membership, Members noted that C Low and J Burgess would be involved in the procurement evaluation and report back to the Committee. It was noted that this paper had initially been issued with the main papers in error. However, as the document was still in draft, with key elements yet to be agreed, it had been determined that this should have no material impact.

16.2 Members had several questions about their input, the assurance in respect of the process, Central Legal Office (CLO) input and how the bidders' responses to the budget of that would be managed as part of the process with other Boards. They were assured that the full Procurement Evaluation report will come to this Committee and Members were comfortable in respect of the internal process proposed around the evaluation. Members briefly discussed any strategy and principles around cost savings in the event of both lots being awarded to the same bidder. Members also discussed the potential overlap in respect of the work NSS undertook for Public Health Scotland, noting this was where the collective approach would have benefits. Members confirmed they were comfortable with the proposed approach, CAP membership and ARC representatives, with J Burgess and C Low sharing information as appropriate.

16.3 M Morgan wished to make Members aware of an emerging issue in CLO of an "under new management" nature following the retirement of the Director/Legal Advisor. An internal audit may be undertaken in response, and the outcomes may lead to some further activity in this area.

There being no further business, the meeting closed at 1157hrs.

Minutes

Board Services
Area 27
Gyle Square
1 South Gyle Crescent
EDINBURGH EH12 9EB
Telephone 0131 275 6000
Text Relay 18001 0131 275 6000



www.nhsnss.org

NHS NATIONAL SERVICES SCOTLAND STAFF GOVERNANCE COMMITTEE

MINUTES OF MEETING HELD ON TUESDAY 25 OCTOBER 2022, MARRIOTT HOTEL, EDINBURGH COMMENCING 0930 HOURS AND VIA TEAMS

Present:

Lisa Blackett – Non-Executive Director and Committee Chair
John Deffenbaugh – Non-Executive Director
Tam Hiddleston – Trade Union Representative
Arturo Langa – Non-Executive Director
Gerry McAteer – Trade Union Representative
Beth Lawton – Non-Executive Director
David Allan – Trade Union Representative
Suzanne Milliken – Trade Union Representative
Keith Redpath – NSS Chair

In Attendance:

Jacqui Jones – Director of HR and Workforce Development
Mary Morgan – Chief Executive
Karen Nicholls - Committee Services Manager [Minutes]

Observer:

Gordon Greenhill – Non-Executive Director

Apologies:

Ian Cant – Non-Executive Director

1. WELCOME AND INTRODUCTIONS

- 1.1 L Blackett welcomed all to the meeting, which was being held in person and virtually via the TEAMS platform, noting the apologies as recorded above. L Blackett added that any inputs in relation to proof reading were done outwith Committee to ensure appropriate time for debate was available for discussion.
- 1.2 Members were reminded that this was an ad-hoc meeting to review and approve the NSS Workforce Plan.

2. NSS WORKFORCE PLAN [paper SG/22/35 refers]

- 2.1 Members noted and discussed the content of the NSS Workforce Plan and the updates that would be incorporated into the next iteration of the plan which would be due for the next reporting period.



Chair
Chief Executive

Keith Redpath
Mary Morgan

NHS National Services Scotland is the common name of the Common Services Agency for the Scottish Health Service.

2.2 Members thanked J Jones and the HR team for the work carried out on the plan and were content to approve it in full on behalf of the Board. It was noted that the document would be published on the NSS external website by 31 October 2022 as per requirements.

There being no further business, the meeting closed at 0957 hrs.

DRAFT

Minutes

(Draft)

Board Services
Area 27
Gyle Square
1 South Gyle Crescent
EDINBURGH EH12 9EB
Telephone 0131 275 6000
Text Relay 18001 0131 275 6000



www.nhsnss.org

NHS NATIONAL SERVICES SCOTLAND FINANCE, PROCUREMENT AND PERFORMANCE COMMITTEE (FPPC)

MINUTES OF MEETING HELD ON WEDNESDAY 16 NOVEMBER 2022 VIA TEAMS DIGITAL PLATFORM AT 0930 HRS

Present:

Gordon Greenhill – Non-Executive Director and Committee Chair
Julie Burgess – Non-Executive Director
Lisa Blackett – Non-Executive Director
Beth Lawton – Non-Executive Director
Keith Redpath – NSS Chair

In Attendance:

Gordon Beattie – Director of National Procurement
Martin Bell – Director of PCFS (Items 1-3)
Steven Flockhart – Director of Digital and Security
Carolyn Low – Director of Finance
Mary Morgan – Chief Executive
Lee Neary – Director of Strategy, Performance and Service Transformation
Matthew Neilson – Associate Director of Strategy, Performance and Communication
Lynsey Bailey – Committee Secretary (Minutes)

Apologies:

Ian Cant – Employee Director

1. WELCOME AND INTRODUCTIONS

1.1 G Greenhill welcomed all to the meeting, which was being held virtually via the TEAMS platform. Apologies were noted as listed above.

2. DECLARATIONS OF INTEREST

2.1 There were no declarations of interest or transparency statements made in respect of any item on the agenda.

3. MINUTES AND MATTERS ARISING [Papers FPP/22/48 and FPP/22/49 refer]

3.1 Following a brief discussion, Members were content to approve the minutes from the meeting held on 24 August 2022 as an accurate record.

3.2 Members were pleased to note that the majority of actions were either completed or programmed in for a future meeting. Members were updated on the meeting held on 11 November 2022 regarding FPPC Development Sessions. They were advised that,



Chair
Chief Executive

Keith Redpath
Mary Morgan

NHS National Services Scotland is the common name of the Common Services Agency for the Scottish Health Service.

following discussions with K Redpath, quarterly sessions would be scheduled but there was the option to cancel if there were no topics to discuss. C Low also highlighted that, in respect of the Meridian Court Options Appraisal, the Board did not discuss it as initially intended and this would be covered in detail later in the agenda.

4. PUBLIC BODIES CLIMATE CHANGE DUTIES REPORT [Paper FPP/22/50 refers]

- 4.1 G Greenhill advised Members that, following discussions with K Redpath and L Blackett (the Board's Sustainability Champion), it had been decided to defer this item until the report had been discussed by the Executive Management Team (EMT). Members' approval was sought for the Chair of FPPC and NSS Board Chair to then approve the report for publication, following its presentation to EMT, and bring it back to the next FPPC meeting in February 2023 for homologation. However, if there were any substantive issues which Members identified, they were asked to feed these back immediately following this meeting. Members confirmed that they were supportive of this course of action.

ACTION: Chairs of the NSS Board and FPPC to approve the Public Bodies Climate Change Duties report for publication following its presentation to EMT and bring it back to the next FPPC meeting in February 2023 for homologation

5. MERIDIAN COURT RELOCATION OUTLINE BUSINESS CASE [Paper FPP/22/51 refers]

- 5.1 M Bell spoke to the draft Outline Business Case for the relocation of staff from Meridian Court, briefly summarising the options and giving an overview of how the accommodation at Delta House could be used. Members also heard about the staff engagement process and high level of participation. M Bell highlighted that the option of taking a second floor at Delta House had not been definitively ruled out. Although this decision could not be made within the timescale for vacating Meridian Court, it could be revisited at a later date if necessary. Members discussed the provisions to reimburse staff for working from home, as well as the considerations for staff in respect of commuting and which site would therefore be the ideal base for them. Members acknowledged that co-location with other NHS or public sector bodies (where there was the potential to do so) was the best way forward in terms of financial sustainability.
- 5.2 Moving onto the decision at the September 2022 NSS Board meeting, it had been argued that the decision to terminate the lease was not specifically required as the original agreement had been to lease Meridian Court for a number of years, and this had now been reached. Referring to the earlier point about staff commuting, Members discussed the rules and provision for re-imburement of excess travel. The terms and conditions for hybrid working had not yet been finalised by STAC (Scottish Terms & Conditions Committee) so, in the meantime, staff would be allocated a base for the purposes of travel. Members commented that the report as a good piece of work and appreciated the level of staff engagement.
- 5.3 Members asked about the final section which had not yet been completed and were advised that it would be completed by Avison Young following the decision resulting from the discussions at this meeting. The decision would also enable consultation with the Trade Unions to progress around staff bases, excess travel provisions etc. Following a discussion about the nature of the decision required from FPPC,

Members agreed this should be around approving the direction of travel to enable progression of the preferred option, and completion of the Outline Business Case for submission to Scottish Government. Members asked how this impacted on Future Ready activity but were advised that the programme had now been closed and nothing arose in respect of this relocation work which would require it to be re-opened.

- 5.4 Members agreed to approve not renewing the Meridian Court lease and progress the Outline Business Case based on Option 3A (one floor at Delta House, West Nile Street, plus retained estate) as the preferred replacement solution. M Bell agreed to have Avison Young turn this around by the end of December 2022 and submit it to Scottish Government by the end of January 2023 to start the rest of the process. A homologation paper would then come to the next FPPC meeting in February 2023.

ACTION: M Bell to have Avison Young complete the Meridian Court Outline Business Case by the end of December 2022, submit it to Scottish Government by the end of January 2023 and bring a homologation paper to the next FPPC meeting in February 2023.

6. SCOTLAND EXCEL AND NATIONAL SERVICES SCOTLAND (NATIONAL PROCUREMENT) STRATEGIC COLLABORATION FRAMEWORK [paper FPP/22/52 refers]

- 6.1 G Beattie spoke to the paper which outlined a Strategic Collaboration Framework between National Services Scotland NSS (National Procurement), and Scotland Excel. Members felt this was a good report and exciting opportunity for NSS. They were supportive in principle but sought clarity on what it meant in terms of other opportunities. They were advised that this was primarily a statement about working collaboratively rather than competitively and having more economy of scale. Members discussed sustainability, working with local suppliers etc, and were advised that, in terms of strategic ambitions, National Procurement was working in a pan-public sector procurement group. This group had agreed a high-level strategy which would be a “golden thread” right down to individual NHS Board level. Members were pleased to note that there was no fee or charge to be associated with the framework. Members also discussed what the framework meant when NSS was looking at a high-value contract (e.g. replacing existing fleet with electric vehicles) and noted this would be done in wider collaboration across NHSScotland or, in some cases, the public sector as whole. Following this discussion, Members were in agreement to approve the Framework.

7. FINANCE REPORT [paper FPP/22/53 refers]

- 7.1 Members considered the paper which updated on performance against NSS’s financial plan as at 30th September 2022. Members were pleased to see that the gap in COVID-19 expenditure had been addressed and thanked C Low that the work done to achieve this. Noting uncertainty, Members asked about the need to revisit financial plans in light of the upcoming UK and Scottish Government budgets. They were advised that the next FPPC meeting, scheduled for 3 February 2023 would consider that but the situation was not expected to worsen and any urgent, material impact would be addressed through the NSS Board as necessary. Members asked for an update on the outcome of the deep dive mentioned. They were advised that it had looked at a variety of points but predominantly focussed on allocations and COVID-19 spend, which is what had enabled the turnaround from a deficit to a surplus and

put NSS back on track to achieve statutory targets. Following these discussions, Members confirmed they were content with assurance provided.

8. STANDING FINANCIAL INSTRUCTION ADVERSE EVENTS

- 8.1 Members were made aware of an emerging issue. An employee seconded to NHS Lothian had managed to be paid by both organisations for a period of time. This was referred to the Crown Office, who had concluded it was not Fraud but unjustified enrichment. An internal investigation was currently ongoing, and Members would be advised of the outcome. However, it was not anticipated that there would be any financial loss as appropriate steps had been taken.

9. PORTFOLIO MANAGEMENT GROUP (PMG) REPORT [Paper FPP/22/55 refers]

- 9.1 Members noted the report, which gave an overview of the delivery status of key national programmes being delivered by NSS on behalf of NHS Scotland, based on the position reported to the NSS Portfolio Management Group at their last meeting on 8th November. Members were content with the status of the programme watch lists and escalation actions agreed.

10. SERVICE EXCELLENCE REPORT [Paper FPP/22/56 refers]

- 10.1 Members welcomed the report which summarised NSS's performance as at the end 31 October 2022 and commended its clarity. Members noted the level of risk highlighted around the delivery of the Annual Delivery Plan (ADP). This was due to the considerable pressures on stakeholders that NSS was reliant on in order to deliver and progress elements of the ADP. However, Scottish Government and Policy teams had reviewed and approved the milestones.

11. RESILIENCE REPORT [Paper FPP/22/57 refers]

- 11.1 Members noted the report, which updated on resilience activities that have taken place since the previous FPPC meeting on 24 August 2022 and highlighted any future issues. There had been no significant business continuity incidents requiring stand up of the NSS Resilience Management Team. However, a review of the NSS Resilience Management Plan, Executive On-Call and Winter arrangements had been undertaken. Members also noted the update provided on the blood stocks position. Following a brief discussion, Members were content with the report and had nothing further to ask.

12. REVIEW OF BUSINESS RISKS [Paper FPP/22/58 refers]

- 12.1 Members were taken through an overview of the activity in relation to the following highlighted risks and issues:
- Red Risk 6282 – Devices with Windows 10 v1709 Build
 - Closed Red Risk 6799 – Industrial Action (which was in the process of being removed as a risk as per Board's request)
 - Red Risk 6205 – Financial Sustainability in the Medium to Long Term
 - Amber Risk 6554 – Skilled Resource Data Capture Validation and Pricing Replacement
 - Amber Risk 6208 – Hosted Desktop Expiry

- Amber Risk 6121 – Unstructured and Unclassified Data
- Corporate Issue 6622 – Budgetary Pressure - Dependency (Digital Prescribing and Dispensing Pathways)
- Corporate Issue 6661 – Supply: Russia Ukraine Conflict
- Corporate Issue 6249 - P&CFS Bespoke System (Oracle 12C & Windows 7/XP)

12.2 Members discussed risk 6282, noting the number of devices seemed to be increasing rather than decreasing. They were reassured this was due to a potential issue with reporting, which was being picked up with Digital and Security as most of the increases looked like they were being managed via “Business as Usual” processes rather than as a risk. Members discussed separation of those devices that could not be made compliant from those with new vulnerabilities which had been identified but could be addressed. Members also discussed 3816 (Staffing Levels in Manufacturing) which had been reopened and were reassured regarding the actions being taken.

13. FORWARD PROGRAMME [paper FPP/22/46 refers]

13.1 Members noted the content of the Forward Programme, noting that there was a sustainability Item to be added and the details would be provided to Board Services.

ACTION: Board Services to check the details of the sustainability item to be added to the forward programme.

14. ANY OTHER BUSINESS

14.1 Members had no further business to raise.

15. NATIONAL PROCUREMENT CONTRACT SCHEDULE [Paper FFP-IP/22/01 refers]

15.1 Members agreed, in accordance with paragraph 5.22 of NSS’s Standing Orders, to discuss this item in private

There being no further business, the meeting closed at 1125hrs.

Minutes

(DRAFT)

Board Services
Area 27
Gyle Square
1 South Gyle Crescent
EDINBURGH EH12 9EB
Telephone 0131 275 6000
Text Relay 18001 0131 275 6000



www.nhsnss.org

NHS NATIONAL SERVICES SCOTLAND STAFF GOVERNANCE COMMITTEE

MINUTES OF MEETING HELD ON THURSDAY 24 NOVEMBER 2022, MARRIOTT HOTEL, EDINBURGH COMMENCING 0930 HOURS AND VIA TEAMS

Present:

Lisa Blackett – Non-Executive Director and Committee Chair
Tam Hiddleston – Trade Union Representative
Ian Cant – Non-Executive Director
Arturo Langa – Non-Executive Director
Gerry McAteer – Trade Union Representative
Beth Lawton – Non-Executive Director
David Allan – Trade Union Representative
Keith Redpath – NSS Chair

In Attendance:

Jacqui Jones – Director of HR and Workforce Development
Mary Morgan – Chief Executive
Jane Fewsdale - Head of People Insights, Performance & Systems
Hayley Barnett – Associate Director, Governance and Board Services (Board Secretary)
Karen Nicholls - Committee Services Manager [Minutes]

Observer:

Gordon Greenhill – Non-Executive Director

Apologies:

Suzanne Milliken – Trade Union Representative
John Deffenbaugh – Non-Executive Director

1. WELCOME AND INTRODUCTIONS

- 1.1 L Blackett welcomed all to the meeting, which was being held in person and virtually via the TEAMS platform, noting the apologies as recorded above. L Blackett added that any inputs in relation to proof reading were done outwith Committee to ensure appropriate time for debate was available for discussion.

2. DECLARATIONS OF INTEREST

- 2.1 There were no declarations of interest or transparency statements made in respect of any item on the agenda.



Chair
Chief Executive

Keith Redpath
Mary Morgan

NHS National Services Scotland is the common name of the Common Services Agency for the Scottish Health Service.

3. NSS PARTNERSHIP FORUM [paper SG/22/39 refers]

- 3.1 I Cant advised that as requested a copy of the draft minutes from the NSS Partnership meeting held on 22 September had been made available for information, and provided Members with a verbal update from the NSS Partnership Forum (PF) meeting held on 22 November 2022.
- 3.2 Members were reassured to hear that the PF continued to work in a positive and collaborative way with good discussion and debate. This was particularly important in the current climate. I Cant advised that J Jones had ensured that discussions in relation to the possible industrial action had been conducted in a supportive way and all voices were heard. M Morgan added that the NSS Partnership Working Agreement had also been discussed and she and I Cant would now be formally signing the document for 2022-23.
- 3.3 Members thanked both for their verbal update and noted the minutes provided. J Jones added that the work done in HR in relation to guidance for industrial action was now being used by other Health Boards as it was seen as an excellent source of information.

4. PEOPLE REPORT [paper SG/22/40 refers]

- 4.1 J Jones took Members through the People Report and highlighted the following areas for scrutiny;
 - National Contact Centre (COVID Response) – service redesign had taken place to reflect changes to the programme and NSS was now in a position to serve notice to that workstream in line with the fixed term contract requirements. This had been discussed fully at the NSS Executive Management Team on 21 November 2022. Any further advice, requests for service received from Scottish Government would be factored into planning in relation to these contracts;
 - Health & Safety Management systems was almost ready and work was ongoing to move it to a go live position;
 - Following on from development days with the EMT, the Organisational Development Team were supporting leadership with a focus on the Senior Leadership Forum, with a first session on 28 November 2022;
 - Statutory and Mandatory Training was now in a better place, but introduction of an additional module may affect this overall;
 - Appraisals, Objectives and Personal Development Plan figures were being reviewed to identify the 'true' levels, taking into account new starts who would not have an appraisal within the first 12 months of their start date, but were being included in the totals. The same applied for other criteria including those on a career break, dental professionals etc. However, it was noted that for Objectives and PDPs these should be in place for all new staff within their first 12 weeks of service. J Jones agreed to provide a more detailed paper on this for a future meeting;
 - Sickness absence levels were continuing to be monitored closely.

- 4.2 Members discussed the report in full and asked that further communications to all staff be put in place to encourage planning for remaining annual leave as this figure in relation to outstanding was still very high.

Action: J Jones to produce additional comms for all staff in relation to outstanding annual leave.

Action: J Jones to provide a more in-depth review of compliance levels for Appraisals, PDPs and Objectives to a future meeting.

- 4.3 Members noted the higher than normal turn-over rate and J Jones advised that a lot of this was due to the excellence of NSS staff moving on to promoted posts. Further work to grow/develop remaining staff would be at the forefront of the enhancing leadership work currently underway.
- 4.4 Members thanked J Jones for her informative report and welcomed the updated approach to graphs and charts. Members confirmed that they were content with the report and scrutiny carried out.

5. WHISTLEBLOWING QUARTERLY REPORT [paper SG/22/41 refers]

- 5.1 J Reilly took Members through the report and noted that there had been no new cases reported during the period. However, one concern had been raised in relation to a contracted service. This has been fully investigated and was not substantiated or upheld.
- 5.2 Members noted that the previous complaint, reported to the Independent National Whistleblowing Officer (INWO) had now concluded and a full debrief session held with the officers. This had been an open and honest session about the process itself which had provided learning opportunities for both parties. NSS was now working alongside five other Boards and INWO to look at a set of resources and tools to ensure consistency of approach.
- 5.3 J Reilly advised that the appointment of Hayley Barnett, Associate Director Governance and Board Services (Board Secretary), this new role would involve her becoming the Whistleblowing Ambassador for NSS and she therefore would be providing the reporting to future meetings. J Reilly would then attend for the Annual Report as the Executive Lead.
- 5.4 Members queried the reporting of Whistleblowing Training within the People Report and were advised that this had been done to avoid duplication of reporting, but it would feature in the annual Whistleblowing report to Committee. Members noted that a full dataprotection impact assessment had been carried out on the manual spreadsheet process for collecting data as an interim measure while the digital tool was being developed. This was part of a much bigger project and there was currently no specific timeline for completion.

6. STAFF RISKS QUARTERLY UPDATE [paper SG/22/42 refers]

- 6.1 Members noted the Staff Risk report and scrutinised it in full. Recognition that the risks in relation to staff wellbeing, particularly in the current financial climate, were being reviewed and mitigated where possible. This also linked with a review of sickness absence, particularly in relation to stress and anxiety, and tools and actions to help

with this were being put in place. HR staff were working closely with the Healthy Working Lives and Occupational Health Teams. A Stewart advised that this was also being picked up as part of the Wellbeing Programme of work and a gap analysis carried out. This would be reported via the Staff Risks to Committee.

- 6.2 Committee Members were encouraged by this approach and were content that the report provided appropriate information to allow full scrutiny and assurance.

7. RECENT AUDITS [paper SG/22/44 and SG/22/45 refer]

- 7.1 L Blakett advised that both reports had already been reviewed by the NSS Audit and Risk Committee and were therefore presented for information and scrutiny respectively.

- 7.2 Notification of Change and Protection Payments – Members noted the paper provided for information and the numbers of staff currently on different forms of protection. J Jones advised that a full report would come to the next Staff Governance Committee prior to submission to Scottish Government.

Action: Board services to add to forward programme for next meeting.

- 7.3 Leadership and Management Development Audit – Members noted the content of the report, and the subsequent discussions that had taken place at the recent Board Development Session as part of the section on Workforce Sustainability. The two areas highlighted; Strategic Intent and Value for Money, were an integral part of the new model around Leadership. Members had no further questions at this time and were content that the report provided sufficient levels of scrutiny.

ITEMS FOR INFORMATION

8. TURAS LEARN DECISION [paper SG/22/38 refers]

- 8.1 Members noted the content of the report and asked for further details on the resource elements required to meet the deadlines presented. J Jones advised that NSS was on course to move to TURAS learn on schedule, it was the management reporting element that could be delayed as the tool was currently still at the minimum viable product (MVP) stage. Discussions between the NSS and NES Chief Executives were underway to establish a way forward.

- 8.2 It was also noted that additional discussions in relation to specific SNBTS modules (Learn Blood Transfusion) was ongoing but this would not affect the statutory and mandatory training element for SNBTS staff in general. Members noted that the LearnPro contract ended in March 2023, and NSS would therefore be moving across within that timeline.

9. WELLBEING ACTION PLAN UPDATE [paper SG/22/43 refers]

- 9.1 Members noted the progress made in relation to the NSS Wellbeing Framework and the appointment of a new Executive Lead (J Jones) and Wellbeing Champion (L Neary, Director SPST). L Neary would attend the national groups to influence and ensure NSS was aligned to any national initiatives. A new Wellbeing Group was also

being established with Membership from across the organisation. Governance of the programme was via the Occupational Health and Safety Committee.

- 9.2 A Stewart advised that a gap analysis was also being carried out on what was currently being delivered and what may be required in the future. Of particular concern currently was the financial crisis and what could be done to support staff and line managers. The gap analysis would then form the basis for the objectives of the plan and reported up via the NSS PF and Staff Governance Committee.
- 9.3 Members were content to note the paper for information.

10. SCHEDULE OF MEETINGS [paper SG/22/46 refers]

- 10.1 Members noted the scheduled of meetings and had no further comments.

11. MERIDIAN COURT DRAFT OUTLINE BUSINESS CASE [paper SG/22/47 refers]

- 11.1 Members noted the Meridian Court Draft Outline Business which had been provided for information only. All agreed that this was a very positive piece of work and good progress was being made.

12. ANY OTHER BUSINESS

- 12.1 Members noted that there was no other competent business to discuss.

Meeting closed 1040 hrs.

NSS BOARD

B/22/40

18.2.22 DEVELOPMENT SESSION

Paper (with Number allocated - receipt confirmed if in Bold) Due Date Received Date Approved by Outcome (Approved, Actioned for Info)

| | Paper (with Number allocated - receipt confirmed if in Bold) | Due Date | Received Date | Approved by | Outcome (Approved, Actioned for Info) |
|---|---|-----------------|----------------------|--------------------|--|
| Standing Items | BDS/22/01 Agenda | 2.3.22 | 2.3.22 | | |
| | Presentations received: Creative Testing SNBTS Strategic Objectives FY 23 | | | Verbal Verbal | |
| Strategic and Key Items | | | | | Discussed at development session |
| Additional Requests | | | | | |
| Items Deferred | | | | | |
| Performance (Items for Scrutiny) | | | | | |
| Additional Requests | | | | | |
| Items Deferred | | | | | |
| Board Papers | | | | | |
| For Info | | | | | |

| 10.3.22 FORMAL | | | | | | |
|--|-------------------------|----------------------|----------|---------------|-------------|--|
| Paper (with Number allocated - receipt confirmed if in Bold) | Exec Lead | Author | Due Date | Received Date | Approved by | Outcome (Approved, Actioned for Info) |
| Agenda B/22/01 | Keith Redpath | Board Services | 2.3.22 | 2.3.22 | | |
| Minutes B/22/02 | Keith Redpath | Board Services | 2.3.22 | 2.3.22 | | |
| Action List B/22/03 | Keith Redpath | Board Services | 2.3.23 | 2.3.22 | | |
| Chair's Update | Keith Redpath | Keith Redpath | | | | Verbal |
| Chief Executive's Report | Mary Moran | Mary Moran | | | | Verbal |
| RAM-Queerries | | | | | | |
| Financial Sustainability Deep Dive [B/22/ | Carolyn Low | | 2.3.22 | | | Discussed at development session From EMT 17.1.22 |
| Risk 6 month update | Lee Neary | Angela Wilson-Coutts | | | | Subsumed into Intergrated Performance Report |
| COVID Status Application ICO Update [B/22/04] | | | | | | |
| Public Inquiries Report [B/22/07] | Carolyn Low | Eilidh McLaughlin | 2.3.22 | Not received | | Not received |
| | Norma Shippin | Norma Shippin | 2.3.22 | 2.3.22 | | |
| One Performance Report [B/22/05] | | | | | | |
| Finance Planning [B/22/06] | Lee Neary | Angela Wilson-Coutts | 2.3.22 | 4.3.22 | | Subsumed into Intergrated Performance Report |
| Performance Report - RMPQ3 Update - see B/22/05 | Carolyn Low | Finance | 2.3.22 | 4.3.22 | | Subsumed into Intergrated Performance Report |
| People Report see B/22/05 | Lee Neary | Matthew Neilson | | | | Subsumed into Intergrated Performance Report |
| | Jacqui Jones | HR | | | | |
| Public Inquiries [B/22/07] | Lee Neary/Norma Shippin | | 2.3.22 | 2.3.22 | | |
| Governance Committee Minutes (Draft and Approved) B/22/09 | | | | | | |
| Forward Programme [B/22/08] | | Board Services | 2.3.22 | 2.3.22 | | |
| | | Board Services | 2.3.22 | 2.3.22 | | |



13.04.22 Development Session

Paper (with Number allocated - receipt confirmed if in Bold)

Exec Lead Author Due Date Received Date Approver Outcome (Approved, Actioned for Info)

Programme

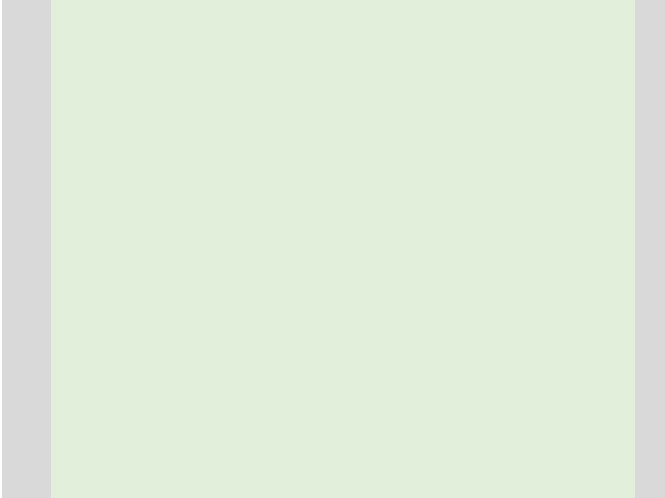
Keith Redpath

Development session for Board members only organised by KR with outside facilitator

NEW MODEL CODE OF CONDUCT TO BE APPROVED - add to SO's debate

28.6.22 Formal - CANCELLED

Paper (with Number allocated - receipt confirmed if in Bold) Exec Lead Author Due Date Receive Approv Outcome (App



29.7.22 Formal

Paper (with Number allocated - receipt confirmed if in Bold)

| | Exec Lead | Author | Due Date | Received Date | Outcome (Approved, Actioned for Info) |
|---|------------------|--------------------|-----------------|----------------------|--|
| Agenda B/22/11a | Keith Redpath | Board Services | 22.7.22 | 22.7.22 | Approved |
| Minutes B/22/12 | Keith Redpath | Board Services | 22.7.22 | 22.7.22 | Approved |
| Action List B/22/13 | Keith Redpath | Board Services | | | Noted |
| Chair's Update | Keith Redpath | Keith Redpath | | | Verbal |
| Chief Executive's Report | Mary Moran | Mary Moran | | | |
| NSS Standing Orders [B/22/17] | Keith Redpath | | 22.7.22 | 22.7.22 | Approved |
| NSS Register of Interests [B/22/20] | Keith Redpath | Board Services | 22.7.22 | 22.7.22 | Approved |
| NSS Sustainability Strategy [B/22/14] | Carolyn Low | Julie Critchley | 22.7.22 | 21.7.22 | Approved |
| NSS Committees' Annual Reports to the Board [B/12/15] | Keith Redpath | Multiple | 22.7.22 | 22.7.22 | Approved |
| NSS Annual Report and Accounts (In Private) [IP/22/02] | Carolyn Low | Laura Howard | 22.7.22 | 25.7.22 | |
| NSS Standing Finance Instructions [B/22/16] | Carolyn Low | Laura Howard | 22.7.22 | 22.7.22 | Approved |
| Annual Whistleblowing Report [B/22/21] | Jacqui Reilly | Lynn Morrow | 22.7.22 | 22.7.22 | Noted |
| Integrated Performance Report [B/22/18] | Lee Neary | Caroline McDermott | 22.7.22 | 22.7.22 | Noted |
| Finance Report see B/22/18 | Carolyn Low | Finance | | | |
| Performance Report | Lee Neary | Matthew Neilson | | | |
| People Report see B/22/18 | Jacqui Jones | HR | | | |
| Risk Report (6 months) [B/22/19] | Lee Neary | Matthew Neilson | 22.7.22 | 22.7.22 | Noted |
| NSS Committees' Approved and Draft Minutes [B/22/22] | Keith Redpath | Board Services | 22.7.22 | 21.7.22 | Noted |
| Board Forward Programme [B/22/23] | Keith Redpath | Board Services | 22.7.22 | 22.7.22 | Noted |
| NSS Public Inquiries [B/22/24] | Lee Neary | ? | 22.7.22 | 22.7.22 | Noted |

9.9.22 Development Session

Paper (with Number allocated - receipt confirmed if in Bold) Exec Lead Author Due Date Received Date Outcome (Approved, Actioned for Info)

Programme

Keith Redpath Kim Kingan

Integrated Performance Reporting

Lee Neary Matthew Neilson

| 23.9.22 Formal | | | | | | |
|--|------------------------|---|----------|----------|---------------------------------------|---|
| Paper (with Number allocated - receipt confirmed if in Bold) | Exec Lead | Author | Due Date | Receiver | Outcome (Approved, Actioned for Info) | |
| Agenda B/22/25 | Keith Redpath | Board Services | 15.9.22 | 15.9.22 | | |
| Minutes B/22/26 | Keith Redpath | Board Services | 15.9.22 | 15.9.22 | | |
| Action List B/22/27 | Keith Redpath | Board Services | 15.9.22 | 15.9.22 | | |
| Chair's Update | Keith Redpath | Keith Redpath | | | Verbal | |
| Chief Executive's Report | Mary Morgan | Mary Morgan | | | Verbal | |
| Risk 6-month update | Lee Neary | Caroline McDermott | | | | Discussed at development session - update to future meeting. Subsumed into Integrated Performance Report |
| NSS Feedback and Complaints Annual Report [B/22] | Lee Neary | Louise MacLennan | 15.9.22 | | Approved | |
| NSS Workforce plan [B/22] | Jacqu Jones | | 15.9.22 | | to be considered at a later meeting | |
| Meridian Court Options Appraisal [B/22] | Martin Bell | | | | | Removed from agenda 14.9.22. Martin Bell/Mary Morgan |
| Integrated Performance Report [B/22]-22 | Lee Neary | Matthew Neilson/Caroline McDermott | | | | Not available for this quarter due to updates discussed at development session 9.9.22 |
| Finance report [B/22] | Carolyn Low | | 15.9.22 | | | |
| Shotts Waste Property - In Private | | | | | | |
| Governance Committee Minutes (Draft and Approved) [B/22/30] | | Board Services | 15.9.22 | 15.9.22 | | |
| Forward Programme [B/22/31] | | Board Services | 15.9.22 | 15.9.22 | | |

25/26.10.22 Development Session with EMT
Paper (with Number allocated - receipt confirmed if | Exec Lead Author Due Date

| Formal 9.12.22 | | | | |
|----------------|--|---------------|------------------------------------|---|
| Received Date | Outcome (Approved, Actioned for Info) | Exec Lead | Author | Due Date Received Outcome (Approved, Actioned for Info) |
| | Paper (with Number allocated - receipt confirmed if in Bold) | | | |
| | Agenda B/22/34 | Keith Redpath | Board Services | |
| | Minutes B/22/35 | Keith Redpath | Board Services | |
| | Action List B/22/36 | Keith Redpath | Board Services | |
| | Chair's Update | Keith Redpath | Keith Redpath | Verbal |
| | Chief Executive's Report | Mary Morqan | Mary Morqan | Verbal |
| | Integrated Performance Report [B/22/38] | Lee Neary | Matthew Neilson/Caroline McDermott | |
| | Finance Report see [B/22/38 a] | | | Subsumed into Integrated Performance Report |
| | Service Excellence Report see [B/22/38 c] | | | Subsumed into Integrated Performance Report |
| | People Report see [B/22/38] | | | Subsumed into Integrated Performance Report |
| | Risk Appetite [B/22/37] | Lee Neary | Matthew Neilson/Caroline McDermott | |
| | NSS Committees Approved and Draft Minutes [B/22/39] | | Board Services | |
| | Governance Committee Minutes (Draft and Approved) B/22/ | | Board Services | |
| | Forward Programme [B/22/] | | Board Services | |

Formal 9.3.23

Paper (with Number allocated - receipt confirmed if in Bold) Exec Lead Author Due Date Received Date Outcome (Approved, Actioned for Info)

| | | | | | |
|--------------------------|---------------|----------------|--|--|--------|
| Agenda B/22/ | Keith Redpath | Board Services | | | |
| Minutes B/22/ | Keith Redpath | Board Services | | | |
| Action List B/22/ | Keith Redpath | Board Services | | | |
| Chair's Update | Keith Redpath | Keith Redpath | | | Verbal |
| Chief Executive's Report | Mary Moran | Mary Moran | | | Verbal |

| | | | | | |
|---------------------------------------|-----------|------------------------------------|--|--|--|
| Integrated Performance Report [B/22/] | Lee Neary | Matthew Neilson/Caroline McDermott | | | |
| Finance Report see [B/22/] | | | | | Subsumed into Intergrated Performance Report |
| Performance Report see [B/22/] | | | | | Subsumed into Intergrated Performance Report |
| People Report see [B/22/] | | | | | Subsumed into Intergrated Performance Report |

| | | | | | |
|---|--|----------------|--|--|--|
| Governance Committee Minutes (Draft and Approved) B/22/ | | Board Services | | | |
| Forward Programme [B/22/] | | Board Services | | | |